

DRESSAGE TODAY

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EXTRA

4 Common Training Problems Solved

Understanding Hock Health



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Are You Riding the Problem or the Symptom?

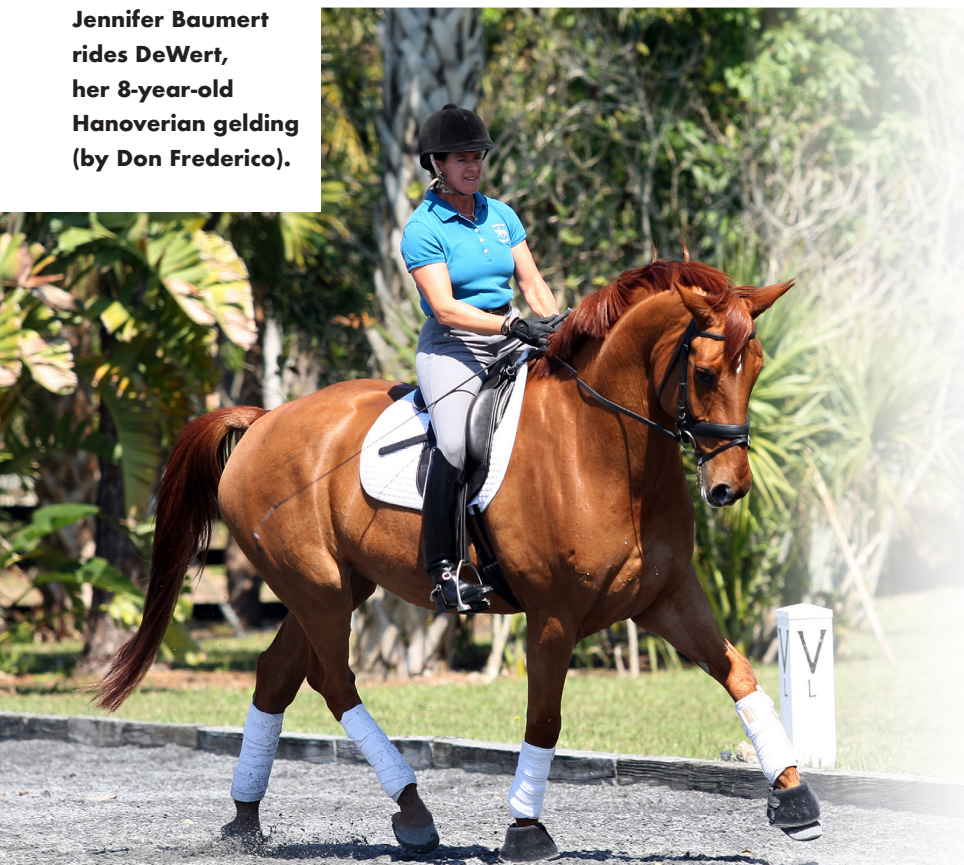
Learn how to solve training problems by addressing your horse's true underlying issues.

By Jennifer Baumert with Beth Baumert • Photos by Susan J. Stickle

When I begin teaching a new horse and rider, I always want to know about their strengths and weaknesses, so I ask. I've learned over time that the rider rarely tells me about the crux of the problem. A rider usually talks about a symptom of the problem. In trying to fix that symptom, the rider sometimes trades one problem for another. It's easy to ride for an hour fixing the symptom when patches and band-aids cover the real issue. Then, the horse is somewhat training the rider!

The manner in which a rider thinks about her problems influences how she goes about solving them. When you address the underlying problem, you ride differ-

Jennifer Baumert
rides DeWert,
her 8-year-old
Hanoverian gelding
(by Don Frederico).



ently from when you are riding the symptom. Even if you're not riding perfectly, you automatically start to solve your problem. It's all about your thinking process. Let's look at a few situations in which the rider can fix the problem instead of the symptom.

Problem 1: A Running Horse that is Heavy in the Hand

Riding the symptom: The heavy, running horse is usually uncomfortable for the rider, so it would be easy to become fixated on the symptom and ride for an hour trying to stop the horse and make him light. In getting him off the rein, the rider can actually create another problem, because self-carriage doesn't come by getting your horse off the bit. He needs to be on the bit but in a positive way, drawing rather than pulling on it. The horse's heaviness—and the running—are both just symptoms of an underlying issue.

The underlying issue: The heavy, running horse is not accepting the rider's aids in a positive manner. He's running away from his hind legs because he doesn't want to carry weight with them. Now, we don't usually think of the running horse as being lazy, but he is. He's behind the leg, and when I imagine him as being lazy, it helps me psychologically. I'm more inclined to use those tools that involve the use of my leg. My horse will get lighter in front when he's in front of my leg and accepting my half halts.

