



## EVENTS

June 10

**Horse Happenings on the Hill**

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*Ernie Howlett Park*

May 11-12

**Tom Curtin horsemanship clinic**

310-345-3274

*Ernie Howlett Park*

May 12-13

**Gil Merrick dressage clinic**

[pbrownsch@cox.net](mailto:pbrownsch@cox.net)

*Ernie Howlett Park*

May 12

**Compton Jr. Posse Fundraiser**

[contact@comptonjrposse.org](mailto:contact@comptonjrposse.org)

*Los Angeles Equestrian Center  
ballroom*

May 17

**PVPHA general meeting**

*Empty Saddle Club*

May 20

**ETI Corral 8 horse show**

[eticorral8.com](http://eticorral8.com)

*Ernie Howlett Park*

June 3

**LSAC horse show**

[palosverdes.com/lsac/](http://palosverdes.com/lsac/)

*Ernie Howlett Park*

June 21

**PVPHA general meeting**

*Empty Saddle Club*

*Send events to [pvpha2010@gmail.com](mailto:pvpha2010@gmail.com).*

## Annamay Memorial Gymkhana draws dozens of riders, spectators

by **NICOLE MOORADIAN**  
DISPATCH EDITOR

More than 40 local equestrians of all ages participated in the Annamay Naef Memorial Gymkhana held April 28 at the Empty Saddle Club.

The gymkhana honored 16-year-old Annamay Naef, a local equestrian who died last year in an early-morning car crash at Hawthorne Boulevard and Palos Verdes Drive North.

Numerous ribbons and other prizes were handed out to the winners of the many divisions in the Big T, cloverleaf barrels, hurry-scurry and pole-bending events.

As spectators took in the sights, a handful of local merchants, such as Gee Gee Equine, hawked their wares.

All proceeds from the gymkhana, which was organized by Martin Performance Horses, went to Ride to Fly and the Peppertree Foundation. U



PHOTOS BY NICOLE MOORADIAN

**Top: Kyle Agouino races to the finish on Annamay's horse Tango.**

**Bottom: Danielle Allen and her horse Scotty show off their ribbons.**

NEXT PVPHA GENERAL MEETING: MAY 17

## Attend May 17 General Meeting

by **NICOLE MOORADIAN**  
DISPATCH EDITOR

The next general meeting for the PVPHA is scheduled for Thursday, May 17 at 7 p.m. at the Empty Saddle Club. As usual, all Peninsula equestrians are invited. Information about the meeting's program was not provided by press time.

As a reminder, the Empty Saddle Club requests that meeting attendees leave their dogs at home. U

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## NEWS BRIEFS

**PVPHA board positions up for election**

The following positions are open for reelection at the June general membership meeting: vice president of civic affairs, president, vice president of membership and corresponding secretary. Currently, Gil Houle (vice president of civic affairs) and Nancy Wildman (vice president of membership) have agreed to run for reelection.

Those who are interested in running or nominating someone for one of the four positions should contact nominating committee members Doreen Houle at 310-375-5157 or June Olney at 310-326-4531.

**Original cowboy Paul Pitti dies**

Paul Pitti, original cowboy and father of PVPHA supporter Pam Turner, passed away April 19. He was 88.

Pitti was the leader of his family band the New West-ernaires, which entertained Cowboy Poetry and Music Festival attendees for many years. Though he missed the 2011 Festival due to a bout of pneumonia, he was back for

the 2012 event.

Funeral services for Pitti were held April 28. In lieu of flowers, the family asks that donations be made to St. Jude Children's Research Hospital, located at 501 St. Jude Place, Memphis, TN 38105.

