Rehabilitating the Neglected Horse: A Caregivers' Guide.



Courtesy of the Unwanted Horse Coalition, the American Horse Council and sponsors; Nutrena, American Farrier's Association and Intervet/Schering-Plough Animal Health



The Unwanted Horse Coalition's 2009 Unwanted Horse Survey found that the problem of unwanted horses is not only perceived to be increasing significantly, it's detrimental effects are being noticed and felt across the country. Whatever its causes, how the horse community deals with these horses promises to be a challenge in the future.

Unwanted horses can be old or young, sick or healthy, purebred or grade, highly trained or barely halter broke. They are unwanted for just as many varying reasons — the horse may have become sick, injured, old, outgrown, dangerous, a burden or simply too expensive to care for.

No one knows for sure how many unwanted horses exist in the United States, but we do know that the number of unwanted horses exceeds the resources currently available to accommodate them. The estimated cost of providing basic care for a horse ranges from \$1,800-\$2,400 annually. Currently, there are not enough volunteers, funding or placement opportunities for all of the unwanted horses. In a 2009 survey conducted by the Unwanted Horse Coalition, 63% of equine rescue/retirement facilities report that they are at near or full capacity and, on average, turn away 38% of the horses brought to them.

Unfortunately some of these horses fall into the neglected category, but with the care outlined in this guide, they can once again become usable and productive equines that would do well in different situations if given the opportunity. If you'ved opened up your heart to an unwanted horse, you'll likely find the experience to be a rewarding one, knowing that you gave a deserving horse a second chance.

This guide covers basic care for rehabilitating a neglected horse. In addition to the physical changes your horse will experience with rehabilitation, you may also notice personality changes as the horse gains confidence and good health. Expert advice is always as close as your local equine veterinarian. Your veterinarian should see the horse soon after it arrives in order to develop a healthcare plan. Through nutrition, farrier care and veterinary attention, your once neglected horse can have the life that every horse deserves.

Nutrition

The first step in rehabbing an underweight or even starved horse is to estimate the body condition using the Body Condition Scoring System. Your veterinarian can show you how to use the scoring system.

The skinny horse.

Horses that are at or above a body condition score 3 (thin) can generally be brought back to a body condition score of 5 (moderate) in 6-8 weeks with the introduction of a balanced diet (50% good quality hay, 50% grain mix) fed initially at 1.5% of bodyweight in 4-5 feedings per day. The amount can be gradually increased to 2.5-2.8% of bodyweight (hay offered free choice, grain fed 2-3 times per day, to a maximum 0.5% bodyweight per feeding).

Complete feeds, particularly senior feeds, also work very well in underweight horses due to the controlled starch level and high digestibility. Neglected horses are also frequently salt starved, so salt should also be introduced gradually at 1-2 oz per day and increased until it can be offered free choice. Of course, neglected horses should also have dental work performed as poor teeth can contribute to lack of weight gain.



Rooty Before

The starving horse.

Horses that have been truly starved may be at a body condition score of 1 (poor) or 2 (very thin). This type of bodyweight loss normally takes 60-90 days without any feed and more commonly will take 3-4 months with very poor forage and water. Starved horses will need a very gradual reintroduction of feed. These horses have lost substantial muscle mass as well as essentially all fat and may also be hypoglycemic and hyperkalemic. One method to recover these horses is by using high-quality alfalfa hay as a base for a high-protein, low-starch diet. The diet should be introduced gradually and increased to free-choice feeding in about 2 weeks. Senior horse feeds are another good choice and can be introduced at 0.5% bodyweight, split into several small feedings per day, and gradually increased over a 10-14 day period to normal feeding rate per feeding directions.

Of course, fresh, clean water needs to be available at all times. While you'll want to give your horse the nutrition he's been missing, you must also take special care to avoid excessive initial feed intake to reduce the risk of colic, laminitis, diarrhea and other metabolic disturbances. Close observation and blood chemistry monitoring can also help prevent complications.



Rooty After

Farrier Care

Any rehabilitation program—whether prompted by disease, injury or neglect—must incorporate a solid commitment to hoof care. In some cases, rehabilitation will necessitate special considerations such as therapeutic application of shoes. In others, it may only require careful attention to trimming and maintaining a healthy bare foot.

