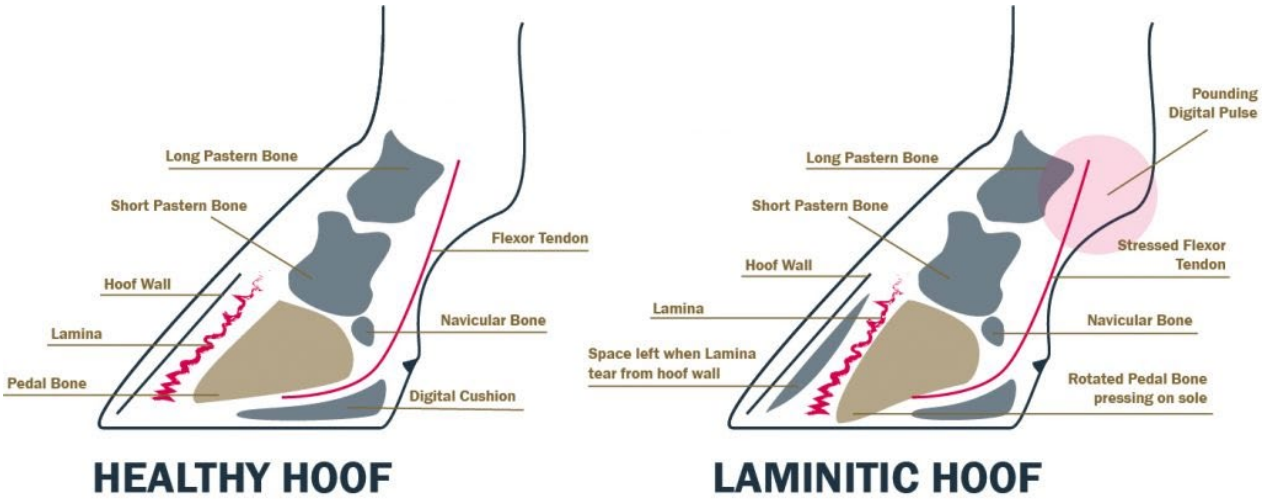
Laminitis

Laminitis is a painful and potentially life-threatening condition affecting the sensitive laminae within the horse's hoof. It is one of the most common causes of lameness and euthanasia in equines, with an estimated 1 in 10 horses or ponies experiencing an episode annually. Laminitis can occur at any time of year and is not limited to spring or lush pasture conditions.

What is Laminitis?

Laminitis is the inflammation and weakening of the laminae — the tissues that bond the hoof wall to the pedal bone. Inflammation reduces blood flow, depriving the laminae of oxygen and nutrients. If untreated, this can lead to necrosis (cell death), causing the pedal bone to rotate or sink within the hoof capsule. In severe cases, the pedal bone may penetrate the sole, necessitating euthanasia.



Laminitis may arise from multiple sources, often acting in combination:

- **Endocrine Disorders**:
  - Equine Metabolic Syndrome (EMS) — insulin resistance and obesity
  - Pituitary Pars Intermedia Dysfunction (PPID/Cushing's Disease) — hormonal imbalance in older horses
- **Mechanical Overload**: Excessive weight-bearing on one limb due to injury in the opposite limb
- **Concussive Trauma**: Prolonged work on hard surfaces (e.g. roads), causing inflammation in the hoof
- **Dietary Overload**: Excessive intake of soluble carbohydrates (sugar/starch), leading to hindgut acidosis and systemic inflammation

- **Stress and Environmental Change**: Sudden changes in management, travel, or foaling stress in mares
- **Severe Infection**: Conditions such as retained placenta, colic, diarrhoea, or pneumonia

Laminitis can be:

- **Acute** and is often associated with a rapid onset and is frequently related to an overload of starchy carbohydrates.
- **Chronic** which is more often linked to metabolic issues and can result in constant relapses (often seen as divergent hoof rings (rings that are wider at the heel than at the toe)).
- **Subclinical** resulting in Internal hoof changes without visible lameness, common in horses with EMS or PPI.

How to Recognise the Signs of Laminitis

It is important that you recognising the signs, often subtle, of laminitis:

- Most horses and ponies will display non-specific, mild signs of laminitis, such as difficulty in turning, a short/stilted gait (also referred to as 'pottery' gait) or lameness at walk (affecting most commonly two limbs).
- Many horses and ponies will display the more classically recognised signs, such as leaning back on the hind feet or shifting from foot to foot to relieve the pressure on the front feet.
- Many horses and ponies will have a bounding digital pulse and/or an increased hoof temperature.

What should you do if you suspect that your Horse has Laminitis?

Laminitis is a medical emergency. You should consult your vet promptly if you suspect that your horse or pony has laminitis so that it can be treated to reduce pain. Even when subtle signs of laminitis are present, damage to the hoof will have already begun. Early diagnosis and appropriate management are crucial to prevent long-term, often irreversible, damage to structures within the laminitis-affected hoof.

