

Abscesses and Infections of the hoof

Thrush

- ◆ Caused by necrotizing bacteria
 - Strict anaerobes exist in moist areas devoid of O_2
- ◆ Attacks areas that are overgrown and exfoliating



Thrush treatment

- ◆ Trim all infected tissue away
- ◆ Scrub and disinfect
- ◆ Pack areas deep in the sulcus with gauze saturated with a disinfectant till healed from the bottom out



Onychomycosis

White Line Disease

- ◆ A combination of fungi and bacteria that digests the stratum medium of the hoof wall, not necessarily the white line.
- ◆ The condition was previously attributed to a yeast infection

Diagnosis of White Line Disease

- ◆ Lesion of crumbly hoof wall adjacent to the white line
 - Crumbly material may be white to tan color with areas of black thrush
- ◆ May cause lameness if the lesion is large enough to cause rotation of PIII.
- ◆ Radiographs will sometimes appear to be similar to laminitis

Lesion under the wall and radiograph of rotation



Resection and shoe



Treatment of WLD

- ◆ Debride all infected tissue
- ◆ Disinfect with antiseptic
- ◆ Keep hoof dry and open to the air if practical
- ◆ Use a shoe that allows treatment of the lesion if possible
- ◆ Continually monitor the proximal border of the lesion for signs of infection

Antiseptics

- ◆ Many antiseptics will work if applied to the lesion routinely
 - Merthiolate
 - 2% Iodine sol'n
 - Nolvasan 20% sol'n
 - Bleach 20% sol'n
 - Koppertox
 - Copper sulfate sol'n
 - Formaldehyde (not recommended)

Post Resection Care

- ◆ Good supportive nutrition
- ◆ Stimulate blood flow with liniments or counterirritants to the coronary band
 - Reducine
 - Absorbine
 - Bigeloil
- ◆ Good stall husbandry
- ◆ Proper shoeing and early detection

Canker



Diagnosis, cause and treatment are varied

- ◆ Appears to be an autoimmune problem complicated by infections of opportunistic pathogenic bacteria
- ◆ A common predisposing factor appears to be prolonged thrushy frogs



Appearance

- ◆ Soft, frond like uncornified papillae
- ◆ Usually around the central sulcus but may also involve the bars, sole and periople



Treatment

- ◆ Debridement of the affected tissues
 - Chemical debridement with peroxide compound
 - ◆ Benzoyl peroxide
- ◆ Antibiotics topically and systemically
- ◆ Maintain cleanliness of the affected area with antiseptics
 - Nolvasan
- ◆ Steroids to control the inflammation
 - Triamcilonolone

Sub Mural (sole and wall) Abscesses



Hoof Abscesses

- ◆ Caused by a break in the cornified capsule allowing bacteria access to the corium
- ◆ Untreated abscesses usually break out and drain at the coronary band leaving a crack parallel to the coronary band

Treatment

- ◆ Establish drainage
- ◆ Flush with antiseptic
- ◆ Soak if necessary
- ◆ Wrap and keep dry
- ◆ Complete resolution should be in 2 weeks

