

The South and West Wales Shetland Pony Group



**Supreme Champion at Group Summer Show
Hayne Blackberry ridden by Abigail Morgan
with Judges Mr & Mrs Wright**

AUTUMN

2010

PLEASE MAY WE REMIND ALL MEMBERS THAT SUBSCRIPTIONS ARE DUE
THANK YOU

CHAIRMAN'S ADDRESS

Dear Members,

I hope you are all enjoying this years' season, it has been good to see our members turning out for some of the smaller local shows as this is the only way that these events will continue – we have heard time and time again the comment that the Shetland exhibitors are the best for getting themselves up to the ring without being continually shouted for; well done to you all.

The International Show at Hickstead was a very successful Show for our President and her daughter Lara whose Standard Shetland Stallion Brinleyview Comanchee was Coloured Champion and went on to be Second Reserve Supreme Champion – well done Anna and Lara.

The Autumn Indoor Show is at Peniel as usual on Sunday, 10th October , I see we have a Fancy Dress class again this year with the theme of “Party Time”, everyone is welcome to enter, young or old, good luck.

Our Committee has decided that we shall add a bar meal to our AGM this year hopefully with a Quiz and anything else that we can put on to be of interest to you all – the date for this is Friday 12th November, food first at 7.30 pm at The Temple Bar, Carmel, further details of menu etc in this Newsletter.

Our Christmas Dinner is at the Hollybrook Country Inn, Bronwydd, Carmarthen, SA33 6BE on Saturday 4th December. We are trying to obtain a Menu for this but unfortunately not available at present. If it is not to hand by the time this Newsletter goes to print we shall send it to you separately.

We are looking for Sponsors for the 2011 Summer Show, we all know times are hard at present so we have come up with an idea of £5. per class, but there are extra packages that you may like to support, please contact our Sponsor co-ordinator ,Debbie Pittard, she will be only too pleased to hear from you.

We all wish you a good end to the season and look forward to seeing you at the October Show.

Charles Seward (Chairman)

Officers and Committee

Officers and Committee

Charles Seward (Chairman)
Sandra Seward (Secretary-01267 275 485)
Stephen Mander (Driving)
Eric Williams
Sandra George (Ridden/Performance)
Debbie Pittard (Newsletter-01685 873 373)
Joan Hunter (Scrapbook)

Anna Stevens (President)
Pauline Mander (Vice Chair-Performance)
Nick True (Treasurer)
Ms Janet Law
Timothy Evans
Gerwyn Pittard

Group News

The Group's AGM/Social evening is to be held on Friday 12th November at the Temple Bar near Cross Hands/Llandybie 7pm, meals will be available at a cost of £5-95 and £6-95 each and a booking form is included.

The extremely popular Autumn Show will be held at Coombe Park Peniel on 10th October , there will be the usual classes with some new fun / childrens classes. A schedule is enclosed .If you would like to sponsor classes at any of our shows please contact Debbie on 01685 873373. The show-class board will be in-situ with the class numbers clearly displayed as we have had some problems in the past! So no more worries about missing classes and anyone who isn't showing and would like to volunteer their services please let us know-likewise a photographer to snap the section winners –Thanks!

Yes- the year has flown by and believe it or not , its time for us to send out the Christmas Dinner Menu – this years Dinner is to be held on the 4th December at the Hollybrook Country Inn near Carmarthen, a guest speaker will be in attendance and we are expecting it to be a spectacular night. A booking form will be sent out and also available at the AGM, Autumn Show etc, please book early to avoid disappointment.

The Summer Group Show is to be held once again in conjunction with the NPS at the Cothi Bridge Showground in Nantgaredig on the 14th August 2011 with Judges from far afield-details to follow, schedules will be posted in due course.

Many Congratulations to group members who have done so well showing this year, including Anna Stevens and Jamie Russ at the International Show. The True Family for their HOYS qualification and Frankie Currell at the NPS Judging Competition among others. Good Luck to you all and sorry for any I've missed. ☺

It had been suggested that we hold a Clinic for in hand showing, ridden/ performance and driving, possibly held at an indoor school near Carmarthen if members would be interested in this please could they contact Sandra Seward on 01267275485 to put their ideas forward.

Pauline Mander has asked that everyone return their performance point card entries asap as the awards are imminent.

Our new website is up and running on www.shetlandsinwales.co.uk if anyone would like to add pages to their stud or are interested in having their website linked or a website designed then please get in touch with Sandra and she will give you the details. Advertisements for tack or ponies for sale can be extremely effective and the costs minimal.

