**FRACTURES**

Many fractures once deemed inoperable can now be surgically repaired successfully, but management approaches during the critical post-fracture window can have a major impact on outcomes.

**Fracture Locations and Prognoses**

Palmer reviewed the variety of fracture classifications and general prognoses for each. In all cases, he said, horses with closed fractures have better prognoses than do open ones (in which bone has penetrated skin), and simple fractures carry better prognoses than do comminuted fractures (having multiple fractures in the same bone). In most cases nondisplaced fractures pose better prognoses than do displaced ones. That said, prognoses are also dependent on fracture location.

**Evaluation**

A veterinarian should begin assessing a horse with a fracture by considering the animal's general condition and temperament. Next, he or she should determine the location and severity of the fracture and whether repair is possible. Specific questions to answer in the evaluation include:

* Is the horse able to bear weight on the injured limb?
* Is the fracture open or closed?
* Is the fracture unstable?

After completing the evaluation, the veterinarian should stabilize the fracture and discuss options with the owner. It's crucial to establish what resources (financial and otherwise) are available for the horse's treatment, and what the owner's expectations would be for the horse post-recovery.This is also the time to consider if the nature of the injury and the prognosis warrant euthanasia.

**Stabilization**

If the owner elects to transport the horse for treatment, stabilization becomes particularly important. In some cases veterinarians administer a sedative and tranquilizer to relieve a horse's pain and encourage relaxation during splinting and transportation. Veterinarians also typically administer a non-steroidal anti-inflammatory drug and, if open fractures are present, antimicrobial medication.

**Transportation**

Once a fractured limb has been appropriately splinted, load and transport the patient carefully for further treatment. It is recommended having assistants on hand to help stabilize the horse as he enters the trailer.

Adult horses should be placed in a partitioned or confined space in the trailer, restrained with chest or rump bars, and the head should be tied loosely to allow the horse use of the head and neck for balance. Note that a horse with a forelimb fracture should be transported facing the rear of the trailer so he can use his hind end to brace when the trailer slows or stops. Similarly, a horse with a hind-end injury should face forward so he can use his front end to balance.

Ship affected foals with their dams, noting that young affected horses often travel lying down.