SUBCLINICAL LAMINITIS IN THE SHOW HORSE
WHAT IS LAMINITIS

• Simply stated, “laminitis” is inflammation of the laminae.
• The sequel to this event can be laminar swelling, laminar detachment, and laminar death.
CAUSES OF LAMINITIS

• Metabolic – Cushing’s, Equine Metabolic Syndrome, Grain overload, Stress (Hauling, Post Surgery, Disease – Potomac Horse Fever)

• Trauma – Direct trauma (Hoof wall avulsions, Repetitive Concussion [“Road Founder”], Tearing of Dorsal Lamina from severe toe elongation and imbalance)
WHAT IS SUBCLINICAL LAMINITIS

• “SUBCLINICAL” REFERS TO A CONDITION THAT IS NOT READILY APPARENT TO THE OBSERVER. THE HORSE APPEARS ESSENTIALLY NORMAL, IS NOT OVERTLY LAME, AND MAY ONLY EXHIBIT A LOWERED PERFORMANCE FROM HIS USUAL LEVEL.
LITTLE KNOWN LAMINITIC EVENTS

- Pedal Osteitis
- Sole abscesses (sequestrum)
- “Gravel”, “Seedy toe”
- Severe flares – toe flares and quarter flares
- “Navicular disease”
- Poor performance
CLINICAL LAMINITIS
?LAMINITIC?
WHAT CAN BE DONE?
(DIAGNOSTICALLY)

• Do not assume that lowered performance is due to ‘bad days’, anemia, bad training, or other cause.
• Do not over-diagnose ‘navicular disease’
• Watch for subtle signs – uneven ‘nod’, mildly lowered performance, physical signs of insulin resistance
• RADIOGRAPH REGULARLY – THESE ARE VALUABLE HORSES
RADIOGRAPHIC LAMINITIS SIGNS

- Decreased sole depth
- Rotation of digit
- Drop of P3 in hoof capsule
- Bone erosion at tip of P3
- Hoof distortion
- Increased distance between dorsal hoof wall and P3
SIGNS OF SUBCLINICAL LAMINITIS

- Drop of P3 in hoof capsule
- Bone erosion at tip of P3
- Hoof distortion
- Increased distance between dorsal hoof wall and P3