

# Factsheet: Mud fever

Mud fever is a common problem for horses at this time of year. It is caused by the bacterium *Dermatophilus congolensis* which is the same bacterium responsible for causing rain scald. The bacterium is always present in the environment however prolonged wetting of the skin and hair enables the bacterium to invade into the skin and cause infection.

## Clinical signs

- Early on in the infection pustules develop in the hair follicles which are difficult to see. As more pustules form and start oozing, scabs develop. On removal of the scabs a greenish-yellow accumulation of pus is often seen.
- The skin becomes very inflamed and red.
- The lesions can become very painful.

### Diagnosis

Often a diagnosis is made upon the clinical signs and distribution of the lesions however for a definite diagnosis samples of the hair and scabs can be taken and examined under the microscope to detect the bacteria.

## Management

- There is no single treatment for mud fever.
- The basic principles of treatment include; gently washing away the scabs and crusting with a mild antiseptic such as chlorhexidine in warm water.
  This is not always possible in one go and a cleansing ointment such as Dermisol may need to be applied overnight to help lift the scabs. It is very important to dry the skin after washing, do not leave skin wet.
- After removing the scabs, the skin will be sore and inflamed. Topical applications of a suitable cream such as silver sulphadiazine eg



Flamazine can be applied morning and evening to encourage healing for 5-7 days.

- The most important factor throughout treatment is to keep the skin as dry and clean as possible.
- If after one week there is no improvement it may be because there are secondary infections in the skin and you should consult your vet as antibiotics or other creams may be required.

#### Prevention

- Continued wetting of the skin must be prevented. Where it is impractical to keep affected horses dry, it is almost impossible to prevent the recurrence.
- Hard standing areas or well-maintained straw pads can be used to help keep the skin dry if no stabling is available.
- Barrier creams and petroleum jelly can be used to help prevent wetting to this skin but can only be applied to healthy skin- not when lesions are present.





These photographs demonstate typical mud fever lesions.



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