



Monocacy Equine Veterinary Associates

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"...accurate evaluations can be made and goals can be set for ultimate improvement of the hoof."

EQUINE PODIATRY

Equine podiatry is the study and management of the equine foot based on its anatomy and function.

When combined with medical treatment such as joint injections, anti-inflammatory medications, rest and rehabilitation, podiatry greatly enhances the treatment of lameness. Considering it is documented that 70-80% of lameness involves the foot, equine podiatry is valuable in a holistic approach to the treatment of many lameness issues.

With a podiatry program, veterinarians work as a team with your farrier to evaluate your horse for proper shoeing, balance, and break over. Using radiographs and a photographic method known as Metron Analysis, accurate evaluations can be made and goals can be set for ultimate improvement of the hoof.

Glue on shoes are now available to attach a shoe to a hoof in cases where the lamina of the hoof wall suffer from nail or other damage. Cracks

can be supported and patched by a combination of plastic or metal devices. The sole can be protected by a combination of shoeing and special padding. Hoof wall injuries can be managed surgically and medically to enable the horse to return to work as soon as feasible, sometime even as active healing of the hoof wall is occurring.

EVALUATION AND EXAMINATION OF THE HORSE'S HOOF

SUBJECTIVE EVALUATION OF THE HOOF:

This is the physical exam of the foot and the evaluation of the hoof and the structures within. This examination will tell the story about the stresses the hoof has been subjected to and how it has responded to these stresses. An examination of the size, shape, toe length, heel length,

hoof pastern axis and many other factors will be considered in a diagnosis.

OBJECTIVE EVALUATION OF THE HOOF:

This is an assessment of hoof balance, hoof size, etc. Lateral and dorsal palmer radiographs and Metron photo analysis help the veterinarian to evaluate imbalance, joint alignment and hoof wall length and can identify any inter-



The defect in the hoof has been allowed to grow out after being opened and trimmed.

nal pathologies that may be present.

ASSESSMENT OF PAIN:

Diagnostic tests such as hoof testers, joint flexions and careful interpretation of nerve or joint blocks are an important part of the exam and critical to localizing the source of pain.

IMAGING: This is the evaluation and interpretation of radiographs, ultrasound or photographic images of the foot which may also include MRI or bone scan(scintigraphy).

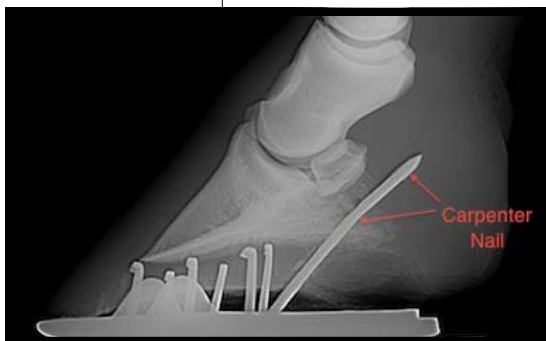
A thorough examination that includes all of the above information allows the veterinarian to treat and accurately resolve any problem that exists.

Careful recording of all the information obtained and periodic assessment are important for a successful resolution of a hoof based lameness problem.



A defect in the outer hoof wall that hid deeper damage.

CASE STUDY: ALLISON; NAIL PUNCTURE OF THE HOOF



OUCH!

“Allison” a sixteen-year-old Hanoverian thoroughbred cross mare stepped on a three-inch carpenters nail. The nail penetrated her frog and exited between her heel bulbs.

Fortunately for “Allison,” the nail missed her navicular bursa, coffin joint, and distal tendon sheath. Digital radiographs taken before the

nail was removed were helpful in determining her treatment and prognosis.

“Allison” was treated with a distal limb perfusion, antibiotics, wound debridement, and regular bandage changes.

She is now recovered sound and happy.

WHAT IS THE DIFFERENCE BETWEEN CUSHING’S DISEASE AND INSULIN RESISTANCE?