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SUMMER SHOW RESULTS

The South & West Wales Shetland Pony Group held their annual Summer show in conjunction with the National Pony Society Area 28 on the 19th June 2010 at the Cothi Bridge Showground, Pontargoithi, Carmarthen. This has proved to be a successful way of fully using a show field both from a financial and workload point of view. Our Judges for the day were Mr & Mrs Wright from Cheadle, Staffs who very kindly judged the Standards, Smalls, Coloureds, Ridden and miscellaneous classes. Our Group has been lucky to have a very loyal and competitive membership who support us over our three shows we run through the year and our judges were pleased with the quality of the ponies that came in front of them on the show day. It has been brilliant to see several new exhibitors appearing with Shetlands and entering fully into all spheres of showing, albeit ridden, driven or in-hand. We are always available as a Group to help in anyway we can and have a very active Committee with a Newsletter Editor who produces three very large Newsletters per year. The results of our show are as follows:

Judge :Mrs D.P.Wright

Lead Rein: 1st Brochwel Birthday Boy – Mrs A. Bael; 2nd Seva Gentleman Jim – Seva Family; 3rd Travassack Jessie – Paul Mander.

First Ridden – no entries

Open Ridden : 1st Hayne Blackberry – Mr D Hodge & Mrs V Morgan; 2nd Sapphire Classic – Carmilo Stud. Ridden Champion : Hayne Blackberry, Reserve : Brochwel Birthday Boy.

Smalls – Entire Male : 1st Tygwyn Black Prince – Pittard Family; 2nd Kerswell Smokey – Mr B Russ; 3rd Threeacre Maxwell - Joan Thomas.

Yearlings : 1st Cwmllynfell Lenny – Traci & Jon Wilson; 2nd Aberdyant Hellen – Mr I & Mrs J Oliver; 3rd Timberland Chiquitita.

2 & 3 yrs : Lloegr Gemmini – Pauline Braddock/A. Reed; 2nd Horspath Bronte Velvet; 3rd Tygwyn Chieftain-Pittard family

Barren Mare/Gelding : 1st Ladbury Estella – Seva Stud; 2nd Lloegr Glympse – Pauline Braddock/A Reed; 3rd Threeacre Inda Willow – Joan Thomas.

Brood Mare : Carmilo Jemima Puddle Duck – Debbie Tremellen; 2nd Sunant April Showers – Jones Family; 3rd Cwmllynfell Fushia – Mr I & Mrs J Oliver.

Foal : 1st Finetime Tumbling Tom – Debbie Tremellen; 2nd Timberland Dynamite – Jones Family; 3rd Cwmllynfell Lilly – Mr I & Mrs J Oliver.

Small Junior Champion : Lloegr Gemmini Reserve Junion Ch : Horspath Bronte Velvet.

Champion Small : Lloegr Gemmini; Reserve : Ladbury Estella.

Black Ponies

Entire Male : 1st Tygwyn Black Prince – Pittard Family.

Yearlings : 1st Valiant Prince of Fairwood – Mesdames Powell & Jarman; 2nd Finetime Leroy – Debbie Tremellen.

2/3 yrs : 1st Crank Genesis – Carmilo Stud; 2nd Horspath Bronte Velvet – Mrs G Salters; 3rd Merrychip Blackberry – Mr & Mrs J Hime.

Barren Mare/Geldings : 1st Willonbry Night Skye – Mrs S & Mr T Clark; 2nd Honor of Fairwood – Mesdames Powell & Jarman; 3rd Glenelg Thelma – Mrs A Stevens.

Brood Mare - 1st Carmilo Jemima Puddle Duck – Debbie Tremellen.

Foal : 1st Mr T of Catchpool – Mrs A Stevens.

Black Junior Champion : Crank Genesis; None others forward.

Black Champion : Willonbry Night Skye; Reserve : Honor of Fairwood.

Coloured Ponies:

Entire Male : 1st Niceman of Catchpool – Mrs A Stevens.

Yearlings : 1st Red Indian of Catchpool – Mrs A Stevens; 2nd Cwmllynfell Lenny – Traci & Jon Wilson; 3rd Aberdynant Hellen – Mr I & Mrs J Oliver.

2/3 yrs olds : 1st Zennor Amaryllis – Mrs A. Reed; 2nd Seva Nerys – Seva Stud; 3rd Cwmllynfell Katkins – Mr I & Mrs J Oliver.