Let's look at the leg aids first. It's difficult to use the leg when your horse is running, but you have to be able to activate the hind legs in a way that doesn't dump the horse into your hand. When you fixate on your horse's reaction to your leg, he will automatically start to improve, even if your aids aren't perfect.

Do things that require the use of your leg, such as turn on the forehand, leg yield, shoulder-fore and lots of bending and turning lines. Sideways exercises

require diagonal aids that give you leverage between the inside leg and outside rein. Your leg persistently asks your horse to draw positively on the bit. Your inside leg says, *step under your center of gravity*. Your outside rein says, *wait for me. We can go more forward when you step positively to the bit—drawing on the rein, not pulling*. You want to feel that you can drive and ride from back to front, even while slowing down.

Now let's look at the half halt aids: If you only stop the horse in front, he will stop behind too. Just as you want your horse to respond to your leg aids in a positive way, the same is true of your half halts. When you sit against the rein for a half halt and the horse's hind leg is engaged, he will transfer weight to the hindquarters. Your half halts, in this situation, close his frame from behind. Remember to release after the half halt so your horse has an opportunity to balance on your seat, and your hand is available for him to draw on but not lean on.

The importance of the rider's position: The rider's position should shape the horse, not the other way around. When the horse is running and trying to balance on the rider's hand, it is common for the rider to fall behind the vertical and let her legs go forward. To prevent this, the rider needs to keep a strong core, with her legs underneath and her upper body tall so the stomach muscles engage. The rider's leg, in this case, is not exactly a driving leg but a supportive one that makes the seat less at the whim of the horse and more belonging to the rider. In this situation, the horse will balance on the rider's seat rather than on her hands. (See "Exercises for Problem 1," right.)

Problem 2: A Horse that is Afraid or Distracted

Riding the symptom: While your horse is worrying about a tractor or his friend whinnying in a paddock, it's easy to get distracted yourself. The tractor and

the whinnying are totally out of your control. You can't force your horse to be attentive. Instead, change your focus and notice the real problem.

The underlying issue: Concentrate on the elements of the problem you do have control over, which is your horse's lack of suppleness and the fact that he's no longer on your aids. He has undoubtedly stiffened his body, probably lost his bend and might not be round anymore. If you focus on putting him on your aids in a supple way, you will automatically start solving your problem.

Think of the unbelievable distractions that horses manage to deal with at the Olympics and other high-level competitions. It's not that these horses are braver and quieter or that the riders are stronger, but those horses have been trained to focus on the rider instead of on the distraction. Those horses have learned to trust their riders and have confidence be-

EXERCISES FOR PROBLEM 1

For a horse that is running and heavy in the hand, combine exercises that require him to step from your leg to your hand with exercises that require him to listen to your half halts. My favorites are trot-walk-trot transitions within lateral work. You can do this in leg yield, shoulder-in, travers, renvers or half pass.

The result: When the rider's strength comes not from muscle but from the strength of her position, the horse balances on the rider's seat rather than on the hand, and he steps under his (and the rider's) center of gravity. If he gets too strong, he doesn't run into your hands. Rather, he hits your seat and leg, and the ultimate effect is on his hind legs, automatically engaging him behind and making him lighter in front. Think about getting your horse to balance on your seat, rather than on your hands and you will get this positive effect. Whereas, it was initially easier for him to lean on your hands, now you've made it easier for him to carry himself.



Try trot-walk-trot transitions within the leg yield.

cause the rider has never punished them for what amounts to being a horse.

When I first got my best Grand Prix partner, Weltgraf, I couldn't even ride him outside. But, at the end of our career together, I could have ridden him in the Macy's Day Parade. My problem with Graf wasn't solved in a day or even a year. It was a long-term project. He didn't become brave because he was older. He's still as hot as he ever was, but he learned to trust me and turn to me as his partner. When I asked him to go on the aids, he found his balance physically and mentally.

If you're having this problem, and something is spooky at one end of the ring, it's not a failure to stay in the safe area of the ring. The point is that you want your horse to go more on your aids. You may get to the scary area today, or it may take longer. You'll never get to it by alienating your horse or forcing

him. I don't believe in facing the horse with his fears. Don't tackle anything unless you're going to be successful.

Rider position: Keep your body in the shape you want the horse's body to have with clear aids asking for flexion and bend. Keep your outside aids there but passive so he will want to go to them. Then you will be clear about his flexion, the positioning of his neck and the bend throughout his body. Also, be clear about his line of travel, his rhythm and his speed. Working on these quali-

ties helps him relax and focus on you rather than on the current distraction. (See "Exercises for Problem 2" below.)

