

The Rig



A rig is an entire male horse with no signs of external testicles so appears to be a gelding; but one or two testicles are still present, producing testosterone. A rig behaves like a stallion and, potentially, may be fertile. Their behaviour is unpredictable and they can be dangerous to handle so they should be castrated. Some geldings still show stallion-like behaviour despite being fully castrated; they are called “false rigs”. The only form of treatment in these cases is behavioural therapy.

Cause

In the male foetus, the testicles initially form next to the kidneys, but as the foal develops the testicles migrate out of the abdomen via the inguinal canal and into the scrotum. In most cases this occurs prior to birth but in some cases can take up to a year after birth. If the testicle doesn't reach the scrotum (undescended), it can remain in the abdomen or in the area of the inguinal canal (groin) under the skin. The failure of one testicle to descend is not uncommon.

Rigs can result from the failure of descent of both testicles into the scrotum or from the unscrupulous surgical removal of a single descended testicle from the scrotum (leaving the undescended testicle remaining).

Testicles do not develop properly in the abnormal environment of the abdomen or inguinal area but still produce male hormones and can in some cases still be fertile.

People buying horses with this condition can be easily misled into thinking they have a gelding.

DIAGNOSIS

Any male horse with no obvious testicles which has started showing stallion-like behaviour should be tested to see if any residual testicular tissue remains.

In horses over three years old a single blood test to measure oestrone sulphate levels can be taken.

Younger horses need two blood samples, an initial sample followed by an injection of human chorionic gonadotrophin hormone and a second sample 24 hours later.



TAKING A BLOOD SAMPLE

If these tests confirm testicle tissue is present the horse will have to be castrated.

A negative result means that the horse has been properly castrated and is called a “false rig” - these cases should receive appropriate training and management to help with the behaviour.

Treatment

Castration surgery of a rig can be difficult and require exploration of the abdomen to locate the testicle and therefore should be carried out at a veterinary surgery.

In many cases the abnormal testicle is under the skin in the groin and can be removed easily but in some cases the testicle is in the abdomen and removal is much more complicated.

Identifying where the abnormal testicle is lying can assist with surgical planning and cost estimation.

In some cases the testicle can be located under sedation by feeling in the groin region or by ultrasound examination and rectal examination.

If outside the abdomen in the inguinal area removal is more straightforward but will still need to be performed under a general anaesthetic.

If an abdominal testicle is identified it can be removed under general anaesthesia or understanding sedation by laparoscopy, using specialist “key-hole” surgical equipment.



STANDING “KEY HOLE” SURGERY CAN ALSO BE USED TO SURGICALLY REMOVE AN ABDOMINAL TESTICLE



MOST RIG CASTRATIONS REQUIRE A GENERAL ANAESTHETIC FOR SURGICAL REMOVAL

KEY POINTS

- Rigs can get mares pregnant.
- Rigs can be unpredictable and dangerous to handle.
- Investigation with blood tests is necessary to check if the horse has any functional testicular tissue.
- Abnormal testicles can be difficult to remove.
- The condition can be hereditary so affected stallions should not be used for breeding.
- Some geldings may show stallion-like behaviour (“false rigs”).



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