Barren Mare/Geldings : 1st Sedgehill Kenny – Roy & Barbara Newman; 2nd Lloegr Amaryllis – Mrs A Reed; 3rd Trevasack Jessie – Mr P. Mander.
Brood Mares – 1st Cwmllynfell Fushia – Mr I & Mrs J Oliver; 2nd Sunant April Showers – Jones Family.
Foal : 1st Timberland Dynamite - Jones Family; 2nd Finetime Tumbling Tom – Debbie Tremellen; 3rd Cwmllynfell Lilly – Mr I & Mrs J Oliver.
Coloured Junior Champion: Zennor Amaryllis – Mrs A. Reed; Reserve Junior : Red Indian of Catchpool.
Coloured Champion : Sedgehill Kenny; Reserve Champion : Cwmllynfell Fushia – Mr I & Mrs J Oliver
Supreme Champion Foal : Finetime Tumbling Tom – Debbie Tremellen, Reserve : Mr T of Catchpool – Mrs A Stevens.
Supreme Junior Champion : Lloegr Gemmeni – Pauline Braddock/Mrs A Reed; Reserve : Zennor Amaryllis – Mrs A. Reed.
Supreme of Show : Hayne Blackberry – Mr D Hodge/Mrs V Morgan; Reserve : Sedgehill Kenny – Roy & Barbara Newman.

SUMMER SHOW PICTURES





Laminitis (general) by Sam Ratcliffe Dip WCF & Paul Conroy FdSc(Farriery) AWCF

The word laminitis can be broken down into two parts:

- lamin – being the laminae of the internal foot
- itis – means inflammation (swelling)

Together the word laminitis means inflammation of the sensitive laminae.

Types

There are two main types of laminitis:

1. Systemic Laminitis.
2. Mechanical Laminitis.

This type is caused by ischaemia to the laminae corium. This is a lack of blood supply to the laminae, brought about by:

- Veins and arteries constricting.
- Blood clots forming in the blood vessels.
- Blood being shunted away from the laminae corium in arteriovenous anastomosis. (Blood vessel from an artery to a vein, bypassing the capillary bed.) This causes the laminae to die leading to inflammation, heat and fluid leakage, due to the pressure build up. There is also intense pain.

Mechanical Laminitis

This type is brought about, not through ischaemia but, via trauma and stress to the laminae. The stress and trauma may be too much for the bond of the dermal and epidermal laminae to cope with. The laminae then begin to separate and inflammation occurs.

Anatomy

Laminae

There are two types of laminae:

1. **Dermal Laminae** (sensitive laminae as it has more of a blood supply than the Epidermal Laminae) – This is produced from the laminae corium, situated around the internal proximal boarder of the hoof wall and totally covering the parietal (dorsal and abaxial) surface of the distal phalanx which it is attached to via a modified periosteum. The dermal laminae are projected out towards the internal surface of the hoof wall.
2. **Epidermal Laminae** (insensitive laminae) - This is produced from the coronary corium with the horny wall and grows distally at the same rate as the hoof wall. The epidermal laminae are projected inwards to interdigitate with the dermal laminae. The epidermal laminae hold the hoof wall to the sensitive laminae which in turn holds the hoof wall to the distal phalanx.
As the wall grows the epidermal laminae to which it is attached grows distally with it, detaching and reattaching, with the sensitive laminae in a ratchet like motion. The distal phalanx is suspended within the hoof capsule via the interdigitation of the dermal and epidermal laminae.

Deep Digital Flexor Tendon (DDFT)

In order for the lower digit of the limb to flex there is the deep digital flexor tendon (DDFT) which inserts through the palmar aspect of the distal phalanx. This tendon is constantly pulling on the distal phalanx bone. To create a state of equilibrium within the foot the laminae must oppose the pull of the tendon otherwise the tendon would pull the back end of the distal phalanx bone up, causing it to rotate within the foot. If rotation does occur the descending body weight of the equine will push the extensor process of the distal phalanx forward causing the bone to rotate even more.

Papillae

There are small papillae on the coronary corium which point distally and secrete the horn tubules which make up the horny wall. If the rotation of the distal phalanx has caused the extensor process to place pressure on the papillae at the dorsal area, the growth of horn in that area could either be decreased or the papillae could be pushed outwards causing the dorsal wall to grow more sloping.

Disease Stages

Laminitis is a life threatening disease which can develop very rapidly. Veterinary advice should be sought straight away, any delay in treatment could prove fatal for the horse.

There are 4 important definitions which describe the different stages of the disease:

1. Acute Laminitis

This is when there has been no movement of the bone within the hoof and the disease is in the early stages. During this phase, the horse starts to show signs of severe pain and discomfort as the laminae become inflamed cause intense pressure within the hoof capsule. If left untreated it will progress on to one of the other types.

