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Our teachers

On the first day of dissection we will share assessment video material of both the horse and zebra during live and explain their full stories as known to us. Below, you can already find a very brief introductory summary as explained by the owner:

Alibi is a beautiful 7-year-old Thoroughbred gelding that should have been coming in the prime of his life. Unfortunately, life has become too challenging to live for him with euthanasia as the only available treatment.

Ally was fully x-ray vetted for purchase Dec 2021 (except the neck) as a dressage and show jumper. The vetting was clear with specific mention that he had a good strong and healthy back.

In the first few months of us getting him he was a very good riding horse, quite brave and sensible. However, not until long his behavior started to change. He showed aversive behavior to being touched on his neck, mane, and wither. We put it down to being a youngster and his upbringing. He also became very tense in the mouth when taking contact on the rein and would stargaze, toss his head and even spook and bolt in the arena (specifically in the canter). He was great on a loose rein but became horrible with contact.

Needless to say I've had the saddle checked, bit fitted, physio, chiro, bodywork, dentist etc.

He was treated for ulcers and send him down on an 8-month let down. In this period he lost quite a bit of condition, and it became extremely difficult to put get that back on. He also started to develop some hind lameness, but not a single professional seemed to be able to help us forward and pinpoint the problem(s). I felt desperate. We took him multiple times to the vet, but he passed the flexion tests despite being unlevel. His loins and glutes were very sore though, so he was injected in the SI area and after 10 days of in hand walking he was actually worse than before under palpation of the hind and it was said that he had a torn SI ligament and needed 3-8 months rest. This was also advised by his chiropractor who strong felt it was SI issues.

However, a second opinion by a fascia therapist pointed out suspicion to neck problems. I decided to get his neck x-rays and it was found he had a cyst in the facet joints between C4-C5. The rest of his neck was said to look in good condition.

However, since his behavior only worsened, it was decided to bring him in for a last final second opinion by specialists from the Gilvarry rehab Centre. Below you can find the information from the assessment form that was submitted in October 2023:

Management (under owner)

Stabling / turnout ration

Goes out at 7.30/8, comes in only on rainy night at 4.30/5. Sand paddocks and/or grass surface.

Daily diet (under owner)

Split into 2 meals

450g fiberbeat

1kg traquillo

500g balancer

Split into 3 meals (most at night)

3 haynet of eragrostis / lucern mix

Since November 2024 he has unlimited forage and only receives additional balancer + probiotics 1x a day.

Dentist:

9 months ago – nothing special noted

Hoofcare:

Barefoot since June 2022, trimmed every 5 weeks

Bodywork:

Physio, chiro and fascia release – rotated between practioners and he gets one every 6 weeks.

Worm management:

Last fecal count was November 2023 + gastric scope. Bot larvae were found, and he was treated with 2x doses of ivermectin and then a full ulcer dose including ulsanic, omeracote & Cytotec.

General habits

Rolling pattern:

He is unable to roll right over so stands and switches sides

Chewing pattern:

More tension on the right side of his jaw

Grazing vs browsing pattern

Only has access to haynets and grazing. I'd estimate he has 70% of time accessing haynets and 30% time grazing from the floor.

Resting pattern

He alternates with 1 front limb forward and 1 back and then often has hind legs tucked right under his body, quite close to front legs. He can rest right hind. He also does not like his feet being lifted and picked out.

Known injuries / accidents

In 2022 he ran through a wire fence and had what looked like superficial cuts and grazes to his hind limbs.

In March 2023 he sat down a twisted position in a stationary horsebox for about 4 minutes until we opened the tail gate and he stood up.

Known pathologies now

C4/C5 face joint cyst; SI damage

Medication:

Ivermectin

Ulcers medication

2 cortisone injections in SI

Training

Bought him as an allrounder for dressage and showjumping

He has been fully rested for 6 weeks. At our very best patch he was worked 3x a week flatwork and 2x walk hacks. This would include 10 min walk work, 20 min trot with walk and neck stretch breathers and 10 min canter. Canter was always most difficult and some days we would leave this out.

Work in a rubber chip arena and the hacks were on sandy tracks.

Equipment used:

Pressure relief bridle, wintec saddle (fitted for him). Lunge snake (barely used).

Performance issues

Stargazing, bit tension, head tossing, stopping, bucking, trouble with canter transitions both directions as speed increased. Intermittent lameness behind (not dramatic).

Reason for assessment:

1. Are his SI and neck problems related and if so, is there some sort of neurological component to it?
2. Do you feel he will ever be able to be the dressage and show jumper that we bought him for? I.e. is it "fixable"?

He was then assessed by Thirza Hendriks and after extensive deliberation, repeated observation, and additional diagnostics the difficult decision was taken that the only real treatment option was euthanasia because of worsening lameness, neurological deficits, pain behavior and no positive response to treatment whatsoever.

So what diagnostics have been taken?

- Full extended blood panel
- Heart scan
- Neck & Back and Limb X-rays
- Gastroscopy
- Tendon & Ligament scans
- SI region scan
- Cerebral Spinal Fluid Tap
- Iridology
- Fecal sample

The vets that have taken these diagnostics will be present during the dissection to explain what could be seen on these diagnostics and what revealing pathologies could not be seen. This will help you further to understand the use but also limitations of diagnostics in assessing pathology, discomfort, and pain in horses.

Prior to the dissection we can already share that amongst other things, it turned out he has unilateral ECVI on C6 with transposition to C7.

Alibi has been living 24/7 outside with social interaction and unlimited forage since November 2023.

The Zebra. As he is completely wild, he does not have a name yet. However, we will provide him an appropriate name to his character a few days before dissection once we get to observe him more in depth. His name will be announced during the introduction in the live-stream as well as the reason for euthanasia.