**Help the Dispatch**

Do you have a horse care tip? Did you take home a ribbon at your last show? Got a great recipe for horse treats? Want to express an opinion on an equestrian issue? Have a clinic to put on the calendar? Send it to [pvpha2010@gmail.com](mailto:pvpha2010@gmail.com), and I'll include it in a future issue. U

*News briefs are generally 2-3 short paragraphs. To submit a news brief, email the text to [pvpha2010@gmail.com](mailto:pvpha2010@gmail.com). The editor reserves the right to not include briefs and to edit briefs for length and clarity.*

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# NAVICULAR EXPLAINED, PART 2:

## Risk Factors, Diagnosis, Treatment Options

by ERIN RYAN  
VPPHA RECORDING SECRETARY

*Editor's note: In the April issue of the Dispatch, Erin Ryan recapped Dr. Jimmy Giacomuzzi's lecture on the causes of navicular syndrome. This month, she relates his information about the risk factors, diagnosis and different treatments.*

There are multiple risk factors when it comes to the possibility of a horse developing navicular syndrome. These risk factors include the horse's breed, conformation, body weight, activity levels, blood supply, age and genetics.

Certain breeds of horses are more likely to develop navicular problems. These include breeds with feet that are small related to body size. The support structures in the hoof are designed by nature to absorb shock and carry the horse; the smaller the hoof in relation to the horse's size, the greater the shock to the navicular bone. Unfortunately, breeders often select horses for their small feet, believing them to be more attractive and increasing the risk of navicular.

A more upright pastern may also predispose certain horses to the development of navicular syndrome. Quarter horses are particularly prone to the disease, but it is unknown whether this is due to some hereditary factor or is related to conformation. Quarter horses, thoroughbreds and warmbloods also have disproportionately small feet and high body weight, which may explain the tendency towards development of navicular disease in these breeds, as opposed to ponies and Arabians.

### Does your horse show signs of navicular?

Different types of horses have different symptoms of navicular. Is your horse exhibiting one of these symptoms?

- 🐾 Dressage horses may have trouble coming onto the bit or may refuse to perform a maneuver that they've done easily in the past.
- 🐾 Racehorses may quit during the race, slow down noticeably at the three-quarter pole or exhibit loss of form.
- 🐾 Jumpers may refuse a fence or take down the rails.
- 🐾 Event horses may exhibit poor recovery—including a prolonged rapid heart rate, respiratory rate and temperature—from the strenuous phases of the event or may have trouble making times.
- 🐾 Endurance horses may show poor recovery or inability to finish rides.
- 🐾 Pleasure horses may stumble or show signs of irritation, such as tail swishing and head bobbing.

Body weight also plays a factor. The more pressure that is applied to the navicular bone from the deep flexor tendon, the higher the probability that the horse will suffer from navicular disease. A horse that's overweight or has disproportionately small feet will exert more pressure on the navicular bone.

A horse's activity level may play a role in the development of navicular syndrome. This is particularly true when the horse is utilized in stressful athletic activities for which he is not suited. Horses that undergo a fair amount of percussion on the forefeet are inclined to experience navicular syndrome. Barrel racing, for example, puts a lot

of stress on the horse's foot and may lead to navicular problems. Working on steep hills, galloping, and jumping can all contribute to navicular syndrome, as they place greater stress on the DDF tendons and may cause overextension of the pastern and coffin joints.

Reduced blood supply to the navicular area may initiate or perpetuate navicular disease. It is possible that standing for long periods can increase the chance of navicular disease, so horses that spend most of the

*Continued on the next page.*

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*Continued from the previous page.* day in a stall with little turnout, such as racehorses and some school horses may have a higher risk. This is because blood flow to the hoof decreases when the horse is not in motion. The horse is also constantly applying pressure to the navicular bones when standing; when the horse moves, the pressure is no longer constant.

Younger horses are affected more often than older horses. Horses that have definite symptoms of navicular problems are usually between the ages of 3 and 16 years.

Additionally, at least one study shows a genetic predisposition toward the development of navicular syndrome. This may relate to the conformation of the foot and the natural angle of the pastern. Some veterinarians believe that the more upright the pastern, the more likely the horse is to develop navicular syndrome.

Horses in the wild rarely experience navicular syndrome.

## Diagnosis

Navicular cannot be diagnosed with hoof testers—which are good for detecting abscesses—or an X-ray machine; it has to be done with a MRI and nuclear imaging, an expensive procedure involving injecting a radioactive compound. Because those methods aren't always financially practical, a vet will normally determine the likelihood the syndrome by talking to the owner along with observing the horse's symptoms—tripping, stilted gait and contracted heels, among others.

