



# Understanding balance in the hoof

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As a practising farrier most of my consultation calls nowadays are for solving hoof related problems, which also tends to keep the brain cells alert.

I have lost count of the number of calls over the last year where each owner has explained in great detail that the horse in question has to be shod with bar shoes and rolled toes or egg bars or wedged heels or something similar, because it was diagnosed with suspected navicular disease two or three years ago.

According to each owner's lament, the horse is tripping and stumbling and has never really been sound; even x-rays which are sometimes years old were never really positive. If they were positive and there is navicular degeneration, the previously mentioned style of shoes may be appropriate and should be continued with. So what is the problem with these vague symptoms?

It is very important to fully understand the basic principles which may be causing stress to the navicular bone area and heels either side of it.



Photo 1

In photo 1, note that the deep flexor tendon travels down the back of the leg and passes over the navicular bone then attaches to the underside of the pedal bone. Thus, if a hoof is at all long in the toe it will cause pressure at the heels and excessive tension in the deep flexor tendon where it passes over the navicular bone. High heels and short toes will also give the same indication due to concussion at the heels; the resulting effect is a lameness which outwardly looks like

navicular syndrome, but is it?

The golden rule in problem solving is always go back to basics, and this is especially true with horses and lameness, but first of all listen to the owner and get all the historical information possible. Common symptoms are usually that the horse is disunited in its gait, rough to ride, stumbles a lot, has a sensitive back, forges and over reaches intermittently -also the horse is usually displaying a less than happy attitude.

The majority of horses that I see with long term suspected navicular are simply left too long between shoeing.

This is an owner education problem and you must understand that these horses need to be re shod very regularly at no longer than four weekly intervals.

This is to prevent any flaring or distortion in the toe area from causing pressure at the heels. To really understand this, try standing on a flat surface then put a 2 cm piece of wood under your toes and stand upright; you will notice that your weight is now all back on your heels just like the horse, so by stopping long toes and correcting any flares at the toe, it will also stop any excess weight on the heels which will then begin to grow properly, plus there should be an immediate improvement in the horse's movement and attitude.

A horse which has upright pasterns will also often display signs of navicular soreness but for the opposite reason; it will be short in the toe and high in the heel and have a short proppy gait, as well as being rough to ride and inclined to stumble.

On inspection you will see that the frog is small and also contracted, so the soreness is a combination of two problems - the high heels are causing the hoof to land too early, resulting in excess concussion of the heel buttresses and the high heels also prevent any frog contact with the ground so there is no cushioning.

In this case leave the toe alone and lower the heels down to the junction where the widest point of the frog meets the hoof capsule - you will see evidence of bruising at this point.

In extreme cases this needs to be done in stages a week or two apart, as the deep flexor tendon which has contracted will also

need time to stretch. Now that the frog is in ground contact again, blood flow through the hoof will go back to normal and the toe will begin to reform.

Another common man-made problem is to fit shoes which are too heavy to suit the bone structure of the horse, and leave them to hang out past the heel buttresses.

This causes pressure and soreness under the shoe at the heel, which can also give the impression of navicular syndrome. In photo 2, the toe has been left too long plus the heavy shoe extends back past the heel buttress.

The bottom line is that without the benefit of an up to date x-ray, a competent farrier must carry out a very accurate assessment and balance and correction on these suspected navicular cases before jumping in and shoeing the horse wrongly.

In most of these horses I get to see, all they ever needed was to

be trimmed correctly or shod with normal shoes.

Ask the horse too - if it doesn't look right the chances are it certainly doesn't feel right either.



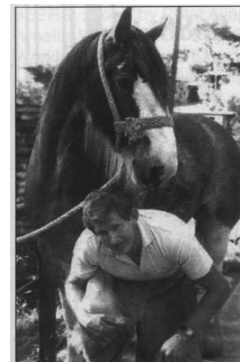
Photo 2



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