Problem 3: A Horse that is Heavy on the Left Rein

Riding the symptom: Because the rider's discomfort is in the left hand, it's easy to fixate on that rein alone. The left rein heaviness is a symptom of the horse's crookedness.

The underlying issue: This horse needs to be connected and even in

both reins. Focus on riding more to that empty right rein, until he is equal in the contact. Then he will be more supple and bendable to the left. All horses prefer one rein over the other, and the problem doesn't always manifest itself as heaviness in one rein. Some horses brace against one rein without being heavy. Some horses tilt their heads as evidence of their crooked tendencies. Focus on developing contact with the right rein and creating a supple, even connection.

Rider position: When the rider stays

EXERCISES FOR PROBLEM 2

For a horse that is afraid and distracted, don't just ride around. Any exercise requires you to use your aids and help him concentrate on you instead of the distraction. All exercises put him on the aids, but my favorites are the figure-of-eight and the serpentine because both require frequent changes of bend. Be sure your aids shape him in correct bend to the right, half halt before your change of direction and then shape him to the left.

The result: When the horse is correctly bent, his body will begin to relax. As he becomes more supple and on the aids, he'll start to turn to you and forget about his other concerns. If you're consistent in your methods, he will, over time, turn to you sooner. He'll develop trust and confidence in you, and it will be much easier for him to turn to you rather than turning to his distractions.



EXERCISE FOR PROBLEM 3

For a horse heavy on the left rein, do the following exercise in both directions. It will be especially helpful tracking toward the stiffer side, which is to the left in this example: Start on a 20-meter circle in trot. On the open part of the circle, transition to walk and leg yield away from your inside leg. When you feel your horse connect to the outside rein, trot off and soften the inside rein.

The result: Your horse will become steady, solid but soft in the right rein. You will be able to track left and right with equal ease, putting him on one outside rein and then the other. It will be easier for him to be straight.



soft on the hollow side and holds the left rein, it gives the horse something to balance on and perpetuates the problem. The left rein sometimes gets longer, the rider's left leg slides forward and the left hip collapses. Remember, your body shapes his body, not the other way around. (See "Exercise for Problem 3," on page 5.)

Problem 4: A Horse Repeatedly Breaks into Trot When Asked for More Collection at Canter

Riding the symptom: Often the rider will chase the horse back into canter, but that's fixing the symptom instead of the problem. Remember, your initial goal was to increase collection, and when he broke to trot, he certainly wasn't in a collected trot. He was probably in a sprawled trot. If you let him run in trot and then chase him into canter, you have two results: You've certainly picked up a poor canter, and you've allowed him to evade your request for collection. Make sure he doesn't find it easy and gratifying to evade by breaking into trot.

The underlying issue: Horses break from canter when they aren't engaged and carrying enough weight on their hind legs. It's tempting to think, *Oh darn, I want to get back into canter as quickly as I can.* Instead, say, *Stay with me here in trot. Stay round. Keep coming from behind. Stay bent. Stay engaged.* Your horse should work hard in trot to achieve all those qualities you were looking for in canter, before asking for canter again. Although it may take longer today, in the long run, he'll be more likely to understand all those qualities you want and less likely to break from the canter in the future.

At the same time, the rider should be sensitive to whether the horse broke because he was tired or because the work was difficult. That can be a fine line. What if your horse broke because he was tired? The more times you ask him to do something he can't do, the more unwilling he will become. But, if you stop the

work every time an exercise is hard, progress becomes slow. Sometimes trainers have to go over the line to find out where the line is. They must be sensitive to it, making sure the horse is rising to a challenge that's manageable for him.

Rider position: In this situation, be sure to stay in the horse's balance. It is common for riders to get behind the motion or in front of it. Also, be careful that your horse doesn't feel trapped between the leg and the hand aids. (See "Exercises for Problem 4," right.)

Show the Horse the Easiest Way

We all have been trained to think about the mechanical aids for riding, but the psychological aspects of training horses pose interesting challenges for the rider. There are hundreds of examples in which the rider's evaluation of the problem might not go deep enough. But, the underlying issue is usually quite simple and related to the basic principles of the Training Scale.

Horses don't think in a complicated way. They don't consciously want to lean on your hands or be heavy on the left rein. They simply do things the easiest way. It's worth noting, too, that horses and riders aren't bothered by the same situations. The horse doesn't mind leaning on your hands. It's easy for him. He says, *thank you. Here's something that will hold me up!* An unwilling horse can make riding complicated, but even a willing horse will search for the easiest way.

