

Hi Dr. O

I have been doing regular US.

So glad to hear that a set back like mine might

not mean we are back at square one. I know each case is individual and this is a broad statement, but I just think he is ready to do a bit more - but the exercise regimen below leaves me with some questions. (listed at end)

(we are at week 5 per the schedule below)

Here is the last report:

Date: 9.1.10

Diagnosis: Proximal suspensory desmitis of both hindlimbs, proximal suspensory desmitis of the right forelimb

Ultrasound comparison: Evaluation of the ultrasound examination of the suspensory ligament of the right forelimb performed on 8.17.10 revealed that immature fiber pattern is filling the hypoechoic areas noted within areas 1A - 2A on the 6.17.10 examination. The cross-sectional area of the suspensory ligament at the level of 2A (the site where it was largest on 5.17.10) reveals that it has decreased in size by a small margin but is still enlarged when compared to the same area of the left forelimb. Overall, the ultrasound appearance of the suspensory ligament of the right forelimb has improved significantly when compared to the examination from 6.17.10, however, much healing needs to take place prior to the ligament having "normal" appearance.

Exercise Recommendations: Due to the fact that Zeke has re-injured the suspensory ligament of the right forelimb, the amount of exercise should be reduced. All exercise should take place on a firm surface (soft, sandy footing should be avoided.)

Week 1: Hand walking for 25 minutes once per day.

Week 2: Hand walking for 30 minutes once per day.

Week 3: Hand walking for 35 minutes once per day.

Week 4: Hand walking for 40 minutes once per day.

As trotting is introduced, it will be extremely important to perform 10-15 minutes of hand walking prior to and after exercising at the trot:

Week 5: Continue hand walking and trot in hand for 5 minutes per day.

Week 6: Continue hand walking and trot in hand for 10 minutes per day.

Week 7: Continue hand walking and trot in hand for 15 minutes per day.

Week 8: Continue hand walking and trot under saddle for 5 minutes per day.

Week 9: Continue hand walking and trot under saddle for 10 minutes per day.

Week 10: Continue hand walking and trot under saddle for 15 minutes per day.

During this time Zeke should continue to be confined to a small area where he cannot canter or gallop.

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If you notice any heat or swelling with the right forelimb, stop all exercise and contact the MWEC.

Follow up evaluation: The suspensory ligaments of the right forelimb and both hindlimbs should be re-evaluated in approximately 60 days.

Dr. O -- any comments after reading that?

I have a couple more questions (my original vet that did surgeries unfortunately went back to England)

* If you were me, would you do some ridden work at the walk for a while before doing the trot work (week 8)?

* Do you wrap legs for exercise or turnout, if so - any suggestions as to with what? I have read a lot about wraps and boots not really offering any real support, but I want to give him every advantage.

* Have you noticed body soreness with this much time off? He is especially sore in lower back and glute muscles. I chalked it up to sore hocks, as he did flex sore on left hind and we injected it on the day this report was made. But it has been persistent for last few months and is very slowly getting better with electromagnetic therapy, Back on Track blanket and lots of massage with Sore no More.

I also started applying Surpass to hocks and RF pastern, as I read the joints below the affected ligament will be "less stable" - Any suggestions on how to deal with that?

* He does a strange curving of his body in an attempt to reach and itch his hindquarters and does it when I approach him to groom or clean his feet. It is really aggressive on his part in an attempt to get me to rub just the right spot. I wondered that he has something in the "whorlbone" - (Trochanteric Bursitis?) area, but it is not sore exactly on palpation - seems more like all the surrounding muscles are affected, or I have not found the right one. Hope this is not too much for this post, but this condition and his curving around and pointing his hip at me has been going on the whole time.

Any comments on what type of soreness is typical? He has been off work 6 months and was very fit when diagnosed.

Thanks so much! Lori