

DEEP DIGITAL FLEXOR TENOTOMY AFTERCARE

Strict stall confinement is a necessity for the patient with massive laminar damage in which tenotomy was performed early in the disease. These horses must be confined until the new growth ring extends three-fourths of the way down the hoof wall (this requires about six months). This amount of growth is necessary to establish a sufficient bond between the hoof wall and distal phalanx to adequately support the weight of the horse. Premature turnout or hand walking invariably results in treatment failure.

The chronic laminitis patient is confined to the stall for one month following a tenotomy, and brief periods (10 to 20 minutes twice daily) of hand walking are allowed. Turning the animal out in a small, flat paddock is permitted during the second month if the recovery has been satisfactory, as determined by an increase in hoof growth and sole depth and a decrease in pulse and lameness. Strict attention to hoof care and shoeing after surgery is necessary to obtain the maximum long-term benefits from the procedure.

Monthly follow-up radiographs are necessary after tenotomy to monitor the alignment of the distal phalanx. The distal phalanx should be realigned with the hoof capsule so that it is nearly parallel to the ground. Radiographs will help you determine how much sole should be trimmed to achieve this realignment. The rapid increase in sole depth after tenotomy requires that adequate sole be trimmed. Otherwise, extreme derotation of the distal phalanx may occur with weight abnormally placed on the heels.