



## Lameness examinations

### What is lameness?

Lameness is an abnormal gait, due to pain in one or more limbs. It may present as a shortened stride, a head 'nod', not fully weight bearing on one limb, or a dropping or hiking of the hind quarters. Spotting a severe lameness in one limb may be easy, but other more subtle lameness, or lameness affecting multiple limbs, can be tricky.

Certain lamenesses will also be worse on the lunge/circling, or more evident when ridden. Sometimes they may just feel 'not quite right' when ridden.

We grade lameness out of 10, with a 0/10 being a sound horse, and a 10/10 being a horse than cannot bear any weight on the affected limb.

### I think my horse is lame – what should I do?

There are multiple different causes of lameness, and so we need to work out why your horse is lame as to what to do next. Things to consider are:

- How lame is the horse? Can they stand on that limb, lift the other limbs etc?
- How long as the horse been lame for?
- Which limbs are affected?
- Are there any swellings or heat on that limb – e.g. on the tendons, around a joint?
- Are there any wounds on the limb? Especially around any of the joints or tendons with severe lameness, as a wound into a joint or tendon sheath can be very serious.

With a sudden onset severe lameness it is important that your horse is seen quickly by a vet to be assessed. With milder ongoing lamenesses the horse can be rested (e.g. field rest or box rest) and assessed when is more convenient for you.

Bexfields Farm  
Galleywood road  
Chelmsford  
Essex  
CM2 8BY  
01245 346904

[admin@claredonequine.co.uk](mailto:admin@claredonequine.co.uk)

## How do we investigate a lameness?

Certain lamenesses may be quite easy to investigate and treat – for example a foot abscess – but others are more complicated and may require a longer investigation including nerve blocks and imaging.

### 1. Standing exam

We will look at the horse at rest, to see if there are any obvious swellings, wounds etc. and also how they are standing. We check the digital pulses to each of the feet and may apply hoof testers if required.

### 2. Baseline lameness

We will see you walk and trot the horse up in a straight line on a hard surface, and may see them on the lunge (both soft surface and hard surface) as some lamenesses are more obvious on a circle.

### 3. Flexion tests

The affected limb(s) will be held in a flexed position for around a minute, to test if this worsens the lameness. Some lamenesses – such as arthritis – will be made worse by flexion of that limb as it puts the joint under more strain. Other lamenesses may be made worse by the opposite limb being held up due to the increased weight bearing.

### 4. Nerve blocks

Local anesthetic is used to work out where the horse's pain is coming from – often it is not where it looks like it is coming from! We have many horses where it 'looks' like the lameness is coming from the shoulder, but is often due to much further down. These nerve blocks may block out regions of the leg (e.g. pastern and hoof) or be given directly into a joint or structure (e.g. coffin joint, or tendon sheath).

### 5. Reassess the lameness

Following the nerve block the horse's lameness will then be reassessed to see if the lameness is the same, improved, or switched to another leg! The latter can happen in multi-limb lameness as the pain is removed from one leg, other lame legs can become 'unmasked' and then appear lame.

### 6. Steps 4 & 5 will be repeated as necessary with different nerve blocks until we are happy the locations causing the horse's lameness have been identified

### 7. Diagnostic imaging

Once we know where the horse's lameness is coming from then we can image the area using x-rays and/or ultrasound. X-rays are good for seeing changes in the bones, but not so good for seeing soft tissue structures. Ultrasound is very good for imaging soft tissues (e.g. the tendons) but not very useful for looking at bones/joints as it the

Bexfields Farm  
Galleywood road  
Chelmsford  
Essex  
CM2 8BY  
01245 346904

[admin@clarendonequine.co.uk](mailto:admin@clarendonequine.co.uk)

ultrasound waves bounce back off bone. It is also not good for examining the hoof as it cannot see beyond the hoof capsule.

#### **8. Forming a plan going forwards**

Depending on the cause of the horse's lameness, the severity and your requirements for the horse, the vet will then work with you to create a plan to help you and your horse. We are happy to work with you, your farrier and your physiotherapist to try and get the best result for your horse.

### **Important points**

- We cannot decide on the best plan of action for your horse without a diagnosis of the cause of lameness
- Nobody can look at a horse and decide it is x/y/z causing the lameness without investigation – not even world experts unfortunately!
- Often muscular pain higher up is secondary to a lower limb problem – 90% of lamenesses originate from the hocks/knees and below
- If your horse has a more complex lameness or lameness in multiple limbs we may recommend bringing your horse in to the clinic – this means we have all the equipment and facilities we may need to investigate the lameness
- Lameness work ups can take a long time – especially the more complex and multiple limb lamenesses. We will not be able to get a full answer for you if you only have an hour spare after 4pm on a Friday!



Bexfields Farm  
Galleywood road  
Chelmsford  
Essex  
CM2 8BY  
01245 346904

[admin@clarendonequine.co.uk](mailto:admin@clarendonequine.co.uk)