

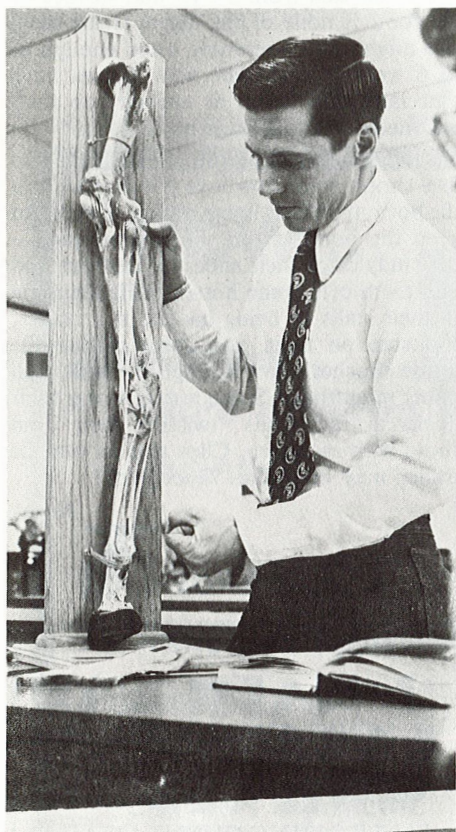
The Realm Of The Horseshoer

by S.E. Kraus and K.D. Butler, Jr.*

*About the Authors:

Mr. Steve Kraus is a Practicing Horseshoer and owner of Kraus Farrier Supply, Trumansburg, New York 14886. He is a graduate of Cornell University with a Bachelor of Science degree in Animal Science.

Dr. Doug Butler is Associate Professor of Range Animal Science at Sul Ross State University, Alpine, Texas 79830; where he teaches Basic, Advanced and Graduate Farrier Training courses.



HORSE SCIENCE EXPANDED. Dr. Doug Butler uses some of the most modern and up-to-date teaching aids available in the Horse Science Program in the Range Animal Science Department at Sul Ross State University. The Horse Science Program encompasses three areas, farrier training, horsemanship, and horse production.

In the field of human medicine, a doctor who specializes in the care of feet and the treatment of their disorders, is known as a podiatrist. Even though all other medical doctors have some knowledge of the foot and its diseases, the foot specialist is usually turned to when special problems occur. There have been instances when, due to a general practitioner's lack of specialized knowledge and reluctance to refer a difficult case to the specialist, a patient has suffered unnecessarily.

The horseshoer's realm has been properly described as being limited to the horse's foot. Veterinarians, on the other hand, have the welfare of the entire animal as their responsibility. Their attention is diverted to other important areas, and the unfortunate result is a small minority of veterinarians who are competent in dealing with foot problems. Often graduate veterinarians cannot tell a lame horse from a sound one. Perhaps this is because they haven't applied what they learned. Those that are competent are largely self-taught.

Equine foot care and treatment has been ignored in most of today's veterinary colleges. As a result many graduate veterinarians are incompetent to diagnose and prescribe for equine foot problems. Horseshoeing once was a major subject in the surgery portion of the curriculum of veterinary colleges. Today, it is apparently considered unimportant and even demeaning to many professors. They don't seem to recognize that in recent years there has been a marked increase in both the number and value of horses. Aside from what interested students can glean on their own time, few instructional hours are devoted to foot care and horseshoeing in our nation's veterinary colleges. Few even have a farriery as a part of their large animal clinic. Yet repeatedly we read in the veterinary literature that the majority of equine lameness is "due to improper horseshoeing."

Traditionally it has been the veterinarian's job to diagnose a hoof disorder and advise the horseshoer how to treat it. Such a relationship has been difficult to maintain in recent years. Competent horseshoers, well-trained and with years of experience, have come to resent dictatorial instructions which often prove to be erroneous.

The horseshoer and the veterinarian can be assets to each other and benefit the horse and its owner, providing each

recognizes the other's abilities. Honest mistakes are made in every field of endeavor. Horseshoers are guilty of mistakes from carelessness, lack of knowledge, and circumstance as well as veterinarians. There is a need for both horseshoers and veterinarians to own up to their ignorance and assist each other in order to maximize the benefit to the horse. Many recently graduated veterinarians have apparently been taught to regard the horseshoer as a "common-laborer" and to quickly convict him when lameness occurs, especially if he has shod the horse at anytime prior to the veterinarian's visit. Several true experiences are presented below to illustrate the premise that where lack of competence exists regarding the foot, horses suffer unnecessarily along with horseshoer's reputations.

While working at a large stable, a horseshoer noticed a veterinarian and two assisting students examining a lame horse. The horseshoer had trimmed the horse two weeks previously. The students came over to the horseshoer to report their findings. The horse was lame in the right rear. They were sure that the heels of the horse had been trimmed too low and that the lame hoof was a different angle than the opposite one. They left only after presenting a detailed explanation to the horseshoer on how an improper angle of the hoof could make a horse lame. The horseshoer examined the horse. The veterinarians had no hoof gauge or calipers. The horseshoer measured the angles and toe lengths of both hind feet and found 53 degrees and 3½" on both of them. He cleaned out and examined the hoof with the aid of his knife and hoof testers. An abscess was discovered in the lateral heel region.