2. Acute Founder

The attachments between the hoof wall and the distal phalanx has started to fail. The dorsal tip of the bone starts to rotate distally within the hoof capsule. The dorsal laminae are the first to be affected as they are the last to receive the blood supply. There may also be a palpable depression in the area of the coronary band on the dorsal region of the foot.

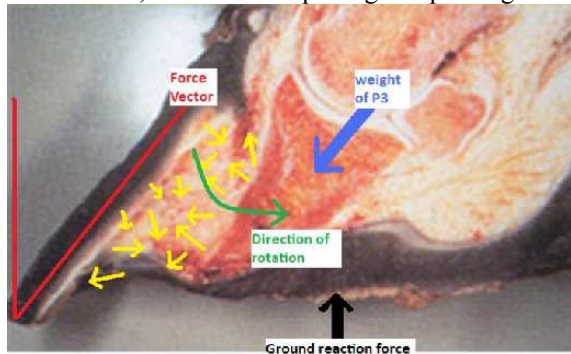
3. Sinker

There has been total destruction of the interlaminar bond and the bone is totally loose within the hoof. There may also be a depression in the hoof wall from heel to heel just under the coronary band, this is due to that area being sucked in as the bone drops distally.

4. Chronic Founder

Abnormal hoofs are present as the Acute Founder has lead to changes in the hoof production. There is also a broken back hoof pastern axis, stretched white line, divergent growth rings appearing tighter at the toe and gradually becoming more spaced apart towards the heels. The soles may be flat or convex with lots of bruising, the heels may also appear long but in fact it is the horn at the toe that has a reduction in growth.

Lamellar Wedge: This may be present in the dorsal hoof wall. The wedge consists of hyperplastic lamellar horn. This is a result of the dermal and epidermal lamellar bond breaking down. When this lamellar wedge forms it forces the bone to rotate even more. This is because the straight tensile lamellar bond of the two laminae has been broken, the forces are pulling and pushing in all directions, resulting in a dysfunctional foot.



The yellow arrows show the effect of the lamellar wedge

Causes of laminitis

- * Over eating of grain
- * Ingestion of cold water
- * Severe systemic infection
- * Obesity and ingestion of lush grass
- * Drug related
- * Stress
- * Pituitary cancer
- * Concussion
- * Poor or irregular farriery
- * Laminitis may also be triggered by other health factors/diseases such as:
 1. Toximia-pneumonia
 2. Diarrhoea
 3. Colic
 4. Endometritis

Over eating of Grain: This may cause laminitis, however different horses have a higher or lower tolerance level. The grains most commonly involved are WHEAT, CORN & BARLEY, the ingestion of oats are usually not as serious. Other grain based feeds such as RABBIT, CHICKEN & PIG feed are also capable of causing the disease. The intake of large amounts of grain will alter the bacterial balance in the cecum, resulting in an increased lactic acid producing bacteria and a decrease in PH level. The increased lactic acid breaks down the cell wall of the bacteria, resulting in a release of endotoxins. This affects the inner lining of the intestine, allowing absorption of these substances into the blood stream, this causes arteriovenous shunting in the foot.

Ingestion of cold water: Although this is not fully understood it is said to have an affect on the development of the disease. When an over heated horse drinks cold water it may irritate the stomach and intestines. A overheated horse should drink small amounts of cold water until the horse has cooled down.

Severe Systemic Infection: A Mare may develop this type of infection after foaling. This can result from retention of part of the foetal membrane (placenta), or a uterine infection. Laminitis in these cases is usually more serious.

Obesity and ingestion of lush grass: The equines that are affected are usually over weight with a large crest on the neck from fatty tissue build up. Shetland ponies, welsh ponies and fat horses of all breeds are subject to this disease. It is not uncommon to see an equine that has had previous lush grass educed laminitis in the summer, then get it again in the winter from just eating hay. Inadequate production of the thyroid hormone has also been considered as a cause of these types of laminitis. It is also said that frozen grass or early grass in spring releases toxins when eaten, this is a defence mechanism for the grass and can cause laminitis.

Drug Related: Corticosteroids causes blood vessels in the foot to constrict. When steroids are administrated they respond in getting the foot's blood vessels back to a normal circulating level, thus producing more hormones which can cause the blood vessels in the foot to contract.

Stress: Long boxed journeys may cause stress. When stressed the body releases its own corticosteroids into the blood stream.

Pituitary Cancer: This type of cancer is more commonly found in old ponies and may lead to laminitis.

Concussion: Horses that work on hard surfaces for long periods of time may be predisposed to mechanical laminitis. As the feet are exposed to traumatic concussion the laminae are pushed beyond their capability and the shearing forces through the laminae become too great, causing the dermal and epidermal laminae to separate. The soles will become bruised and the distal phalanx may inflame, over time [pedal osteitis](#) may set in. Horses with thin walls and soles may be at more of a risk of getting this type of laminitis.

