Connection Issues: Shared frustrations b/t owner, trainer, horse

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Problem List

• Won’t go into frame
• Tosses head
• Tilts head
• Behind bit
• Tongue hangs out
• Funny to the L/R side
• Stiff to the L/R side
Investigation into causes

1. Rider
   - Experience
Investigation into causes

2. Tack
Changes?
Rough wear?
Alternatives?
Investigation into causes

3. Horse
Behavioral v. Pain
Poll, chiro, accu, lameness
Between the ears?
Between the bars?
Investigating the horse

• Age dependent variables- both behavior and dentition

• Breed dependent variables- Head shape, bar shape

• Discipline dependent variables- Dressage, Hunter, Eventing, Driving
Oral Bit Pain

- Anatomy involved:
  - Lips/ cheeks
  - Tongue
  - Bars
  - Hard Palate
Investigation

• Horses bite---hard.
• Have your veterinarian sedate and examine for:
  1. Abrasions, cuts, lesions from bit contact
  2. Palpate all soft tissues for abnormalities
  3. Look at all teeth for problems
Case 1

• Hanoverian 6yo Gelding, imported 60 days ago
• Resist contact, great on loose rein
• Tosses nose and rolls/slants left side of head up
• Becomes very ‘awnry’ when forced into a frame—will buck
• He’s a fancy, expensive horse and is not suppose to do this!
Case 1

- Extraoral-head tossing, worst in contact, no frame, twist nose
- Oral Soft Tissues- no abrasions, sensitive at subtle raised area on right lower bar
- Orthodontic- mild imbalance, step 308, 408 likely not the problem
- Periodontal- NSA
- Endodontic- NSA
- What’s the next step?

Diagnostic imaging- is always the next step. Thing about your dentist taking x-rays of your mouth to see below the gum line!
Case 1

• Raised area of R mandibular bar, mildly reactive
Case 1 Solution: Relieve bar pressure

- There are no good surgical solutions to this problem, train through it.
Case 2
5yo WB Gelding

- Extraoral - Head shaker, tosses head in stall and while in work, facial swelling below right eye
- Oral soft tissues - NSA
- Orthodontic - mild step defect 310
- Periodontal - Feed packing at 110
- Endodontic - Abnormal crown shape 110, w/ potential infundibular fracture and feed packing
- What’s your next step?
  - A. Extract 110  B. Odontoplasty  C. Diagnostic Imaging  D. Refer
Case 2 Diagnostic Imaging
Case 2
Treatment Plan

• Oral extraction 110a, 110b,
• Conchofrontal Sinoplasty / flap for 110c
• Perioperative antibiotics
• Periodontal tx of 110
• Recheck in 10-14 days for suture / staple removal
Case 2 Intra-op
Conclusion

Shared frustrations/challenges

Involve your trainer, veterinarian, consult with a bitting specialist, reach out to a veterinary equine dentist.

Some of the causes can be found and solutions formed when we work together during our investigation of the problem.

Many times imaging is invaluable to identify anatomical variances.
Questions?