A really effective rider closes all the little doors and arranges it so what she wants is the easiest avenue for her horse to follow. Of course, it's not actually easiest for the horse to be in self-carriage, and horses have no inherent reason to want to do things the hard way. It's the same with people. When we get out of shape, do we want to go to the gym? Not really. The rider is successful when she makes the evasion difficult for her horse and the desired outcome

EXERCISES FOR PROBLEM 4

For a horse that repeatedly breaks into trot when asked for more collection at canter, use exercises that change gears in canter. Do transitions between working, collected and medium canters. You can also use exercises that increase collection in other situations. Transitions that skip a gait, such as trot–halt–trot and canter–walk–canter teach the horse to collect.

The result: When you stay focused on engagement and self-carriage, it will never become easier for him to break.



easy. Then, when the horse is successful, the discerning rider either gives her horse a break or moves onto another interesting challenge. Horses ridden in this way find that training is a positive experience. The rider has made dressage interesting, comfortable and fun. 🐾

JENNIFER BAUMERT is a U.S. Dressage Federation (USDF) bronze, silver and gold medalist and a USDF Certified Instructor through Fourth Level. As a rider, she has won Region 8 championships at the Prix St. Georges, Intermediate I and II and Grand Prix levels. She has also won numerous top-10 USDF Horse of the Year Awards.

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Your Horse's Hocks

Understand some of the elements that affect hock health

By Mary H. Bell, VMD

For the horse who competes in dressage, where hind-end engagement is a key to correct performance at all levels of competition, hock pain is a common and marked impediment. The significance, treatment and prognosis depend on the source of the pain. Although prescreening can help identify some potential problems, no system is foolproof. Similar to the prevention of many sources of lameness, a conscientious system of horse development in the care, feeding and training is the best method of prevention and control.

The hock consists of 10 bones and four joints and is supported by several ligaments. The tibiotarsal joint is a ball-and-socket joint that has the largest range of motion. The other three joints are low-motion joints and serve as good shock absorbers. When the tibiotarsal (or tarsocrural) upper joint is inflamed, there is an increase in synovial fluid. The old-time horseman term for this is "bog spavin." This is a vital joint for a performance horse, and swelling is often a sign of a problem. If that is something you notice, you should call your veterinarian to help you garner more information and provide you with treatment options.

The tibiotarsal joint is also a joint where osteochondritis dissecans (OCD) is commonly found. OCD is a developmental problem that affects joint cartilage and often affects the bone just beneath the cartilage. Normally, OCD is a condition that is identified in the young horse. The worst lesions are found early. These OCD lesions can be present without any lameness issues; however, when they are present and there is filling in the hock, surgical removal is the treatment of choice. Fragments of bone and/or abnormal cartilage can break loose and result in joint inflammation, and even if this has not caused issues in the past, it is wise to remove them from the high-end performance horse as they may eventually break loose with poor timing. Once they do break loose, resulting in inflammation, some people opt to put a band-aid on the issue by injecting the joint with corticosteroids or by using nonsteroidal anti-inflammatory products. However, this actually risks further damage to the joint.

In the case of a horse who is lame due to an unknown cause, joint distension or enlargement, is usually indicative of a problem. It can be helpful for a veterinarian to use local anesthesia in the tibiotarsal joint to confirm the source of lameness before more in-depth surgery. Nothing is more discouraging than having a surgery done with rehabilitation time only to discover the lameness came from elsewhere.