Poor/irregular Farriery: The equine may be trimmed poorly with no care taken over medio-lateral and anterior-posterior balance. The foot may be landing and loading unevenly sending stress to parts of the laminae. If the live sole is pared away too much the protection and stability is taken away from the distal phalanx, this may also cause mechanical laminitis. If the toe of the equine's foot is left to get too long it creates a longer lever and more shoeing force on the laminae. Effectively the break over time is increased as is the break over point of the foot. This can also cause mechanical laminitis.

Alteriovenous Anatomosis (AVA Shunts)

During laminitis a change in tone and size of the blood vessels in the foot and alteration in the clotting system can cause the capillary beds to be starved of blood. Although more blood is produced to the foot in the onset of laminitis, it reaches the dermal laminae through the AVA vessel. This vessel connects an artery to a vein, thus bypassing the capillary bed. This starves the epidermal cells in the epidermal laminae of important nutrients and oxygen. This then leads to separation of the epidermal and dermal laminae, this may lead to sinking or rotation of the distal phalanx. Hormones are produced when the pain stimulates the adrenal gland. The hormones cause the blood vessels to constrict this reducing blood flow to the digit.

Signs

All four feet can be involved, but usually just the fore feet are affected. This is due to the greater amount of weight passing through the front feet. One of the fore feet may become more severe than the other, as the equine will prefer to stand on the good foot. This takes pressure off the bad foot but results in up to twice as much weight passing through the better foot.

Farriers: ensure that the so called 'good' foot is shod with a heart bar to support and prevent any mechanical rotation due to prolonged and excessive weight bearing on a single foot. This can speed up the laminitis in that foot causing it to become the worse foot very quickly.

Clinical Signs

- * Lameness – varies in amount.
- * Standing with fore limbs forward.
- * Stronger pulse to foot.
- * Reluctant to walk, due to discomfort and pain.
- * Hoof testers – pain felt.
- * Depression at the coronary band if foundered.
- * Faster rate of respiration and pulse.
- * Heat is present.



Lameness: The degree of lameness can vary but typically it is severe and sudden in onset. It is usually accompanied by the laminitis stance (see below).

Standing with fore limbs forward: The equine may stand with the fore limbs stretched out forward placing as much weight on the heels of the feet, to relieve pain off the toe where the laminitis is most severe. The hind limbs may be tucked under the body trying to take as much weight of the fore feet as possible.

Stronger pulse to the foot: The pulse is taken from just under the proximal sesamoid on the palmar/plantar abaxial surfaces. This is where the medial and lateral digital arteries are at their most superficial. Depending on the stage and type of laminitis the pulse becomes stronger or faster. In the early onset of laminitis more blood is pumped to the foot. Or the blood vessels have become constricted and the pulse becomes stronger and more pounding.

Hoof testers: The hoof testers are applied on the sole between the frog and toe, if the equine flinches then this reveals pain.

Heat: Heat may be present over the wall and coronary band this is due to the inflammation of the laminae and the pressure being created in the foot.

Signs - Acute Laminitis

- * The equine may stand with front limbs forward and the hind limbs underneath the body, or be lying down for extended periods of time.
- * The equine shows great reluctance to move, struggling to take its weight on one

fore limb while the other is lifted.

- * Heat is present over the wall and coronet band.
- * Increased digital pulse.
- * Muscles may be trembling from pain.
- * Increased body temperature.

Death may result from Acute Laminitis but is not common.

Chronic Laminitis

- * Laminitis becomes chronic when rotation of the distal phalanx occurs.
- * A semicircular bruising of the sole may occur dorsal from the apex of frog (suggesting rotation of the tip of the distal phalanx).
- * Diverging growth rings on the hoof wall may be present.
- * An equine with chronic laminitis and rotation may land heel first and crash down on to the toe (this happens because the distal phalanx is not aligned with the dorsal hoof wall and the sole).
- * The sole will appear convex as appose to being concave.
- * Hoof tester examination rarely shows a reaction in the chronic phase.



This picture is showing severe semi-circular bruising indicating pronounced rotation of the distal phalanx.

Diagnosis

- * Increased pulsation of the digital arteries.
- * Heat in the foot.
- * Pain reaction from hoof testers in the acute stage.
- * X-rays

X-rays



These are usually taken 48 to 72 hours after the acute onset of laminitis. The X-rays may reveal swelling of the laminae or rotation and sinking of the distal phalanx.

