



# Delmarva Equine Clinic Newsletter

Volume 1, Issue 3

[www.delmarva-equine.com](http://www.delmarva-equine.com)

Summer 2010



Photo of Leg Press (aka Moxie) and her colt Phin, owned by Stacy Stafford.

## Watching Your Foal Grow

*Dr. Jan Sosnowski*

You have done all the prep work. You have chosen the best stallion for your mare, she got pregnant, and she has been munching on “Broodmare Super Special” with added vitamins and minerals. And now after 11 months of waiting and anticipating the arrival of the next “World Champion,” it has finally arrived!

Little “WC” stands and looks at you sucking on his tongue. His knees swing east, his hocks swing west, and all 4 fetlocks are sitting on the ground while his toes point up in the air! Should you “knock him in the head” before anyone sees him and before that \$25,000 stud fee comes due? Nope! In 3 weeks with a little TLC, “WC” should be up and straight and ready to gallop around the paddock looking like the next World Champion. Many foals are born with weak, crooked legs. They usually need to have limited exercise until the legs “come up” and straighten. Some may even need bandages or splints, but they generally just need some “therapeutic neglect.”

On the other hand, once your foal has become strong enough to turn out, you should be taking a brief look at your foal’s legs daily as you feed it and then a good serious look once a month. We trim our foals monthly, and this is the time we use to review how they are standing, how they need to be trimmed, and whether further intervention is needed.

*continued on page 2*

## INSIDE THIS ISSUE

- 1** Watching Your Foal Grow
- 3** Handling Equine Emergencies

First look at the foal from the front and back. Does he stand straight? If so, he just gets trimmed to maintain a level foot. What you need to look for are rotational deformities and angular deformities. Rotational deformities are “toeing in” and “toeing out”. You can improve this somewhat in the foal by lowering the side to which the toe points. Lower the outside wall in foals that toe out and the inside wall in foals that toe in. There is no surgery that can straighten this, but it can be improved. In more severe cases, we can apply acrylic to the opposite side to “raise” that side which I have found easier in foals than trying to use shoes with extensions on them. It is important to keep up with the trimming, and to re-evaluate them regularly.

Angular deformities (knock-kneed or bow-legged for example) result from uneven growth in the growth plates. We are most often talking about the knees but the hocks and fetlocks can be affected also. One side grows faster than the other so the leg starts to grow “sideways”. This can happen almost overnight and often requires surgery to straighten the leg back up.

Making it more complicated is the fact that the surgery has to be done before the growth plates close. The growth plates in the fetlock close by 3 months of age!!! Close observation of your foal is critical! The knees close much later which gives you more time to fix the problem, but it also gives the foal more time to develop a problem. To further muddy the water, foals can have both angular and rotational deformities in the same leg.

So if you are going to take the time and spend the money to try and produce a quality athlete, make sure to give it every chance to reach its full performance potential.



Baby Mallbreaker and Krystle Jackson – Delmarva Equine vet tech

## HANDLING EQUINE EMERGENCIES AND HOW YOU CAN HELP US HELP YOU!

*Pam Fulcher*

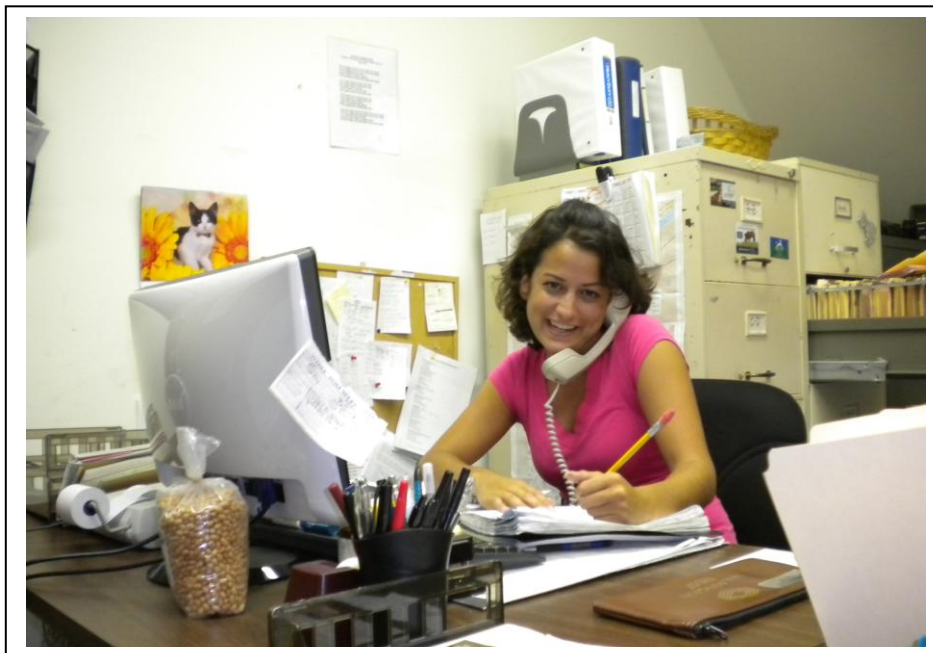
First and foremost try to remain calm when calling us! If someone is available to help “grab them”!

Assess the situation. Are you able to observe any of the following?

1. Bleeding and where? Are you able to stop it with pressure?
2. Any injury and where? Are there any foreign bodies seen?
3. Colic? Is the horse “up or down” and are you able to keep him/her moving?
4. Having trouble breathing? How old is the horse and have they experienced this previously?
5. Having trouble walking? Are they unable to bear weight on a leg or trouble walking normally?
6. If your mare is foaling how long has she been in labor? Do you see “two legs and a nose”?
7. Eye discharge? Is the eye open or closed?
8. Sick foal? Is it able to nurse? (watch and also check the mares bag to see if it is “tight”) is it coughing or does it have any nasal discharge?

If the horse is not in distress, take a moment to get a rectal temperature, check the color of the gums and if possible, obtain a heart rate and respiratory rate. This will help us when we contact the veterinarian so they may determine the urgency of your visit. And of course don’t forget to have a phone number where we may readily contact you!!

And as a reminder the young, the old and the chronically ill are more vulnerable to any illness that may arrive at your stable so if in doubt about anything, call us! We are here to help with any questions and concerns you may have.



We welcome, Krissy Keeler, Delmarva Equine Clinic - new office assistant.