Finding a farrier.

Hoof rehab requires that you work with a professional farrier who understands anatomy, biomechanics, gaits, and overall hoof care, including the application of specialty shoes when necessary. Likewise, such care requires professionalism and a knowledge of how to work and coordinate with other equine professionals, including veterinarians and nutritionists.

While there are many ways of finding a farrier to tend to the needs of your horse, finding someone capable of providing the level of care necessary for rehab should be a careful decision. Ideally, you want a farrier who takes advantage of continuing education, works to stay current, and voluntarily participates in farrier certification programs such as those offered through the American Farrier's Association. You can find a list of farriers on the AFA Web site: www.americanfarriers.org.



Rehabbing the hoof.

Routine hoof care is established on a rotational schedule, with regular farrier care varying from four to eight weeks. For a horse in rehab, however, scheduling is often more situational and variable according to the horse's needs. Horses suffering from injury or disease-related issues may require special appliances that need to be adjusted or changed on short schedules. Those suffering from neglect may need to be short-cycled to recover the capsule's position under the boney column of the limb.

Start your horse's hoof care with a farrier visit shortly after the horse has arrived and settled in. It's important that the horse has enough strength to stand for the farrier work, so your farrier may advise waiting until the horse gains weight before beginning the program.

Your farrier may request a set of x-rays in order to assess internal damage and develop a plan for angles and trims. It's important that your farrier and veterinarian communicate, especially if there is lameness resulting from improper, or nonexistent, hoof care.

Most horses needing a rehab program didn't arrive in that situation overnight, and there are no quick fixes for their recovery. Instead, it's a matter of establishing a long-term program and sticking to it. The hoof capsule does not heal so much as it regenerates. With good nutritional support and veterinary attention, the horse can grow a new, healthy hoof in less than a year's time.



Vaccinations & Deworming

With unwanted horses pulled from situations of neglect, rarely is a vaccination or deworming history known. Therefore, it's very important to work with your veterinarian to devise a deworming and vaccination plan that assumes no care has been given in the past. You should quarantine the newcomer and monitor the horse for signs of contagious respiratory diseases and fecal parasites before integrating the horse into your herd.

Vaccinations.

Your geography, endemic diseases to your area and the horse's intended purpose will largely determine the vaccines that your veterinarian recommends administering. The American Association of Equine Practitioners recognizes five vaccines as being core vaccines that exhibit a high enough level of patient benefit and low enough level of risk to justify their use in the majority of horses. These are Tetanus, Eastern Equine Encephalomyelitis, Western Equine Encephalomyelitis, West Nile Virus and Rabies.

Your veterinarian will want to schedule the vaccines far enough apart as to not overwhelm the horse's system, especially since the horse may be malnourished or carrying a heavy parasite burden. Be prepared for your horse to need primary doses of the vaccines, which is two doses spread several weeks apart in most cases.



Deworming.

Many neglected horses have never seen a tube of dewormer their entire lives. Deworming can make an immediate and noticeable difference in the horse's energy levels, weight gain and outward appearance. What appears to be a hay belly could actually be an unhealthy parasite burden.

When your veterinarian determines that your horse is of sufficient weight and body condition to handle deworming, you should administer a larvicidal treatment that will control all stages of small strongyles, including the important early-third stage (EL3), along with large strongyles, pinworms and roundworms. Small strongyles are considered the #1 internal parasite problem in horses today, primarily due to their overall prevalence and their ability to burrow and encyst into the lining of the large intestines for up to three years.

About 4 weeks after the larvicidal treatment, follow up with a dose of ivermectin or moxidectin (with or without a tapeworm treatment).

After this initial deworming, your veterinarian can help develop a strategic program that treats the horse based on fecal egg counts and exposure risks. By targeting the right horse at the right time with the right dewormer, you'll maximize the efficiency and effectiveness of your deworming program as well as the health of your horse.



To learn more about unwanted horses please visit www.unwantedhorsecoalition.org.







www.horsecouncil.org



www.americanfarriers.org



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