X-ray radiographs should be taken every two days during the painful acute stages of laminitis. This will help the veterinarian monitor the changes and decide on the appropriate treatment and what the possible outcome may be.

The radiograph (left) shows a lateral view of a horse with rotation of the distal phalanx. Note that the bone is not at the same angle as the dorsal wall.

How it is done...

1. A latero-medial projection should be taken with the limb standing on a block.
2. A metal object e.g. a piece of wire, is placed on the dorsal hoof wall from the coronary band extending downwards. This will show a clear reading of the dorsal hoof wall angle in relation to the distal phalanx, also indicating any rotation.
3. The wire is also used as a guide to calculate any sinking of the bone. The extensor process of the distal phalanx should be about 0-10mm below the coronary band.
4. A thumb tack is placed 1cm palmar/plantar to the point of frog, this gives the farrier a reading into the correct placement for the tang of the heart bar.

An equine's recovery can be predicted from the following guidelines:

Group 1. – Less than 5.5 degrees of rotation will usually return to athletic performance.

Group 2. – 5.5 to 11.5 degrees of rotation will usually perform but not at the level it did previously.

Group 3. – Greater than 11.5 degrees of rotation may generally remain lame despite regular treatment.

The X-ray radiograph (right) shows type 2 chronic founder.

Note the bone remodelling at the tip of the distal phalanx bone and also the degree of rotation. The distal phalanx has rotated off line of the phalanges and the extensor process is bearing the weight of the middle and proximal phalanges.

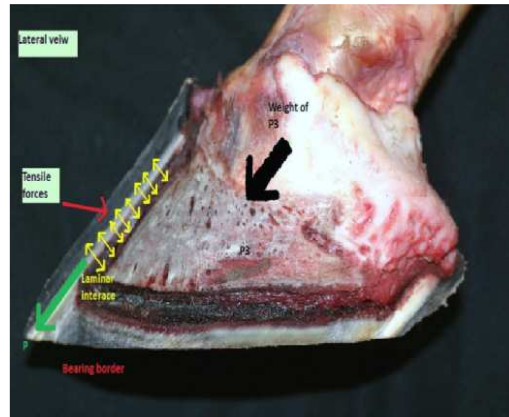
This X-ray would suggest a grave prognosis for the horse in question, however, at the time of writing this the horse is making slow but steady recovery.

Treatment

To treat laminitis you must first consider the anatomy.



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In a sagittal section of the lower digit the extensor process of the distal phalanx is slightly below the hoof wall (about 0 – 10mm). The dorsal surface of the distal phalanx runs parallel with the hoof wall. The solar margin of the distal phalanx should be at an angle of 20 degrees from the ground surface.

If a horse founders, the horny papillae where the wall is produced from will either be bent out through an angle of up to 150 degrees or be pulled from their sockets in the epidermis. Following the stretching or detachment of the inter-tubular horn fluid fills the space that has been created. The parallel alignment of the distal phalanx and the dorsal hoof wall is lost. However the alignment between the three phalanges has not been lost.

In some cases of laminitis the deep digital flexor tendon (DDFT) may spasm or actually shorten, this will cause the distal phalanx to become out of alignment with the other phalanges.

The treatment of laminitis is as follows:

- * Treat the cause.
- * Box rest.
- * Pain killing drugs.
- * Frog supports.
- * Dorsal wall drilling.
- * Dorsal wall resections.
- * Sectioning the DDFT.
- * Thinning of the dorso-proximal hoof wall.



Treat the cause: e.g. inappropriate food to be taken away immediately. Some laminitic equines are really miserable at being taken off what they are used to eating, even if it was killing them. Pain is a primary cause of laminitic equines not eating. Many sick animals are fussy and it is more important to eat something than nothing! You must prevent hypoglycaemia and hyperlipidemia in ponies.

Box rest: The equine should be placed on a clean, dry deep shavings bed. This will help support the sole and frog and will also reduce the hydration of the horn so it stays hard and strong to offer more support.

Pain killing drugs: Phenylbutazone ('bute') is used to reduce the pain thus keeping the equine calm and comfortable.

Frog supports: First aid can be given straight away by the use of a bandage or a lily pad rolled up. This is taped in line with the frog. This will give a bit more support for the bone until X-rays can be taken and then a heart bar can be properly placed.

The heart bar should be fitted with the aid of the X-rays. If the tang of the heart bar is placed too far forward pressure can be placed on the tip of the distal phalanx, this may cause discomfort and trauma to the bone. If the tang is placed too far backwards the support given will be to the back of the distal phalanx and will cause the bone to rotate even more.

The aim is to mechanically oppose rotation of the distal phalanx (see this website's [biomechanics](#) section on laminitis for a more detailed farriery treatment considerations).