After calling your vet, bring your horse in from the field slowly and box rest. You should make sure there is a deep bed that will support and cushion the hooves. Ensure the bed comes all the way up to the door. Provide plenty of fresh water and feed your horse on hay that has been soaked to remove as much of the carbohydrate as possible. Do not feed concentrates based on cereals as they are rich in carbohydrate. Monitor water intake and ensure hydration.

How is a Diagnosis of Laminitis made?

The vet will normally be able to diagnose laminitis based on the clinical signs being displayed. X-rays may be taken if there is concern that the pedal bone has sunk or rotated, or if the horse or pony is not improving despite appropriate therapy. Blood tests may be required if the vet suspects that an underlying hormonal disease is present.

What is the Treatment for Laminitis?

The vet will normally provide medicines to control the pain including non-steroidal anti-inflammatory drugs (such as phenylbutazone ('bute')). Other drugs may also be prescribed, for example, to increase blood flow. The vet may require the hoof to be supported to limit movement of the pedal bone and to reduce the pain experienced by the horse. This is likely to be a deep bed which extends all the way to the door but can also include frog, and frog and sole supports and/or corrective farriery. In some cases, cold therapy may be used to reduce inflammation. The vet will prescribe box rest and may recommend dietary changes.

If the laminitis is the result of an underlying condition, such as a hormonal disorder, the vet will prescribe an appropriate treatment.

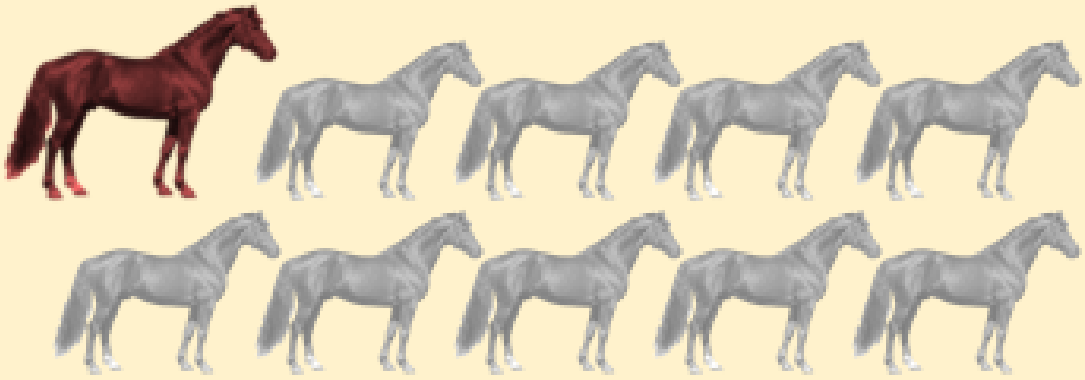
It takes weeks to months for a horse to recover from laminitis. Most horses and ponies will be sound at the trot after about 8 weeks and many will be back in work, but it can take much longer depending on the severity of the laminitis.

Once a horse or horse has had laminitis, they will be at an increased risk of getting it again. You should seek your vet's advice on how best to manage this risk.

Prevention and Management

- Maintain a healthy weight and body condition score
- Avoid sudden dietary changes
- Schedule regular farrier visits and hoof assessments
- Consult your vet for a tailored prevention plan

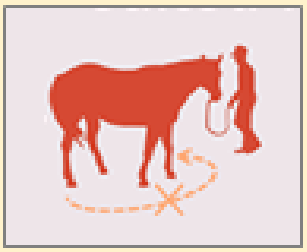
1 in 10 horses/ponies will suffer an episode of laminitis each year

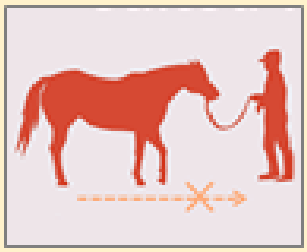


Know the Symptoms

Those will laminitis will show the following symptoms:

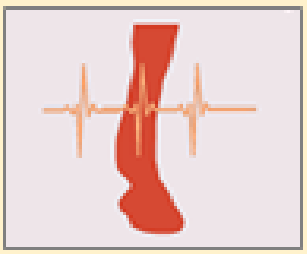
Difficulty in turning

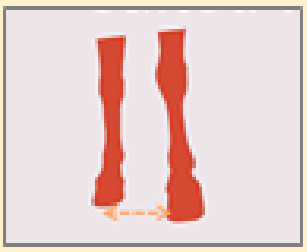




Reluctance to walk

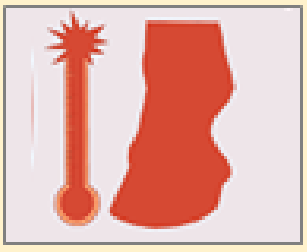
Presence of a bounding digital pulses

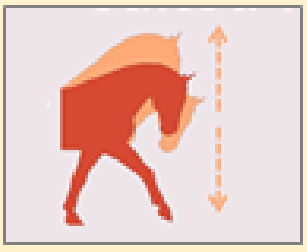




Shifting weight from foot to foot

Increased hoof temperature





Foreshortened walk and lame at walk

If your horse/pony has laminitis – call your vet

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