These two conditions increase the risk of founder in horses and ponies. But they are two different diseases, so lets make a clear comparison.

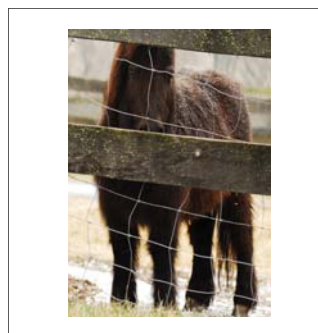
Cushing’s is a disease that leads to increased levels of cortisol (normal steroids in the body). This can lead to many conditions including longer hair coat that does not shed out, laminitis, obesity or chronic weight loss in some horses, increased drinking and urination. It can also lead to a decrease in the body’s immune system which can lead to an increase in eye infections, rain rot, scratches and/or other illnesses. It is more often seen in teenage and older horses and ponies. To screen for Cushing’s we draw blood and check for increased levels of adrenocorticotrophic hormone(ACTH). The gold standard for testing is a dex suppression test, but this has some risk for previously or currently foundering horses.

Insulin resistance is

shown by an increased insulin level in the blood. Insulin normally helps to control blood sugar by pushing the sugar out of the blood and into the tissues that need it most (such as fat and muscle). If the receptors for insulin are not working properly or if there are too few receptors, the body will increase its insulin production to try to compensate. This can lead to issues such as laminitis, cresty necks, and/or abnormal fat deposits in the rump, croup, back withers and neck. An increase in allergic reactions is also a common symptom. This can happen to a horse of any age and can happen to horses with Cushing’s as well. Often insulin resistant horses are obese or have fat accumulated along their top line that is very hard to work off. They are often the horses that stay

little food. The disease is present in all breeds. Ponies, Morgans, Arabians, Paso Finos as well as other “easy keeper” breeds are more likely to be insulin resistant than many draft breeds, Thoroughbreds, or Quarter horses. To check for insulin resistance a blood sample is drawn and tested for abnormal blood glucose levels and blood insulin levels.

Diet and exercise can improve both conditions but the medications and supplements for each are different. A low carbohydrate diet with limited grass and grain is good for both Cushing’s and Insulin resistant horses. Increased daily exercise can help horses lose weight and can raise the number of insulin receptors in the body. Perglide is a medication that helps to reduce the increased hormones associated with Cushing’s disease. There are many herbal supple-

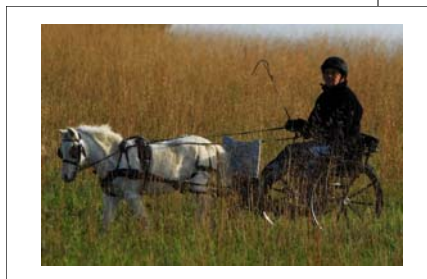


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CUSHING'S DISEASE VS INSULIN RESISTANCE CONT.

ments on the market now for both Cushing's and IR but little has been done in the way of testing their effectiveness. Magnesium, chromium and vitamin E have been shown to help in both conditions and are available in supplements like Quiescence. Beware of supplements that have a glucose or sugar base and beware of glucosamine joint supplements which affect insulin metabolism. Many

of these supplements are pulling ingredients straight out of human holistic medicine with out any proof that they will work or be harmless in horses. Always consult a veterinarian before adding a new supplement or herb to your horses diet. If you have questions or concerns please feel free to call or email us with your questions. We are happy to assist you. We can draw blood to screen for both diseases at a



Linda and JT exercising

routine visit. Prevention of laminitis starts with knowing your horse's risk factors.

