

Clinical Case

“Joe”

5-year old gelding – Arabian

Uncoordinated Hind Limb Movement and Hindquarters Muscle Wasting

8 FES Treatments on top line

3 Movement Evaluations

Until sound at trot and canter during longeing

SUMMARY: Upon examination Joe was Grade 3/5 lame in both hind legs. Observation during trotting showed a locked hip positioning the torso to the left while tracking in either direction or straight. Palpation to the lumbar/sacral region produced no rotation and a “drop” in the lumbar to pressure on the right side of the spine. The right pelvis was low and rolled forward in its position relative to the left. Observation of the dorsal spine showed a “S” shape lateral curve pushing the torso to the left. Left scapula was pushed forward and was higher in position relative to right scapula.

Four FES treatments were performed during the first 3 weeks. Three treatments were performed on the lumbar/sacral region and one treatment on T12 – L4. Joe was longed after the 4th treatment and a protocol was set for longeing at the trot, using circles no smaller than 20 meters in diameter. Longeing had to be done with sidereins so Joe would maintain straightness during work.

At 1.5 months, Joe showed some shortness in the right hind during longeing. This was attributed to the training requiring Joe to be more symmetrical by using his right hind more. The increased use of the right hind was causing some stiffness during the warm up phase. Joe would work out of the stiffness and became symmetrical after 3-5 circles. Canter work was added in both directions.

At 2 months, Joe was considered clinically sound at both trot and canter on the longe. Joe has only limited riding so work under saddle was introduced slowly at 2.5 months.

5/10 Evaluated at University Equine Medical Center

History of uncoordinated hind limb movement
Hip locking and “bunny hopping” at canter
Progressively worse since December 2006
EPM (Western Blot) Non-Specific Serum - Weak
Treated with Marquis with no noticeable improvement in gait
Neurological exam

Overall	2.5/5
Hindlimbs	3/5
Forelimbs	2/5

Radiographs

Standing cervical radiographs

Normal measurements of spinal canal

Osteoarthritis of the articular facets, C5-C6, C6-C7, clinically no hesitation in neck flexion in either direction

5/15 EPM-IFAT Sacrofluor - Negative
EPM-IFAT Neofluor - Negative



JOE Pre FES treatments

- 4/23 FES treatment
L1 - S4 (centered over loins)
- 4/25 FES treatment
L1 – S4 (centered over loins)
- 5/1 FES treatment
T12 – L4 (behind withers)
- 5/12 FES treatment
L1 – S4 (centered over loins)
- 5/31 FES treatment
T18 – S3 (mid back to loins)
Movement Evaluation
Torso locked to left, no weight in right hind
Longeing every other day for 20 minutes each direction, changing directions frequently,
only large circles
- 6/6 FES treatment
T12 – L4 (behind withers)
- 6/8 Movement Evaluation
Short in right hind – swing phase
Add canter work both directions
- 6/26 FES treatment
L3 – S5
Movement Evaluation
Swinging hips to right at canter
- ***** Clinically Sound During Longeing *****
- 7/5 FES treatment
L3 – S5
Movement Evaluation
Right hind stronger, improvement in length of stride
- 8/12 FES treatment
L3 – S5
Movement Evaluation

Almost symmetrical in flexibility to right and left during trot
Canter still stiff to left



4/23 Pre FES Treatments



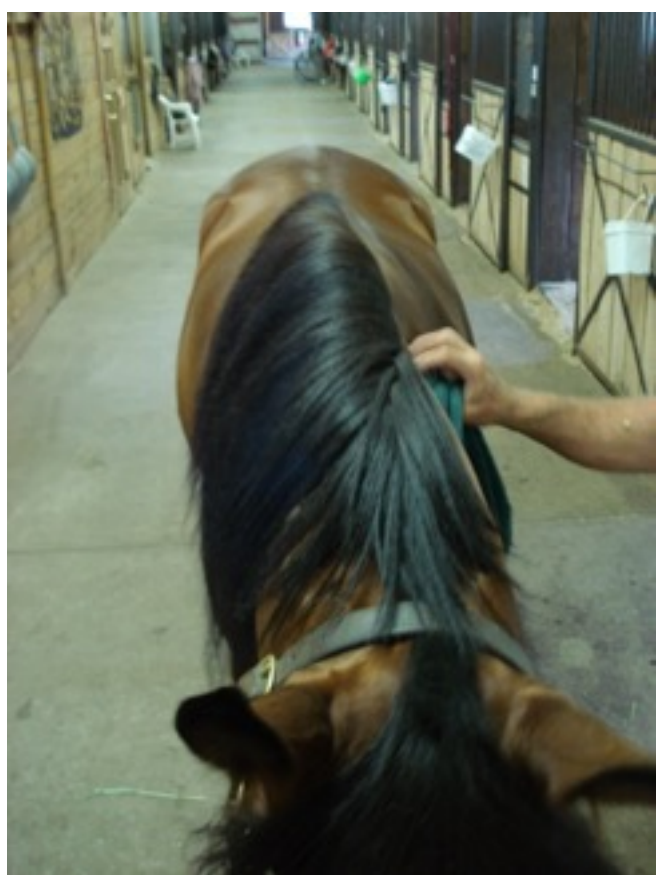
6/26 After 7 FES Treatments



4/23 Pre FES Treatments



6/26 After 7 FES Treatments



4/23 Pre FES Treatments

6/26 After 7 FES Treatments