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Equine Wound Care

Dr Rachel O'Higgins

Minor and major wounds are common occurrences in horses and the severity of a wound can be deceiving. Large wounds accompanied by profuse bleeding often appear worse than they are, particularly if they involve only superficial structures. In contrast, small wounds occurring on or near a joint or tendon might not initially present a dramatic flow of blood but could prove to be more serious due to the potential for underlying structures to become infected. Common types of wounds include partial skin thickness abrasions, full skin thickness lacerations and puncture wounds through the skin which leave a very small surface wound, but with the possibility of damage to deeper structures.

Be prepared! Providing effective first aid to an injured horse means having easy access to a fully-stocked first aid kit. A good first aid kit should include the following:

- Your vet's telephone number
- Large roll of cotton wool or Gamgee dressing
- Sterile non-adherent wound dressings (eg. Melolin pads)
- Antiseptic solution, either Hibiscrub or Povidone Iodine
- Bandages e.g. Vetwrap, elastoplast, gauze rolls
- Clean bucket, scissors, thermometer, large towels

Up-to-date vaccination records should also be readily accessible. A tetanus booster should be administered to your horse annually. Clostridium tetani is a bacterium found in the environment which can infect your horse through open wounds. Clostridium tetani produces a toxin which results in the potentially fatal neurological disease Tetanus.

When to call the vet

Any of the following should alert horse owners to seek veterinary consultation:

- Profuse bleeding that is not stopped by simple compression as described below
- Penetration or puncture through the entire skin thickness, especially if near a joint or tendon
- Wound edges that gape apart or if there is a skin flap present
- If there appears to be contamination of the wound either with dirt or other foreign bodies
- The horse is very lame, especially if the wound appears to be small
- If structures deep to the skin such as muscle, bone or tendon can be seen
- Your horse's tetanus vaccination is not up to date.

You should avoid giving your horse any painkillers before your veterinarian arrives as they can mask the severity of the injury. Also, avoid placing any topical treatments onto the wounds without consulting your veterinarian first.

Immediate first aid

- Don't panic! - Be as calm as you can when catching your horse and try to calm them so they don't cause any further injury to themselves.
- If your horse is able to walk, take it to a dry, clean stall or a quiet area on the yard. If you feel your horse is too sore to walk, keep them where they are. A feed bucket is always a nice way to distract your horse from the pain of an injury and relax them.
- If possible find a helper to hold your horse before you assess the wound or apply first aid. Wounds are often painful and your horse might be quite anxious - the last thing you need is for them to accidentally hurt you whilst you are looking at their injury.
- If the wound is still bleeding, apply even and direct pressure to the area using a bandage as described below. If the bandage soaks with blood simply place fresh material on top. By doing this you avoid disturbing newly formed blood clots when the soaked material is peeled away.
- Once bleeding has been controlled, try to assess the location, depth and severity of the wound and call your veterinarian. Some large wounds that appear horrific initially can heal extremely well where as other seemingly minor wounds can result in severe career-ending infections if they are not dealt with quickly and appropriately. Don't forget to look at all other areas of the horse for other injuries, some potentially more serious wounds can easily be missed during your initial examination.

First Aid for Minor Wounds:

- Clean the wound with large volumes of clean water using a hose.
- Apply a small amount of antiseptic cream or gel except if bone is exposed or a joint open.
- Apply a bandage as described below.
- If the wound is minor, leave the bandage in place and change every 2-3 days - however, monitor daily for infection and if there is unpleasant discharge or smell consult your veterinarian.

Bandaging

Every bandage should contain 3 layers;

1. Primary layer - this layer is placed directly onto the wound. It is non-stick so that when it is removed, the healing tissue below is not accidentally damaged. Melolin® or Allevyn® are two examples.
2. Secondary layer - this is the padding layer that provides even pressure over the wound. Products such as cotton wool or gamgee are good choices for this layer or if desperate a disposable nappy can suffice.
3. Tertiary layer - this is the top layer of the bandage that holds everything in place and provides compression. Products like Vetwrap and Elastoplast are used for this layer.

Some areas of the horse that are prone to wounds such as the hock are often quite tricky to bandage. If you are unsure how to place a bandage over a wound, don't hesitate to ask your veterinarian.

Your Veterinarian and Wound Management

How a wound heals and the final functional and cosmetic outcome greatly depends on the initial management and investing in appropriate veterinary care in the first instance, can help minimise complications and delayed wound healing. Penetration into a joint or tendon sheath can produce a life threatening infection which needs advanced wound care and often extra diagnostics such as radiographs (X-rays) or ultrasonography. Veterinary treatment may include trimming skin flaps, removing dirt and foreign particles from the wound, cleaning the wound with saline and antiseptics and suturing the wound if appropriate and bandaging. Use of antibiotics and pain relief may also be needed.