Dorsal wall drilling: This is done in acute founder or sinker cases. In these cases pressure builds up from the inflammation in the dorsal hoof wall below the extensor process. A hole is drilled to drain blood, serum or puss relieving the pressure and pain.

Dorsal wall resections:

* Old founder cases – a Dremel® or knife is used to remove a large section of the dorsal hoof wall. This removes pressure from the blood vessels supplying the coronary band thus relieving pain. It also allows inflammatory exudates to escape and allows the new horn that is being produced to grow parallel with the distal phalanx. It will also help with the realignment of the distal phalanx with the other phalanges when combined with a frog support.

* Chronic founder cases – the dorsal hoof wall is rasped back so it is parallel with the distal phalanx. This will create a semi circular arch at the distal end of the hoof wall, discoloured yellow hyperplastic laminar horn is present. This technique will relieve some pressure but the foot will keep growing abnormally. For the foot to return to its normal shape and function properly the laminae wedge must be removed. The laminal wedge must be rasped back at regular intervals for the horny wall to grow as parallel as possible with the distal phalanx. In both these cases the sole can become convex, the circumflex artery becomes compressed between the distal phalanx and the sole. This reduction in the blood supply to the dorsal laminae may lead to the distal phalanx prolapsing through the sole. It is important in these cases that the shoe puts no pressure on the sole to further help this problem.

Sectioning the DDFT: This is only done when the distal phalanx has become out of alignment with the other phalanges, through spasms or shortening of the DDF muscle. This is done by a veterinarian and is an extreme procedure.

Thinning of the dorso-proximal hoof wall: This is done to relieve compression of the coronary band. Thinning of the wall in this area means the wall will compress during concussion and not damage the horn producing papillae within the coronary band.

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Common Driving Questions

Can I drive my horse?

Provided it is old enough to be ridden, fairly sane, sensible, fit and healthy then yes you can. No-nos are - bad in traffic, very spooky, kicks, bucks (a lot), generally hard to handle or nervous etc. Any breed can drive, some are just generally better suited than others (generally the calmer working breeds - eg arabs can and do drive but can be harder to break to drive and then potentially not a novice drive).

I have been told (or my horse acts like) it has been driven before

Always assume a horse has never been driven unless you have actually seen it for yourself. Its safer that way. So start from scratch with the early stages.

Can I break my horse to drive myself?

Yes, but do make sure you get some driving lessons, preferably some experienced help and at the minimum never attempt it without plenty of helpers on the ground in case things go wrong. Do not attempt it if you are not generally experienced around horses and if in doubt go back and repeat previous step rather than moving on if horse seems uncertain of something - better safe than sorry, accidents with a vehicle attached can be nasty.

Where do I get lessons?

If possible get to an LHHI (Light Harness Horse Instructor) - if in the UK. There are not many of them but they are well worth going to and trained to a very high standard. Find instructors here <http://www.britishdrivingsociety.co.uk/> failing that contact your local branch and ask their advice for help/finding someone for lessons.

Choosing a carriage

Think first about what you are aiming to do with your horse/pony and what your budget is. This has an affect on what you buy. However, especially if horse is just getting broken to drive, the best bet to start with is an exercise vehicle. When looking at exercise vehicles make sure welds etc are safe as there are some very dodgy home-made vehicles out there. Avoid mini wheels and axles as they make the carriage very heavy, motorbike wheels are generally fine. Once you have got going you can move onto the marathon/three phase vehicle suitable for HDT or the gig for private driving or just decide what vehicle you want for pleasure driving (sticking with the exercise vehicle is always an option here).

Choosing a harness

Again think first about what you are aiming to do with your horse/pony and what your budget is. Again don't spend ££££ on a show harness if just starting. Your best bet are probably the good quality synthetic Cheap synthetic harnesses can be a false economy as they are at best stiff and inflexible and at worst actually missing vital parts and unsafe! Avoid cheap indian leather harnesses for the same reason as you would in riding - poor quality leather liable to crack and snap, and often very poor workmanship.

What can I expect to spend?

This is hard to say exactly as it depends on horse size/your requirements/where you live etc. But at a rough guide I would expect to spend on average

£250-£550 on a basic starter vehicle

£200-£500 on a starter harness

Obviously you can spend more or less but a whole lot less and you may be looking at a false economy of poor quality (and possibly dangerous) equipment and a lot more and you may regret it if you or the horse don't take to driving or you snarl yourself up in the early stages and scrape your beautiful vehicle down a wall etc.