Most diagnoses are made through a process of elimination. Nerve blocks can be applied on different nerves until the horse is sound when trotted out. If the horse appears sound after blocking the nerve that serve the navicular bone, navicular disease may be causing the lameness. When navicular syndrome is suspected, X-

rays sometimes are taken to make sure the horse does not have a fractured bone.

## Treatment options

The treatments of navicular syndrome vary widely because problems in the navicular area have several causes, and treating a horse with navicular disease remains a controversial issue. The treatment chosen depends on the demands put upon the horse and the condition's severity.

Degenerative changes are usually quite advanced by the time the horse is consistently lame, and these changes are believed non-reversible. At this time, it is best to manage the condition and focus on alleviating the pain and slowing the progression of the degeneration.

The issue of hoof care is subject to great debate. Corrective shoeing can be beneficial to horses suffering from navicular disease, although sometimes the effects are only temporary. Others believe that removing the shoes altogether is the best way to manage navicular disease, as it allows increased circulation to the hoof. People from both sides agree, however, that proper hoof shape and angle are an important long-term management plan for a horse with navicular disease. Each horse may respond differently to a given technique, so the farrier, owner and veterinarian should work as a team to formulate a plan and adapt if the initial plan is not effective.

People who choose to treat navicular disease through shoeing will sometimes use a shoe designed to lift and support the heels. Wedge pads or wedged shoes are often used, but can amplify heel-related problems if they're present. Another strategy is to use a bar-type shoe. Some horses will also benefit from shoes that change the breakover of their foot. Horses with long toe-low heel conforma-

tion need careful trimming to counter this. Horses with upright feet may need their heels lowered and a shoe that will allow their heels to spread. Early intervention is key.

Advocates of barefoot trimming cite recent studies that show that removing the shoes can help alleviate the symptoms of navicular disease. Successive and carefully applied trims help restore the natural angle and shape of the hoof, while walking helps stimulate circulation.

Horses should be stabled in the biggest corral possible. To promote movement, put the food at one end of the corral and water at the other end.

If there is significant damage, relief is typically incomplete no matter what foot care technique is used.

The veterinarian may prescribe medication for the horse. Non-steroidal anti-inflammatory drugs, also known as NSAIDs, help reduce the pain and swelling of the joints and decrease stiffness. When taken at a low dose, they can reduce pain; when taken at a higher dose, they can also reduce inflammation.

Proper hoof care and training changes should also be implemented, as NSAIDs do not prevent joint damage. In the long term, the medication may accelerate joint breakdown. Taking more than one NSAID at a time increases the possibility of severe side effects such as ulcers and bleeding. NSAIDs affect normal blood clotting and therefore may interact with other blood-thinning medications.

Vasodilators improve blood flow into the hoof by relaxing the smooth muscle in blood vessels, causing the vessels to dilate. Anticoagulants, which prevent blood from clotting, also improve blood flow.

Almost anything that will thin the blood is appropriate. Many athletic horses should be on aspirin, anyway. Hemoflow costs approximately \$262 for one tub. If you would like to put

your horse on powdered aspirin, start with two tablespoons for five consecutive days, then one tablespoon for three days, then one tablespoon every three days for the rest of the horse's life.

A drug known as Tilden can prevent the navicular bone from dissolving away. The drug, which is not distributed in the U.S. but is OK to use on a personal horse, was originally developed as an osteoporosis treatment for women. One study showed that after nine months of use, the holes in

the navicular bone were gone. It was miraculous. Tilden treats any type of disease that involves inflammation and lasts about a year. If the navicular bone looks like a solid piece of chalk, the bone is just not getting any blood. Tilden will not work on that type of navicular, which is rare.

Anything that would help lubricate that joint would be beneficial.

Other treatments involve stem cells and palette-rich plasma, which helps the joints and tendons. Additionally, supplements can also be used; how-

ever, they were not discussed in detail at the April meeting.

