

Case 051005-03: Seven-year Old Warmblood Hunter Jumper Proximal Suspensory with Avulsion

A seven year old Warmblood Hunter-Jumper was presented for acute lameness of the left front limb. On physical exam, the patient was grade 2/5 lame to the left, right, and in a straight line. Flexion tests on that limb did not worsen the lameness. The horse exhibited pain on palpation of the area of insertion of the suspensory ligament of the left front limb. A high-volar block resolved 95% of the lameness. An ultrasound of the proximal suspensory was performed: it showed an hypoechoic area in zone 1A of the suspensory ligament. The core lesion measured approximately 0.18 cm squared and revealed a 0.3cm segment that had avulsed from MCIII. (Fig 1, 2)

With the intent of minimizing scarring in order to continue this horse's career as a successful Hunter-Jumper, regenerative cell therapy was elected as the course of treatment.



Figure 1: May 9, 2005



Figure 2: May 9, 2005

On May 9, 2005 a 23.87 gram subcutaneous adipose sample was collected just lateral to the tailhead and was submitted for regenerative cell recovery. On May 11, 2005, 4.7 million regenerative cells were injected with ultrasound guidance directly into the core lesion and at the location of the tear. The patient was placed on 1 gram of phenylbutazone orally twice a day for three days.

The horse was given stall rest for 14 days and then subsequently hand walked twice a day for 30 minutes. On June 30, 2005, the patient was started on an Aquatred; the sessions lasted 20 minutes and occurred 3 to 4 times a week over the course of a month.

By August 2005, the patient was sound and had been started back into light training. In December 2005, the Warmblood was back at her prior level of performance and is currently competing in Hunter-Jumper classes in Europe. No re-injury, pain or lameness issues to the left front suspensory have been reported since regenerative cell treatment.

References: