

Lameness in the Western Pleasure Horse

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1. Introduction

Western pleasure is one of the most popular events in the United States in which equine enthusiasts participate. Because of the unusual gait requirements put on these horses, many veterinarians are not comfortable diagnosing and treating the most common lameness problems.¹ With a minimum of effort observing the western pleasure horse, one will find that the lameness problems that commonly occur with this discipline are similar to those of other performance horses.

The number of the western pleasure horse owners has decreased in the last few years in the face of increasing competition for owners' entertainment dollars from cutting, reining, and team roping events.² Still, one of the most popular classes at any American Quarter Horse Association, Appaloosa Horse Club of America, American Paint Horse Show, and Palomino Horse Breeders Association Show are the various western pleasure classes. A brief description of the pleasure horse along with a description of the required gaits and show terminology will help the equine practitioner understand this discipline.

The western pleasure horse by definition should be free flowing, balanced, and willing. A pleasure horse should give the appearance of being fit and a pleasure to ride. The horse should cover a reasonable amount of ground as it exhibits the correct gaits in a consistent rhythm and cadence. The perfor-

mance of the required gaits and the ability of the horse to do so with ease are a major factor in the judging. The horse should carry his neck level or just above level as the pole relates to the withers. The horse should carry his nose slightly in front of a vertical line and have a normal expression with alert ears. The head carriage should be natural, showing that the horse is neither intimidated nor resistant. The modern western pleasure horse is a "gaited horse" no different than any of the other gaited show horses.

2. Gaits

The WALK is a flat-footed, relaxed, 4-beat gait. The footfall is (RH-RF-LH-LF). At this gait the horse should be alert but relaxed. The rider should not have to cue the horse or rate the horse's speed, and the horse should move in a straight line.

The JOG is a 2-beat gait where diagonal legs move and hit the ground at the same time. The footfall should be (LH-RF, RH-LF). The horse should have even stride length of both front and hindlegs. At this gait the horse should be relaxed with expression; the horse is allowed to look in front but should not be turning around to look to the side or behind. The horse should have a constant speed without cues from the rider. The head and neck should be kept level or just above level and balanced without excess movement.

NOTES

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The LOPE is the most difficult of the gaits required for the western pleasure horse. The horse will carry a major portion of its weight with the hind legs and back. The head and neck must be carried in a relaxed position without excessive movement. The lope is a 3-beat gait, in the left lead the footfall is (LH-RF, LF, and RH), whereas in the right lead the footfall is (RH-LF, RF, and LH). At the jog and the lope the horse should have an even stride length in front and rear legs with "engagement behind." The term "engagement behind" describes a horse that drives the hindleg (hocks) directly underneath, using the hindquarters and loin to elevate the shoulders and front end. This allows the front legs to be advanced with little or no carpal flexion. Western pleasure enthusiasts have coined this gait characteristic a "flat knee." Pleasure horses that can take deep strides with the hindquarters and elevate the front end and shoulders can advance the front limb with a minimal carpal flexion (decreased forelimb "action" and decreased "animation"). At the lope a horse with a "flat knee" is given maximum credit by the judge. At this gait, as with the other gaits, the horse should have a consistent, level carriage of the head and neck. The western pleasure horse should have a uniform slow speed, showing that the horse is well broken and comfortable to ride.

The EXTENDED JOG is the fourth gait that may be required by a judge during a western pleasure class. This gait is just an "extension" of the jog, with the horse moving at an increased length of stride and speed. The horse should move out immediately on the rider's command in a calm manner with a consistent speed.

The BACK may not be a gait but is still considered important by the judge. Horses should back, on command, quietly, willingly, and easily in a straight line without resistance. The back is commonly used to break ties between horses in a class.

Over the past 15 years, the AQHA has addressed inconsistencies in judging the western pleasure horse. These changes in judging policy have led to significant changes in the way western pleasure horses are shown today. With certainty, the judging of the western pleasure class will evolve and change as new fashions in training and showing come and go. Recently the AQHA judging committee addressed the issue of "loss of forward momentum." This term related to pleasure horses that are moving too slow at any gait or "not covering enough ground" in relation to conformation and size. In the past, trainers and judges have put a premium on slow speed, showing that the horse is well broken. Exhibitors felt like they would be penalized if their horse was moving fast enough to pass the horse in front of them. The judges will now penalize any horse that is traveling too slowly. Horses will not be penalized for passing if they perform the gait correctly.

3. Clinical Examination

The examination of the western pleasure horse begins as any normal lameness examination. History and previous medical or surgical treatments are very important. Videotapes of previous exhibitions or shows are valuable in the evaluation of lameness and gait deficits. Tapes made when western pleasure horses are being shown are especially useful because the background in the show pen is usually uniform, allowing good visualization of the limbs, head/neck, and topline. The ability to slow the videotape is especially useful in determining gait deficits at the lope and jog. Although there may be common sites of lameness in the western pleasure horse, a thorough and detailed examination is important. All limbs from the foot proximally should be hoof tested, palpated, and flexion tests should be performed.

4. Common Lameness Problems

Special attention should be paid to both the fore and hind feet. Often, horses are shod just before leaving for a competition. Farriers may be required to shoe a large number of show horses on short notice under intense pressure. This, along with poor hoof wall and specialized shoes and pads, will lead to an increased incidence of hoof wall abscesses. Many western pleasure horses are shod at high angles with aluminum wedge or egg bar shoes. Increasing the hoof angle speeds breakover; this, along with a lighter weight shoe, decreases the carpal flexion giving the appearance of a "flat knee." After shoeing, most show horses have the hoof wall sanded smooth for a more cosmetic appearance. The removal of the periople affects hoof wall quality, causing more problems for the farrier and veterinarian in the future. Additionally the nail clinches are sanded smooth, allowing the shoe to be torn off with little effort, leading to additional hoof wall damage. Many horses are shod by farriers at shows that may not be familiar with the horse and his shoeing needs, leading to additional problems.

Western pleasure horses have to be quiet and calm while being shown. These horses are routinely ridden for extended periods of time before entering the show pen. This leads to increased concussion and fatigue. Many Quarter Horses have small feet compared with their frame and size, leading to a higher incidence of foot lameness. The distal interphalangeal joint may become inflamed due to concussion and increased hoof angle. Intra-articular injection with hyaluronic acid in combination with a corticosteroid gives the most consistent return to function. Injury to the proximal origin of the suspensory ligament is not uncommon in western pleasure horses. This injury may be associated with the increased amount of riding before competition. Stallions, due to their nature, may require more work and training before entering the show ring. This may lead to a vicious circle where the horse is loped more, resulting in increased fit-

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ness. Even longer periods of work are required to control the horse, leading to more injuries from fatigue. Suspensory ligament injuries may be treated by various means, with bone marrow injection and extracorporeal shock wave therapy being more recent attempts to treat chronic desmitis.^{3,4}

Hindlimb lameness is common in the western pleasure horse because a large portion of the body weight must be carried as the hindlimbs drive forward to produce the power that will elevate the front limbs of the horse. Additionally this has to be done at a slow gait, which puts more stress on the hind limbs and back.

The most common problem area of the hindlimb is the tarsus. In long yearlings and early 2-year-olds, developmental orthopedic disease including osteochondrosis is not uncommon. Thorough, high-quality radiographs are a necessity. The distal tarsal joints commonly have minor or no radiographic abnormalities. Many times horses with distal tarsal inflammation are presented with only a decrease in performance. The horse with left hind tarsal inflammation may present with the complaint of not wanting to take the left lead or not "framing-up" when put in the left lead. These horses may or may not have positive hindlimb flexion tests. It is often useful to watch the horse ridden in a circle where the only abnormality may be a subtle medial stabbing of the hindlimb that is on the inside of the circle. Horses with minimal radiographic changes may respond well to intra-articular hyaluronic acid and corticosteroids. In the majority of cases with radiographic evidence of osteoarthritis, intra-articular corticosteroids alone may be necessary to return the horse to adequate performance levels.

In the hindlimb of the western pleasure horse, inflammation of the proximal interphalangeal joint should not be overlooked. Often lameness in this joint, especially in the hind leg, is mistaken for metatarsophalangeal joint inflammation. Intra-articular anesthesia of this joint is often necessary to elicit a positive response. Radiographs of this area rarely show significant changes.

As mentioned in the front limb discussion, injury to the proximal origin of the suspensory ligament is not uncommon in the hind limb of the western pleasure horse. Most horses presenting with this injury are somewhat lame, but the lesion can be difficult to block with regional anesthesia. Ultrasound imaging of both hind limbs after positive response to nerve blocks can be very helpful in determining a prognosis, and deciding whether an extended rest period is required.

Lameness occurring in the stifle of pleasure horses is often a straightforward diagnosis and routine treatment. Trauma and developmental orthopedic disease are the most common causes of stifle lameness in these horses. Back soreness is a common occurrence in pleasure horses. Common causes for back soreness include tarsal joint inflammation, proximal interphalangeal joint inflammation, inexperienced rider, overweight rider, and improper fitting saddles. Local injection with corticosteroids and eliminating the original inciting cause gives the horse immediate relief.

5. Summary

Western pleasure is one of the more popular show horse disciplines. Knowledge of the gaits and terminology will assist the practitioner in evaluating common lameness problems in these horses. The majority of injuries that these horses encounter are similar to other western performance horses.

References

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