



What Is Piroplasmosis?

Equine Piroplasmosis (EP) is a potentially fatal disease caused by the blood-borne parasites *Theileria equi* and *Babesia caballi*. These parasites are transmitted to horses by infected ticks. Piroplasmosis can also spread from infected horses through contaminated needles, catheters, or intravenous tubing. While piroplasmosis is considered a foreign disease in the United States, certain high-risk groups of horses remain vulnerable to infection. Horses imported from regions where the disease is endemic must test negative for both *T. equi* and *B. caballi* to prevent its spread.



Clinical Signs

Infected horses can take 10-30 days to show signs of disease. The clinical signs of equine piroplasmosis can vary depending on the stage of infection and whether the horse is acutely or chronically infected. Signs horses might show in the acute phase include:

- Fever.
- Weakness and lethargy.
- Inappetence.
- Colic.
- Elevated heart and respiratory rates.
- Anemia (a drop in red blood cells).
- Jaundice (yellow mucous membranes).
- In severe cases, sudden death.

If the horse survives the acute phase, it might become a chronic carrier of the parasite. Some chronically infected horses appear outwardly normal, which

makes the disease harder to detect without testing.



Diagnosis

Diagnosing EP requires laboratory testing. The most effective test for chronic infections is the competitive enzyme-linked immunosorbent assay (cELISA), which detects antibodies for *T. equi* and *B. caballi* in the blood. The cELISA test is widely available at USDA-approved laboratories.

In addition to testing, a veterinarian will consider clinical signs, history, and potential exposure risks when making a diagnosis. For horses with a known risk of exposure (e.g., those imported from countries where piroplasmosis is endemic or horses with a history of unsanctioned racing), testing is critical to identify infection early.



Treatment and Management

Currently, there is no widely accessible cure for equine piroplasmosis. However, horses diagnosed with EP can be enrolled in the USDA's treatment program, which has proven successful in eliminating the infection in many horses using high-dose imidocarb dipropionate. It can take months to years to clear the parasite from the horse's system, at which time he can be released from quarantine. Horses that test positive for piroplasmosis but do not show signs of disease must be managed under state quarantine.

One of the key challenges in managing EP is preventing iatrogenic (medical procedure-related) transmission. In some high-risk groups, such as Quarter Horse racehorses, EP has been spread through unhygienic practices, such as reusing needles or administering blood products from other horses. The use of unsanctioned methods, like blood doping or nonsterile medical equipment, increases the risk of EP and other blood-borne diseases like equine infectious anemia (EIA). Owners should always ensure that proper hygiene protocols are followed during veterinary procedures.



When to Call Your Vet

Call your veterinarian if:

- You own a current or former Quarter Horse racehorse that has not been tested for EP.
- You own a horse that was imported from another country but do not have proof of his USDA documentation.
- You believe your horse was exposed to blood-contaminated veterinary equipment.
- Your horse shows any combination of clinical signs of EP.

If your horse falls into an at-risk group for EP (e.g., imported from a country where EP is endemic, Quarter Horse racehorse), have your veterinarian arrange for testing even if the horse seems healthy. EP can remain undetected in chronically infected horses that show few or no signs of illness.