



February 2017

Issue #1

# VIP NEWS

Unlocking your horses potential from the inside out



## Meet the team

**An Equine Veterinarian and Nutritionist, the perfect combination for your horses wellbeing.**

Petra and Nikita met in University where Petra was completing her Veterinary degree and Nikita was commencing her research career in Equine Nutrition. Fast forward a few years and one afternoon they were catching up for a coffee and discussing current frustrations with not always having a complete solution for their clients. Then came a lightbulb moment. Why not combine Veterinary and Nutritional expertise to offer a holistic approach to Equine wellness? From here Veterinary and Nutritional Integration (VANI) was born. Every month VANI will provide it's valued clients with a newsletter packed full of useful tips and information about common feeds and conditions that might be affecting your horse. This month we focus on Laminitis colloquially known as 'Founder'.

**1**

### PACKAGES

We have a range of veterinary and nutritional packages to suit everyone.

**2**

### FARM VISITS

VANI specialises in on farm consultations where we come to you and address your horses requirements

**3**

### PRESCRIPTION DIETS

VANI can create a perfectly balanced diet based on your horses individual requirements

### **Laminitis colloquially known as 'Founder'**

This months feature that affects so many of our horses. Read more on pages 2-3.

### **Sign up to receive our newsletter every month**

It's easy just sign up online, on Facebook or flick us an email with your details and we'll add you to the list.

### **Send us your favourite pics of your horse and we will pick a few each month to feature on our newsletters**

### **Tell us what you want to know, we'd love to hear from you**

We would love to hear what you would like to hear about in an upcoming newsletter. So drop us a line on [Facebook](#) and your topic might just pop up next month.

# Laminitis colloquially known as 'founder'.

## Vets corner with Petra

Laminitis is inflammation of the sensitive laminae (the tissue that bonds the hoof wall to the coffin bone). It can affect all four feet but is most common in the front feet. The exact etiology and pathogenesis (how it occurs) of laminitis is not fully understood but results in disturbances to the circulation in the foot. The sensitive laminae are inflamed yet cannot swell since they are encapsulated in hard hoof wall. The condition is EXTREMELY PAINFUL.



There are many predisposing reasons why your horse may be prone to laminitis. The most common cause relate to the ingestion of an excess of rapidly fermentable carbohydrates (sugars and starches - grain overload) or the grazing of lush pastures (fructans). It can also develop due to excessive loading, certain disease states and the administration of steroids. The risks are much higher in overweight, unfit ponies and the incidence of the acute form of the disease is much higher when there is a flush of new grass (like now!).

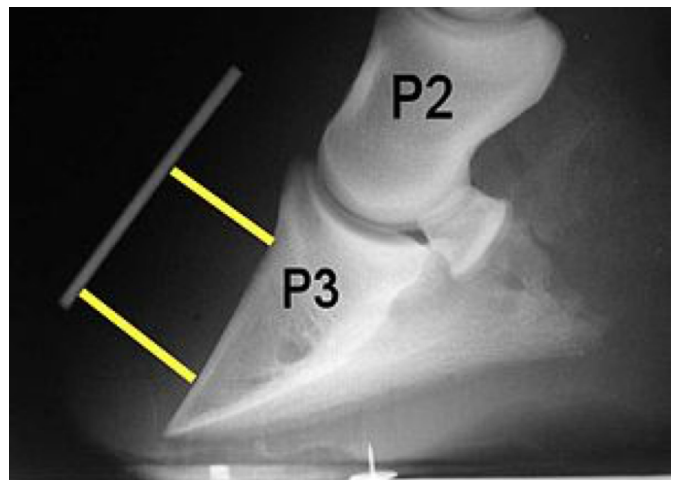
In acute laminitis the horse is depressed and anorexic and standing in characteristic sawhorse stance, with reluctance to move. There is usually heat in the hoof and a bounding pulse can be palpated. If caught early these changes can be reversible but can quickly result more severe, permanent changes such as rotation of the pedal bone due to the separation of the hoof from the sensitive laminae. If the rotation occurs rapidly the pedal bone may 'sink' within the hoof.

Chronic laminitis is characterised by changes in the shape of the hoof and is usually sequential to an acute attack. Bands of irregular horn growth (laminitic rings) may be seen, and the hoof itself may become narrow and elongated. As the condition progressed the sole may become thickened and the sole convex. On radiographs the pedal bone may have begun to rotate as well as osteoporosis of the pedal bone.



**Prognosis:** The prognosis in severe cases is poor because the changes become irreversible and secondary infection often occurs. In chronic cases the rotation occurs slowly and the sole tends to become convex and thicken in response to the altered change in loading.

