

Equine Melanomas
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If you are the proud owner of a grey horse, you are most likely well-aware of the appearance of a melanoma. In my experience as an equine veterinarian, there have only been a handful of older grey horses that I have examined that do not have at least one melanoma. The worst case I ever saw was a grey Arabian gelding with melanomas surrounding his entire anus, ranging in size from a quarter to a golf ball, and multiple large ones beneath his tail (tennis-ball size...his tail later broke off entirely at the site of the tumor). They were also present on the inside of his lips, around his eyes, and in his parotid salivary glands. The gelding appeared to have no idea he was afflicted with numerous tumors.



A melanoma is a tumor that arises from skin cells and may be benign or malignant. The tumors occur most commonly in older grey horses, with Arabians having an increased incidence. It is estimated that 80 - 100% of grey horses over 15 years of age have melanomas. The tumors are most commonly found on the perineum or the underside of the tail, though they can also occur around the eyes, mouth, ears, in the salivary glands, lymph nodes and in the guttural pouches. Solitary nodules can be seen on the skin anywhere on the body, including the male horse's sheath. The tumors are firm, nodular and typically hairless. They can also become ulcerated and are almost always black in color.



Diagnosis is typically made by clinical presentation – a biopsy can be performed but is typically not warranted. These tumors rarely metastasize but they are locally invasive and can lead to problems due to their size. The most common example of the melanoma as a space-occupying lesion is around the anus. The tumors can grow large enough in size to impede defecation. Treatment is ALWAYS recommended before these tumors cause problems with defecation to prevent discomfort to the horse and aid in ease of removal (it is much easier to remove a small tumor than a large one).

There are several described treatments of melanomas, but surgical removal is by far the most effective treatment. The tumors are typically removed in the standing horse under sedation using a laser to control bleeding. The remaining tissue is left to heal on its own, with daily wound care and application of a topical antibiotic. Daily maintenance treatment with cimetidine (an antihistamine) has been reported to stop growth and cause partial regression of tumors, but this treatment has variable success. An autologous melanoma vaccine (derived from the affected horse's own tumors) is also reported to cause tumor regression but efficacy is questionable.

Many horses will live for years with melanomas with no ill effects, but it is always recommended to monitor the size of the tumors and attempt treatment if they are growing in size or are present in a precarious location.