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Standardbreds are not Thoroughbreds

When it comes to racehorse's vs. show horses we all know that the problems they can develop are different. How about between racehorses? Are Standardbred problems different from thoroughbreds? You betcha! Breeding and type of gait both play a role. Firstly let's discuss a common problem in both breeds - OCD. This is an abbreviation for a form of osteochondrosis leading to fragments or chips in the joints. The Thoroughbred seems to have a higher incidence of OCD affecting the stifle while the Standardbred has more in the hock. How about the fetlock? There are small fragments at the back of the joint that seem to bother horses only when they race at speed. I mainly see these in Standardbreds and remove them arthroscopically. They rarely occur in the front fetlocks and are uncommon in thoroughbreds. OCD can affect all joints in the body but I just wanted to comment on the areas we most frequently see.

How about tendon and ligament injuries? These affect both breeds but the distribution is definitely different and the prognosis differs as well. Pulling a sulky and using a gait where a front leg and a hind leg are simultaneously in use means that their weight distribution is more evenly divided between the front legs and the hind legs. This means that that tendon and ligament issues that mainly occur in the forelimb of thoroughbreds can be seen in all 4 limbs of a Standardbred. The good news is that a Standardbred can continue racing after many of these injuries heal while a thoroughbred has a poorer prognosis for a forelimb injury. Why? When racing at the gallop there is a disproportionately greater force on the front legs resulting in greater reinjury rates.

Let me give you an example.

The main tendon running down the back of the leg is the SFT – superficial flexor tendon. Standardbreds and Thoroughbreds often injure this tendon resulting in a “bow”. The “bowed” appearance is a reflection of swelling after fiber disruption. The diagnosis is usually made by appearance but the severity and extent of injury is assessed by a veterinary ultrasound examination. Treatment includes treating the tendon (shock wave, PRP, stem cells) and indirect lengthening of the tendon by cutting the superior check ligament to prevent reinjury. If the tendon is allowed time to heal this technique has great success in Standardbreds but statistically is not half as consistent in thoroughbreds resulting in more frequent reinjury.

Bone and joint problems: Both breeds have lower knee (carpus) joint problems but upper joint problems are a thoroughbred racehorse issue. Fractures of the long bones and bucked shins are less common in Standardbreds. A common bone issue affecting both breeds is subchondral bone pain. This is lameness coming from diseased bone under the cartilage. Essentially it is a failure of the bones to

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adapt to training or racing. The bone can either thicken too much (sclerosis) or undergo a process like osteoporosis (lysis) leading to areas that are brittle or weak. The result is low grade pain (lameness) resulting in poor performance. This is very typical of ankle (fetlock) pain where there is no fetlock joint swelling. More severe cases can lead to loss of overlying cartilage, chips or fractures. Third carpal slab fractures of the knee are usually associated with abnormal remodeling (sclerosis). Fracture healing is challenging since often the surgeon is trying to screw diseased bone back to diseased bone. In summary both breeds are unique and we should recognize the specificity of many of their health concerns. Recognising these differences allows for a more frequent diagnosis resulting in more precise treatment and management programs.