

WARWICK EQUINE VETERINARIANS

185 BRACKER ROAD

WARWICK.

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Newsletter

Client night, reproduction and foal theme

Molar teeth and abscesses

Peroneus tertius sprain

The unrelenting and unprecedented dry conditions continues in our district as it does across many areas. For WEV it means many of our clients are struggling to just feed their horses, let alone breed new ones. We expect it will mean reduced numbers are bred this year, especially in the non-thoroughbred breeds. It also has made buying feed for hospitalised horses much more expensive so we understand the pain this is creating for our clients.

On the **10th of September at 6 pm** we are going to have a client education evening again at Lona. As always each of our vets will give a short presentation which this time will cover limb deformities in foals, preventative care for mares, preparing your mare for breeding and stallion collection and semen handling.

These evenings have proven to be very popular and we were a little overcrowded last time so if you are interested in attending please RSVP to the WEV office as we may need to limit numbers again.

When conditions are as severe as they are now it is important horses can utilise their feed as efficiently as possible. Important in this is to keep their teeth in as good order as possible. It is no surprise we have been doing lots of routine dentals and therefore from time to time we come across more significant pathology.

One case was a polo mare, about 10 years old. She had been having some issues with eating and the bit and there was a small discharging tract on the right side of her face. Initially it was treated with some antibiotics with only some temporary improvement. We were called in to examine the mare more carefully. A careful oral exam revealed some quite sharp enamel points, however, orally



the teeth seemed reasonably healthy. X-rays gave another perspective.

The first x-ray we took was a standard LM view shown above. X-rays are very useful in localising dental pathology but it is hard on this x-ray to see much abnormal. It is important to take appropriate views so therefore we took some oblique views.



On this view when you take away the superimposition of the normal teeth, it is apparent there is a rounded abscess over the tooth root of the second molar (207) tooth on the right. Further examinations confirmed that the draining tract on the side of the face was from this tooth root abscess. This must have been going on for some time because not only were the soft tissues involved but the bone at the base of the tooth root has resorbed to some extent and a hole has developed through the bone to allow drainage of pus. This is the body's way of dealing with chronic infection, unfortunately in a case like this one the condition rarely resolves spontaneously, even with antibiotic administration.

In most cases the best treatment for these is removal of the infected tooth and its roots. Depending on the horse, the tooth involved and any other complicating factors like other structures concurrently affected, we prefer to ex-



tract these through the mouth standing if possible. In this mare we did not need to resort to some of the more complex surgical options and we were able to extract the tooth standing using sedation and nerve blocks.

X-rays were taken immediately after the procedure to confirm complete removal of the tooth as well as its roots and to check for any damage to the adjacent teeth.



Below you can see the extracted tooth on the left next to another tooth taken from another mare the next day. The reason for the big difference in size is the age difference between the 2 mares. Horses teeth are gradually worn down through life and the tooth roots gradually move down as the horses age and eventually if the horse lives long enough will completely grow out. This is quite different to humans and dogs where the



teeth do not grow down like this. It does make extracting teeth much easier in older horses as the reserve crown (roots) are much smaller.

Thanks again to all our clients for their business and allowing us to do what we like to do which is to help you keep your horses healthy and happy.

Warwick Equine Veterinarians

STAFF

Tias Muurlink BVSc (Hons) FANZCVS Registered Specialist in Equine Surgery
Michael Duggan BVSc MRCVS Veterinarian
Sara Rodes BVSc (Hons) Veterinarian
Paula Ellul BVSc (Hons) Veterinarian
Chaylee Joe Kong Vet Nurse Cert IV
Monica Connolly Vet Nurse Cert IV
Danielle Assen Vet Nurse
Odette Kolenich Vet Nurse
Tamasin Maher Admin
Tyler Aspinall Trainee Vet Nurse
Rita Gangemi Administration

Excellence in Equine Veterinary Care

OUR CONTACT DETAILS

Business office and postal address:

185 Bracker Road, Warwick, Q 4370

Equine facilities and surgery:

19811 New England Highway

Rosenthal Heights, Q 4370

Email address: office@warwickequinevets.com.au

Website: warwickequinevets.com.au

Facebook: Warwick Equine Vets

Office (BH): 0400 977 564

Tias Mobile: 0438 791 804

Mick Mobile: 0419 424 546

Paula Mobile: 0409 095 828

Our goal is to provide excellence in clinical service to all our equine patients.

A professional, compassionate and caring approach with good communication, and up to date services.



This month we treated a dressage horse with a relatively unusual condition. The horse had fallen over with its gear on when being lunged, and since had some lameness issues in one hindlimb. Although the horse could reasonably comfortably weight bear, there were problems with bringing the limb forward and a swelling on the front of the hock was noted. Horses hindlimbs have an anatomical arrangement, the reciprocal apparatus, which ensures when the stifle is flexed the hock and distal limb must flex as well. Important in this is the Peroneus tertius tendon. This tendinous band runs from the femur above the stifle to the cannon just below the hock. This band has little stretch and therefore if a horse falls such that its stifle flexes but the hock is forced out behind this band often ruptures. What is unusual about this case is that almost all cases of injury to this structure result in rupture, but this was as a case where the tendon was sprained and enlarged. As you can see in the photo there is a soft tissue swelling over the front of the hock and on the ultrasound image the normally homogenous thin band is markedly enlarged and irregular. Although we have not seen an injury like this before and there are few if any cases reported in the literature, we expect this horse to recover well with conservative management. Even when completely ruptured with time these tendons tend to heal quite well.