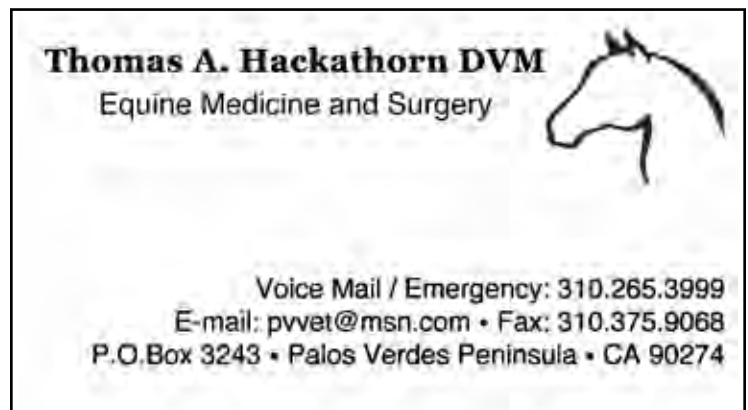
### Prognosis

The prognosis for a horse with navicular syndrome is guarded. Many times the horse does not return to its former level of competition. Others are retired. Eventually, all horses with navicular syndrome will need to lessen the strenuousness of their work, but, with proper management, a horse with navicular syndrome can remain useful for some time. U



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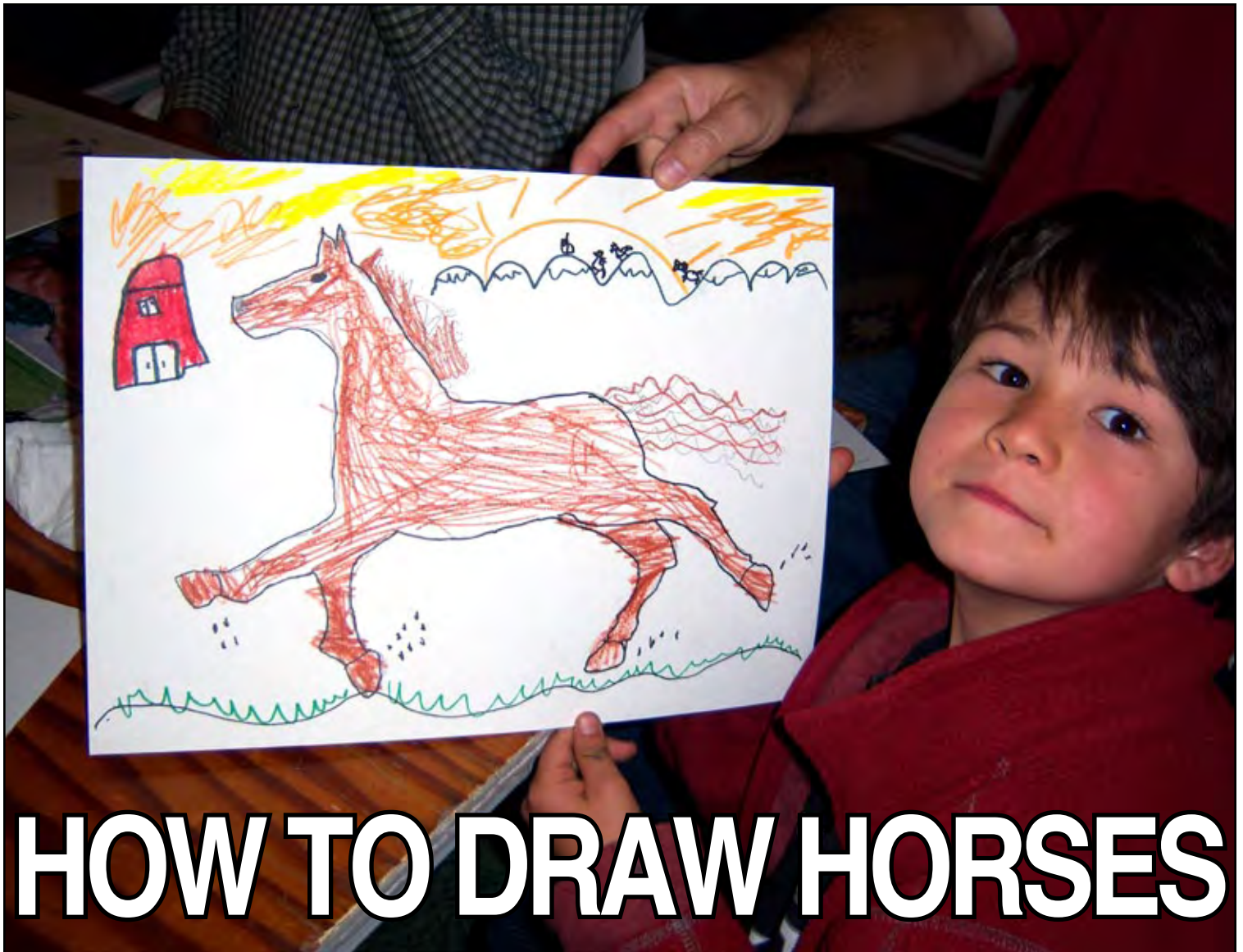
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# HOW TO DRAW HORSES

ALL PHOTOS ON PAGES 6 AND 7 CONTRIBUTED BY KATHY STOWE

A young student at the April PVPHA general meeting shows off his masterpiece for the camera.

by **KATHY STOWE**  
CONTRIBUTING WRITER

*Editor's note: For April's general meeting, Sheryl Steckel and Kathy Stowe taught a good-sized group of attendees how to draw horses. Here is Stowe's recap of the meeting as told through 11 steps.*

First, get a PVPHA membership. It's the shortcut to area horse secrets, including tips about soup and nuts.

Second, embrace the challenge of creating a replica of the beautiful animal you love looking at—even if you're a novice to the art world.

Third, have the PVPHA supply Sheryl and her trusty assistants with a bunch of fun art ammo.

Fourth, come to Sheryl and Kathy's How to Draw Horses class and walk away a winner!

Fifth, utilize the great movable template that Sheryl

created and position it in the pose you would like to depict. Have Sheryl and Kathy help you in case you aren't sure of how it should look.

Sixth, start drawing! Lightly trace around the template, making sure to get the feet level with the horizontal line of the paper if the horse is standing. If the horse's hooves are lifted up because it's walking, trotting, cantering or rearing, etc., place the foot at a nice pointed angle aiming down. Take note of the movable joints and where things connect on a horse's musculature as you trace the lines.

Seventh, lift the template and see your horse take shape. Now begin to darken up your lines and get them more exact on the outline. If you only traced two of the legs, place the template on once more to add two more legs. Position them forward or back and outline. For a standing horse, just follow the outline of the leg about one-quarter of the thickness, starting under the belly all the way down. When you come to the hoof, make it a

little shorter than and just as level as the other so it looks as if it's on the other side.

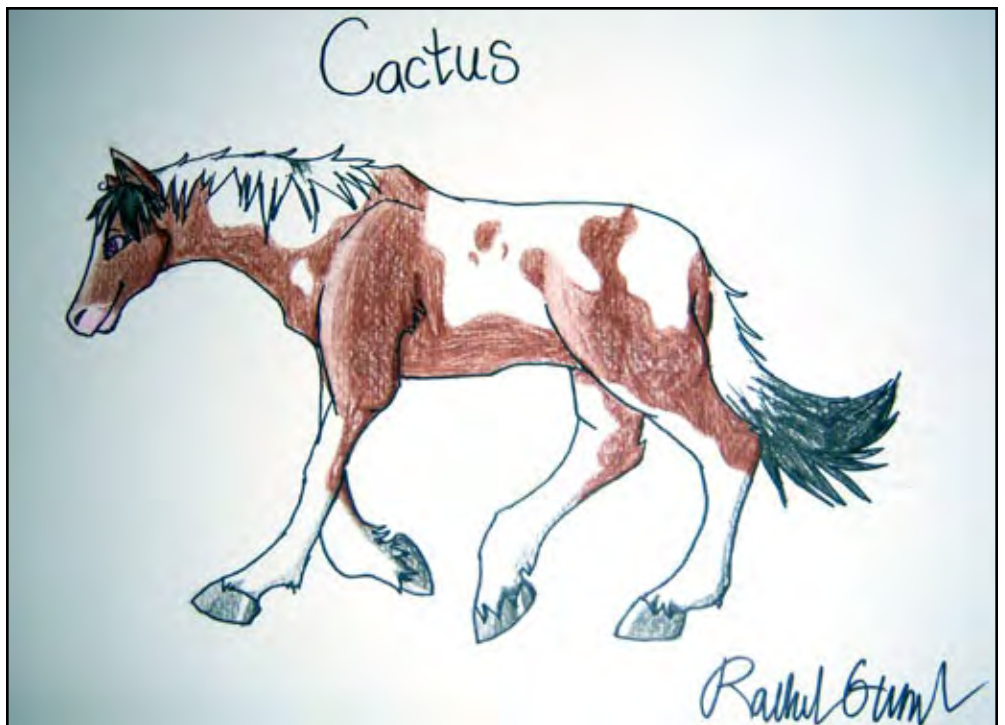
Eighth, add the eye about a third of the way between the ears and the muzzle and add a nostril for the nose. Add a curved line from the eye area to the nostril to depict the forehead and nose bridge. Add a line for the mouth and draw a half-circle at the cheek of the jaw area.