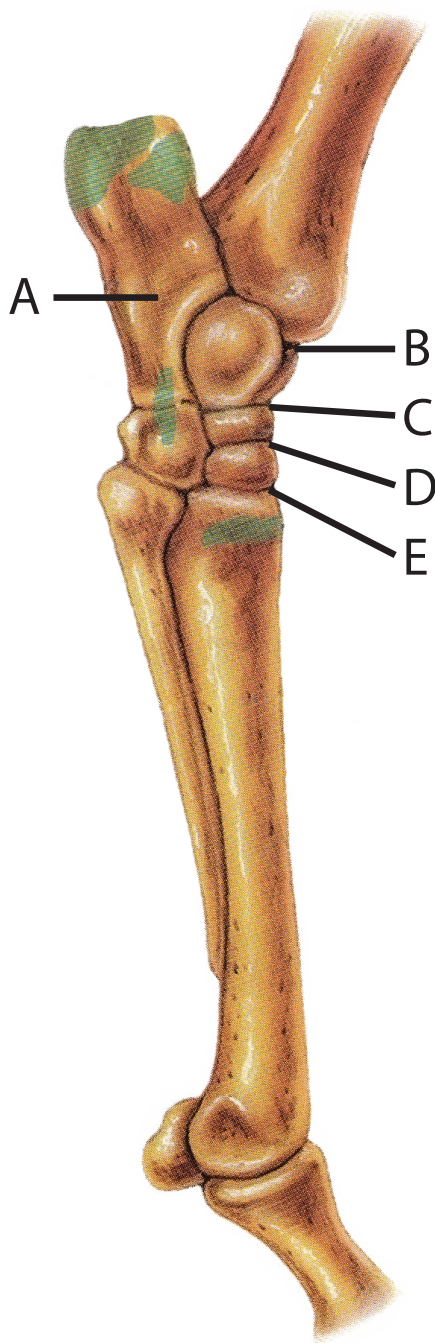


Illustration based on image from Illustrated Atlas of Clinical Equine Anatomy and Common Disorders of the Horse

Hock anatomy: A. Fibular tarsal bone (calcaneus) B. Tibiotarsal (tarsocrural) joint C. Proximal intertarsal joint (PIT) D. Distal intertarsal joint (DIT) E. Tarsometatarsal joint (TMT)

In the absence of lameness or any sign of a radiographic lesion with a full component of radiographs, the joint can be drained and injected with a veterinarian's choice of product and with a period of rest prescribed. It is not uncommon for some level of filling to return. The tibiotarsal joint frequently communicates with the next joint down, the proximal intertarsal (PIT) joint. The PIT joint is a less common source of lameness.

The most common sources of hock lameness in horses are the bottom two joints, the distal intertarsal (DIT) and

anti-inflammatory drugs, intra-articular injection of the joints, systemic products that are considered to protect cartilage, magnetic therapy, shock-wave therapy or laser therapy. Usually two or three of these treatments are used in combination.

It is important that you address hock pain in your dressage horse. A change of movement as a result of hind-leg pain threatens both his other hind leg as well as his front legs. There are a variety of conclusions regarding the prognosis for a horse with hock pain. It has been my experience that, as long as there

treated with a corticosteroid, the healing process is interrupted. There is not room in this article to address high-suspensory tears, but they can appear very similar to arthritis of the lower two hock joints.

How do you choose a young horse intended for dressage from the point of view of avoiding hock pain? There is some evidence that horses who are base-wide behind (where the hind fetlocks and feet point out marginally) are better able to engage for upper-level work. You must not confuse this with cow hocks that are actually predisposed to hock problems. There is evidence that a horse with a straighter hock angle has more longevity, so a sickle-hocked conformation is not ideal.

I consider radiographs to be an important tool in assessing the young horse. OCD lesions can be there in the absence of clinical signs and stalemate you later. There can also be radiographic signs that the lower hock bones did not ossify thoroughly and show signs of having been crushed in babyhood. Although horses with this problem are usually sickle-hocked, that is not always the case.

A practice of a long warm-up—about 15 minutes of walking—is always appropriate. Dressage is a system of progressive strength training, and a day or two per week of rest or light work is needed to allow for healing. Ensuring that your horse has the strength to do the exercise being asked and is not asked to do it when he is too tired is the best protection for both joints and soft tissue. 🐾

Dressage is a system of progressive strength training, and a day or two per week of rest or light work is needed to allow healing.

the tarsometatarsal (TMT). These two joints have very little effect on the movement of the hock unless they are painful. If that is the case, the horse is very guarded in the movement of the hock. Usually, the lameness is most evident when he is under saddle and being asked to work. The horse with osteoarthritis of the lower joints may carry that hip higher during the swing and landing phase of the stride. Often he will leave the leg further behind when it is on the outside of a circle and have a markedly shortened anterior stride. These horses are usually quite positive to an upper-leg flexion test. Occasionally, pressure on the inside of the hock will be painful. Radiographic evidence of arthritis can be there in the absence of lameness, and lameness can be there in the absence of radiographic evidence. Some horses are perfectly normal on flexion.

There are many avenues of treatment for arthritis of the lower two hock joints. These include systemic

is no extensive radiographic change, hock pain stemming from the lower two joints can be controlled and can resolve. However, the greatest successes have been in cases where training has been appropriately modified or ancillary therapies such as magnetic hock boots are used.

Some veterinarians, including myself, believe that frequent cortico-steroid injections of the tibiotarsal joint (three to five times a year) are partly responsible for tears at the origin of the high suspensory ligament. Some of the origin is included in the TMT joint. Micro-tears in the high suspensory occur regularly and heal regularly. When this area is frequently

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