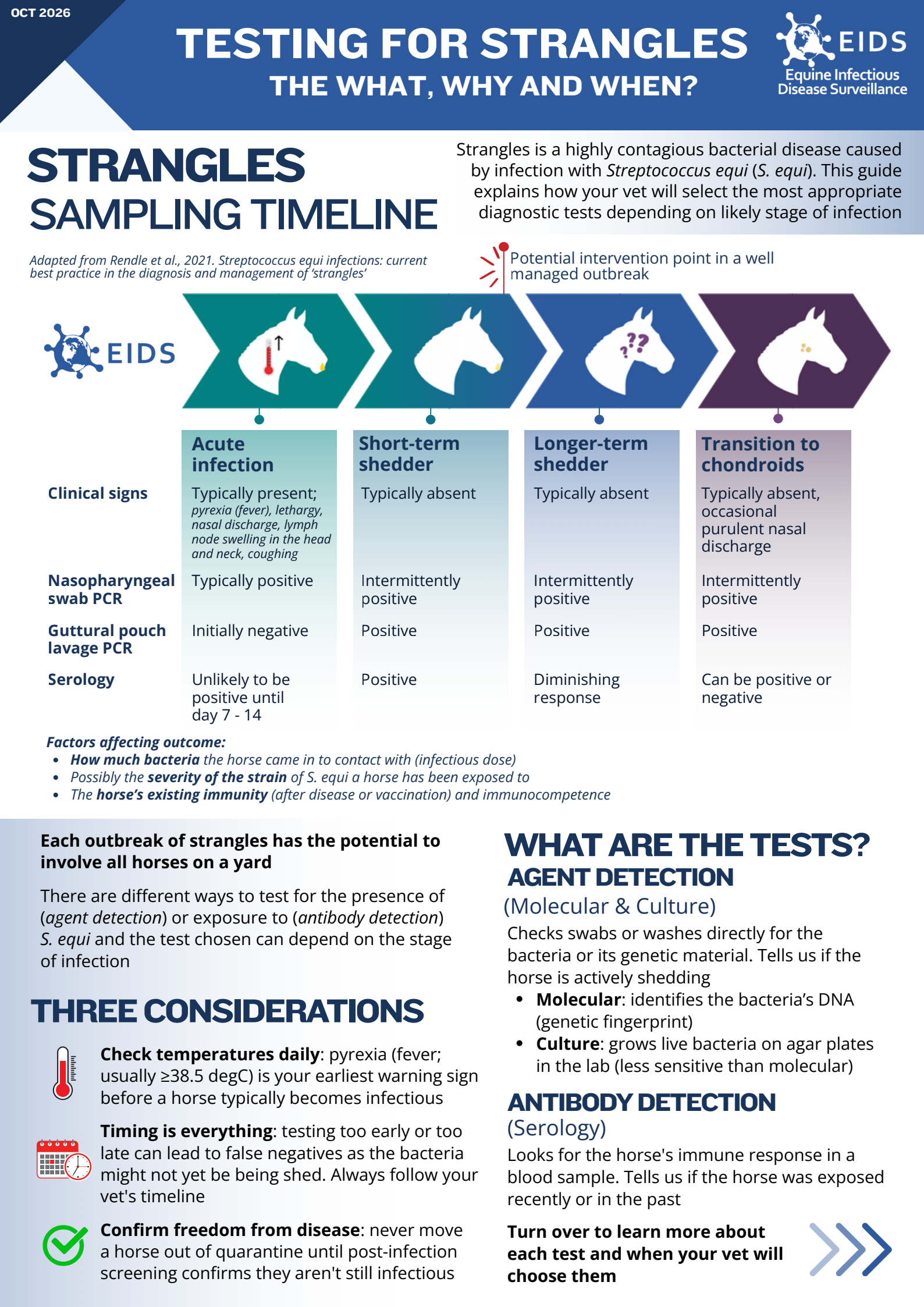




TESTING FOR STRANGLES

THE WHAT, WHY AND WHEN?

Test Type	What It Measures	Why Use It?	When To Use It?
Agent detection: Molecular (PCR / iiPCR / LAMP)	Detects bacterial DNA from swabs or guttural pouch washes Standard lab tests (qPCR): samples are sent to a diagnostic laboratory for detailed analysis In-practice tests (LAMP/ii-PCR): benchtop machines allow vets to analyse samples in practice for much faster results. May be referred to as point-of-care or PoC tests	Speed: qPCR tests can return results the same day, with benchtop machines able to provide results in less than an hour, but testing large batches can take much longer Sensitivity ('True Positive Rate'): agent detection tests can detect low levels of bacterial DNA in samples making them more accurate than culture alone	Acute infection: when a horse has clinical signs such as a snotty nose or abscesses Post-infection: typically, 4 weeks after clinical signs have stopped. Ideally a guttural pouch sample to confirm the horse has completely cleared the infection Subclinical screening: investigating possible carriage of <i>S. equi</i>. Either as part of quarantine or after a positive serology result triggering further testing
Agent detection: Culture	A sample is streaked onto an agar plate to see if live bacteria are present in the sample and how much/well it grows. Further tests are done to confirm the specific species is <i>Streptococcus equi</i>	Live bacteria: confirms viable infection Sensitivity testing: allows antibiotic susceptibility testing to be conducted and best direct treatment, should that be necessary	Best used alongside molecular agent detection tests - Limitations: far less sensitive than PCR, takes 24-48hrs to return a result rather than hours Advised to not be used as the sole testing method when investigating strangles
Antibody detection: Serology	A blood test detects the immune response to <i>S. equi</i> by measuring antibody levels, indicating whether a horse has had recent exposure	Less-invasive: simple blood sample Exposure marker: shows if the horse been exposed to <i>S. equi</i> recently, but not that it is infectious	Outbreak management: best used during or immediately after an outbreak to distinguish exposed horses (requiring further testing) from those not exposed As part of a new-arrivals quarantine, if not screening with guttural pouch washes: paired blood tests taken 2 weeks apart during quarantine to identify horses that may have been exposed or incubating disease prior to joining the main herd

WHAT TO DO IF YOU SUSPECT STRANGLES:



Isolate immediately: move the horse to a strict isolation area and assign dedicated equipment and ideally separate staff



Contact your vet: seek veterinary advice as soon as possible and discuss testing to confirm the presence of *S. equi* / strangles infection



Follow a traffic light disease risk management system:

RED GROUP: suspected or confirmed cases kept away from other horses. **AMBER GROUP:** horses that have had contact with infected horses in the last three weeks that could be incubating disease. **GREEN GROUP:** horses that have had no contact with infected horses, or their contacts in the last three weeks

For more information about strangles, scan here

