

EVENTS

**The Liz Hodge clinic
was a great success
and will be offered
again in late summer.**

**Watch future
newsletters for
information.**

****Due to this fantastic
summer weather, there
are no events planned
for the month of June**

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Lameness

Most horse owners have had to deal with some sort of lameness in their horses, regardless of use, breed, and size. The most common lameness diseases, described below, are sole abscesses, white line disease, thrush, scratches, sole bruises, laminitis, navicular syndrome and osteoarthritis.

Sole Abscess: Abscesses are caused by bacteria that have invaded the hoof by a puncture wound or defect in the sole. The bacteria create an infection that can cause mild to severe, non-weight bearing pain. In severe cases the infection can spread to the leg and travel through the body. In all cases medical attention is needed. The abscess may drain through the sole of the foot or out through the coronary band on its own; drainage can also be achieved through various techniques performed by a veterinarian or farrier. Daily soaking, wrapping, anti-inflammatory medication (NSAIDs), analgesics (pain reliever) and antibiotics are often required.

White Line Disease: White line disease is an infection caused by bacteria and/or fungus that invade the white line area of the hoof and work its way under the hoof wall. White line disease generally doesn't cause lameness at first, but can easily progress to a non-weight bearing lameness. The white line is located along the outside of the sole and on the inside of the wall. White line disease presents as crumbly, white matter that is easily removed from the white line area. Mild cases, before lameness is evident should be treated to prevent a more severe progression. Treatments for mild cases include topical antifungal or antiseptic products, and chlorine dioxide (White Lightning); more severe cases may require resection of the hoof wall. Medications are available at the clinic and any cases causing lameness should be seen by a veterinarian and/or farrier.

Thrush: Thrush is a bacterial infection of the frog, heel and sulcus that is typically black, moist and has a foul odor. It is often seen during wet conditions, but can also occur under ideal conditions. It is often due to an inability of the natural cleaning function of the hoof to work properly, which may be caused by chronic lameness, improper hoof trimming, and insufficient exercise. Although thrush rarely causes lameness it should be addressed with topical treatment. The cause of the thrush must be identified and addressed.

Scratches: Scratches is the common name used to describe a dermatitis that is found along on the backside of the leg from the heel to mid-cannon bone. It often presents as scabs and hair clumping and is associated with pain. Like thrush, scratches typically develops in a wet environment. Treatment includes clipping, cleaning, and using topical antiseptic products. The horse should also be placed in a dry environment. It generally only causes mild pain, but in severe cases can develop into non-weight bearing lameness, especially in draft breeds.

Sole Bruise: Sole bruises can occur from stepping on a stone, rough terrain, packing of snow in hooves or from excessive force, such as landing hard after a jump. Some bruises do not cause lameness and are found by your farrier during a routine trimming. Others are so severe that they cause lameness and eventually develop into an abscess. Treatment may consist of wrapping, soaking, shoeing, antibiotics, pain medication, and rest. Some horses are more prone to sole bruises, such as Thoroughbreds, due to their thin soles. Various shoeing methods can help prevent bruising such as wide shoes, bar shoes or shoes with pads.

Laminitis: Laminitis, commonly referred to as founder, is an inflammation of the structures within the foot. It can occur due to a variety of reasons, but occasionally there is never an incidence that is identified. Common causes of laminitis are grain overload, lush pastures, retained placenta, colitis, endotoxemia, severe lameness, Cushings disease, and pneumonia. There is a breakdown of the structures within the hoof, which can cause rotation and sinking of the coffin bone. An acute case of laminitis may be identified by heat in the hooves and coronary band, pulsing in the fetlock region, reluctance to move, sitting back on the haunches, “walking on eggshells”, increased time laying down, decreased appetite, and depression. If there is any question if your horse has developed founder, a veterinarian should be called immediately. This is an emergency! There will be sensitivity in the toe area of the sole and sometimes along the wall. The front feet are generally affected first. Often horses that have an incident of laminitis are at risk of developing future episodes. Treatment consists of x-rays to assess movement of the coffin bone and severity of changes, pain medication (often Bute and Banamine are used for immediate pain relief, and Equioxx and Bute can be used for long-term relief), padding the soles, icing the feet, and treating the underlying disease. Corrective shoeing may be beneficial in preventing future episodes and making the horse more comfortable. The nutritional management of horses who have foundered should be evaluated as adjustments may need to be made especially related to carbohydrate intake.

Navicular: Navicular syndrome is the degeneration of the coffin bone and its associated structures. It is a chronic condition that occurs most frequently in the front feet. Generally one front foot seems to be more affected than the other and initial symptoms may be as subtle as the development of a shortened stride. Often horses are more painful on hard surfaces, and toe point. Radiographs are needed to make the definitive diagnosis. Treatment consists of long-term pain relief with NSAIDS (Bute, Equioxx) and corrective shoeing. Joint injections are often helpful, as well as supplementation of polysulfated glycosaminoglycans (Adequan), and glucosamine chondroitin (Cosequin). In severe cases surgery may be warranted for pain relief.

Osteoarthritis: Osteoarthritis is a group of disorders that are characterized by progressive degeneration of articular (joint) cartilage. Damage to bone, soft tissues, and joint fluid often accompany cartilage damage. There are many causes of degenerative joint disease (DJD), but they share the same theory that trauma of any amount is the main factor. Signs of DJD begin with stiffness, decreased range of motion and slight toe dragging, as well as obvious lameness and swollen joints. Many horses appear to get better after a warm up, or with a period of rest. Joint blocks and radiographs may be needed to identify and assess affected joints. Treatment consists of rest, long-term pain relief (Equioxx is most effective, followed by Bute), topical anti-inflammatory medications (Surpass and DMSO), and occasionally joint injections. Supplementation of glucosamine chondroitin and MSM (Cosequin) is also beneficial.

Accurate diagnosis and appropriate treatment is the key to successful results when dealing with a lameness problem. The work-up of a lameness problem will often require the coordinated efforts of the horse owner, veterinarian and farrier and it is important that all parties work together. Remember that laminitis is an emergency and that any lameness that is non-weight bearing also needs to be seen as soon as possible.