A horse with known stifle and hock problems was reported to be "going short". The horseshoer had shod the horse within the month. The summoned veterinarian was told this. He watched the horse go about 7 or 8 steps, and without touching the horse exclaimed that the horse was "shod all wrong". What was wrong or how to help the horse, he could not say. The horse was going as sound as possible with stifle and hock arthritis. This was confirmed when another veterinarian thoroughly examined the horse and made radiographs of the afflicted joints.

A recently purchased horse was looked at by a veterinarian who saw common

growth or grass rings in the front feet. Without even picking up a foot, he exclaimed that the horse had been foundered and was "not worth a nickel." He was very adamant about his findings even though he did not touch the horse. The horseshoer was in a position to know that the horse had never been foundered, since he had been shoeing the horse regularly for several years.

Puncture wounds and abscesses are sometimes hard to locate. Even experienced horseshoers and veterinarians occasionally have difficulty. However, it doesn't seem fair that these mistakes should be excused at the horseshoer's expense. Several times a puncture wound at the toe has been mistakenly diagnosed as seedy toe "caused by a tight clip" and sole punctures have been called an "improperly driven nail". The prevailing philosophy often seems to be preoccupied with incriminating the horseshoer in lameness cases. As soon as a horse goes lame for any reason, if the horse has been shod or trimmed, the horseshoer gets the blame. Immediately the shoe must be pulled off "to relieve the problem" when often the lameness may not even be in the hoof, but elsewhere on the leg.

A horse that had been shod regularly for many years turned up lame and appeared to have bowed a tendon. The pleasure horse was a heavy, fine boned animal, with poor, low-heeled, mismatched feet. Hoof growth was slow and the feet so poor that the horse would go lame if left unshod and without heels for even a short period of time. Shoeing was always difficult since the hoof had a thin sole and a brittle wall.

The veterinarian answering the call immediately stated that the tendon was bowed and then examined the hoof on the same leg. He diagnosed the hoof as low on the lateral side and insisted that this was the reason for the bowed tendon. A thoughtful recollection of the anatomy of the leg would have revealed that this was impossible. The treatment prescribed was to "immediately remove the shoe to prevent further damage". The absence of a history of the animal and a knowledge of its peculiarities made both the diagnosis and treatment unqualified guesses. The treatment prescribed would have been detrimental to the horse. The owner recognized this. After calling the horseshoer, another veterinarian, and then a former horseshoer familiar with the mare's history, the owner concluded that the original veterinarian was wrong when blaming the cause of the bow on the horseshoeing job and that his prescribed treatment was valueless. The horse was treated with the cooperation of the second veterinarian and the horseshoer, and became sound again.

A thin-soled Thoroughbred became

acutely lame. The horse was thought to be suffering from a stone bruise. A veterinarian was called to examine the hoof with his hoof testers. The horse was made to show pain at every squeeze. Still not satisfied, he squeezed again and again until his hoof tester finally penetrated the sole. Needless to say, this error in judgment crippled the horse and required over two months of stall rest to restore the animal to serviceable soundness. A shoe with a steel plate had to be made by the horseshoer to protect the sole.

It is just as necessary to develop skill and judgement when pulling off shoes as it is when using hoof testers. Along with the instruction that veterinary students apparently receive on the need for pulling shoes, it would seem that instruction and practice could be given in this skill. Horseshoers have reported cases of veterinarians removing shoes from lame horses and making them lamer in the process. Often tugging and/or ripping a shoe off without cutting the clinches can make even a sound horse lame. In one case a horseshoer observed a senior veterinary student unsuccessfully struggle for over five minutes to remove a shoe.

These incidents are isolated experiences from several years of horseshoeing. Most of these problems could have been prevented. It is possible for horseshoers to be more competent than veterinarians when it comes to taking care of horses' feet and their problems. Veterinarians should realize this and regard competent horseshoers as professional technicians. The horseshoer in return should recognize his dependence upon the veterinarian. It is hard to beat a person at his own game. If a person handles feet all day, every day, he can't help but be in a better position to recognize their ills than one who occasionally looks at them.

G AND H HORSESHOE SALES

2185 Canton Highway
Marietta, Georgia 30066

Complete Line Of
FARRIER SUPPLIES
INCLUDING CUSTOM-MADE
AND HAND-MADE-SHOES

Prompt Mail Order
Service — Quantity
Discounts

GENE HILL, Owner

Member American Farriers'
Association
[404] 427-7232
[404] 427-1413 - Home

Whenever competent horseshoers and veterinarians that respect each other have the good fortune to work together, the outcome has always been beneficial to the horse. But when veterinarians have not recognized that the horseshoer was capable in his realm, the horse (and of course the owner) must be left to suffer the consequences.