MESOTHERAPY FOR BACK PAIN

Mesotherapy is an alternative therapy, based on a new theory of pain control. This treatment stimulates the mesoderm, the middle layer of the skin, which will in turn relieve a wide variety of symptoms and ailments such as acute or chronic neck or back pain and degenerative arthritis of the back and cervical vertebrae (neck). These issues may present clinically with a change in attitude, refusal of fences, bucking and painful or tense palpation. The



change in attitude, refusal of fences, bucking and painful or tense palpation. The

stimulation helps reverse the physiology of the condition and stops the pain and muscle spasm cycle. Injections are made using a combination of substances including a homeopathic anti-inflammatory, a local anesthetic and a steroid, to stimulate the mesoderm. The mesotherapy injections involve extremely small needles that penetrate the intradermal layer of the skin only to a very small depth. It is well tolerated but because most horses are sensitive to the procedure, the patient is usually sedated. The number of treatments needed (often only 1 or 2) depends



on many variables including the condition, the abnormal physiology causing the condition, as well as the chronicity of the problem. Substantial improvement is anticipated within 7-14 days. Duration of action varies from 3 months up to 12 months or more. Maintenance treatments are done as needed.

Mesotherapy may also be combined with other therapies including shockwave therapy, para-spinal injections or coxo-femoral injection, when indicated.

"... relieve a wide variety of symptoms and ailments such as acute or chronic neck or back pain"

FEATURED NEW SERVICE: NUTRITION CONSULT

MEVA is pleased to announce that it has begun an association with Kentucky Equine Research (KER) and Performance Feeding for nutritional consultation services. These consults are available for individual

horses and ponies or complete

barns. This service will set up a proper nutritional program for your horse, which can improve his health, and eliminate excessive supplementation, which will save you money. This program has been shown to be especially beneficial for animals with insulin resistance or Cushing's disease.

Please contact our office and find out about the details and cost of this new service.



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ANNOUNCEMENTS;

MEVA is pleased to announce it now has a face-book page. Also check out our website monocacyequine.com, for the latest news updates and case studies.

WELLNESS

PROGRAMS:

We currently have four different kinds of wellness programs that suit the needs of different horses and owners. Check out our website or call our office for more details.

We are pleased to announce that we have added a new aspect to our wellness program, Wellness plan #4

A FOOT HEALTH CARE program, This plan comprises A.) Initial physical exam of all four feet B.) 2-4 Radiographs of each front foot and C.) Digital photos of the feet. This information will be compiled into a report which we can discuss with your farrier and you concerning the health of your horses feet. Then working as a team we can improve your horses foot quality by using radiographically guided hoof



trimming and shoeing. After six months we will reevaluate the progress we are making. Radiographs and photos may be repeated at that time.

Please call our office for the cost of this program.

FOALING MARES:

MEVA will be foaling a limited number of broodmares at our clinic this spring. Make a reservation early with us to have a place to accommodate your mare

BREEDING: Call to schedule your mare for a pre breeding evaluation soon so we can work out any problems which could affect her later on in the spring.



GOING GREEN

To reduce our effect on the environment, our practice is now offering our newsletter via email or on our website www.monocacyequine.com. Contact the office to provide your e-mail address for future online updates.

CONTINUING EDUCATION:

Dr O'Halloran attended the Maryland Veterinary Medical Association conference in November which covered the topics of: Suspensory desmitis of the performance horse, diagnostics for neurologic disease, Fevers of Unknown Origins, and Chronic Diarrhea and Colic. Dr. Forfa attended The



American Association of Equine practitioners AAEP annual convention for 2009 in December which discussed the topics of : sport horse lameness ,the purchase exam, colic and other G.I. problems and critical care.

Other news is Dr Forfa is a member of the AAEP; UHVRC Unwanted Horse Vaccine Relief Committee which provides vaccines to horse rescues in the U.S. supplied by Intervet / Shearing. He is also a member of The Biologics and Therapeutics Committee for the AAEP. He serves on the American Veterinary Medical Association's (AVMA) Council on Biologics and Therapeutics agents.

Dr Forfa was recently appointed as an FEI Veterinary Delegate for Driving and will be part of the driving veterinary team at the 2010 World Equestrian Games (WEG) to be held in Lexington ,Kentucky at the horse park this fall.