**Diagnosis:** The diagnosis is usually made on history and on clinical signs. Radiographs are often recommended to ascertain the severity of the laminitis, as well as identifying more mild cases. They are also extremely useful as an aid in corrective farriery.



**Radiograph (X-ray) of distal phalanx (P3) showing evidence of rotation.** The yellow lines mark the distance between the top and bottom part of P3 relative to the hoof wall, showing the bottom lines has rotated further away. (They should be the same size).

**Treatment:** Acute laminitis is a medical emergency so please ring your vet ASAP. In chronic cases the aim is to decrease pain and ultimately restore the normal hoof alignment of the rotated pedal bone. This can be achieved by providing a deep, soft bedding, anti-inflammatory medication, dietary control and corrective farriery.



**Prevention:** You can decrease the occurrence of laminitis by avoiding high risk situations. Nikita will cover some broad management strategies in the next section but talk to us at VANI about your individual situation and we can help you formulate a specific diet and management strategies. Some horses also have a metabolic condition which is preventing them losing weight if you are concerned or would like some further advice please contact on our website [www.vani.nz](http://www.vani.nz) or drop us an email or call e: [nikita@vani.nz](mailto:nikita@vani.nz); t: +64 21 563 272

## In the feed room with Nikita

So your horse has laminitis and you are following your vets advice about how to best manage the disease, fantastic that's the first step. Next you need to consider how to manage your horses feed differently to ensure you prevent the disease from getting worse and hopefully prevent your horse from foundering again. In New Zealand we are fortunate enough to graze our horses at pasture all year round, unfortunately for the laminitis prone horse or pony we may need to limit their pasture intake at certain times of year, especially when the pasture is lush and actively growing. Pasture is highest in soluble carbohydrates (we'll call them sugars to make it more simple) in spring, followed by autumn and is lower in winter and summer. Sugar levels can also fluctuate throughout the day, however so to do our horses and ponies grazing patterns so it's not always as easy as turning your horse out when the levels are lowest and keeping them off pasture when the levels are at their peak. If you are concerned about pasture exposure, it is safest to keep your horse off pasture during high risk periods (e.g.. Spring and Autumn or whenever the pasture is rapidly growing). If you can't keep your horse off pasture altogether, graze them late at night or very early in the morning only if possible. The type of pasture (i.e., pasture species) you have in your paddocks will also have an impact on how safe it is for your horse. Contact us at VANI if you would like to organise a farm visit where we can assess such things like pasture quality and suitability and can have your pasture tested for sugar levels at different times of the year to give us a picture of how your pasture can be safely incorporated into your horses diet. We can also help you with a regressing



programme to incorporate lower sugar grasses such as Timothy and Cocksfoot into your pastures.

If you are able to successfully manage your horse on and off pasture then you are 90% of the way to minimising your horse from future laminitic episodes. You also need to consider the other components in the diet. The best way to do this is to write EVERYTHING down that goes into your horses feed each day, and other forages that your horse may be getting such as Hay. To take the guesswork out of this you can complete VANI's online horse diet evaluation here [www.vani.nz/packages](http://www.vani.nz/packages), where we can evaluate your horses diet for you and give you practical recommendations to improve your horses diet and wellbeing. Whether you do it yourself or ask for some help, the main thing to assess is the Non-structural or water soluble carbohydrate levels in all of your feeds. This may not be possible with certain chaffs and hay so you may need to make some assumptions, however most hard feeds will now have information about sugar levels in feeds and make sure if your horse is prone to laminitis that you stick to feeds with low sugar levels (usually high fibre, non-grain based feeds). Some feeds also have the Laminitis Trust horse feed approval mark, so this is a great mark to look out for. If in doubt if your feeds are safe for your horse, don't be afraid to ask the feed company for an analysis (if it is not on the bag), or let us do it for you!



Laminitis is a severe and painful disease that is common amongst our horsey friends, so let's do our bit to look after them, treat them appropriately and feed and manage them well so they can live long and happy lives.



# OUT AND ABOUT WITH VANI

Get in touch with us to catch up at one of these events

## January - February 2017

30th January - 3rd February - Nikita will be at the New Zealand Bloodstock Thoroughbred Yearling sales held at Karaka.

20th February - Nikita will be at the PGG Wrightsons Standardbred Yearling sales held at Karaka

## March 2016

7th - 12th March - **VANI will be in full force at the Horse of the Year Show in Hastings at site B03** on the premier arena all week. Come and see us and, get your exclusive HOY horse health check and check out everything we have to offer. We can't wait to see you there!



## Coming up next time

Sign up to become a VANI VIP [here](#) and receive our next newsletter automatically in March!

### GET IN TOUCH WITH US

[www.vani.nz](http://www.vani.nz)

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