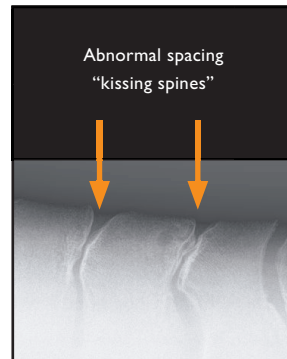
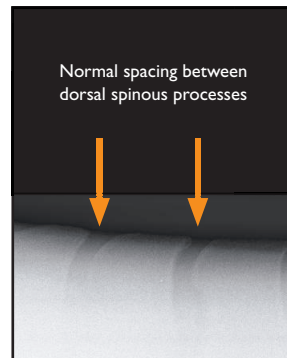




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Kissing Spines

Kissing spines or dorsal spinous process impingement may be sudden (provoked by a traumatic incident such as a fall) or insidious in onset, presenting as a progressive unwillingness to work or a deterioration in performance. In some cases the condition is a congenital defect but can present at any age. Generally the condition is seen more in dressage, event and other competition horses. This is possibly due to the greater physical demands placed on them as in many cases the problem may go unnoticed in horses used for hacking and low-level work.

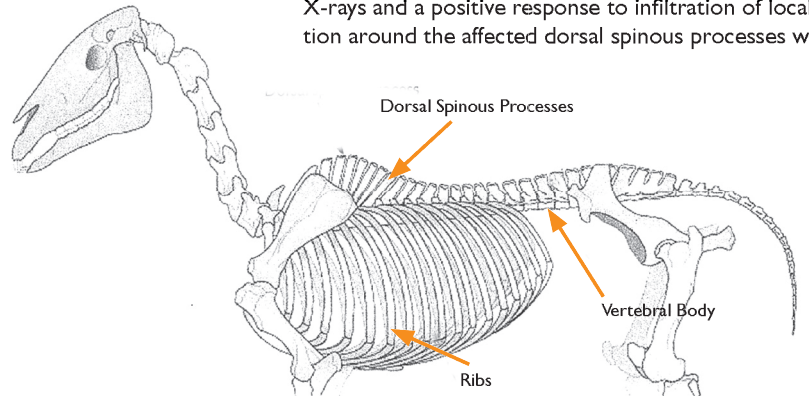
Cause of pain

The horse's back is comprised of 18 thoracic vertebrae and five or six lumbar vertebrae and the sacrum. Each vertebra has a dorsal spinous process (DSP) — a thin, bony blade that projects upwards. The spacing of the dorsal spinous processes is dependent on the horse's conformation. The shorter the horse's back, the closer the DSPs are likely to be. A horse with this condition may experience consistent, low-grade pain because the spinous processes, or bones projecting from the vertebrae, are too close together and impinge on each other. Extra bone develops as a result and compresses the soft tissue.

Back pain rarely causes overt lameness, but it may result in reduced stride length in front and behind, reduced hindlimb impulsion and stiffness. The longer the problem is present, the more likely it is that the horse will lose muscle off the top line because he is protecting his back and not using the muscles properly.

Diagnosis

Definitive diagnosis is dependent on a careful assessment of the horse, X-rays and a positive response to infiltration of local anaesthetic solution around the affected dorsal spinous processes when ridden.



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What to look out for

- Reluctance to be saddled
- Cold-backed' behaviour when mounted
- Irritability when being groomed
- Reluctance to jump
- Unpredictable behaviour
- Extreme stiffness in the back and hind quarters
- Rearing, bucking and bolting

Treatment options

- 1) Corticosteroid Injections: this is a deep injection between the affected spinous processes and aims to reduce surrounding inflammation and associated pain.
- 2) Shock-wave therapy.
- 3) Use of Tildren appears to be beneficial in some cases of kissing spines, however strong clinical evidence of this success is yet to be published.
- 4) Surgery: this involves cutting and removing the dorsal affected dorsal spinous processes and some associated soft tissues.
- 5) An extended period of rest may cure kissing spines in some horses.
- 6) Alternative therapies including acupuncture, chiropractic manipulation, laser and magnetic therapy may also alleviate symptoms but in the majority of confirmed cases of kissing spines this improvement appears transient in our experience.

Horse Weighing Service

In July we added an equine weighbridge to our list of specialist equipment. The weighbridge allows precise assessment of your horse's weight and is used on a daily basis both for our inpatients and in monitoring those patients who are significantly under or over weight. Since its arrival at the practice, we have identified numerous discrepancies between weights that have been calculated from a weigh tape or gestimated. This has led to over or under dosing with wormers. Anyone is welcome to use the weighbridge **free of charge**. Please contact the office 01342 823011 to book an appointment.

New staff at Priors Farm

Fi Ashton joined us in April as our newest Veterinary Nurse, working alongside Sam. Fi has previously worked as an Instructor and competition groom, both in the UK and abroad. In her spare time she enjoys competing and riding at home, as well as creative writing, cookery and the gym.

We are also delighted to announce Alex has taken up a permanent position working in reception alongside Sacha.



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What is IRAP?

Osteoarthritis, i.e. degenerative joint disease (DJD), is one of the main causes of lameness in horses and it starts when cartilage in joints is damaged producing inflammation and pain. Usually therapy involves intra-articular medications such as corticosteroids and/or hyaluronic acid, rest, NSAIDS such as 'bute', polysulphated glycosaminoglycan (PSGAG) such as "Adequan", pentosan polysulphate such as "Cartrophen", and oral supplements containing glucosamine and/or chondroitin sulphate.

More recently a treatment called IRAP (Interleukin-1 (IL-1) Receptor Antagonist Protein) has been developed. This uses the horse's own serum to combat osteoarthritis in the joint. IL-1 is a cytokine secreted by cells of the immune system to attack infections and damaged or dying cells. Although this is an important part of the inflammatory response, it can be detrimental to joints by accelerating deterioration of the cartilage. IRAP works by blocking IL-1 from binding to tissues and as a result preventing the damage to the cartilage. Therefore the reason IRAP is exciting is its potential long-term effect on cartilage i.e. preventing an injured joint becoming an arthritic joint.

The procedure starts with sterile collection of blood into a syringe with special glass beads that stimulate production of IL-1. After incubation and centrifuging the IRAP rich serum is injected into the affected joint in a sterile manner. Usually IRAP treatments are given on three occasions at two week intervals. Case selection is very important and IRAP is of most benefit in joint disease where no x-ray change can be seen but pain has been localised exclusively to the joint. In these cases we have found IRAP to be remarkably effective with horses returning to normal work. In addition we have also seen benefits in its use where there is a damaged ligament associated with a joint for example with coffin joint collateral ligament injuries. It is however no substitute for surgery where fragments must be taken out, and there are also limitations in its use for the later stages of joint disease.

