

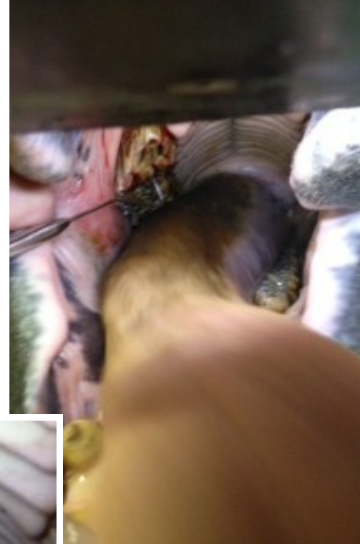


DR. MATT SCHAEFER

www.dairylandvet.net 920-837-7766 dvs@centurytel.net

Equine Dentistry

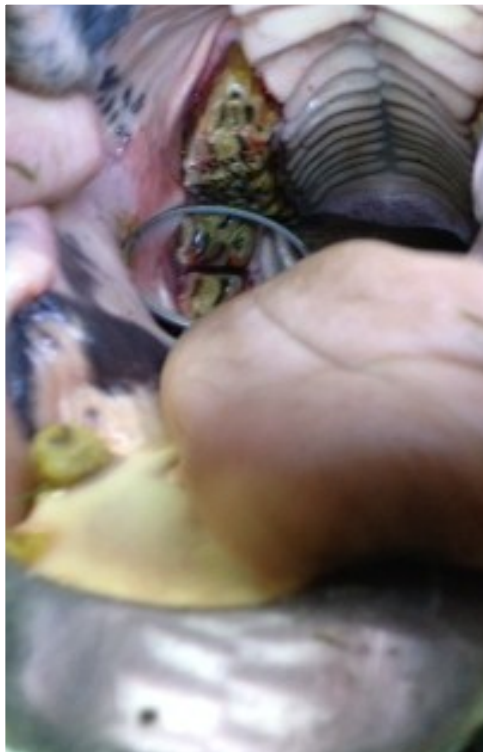
Equine dentistry is rapidly evolving medical practice that has made several advances in what we can do for the horse.



Probe deep in diastema should have radiograph

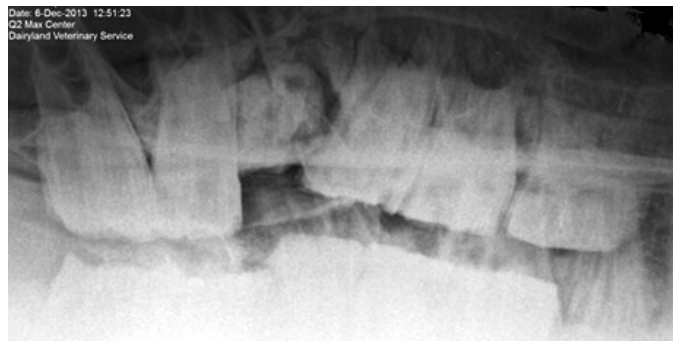


Food packing in "value" diastema



Diastema (gap between the teeth) necessitating investigation with probe.

Simple exams are more detailed and with the use of digital radiography chronic problems can be diagnosed. The latest generation of equipment for the simple floating procedures has improved so much that the time it takes to do the work has been substantially reduced.



Impacted 208 in need of removal

Phone: 920-837-7766

E-mail: dvs@centurytel.net

www.dairylandvet.net



EQUINE CUSHING'S & INSULIN DYSREGULATION



Cushing's Horse



"The biggest thing you can do is weigh the hay and feed @ 1.5% of the horse's weight."

Through August we will be offering testing at ½ price with any dental procedure.

One of the most common causes of lameness in all horses no matter what the discipline or use is Laminitis. Pituitary Pars Intermedia Dysfunction or Equine "Cushings" can very well be the underlying cause of laminitis with or without insulin dysregulation. Horses that are generally older than 9 years old, consistently heavy in body condition (>6 of 9) with a crested neck probably should be checked for an endocrine abnormality.

Once horses have had an episode or two of laminitis or are slow to shed out their hair coat in the spring, it is even more imperative to test. Checking insulin and ACTH status is the backbone of laboratory diagnosis of these conditions. The insulin testing can be a resting, fasting, or oral glucose challenge, each of these vary in sensitivity of achieving a correct diagnosis of insulin dysregulation.

Equine "Cushings" is diagnosed by a simple ACTH sample or the Dexamethasone 19 hour suppression test. It is important to remember that not all horses with "Cushings" have insulin dysregulation and that not all horses with insulin dysregulation have "Cushings". So we really have to test for both. The purpose of this testing is to properly manage the horse through dietary changes and medication if necessary to prevent or control laminitis.

Once a diagnosis of Equine Cushing's is made, the drug Pergolide is prescribed and within a matter of around 2 weeks most clients note that their horse's attitude has changed showing more energy and the hair coat sheds out. However, it is very important that the diet is addressed with the amount and quality of feed as most horses are overweight. The biggest thing you can do is weigh the hay and feed @ 1.5% of the horses weight, with further evaluation of this plan after 1-2 months. Again horses may not only have Cushing's but, have insulin dysregulation as well. In these cases we must feed < 15% nonstructural carbohydrates in the diet. Feeding from a hay net is a good way to avoid insulin peaks during the day. If you notice any of these symptoms in your horse contact us.