

What can be done for a horse that has suffered ringbone, a debilitating malformed calcification of the joint?

Ringbone is the common term for osteoarthritis of the pastern joint (“high ringbone”) or coffin joint (“low ringbone”).

It appears as a mild-to-severe lameness that often is exacerbated on a circle or with flexion tests. Bony formation may be palpable over the pastern or coffin joint areas in affected cases. It most commonly is diagnosed by a lameness exam with flexion tests, diagnostic nerve blocks, and radiographs.

Radiographs often will show osteophytes or spurs around the joint, new bone formation, and loss of joint articular fractures, acute trauma, or infection.

Treatment includes intra-articular steroid and hyaluronic acid injection into the affected joint. Non-steroidal anti-inflammatory therapy also is valuable. Oral and injectable joint supplements, containing products such as glucosamine, chondroitin, avocado soybean unsaponifiables (ASUs),

and hyaluronic acid may also help.

Regenerative medicine techniques such as IRAP (Interleukin 1 Antagonist Protein), PRP (Platelet Rich Plasma), and stem-cell injection may help decrease inflammation and slow the process of arthritis.

Extracorporeal shock wave therapy also is used on ringbone cases to increase blood flow to the area, provide analgesia, and increase bone remodeling. Surgical fusion or arthrodesis of the pastern joint is available for cases refractory to other treatments.

Pasture or light riding soundness is expected, with hind limbs generally having a better prognosis than front limbs. Several techniques are available with multiple screws placed across the joint or a combination of plates and screws. Chemical fusion of the pastern joint is much less successful than fusion in the distal hock joints due to the higher motion of the pastern joint.



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Dr. Werner attended veterinary school at Auburn University. She completed a surgical internship at Hagyard Equine Medical Institute prior to her residency and Master’s program at Ohio State University. Werner stayed on as a clinical instructor at Ohio State after her residency and then went on to be a surgeon in private practice in Central California for six years. She returned to Hagyard Equine Medical Institute in January 2011. Her interests are emergency surgery, septic arthritis, and lameness.

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