INTRA-OP case 3

If the foreign body penetrates through to the corium, infection is introduced to the dermal level, and an abscess develops. The rapidity of onset and severity of the lameness depends to some extent on the location of the sole penetration. In the apical and subapical region, the lesion is located between the distal phalanx and the non-resilient sole. As the abscess develops, pressure increases rapidly. Thus, the onset of lameness is rapid, and pain is severe. Acute lameness may cause the animal to stand with the foot off the ground or with the toe lightly touching.

In the sub-bulbar region, the corium is located between the digital cushion and the soft, resilient horn of the bulb. The onset of lameness is relatively slow, and the pain is significant but not severe. The pus in the abscess tends to spread over a wide area through the fascial plane and to cause separation of the skin-horn junction at the heel. A moist discharge from this area may be the first indication of the lesion. This is referred to as "underrunning of the heel," a condition that can be confused with double sole.

* If distal phalanx is involved (osteitis), then bone must be curetted  
  • Requires anaesthesia and application of a tourniquet  
  • Most easily done through a trephine hole in the hoof wall  
  • +/- regional limb perfusion with antibiotics

Part of the detached horn may be removed, but the abaxial wall must be left intact to bear weight and spare the exposed, newly forming sole.