Some very quick definitions:

Private Driving - this is the showing side, focussing on traditional turnouts such as this

http://www.britishdrivingsociety.co.uk/images/thimbleby_champ_pic.jpg

Horse Driving Trials (HDT)- this is the three day eventing of the driving world, with dressage, cones (equivalent to showjumping), and a marathon (equivalent to roads and tracks) and obstacles (equivalent to the cross-country). <http://www.horsedrivingtrials.co.uk/>

Indoor Driving - this is the winter equivalent of HDT but takes place in one day (as do some of the club level HDT events) in an indoor arena. Often a good place for novices to start HDT.

<http://www.indoordriving.co.uk/>

Scurry Driving - fast and furious sport, consisting of pairs of small ponies competing against the clock around a cones course, usually at full gallop. <http://www.scurrydrivers.co.uk/>

www.osborne-ref.co.uk

Carriage driving clubs (UK)

Generally clubs are geared to particular interests, however don't be put off if your local one is primarily a driving trials group as most have picnic drives too and most of the BDS areas have some competition driving as well as pleasure drives, so do contact your local groups and ask. Drivers are generally known for their friendliness and welcome new drivers.

Driving in Wales

Mark Evans - (T); Pleasure & Private Driving

Llangadog SA19 Tel: 01550 779066

E-mail: PastureFarm@compuserve.com Website: www.pasturefarm.com

Rowena Moyse

Swansea SA4 Tel: 01792 874299

email: info@rowena-moyse.com Website: www.rowena-moyse.com

Anders Leijerstam

Tel: 01446 781900

Email: anders@prestige-carriages.co.uk Website: www.prestige-carriages.co.uk



Vet's Question Time

Our Veterinary Expert is Mr. Brian Cotter. M.V.B & M.R.C.V.S of the Emerald Veterinary Group in Tumble, Llanelli. Brian is an experienced equine vet and the readers Questions were:

Q1: My yearling pony always seems to have runny eyes we tried some drops but they are still runny should he be on antibiotics?

A. It depends on what condition your pony has. If it is in the summer it is possible that this could be an allergy. However if it is an infection the pony will need antibiotics. I would also like to know if your pony has any problems with his tear ducts which could also cause permanent wetness in the corner of the eyes.

Q2: is there an injection or spot on treatment available for lice, like there is with dogs and cats,if not what is the best thing?

A : There are many products on the market for treating/preventing lice infestation in dogs and cats. However there is nothing specific for horses. There is louse powder available for use. I have heard of people using small animal and cattle products but these are NOT licensed for use in horses. It is therefore important to try and prevent lice infestation by ensuring the ponies are well fed and in good body condition.

Wrexham 'billy goats tough' drive off dog



MEET Rustle and Cosmo – the have-a-go heroes who would make the Three Billy Goats Gruff proud.

The brave animals charged into action when a dog appeared poised to attack a miniature Shetland pony at a horse sanctuary.

In an incident which may be connected to the attack on sheep in nearby Bradley, a husky-type dog began stalking 28-inch-tall Lenny the pony at the HACK sanctuary off Park Road, Llay.

But plucky rescue goats Rustle and Cosmo came dashing to his aid.

After being charged by the fearless duo, the dog – much like the troll in the famous fairy tale – took flight.

Sanctuary trustee and volunteer Jane Lloyd had taken her two small godchildren, Eli, three, and Ben, six months, to the sanctuary to see two new chickens.

She said: “My attention was caught by a dog stalking low in the long grass. It was a husky type and as it got nearer I became afraid for the safety of the children and picked up the garden fork.

“Then I realised it was Lenny the dog was focused on. I didn’t know whether to leave the

children and protect Lenny or what.

“The matter was taken out of my hands when Rustle and Cosmo, our two goats whom I had previously put out in the paddock came dashing around the corner, heads down charging towards the dog.”

The dog fled into a lane but sanctuary volunteers were unable to see any owner.

Jane said: “There was no one about at all.”

She added: “I was absolutely amazed at the goats’ reaction and am very proud of them.

“We had rescued them a few years ago and I look after them. They have big horns so I certainly wouldn’t want to get on the wrong side of them.”

Despite Rustle and Cosmo’s bravery Jane says she is worried about the dog returning to the sanctuary, which is also home to sheep, chickens, pigs and a donkey.

She said: “The police have been informed and I would ask anyone who knows to whom the husky dog belongs to please come forward.”

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Please send any articles ,poems or interesting items that you may have to Penybryn Hse, Waterloo St, Cwmbach, Aberdare, Mid Glamorgan. Cf44 0ED
Or telephone me directly on 01685 873373 email us at tygwynshetlands@btopenworld.com
Thank you to those who contributed for this edition.