

## Use of pharmacological agents to aid management of ejaculatory and behavioral dysfunctions in stallions

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Select stallions referred for ejaculatory failure and behavioral abnormalities that benefited from pharmacological agents and other ancillary treatments are described herein.

Relevant history	Observation	Adjustments	Medications
Case 1. 17yr QH. Hemospermia and PU surgery, last collected 8 yrs. ago	High libido, multiple mounts, ejaculatory failure (ALP <100 UI/L).	AV temp, pressure, lubrication, phantom, height. Transrectal ultrasound not obstructed	Phenylbutazone 1g, PO, q24h, Imipramine 1.5g PO, 1-1.5 h
Case 2. 6yr QH, HYPP+, aggressive live cover.	Overweight, high libido, aggressive on phantom), pharyngeal collapse, urospermia.	Lip chain, diet, controlled-exercised, change collection time & bedding pre-collection	Imipramine 1.5g PO, 1-1.5 h
Case 3. 13yr APP. Show horse, live covered 1 mare 5 yrs. prior	Low libido, no interest for estrus mare or phantom	Changed teasing mare, teasing approach no success	20mg diazepam IV 5 min after teasing
Case 4. 11 yr. PH., 4 yr. history of unsuccessful collections	No libido on phantom or estrus mare, no penile exposure. Not trained to phantom	Multiple teaser mares, preferred bay pregnant mare	20mg midazolam 10 min after teasing
Case 5. 7 yr. STB. Racing, retired 2 yrs., orphan, overly aggressive	Excellent libido, striking and kicking behavior, no previous breeding experience	Responsive to management, fully erect, but still refused to mount the phantom	25mg midazolam, IV
Case 6. 14 yr. QH. Incomplete ejaculation, low libido	Poor libido, incomplete collections, trained to the phantom	Changed teasing, penis washing & teasing next to the phantom	1g imipramine PO 1h before collection, 7 mg of midazolam

All stallions here were successfully collected after the adjustments and described medication. In some cases, a combination of different drugs was used to collect. Case 1, phenylbutazone was used for suspected orthopedic pain in combination with imipramine, a tricyclic drug known to decrease the threshold for ejaculation (cases 1 and 6) and to promote closure of the bladder neck (case 2). Benzodiazepine (diazepam and midazolam), anxiolytics and anti-depressants were used to promote libido (cases 3,4,6) and to decrease anxiety in a high libido horse stallion (case 6) afraid to mount, either due to previous bad handling experiences or punishments. We foresee that the discussion of the present case series will be of interest as continuing education for clinicians and trainees.