Ninth, define some muscle lines, such as the arch line of the neck, the shoulder slope from wither to chest top, the bicep muscle at the front arm area, the indented line back near the buttock, and the little line that goes up into the belly near the stifle area.

Tenth, add a beautiful tail at the dock of the buttock, flowing from the top line. Standing horses should have their tails hanging down, while running horses' tails should be waving out. Add a mane that is flowing out for a running horse, hanging long for a standing horse, or braided or short, depending on the activity and style you want depicted.

Eleventh, add color. Concentrate on leaving a shine mark at each muscle group by not adding any color there or adding a white shine streak later. Add a wavy land line in the background and color the top sky blue and the bottom grass green. A masterpiece has now unfolded.

It was wonderful to see all these beautiful creations from students 5 years old to more than 80 years old! Charlene O'Neil provided the great brownies. Many thanks to Sheryl for the creatively fun cutout horses and nice paper, and all the artists, too! U





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*Dispatch edited by Nicole Mooradian.*



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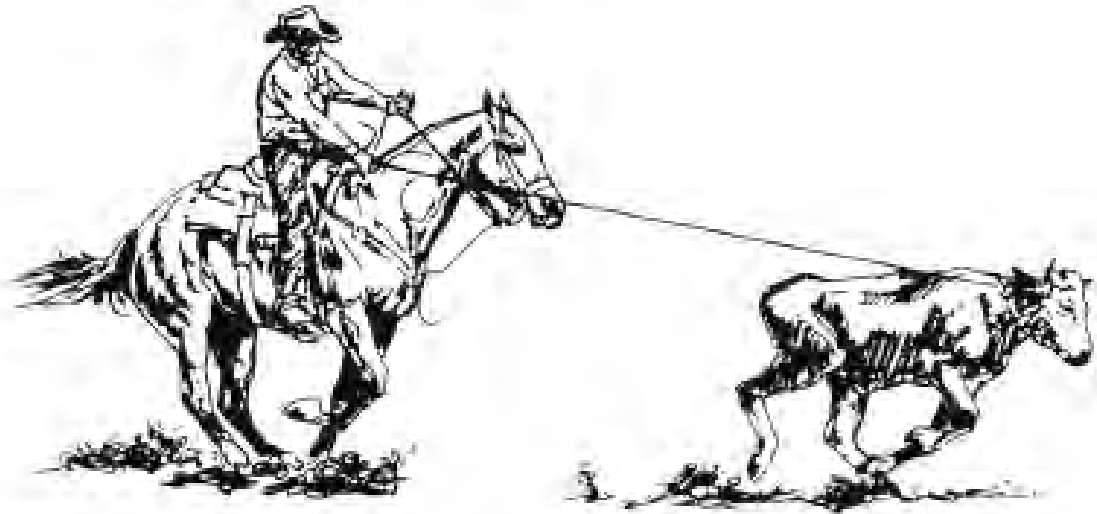
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