

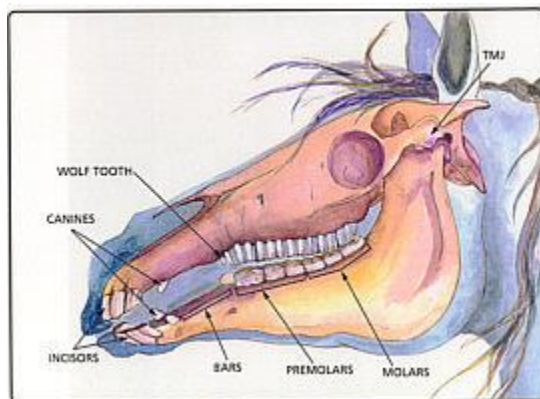
AGE RELATED DENTAL CARE NEEDS

The **newborn mouth** should be checked primarily for a normal occlusion of the mouth. With the baby's head vertical, run a finger along the front of the gums/teeth to check if they are meeting evenly. If not, if one of the jaws is off, that is an indication that as those teeth come in, that baby will develop either an underbite or an overbite that will worsen when hooks develop that act as "braces" to exacerbate the problem.

If the young horse's incisors have a tendency to not meet correctly, by the age of 3 months, he may need to wear a mechanical or acrylic corrective device, such as a bite plate, for awhile to encourage a more desirable alignment. If he is not aligning correctly, he will also be developing small hooks that will add to the developing deviation. If you can catch these babies' little problems early enough, it can save bigger developmental problems in the future.

We recommend that the first intraoral exam be performed at around 18 months of age. We usually find sharp enamel points and buccal (cheek) ulcerations at this time. We also find developing hooks on the 1st upper or lower deciduous cheek teeth that can have long term consequences on the developing skull structure.

The **two to five year olds**: This is a **VERY** important age to be checking the mouth on a 6 month basis. Between the ages of 2 and 5 years old, 24 permanent cheek teeth will erupt with up to 16 teeth erupting simultaneously. When a young horse loses a deciduous (baby) tooth, (often referred to as a cap) some very sharp points are left behind on the emerging adult premolar. This shedding process can cause much discomfort as those sharp points can take 6 months to smooth on their own. Those sharp enamel points often lacerate the cheek. Deciduous teeth also become problematic when they don't always shed on time. Retained caps can cause delayed eruption (impaction) or malpositioning of permanent teeth.



A very important consideration for a two year old is having his wolf teeth removed

before he ever goes into training and/or has a bit in his mouth. The wolf teeth are small vestigial teeth located just in front of the first upper cheek tooth, which is where a bit will normally be positioned in the mouth. They may have erupted through the mucosa or they may not. The unerupted wolf tooth is called a blind wolf tooth. The interference of these wolf teeth with the bit can create a very unpleasant sensation for the horse, as evidenced by the amount of biting problems that are alleviated by removing them. We often see blind wolf teeth on horses that have had previous dental work performed. The skill of the practitioner is important in locating these unnoticed, but very important unerupted teeth. Remember, your horse knows that they're there!

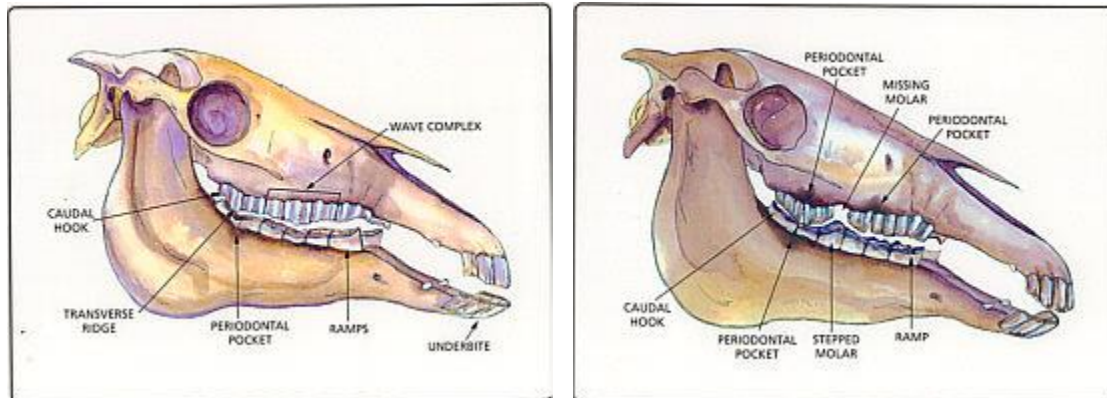
We often encounter horses with training problems that are the direct result of their effort to avoid mouth pain. These training problems usually stem from current uncomfortable conditions in the mouth. However, aversion to past dental discomfort can become a learned behavior that becomes today's training problem. Either way, that horse is trying the only way it knows how, to avoid a stimulus that has caused it pain and often the rider is interpreting that behavior as resistance. There are many people who have changed bits, changed trainers and/or changed methods of training in an effort to find the fix. The fix was very possibly in their horse's mouth all the time.

It is important to remember that every experience our horses have, particularly when they are young, is a training experience, be it positive or negative. Being taught that the rider/bit is something that hurts that young horse every time they are present, can have negative consequences we'd rather avoid.

Horse 5 - 16 (mid teens), annually, once an initial practitioner exam is done. What we look for in horses this age are hooks, points, wave mouth, accentuated transverse ridges and stepped molars. Freedom from these conditions, allows the jaws to move more freely against one another, which positively affects the horse's ability to round at the poll without creating stiffness or tension. Other conditions we encounter are gingival recession, periodontal disease, and dental decay. Keeping the mouth balanced and equilibrated will spread the forces of mastication evenly throughout the mouth ensuring the maximum life for all of the teeth.

Horses 16 through aged: Besides seeing and treating the same conditions as the 5 - 16 group, as we get into the 20s, we are now dealing with teeth that are wearing out. The significance of that is, from a treatment standpoint, we want to keep the teeth that are there, working, or grinding, the best possible. We see many older horses receiving excellent care but who are starting to have trouble maintaining condition. These horses often have dental problems that keep their premolars and molars from grinding properly, affecting their ability to process their feed effectively. There is little difference between a horse that is fed very well and can't utilize the feed, and a horse that is fed very little. The effect is the same, a malnourished horse. The result is either slow

starvation, or a horse that is expensive to feed to compensate for the amount of feed that is going through him with little nutritional benefit.



The dental problems that can become life threatening to an older horse, started years before when he was fat and sassy and his younger metabolism could compensate for some less than optimum dental/grinding/processing conditions.

In some mouths that haven't had regular dental care, malocclusions (dental arcades, or rows of teeth, that haven't met efficiently) over long periods of time, have created significant gum and periodontal problems by now. Inflamed gums, loose teeth from periodontitis, possible abscesses, broken and loose teeth, again from malocclusions, are all conditions that we find. Broken teeth are very painful for the horse. Loose teeth could be uncomfortable as they chew and also are the potential source of abscesses. When bad enough, they need to come out. Small animal and human dentistry have also documented that toxins released from infected (gum) tissue, do have a systemic effect on the heart and other organs, through bacterial release from infected gums and decaying teeth. These "bacterial showers" may initiate such conditions as endocarditis, kidney problems, etc

We personally have experienced dramatic changes in horse's demeanor and energy, when infections, either due to unknown severe periodontal disease or fractured and abscessed teeth, are diagnosed and treated. Systemic infections make horses sick! We might not notice the changes; the lack of energy as it happens, but improvement is definitely noticed when the infection is no longer in the body following treatment and resolution.