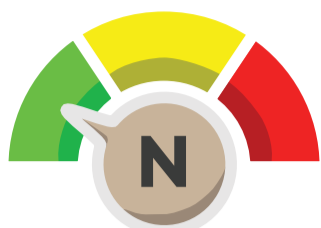


vmrdsAA^{for} Equine

What Can SAA Tell Us About Colic?

Most cases are straightforward, however those that are not pose a constellation of challenges when making decisions for management. In many research studies and real-world situations, SAA testing has demonstrated value for multiple key aspects of colic management.

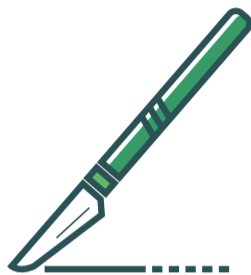
SAA can help *make critical decisions*



SAA is usually **normal** with uncomplicated colic



SAA elevation may indicate **referral is needed**



SAA is often higher in horses that **require surgery** or advanced care

In conjunction with other clinical factors,

Increased SAA can mean:



more **severe** disease

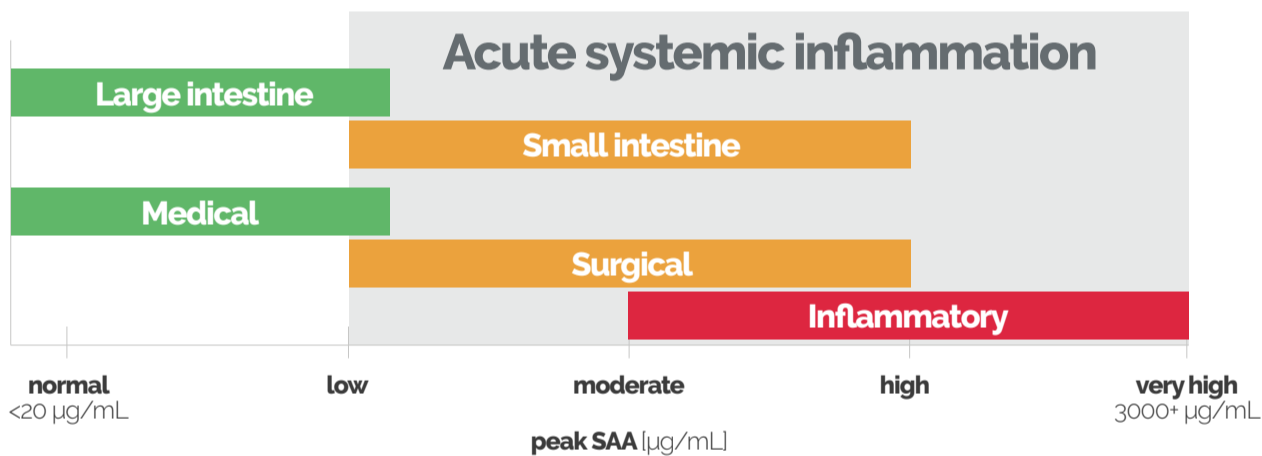


poorer prognosis



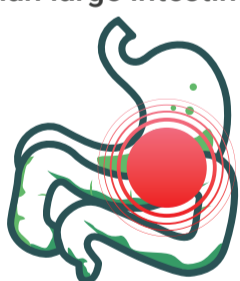
Increased cost of care

SAA can help *determine etiology*



SAA only increases with **acute, systemic inflammation**

SAA is usually **more elevated** with **small intestinal** than large intestinal issues



Very high **SAA** is common with **inflammatory** diseases such as **colitis or enteritis**

SAA can help with *post-op monitoring*



progress of **recovery**



presence of **complications**



readiness for **discharge**

SAA will **increase due to surgery**

Check at



post-op

to establish peak **SAA**

then every

24-48hrs

to track recovery

Failure to decrease can mean surgical infection, thrombophlebitis, pneumonia, or other complications



Re-test prior to discharge

SAA should be **approaching normal**