Diastema Treatment

My horse has a Diastema. What does this mean?

Horses chew using rows of molar (cheek) teeth which are tightly packed together like bricks in a wall to form complete ‘units’. If a space (diastema) develops between these teeth, food will be forced into this. The food material/fibres decays which causes significant inflammation of the gum surrounding the diastema.

Picture above - shows food packing between first and second molar on a lower jaw
In time, (several weeks, sometimes months) infection can track to the ligament which attaches the tooth to the socket (the periodontal ligament). This causes stretching and the ligament becomes weakened eventually leading to loosening of the tooth or infection of the tooth-roots. This may ultimately lead to the affected teeth needing to be extracted.

*Picture above*—post mortem picture of a jaw showing multiple diastemata with periodontal pocketing

**Is this something that really needs to be treated?**

Yes. Periodontal disease (always found in association with diastemata) is known to be one of the most painful conditions to occur in horses’ mouths. Many horses will have shown signs of oral pain before diagnosis; difficulty chewing long fibres such as hay/haylage, dropping rolled-up food from the mouth (quidding), pouching of food in the cheeks, problems with ridden exercise/head carriage and if the disease is advanced, weight loss. Some horses show no obvious symptoms. The decaying food also produces a foul smell so halitosis (bad breath) may be evident in some horses too. Many horses will manage short-fibre diets (especially grass) very well so these signs may not be apparent on horses out at grass or during summer turnout. We have also found that even if the horse has not shown these ‘obvious’ signs, once we perform necessary treatment, owners often report the horse to be brighter, have an increase in performance or be less fussy with feeds.

**Who can I get to treat this?**

Diastema widening is considered an act of veterinary surgery and should therefore only be performed by your vet. In some cases, the horse can be so painful that considerable sedation can be required. Your vet is legally the only person who can dispense this and any other associated medication.

All of the equine vets at Avondale Vet Group have undergone further training in advanced dentistry to fully equip them with the knowledge and expertise needed to treat this and other dental conditions.
What treatment can be performed?

Horses cannot floss their teeth and even if they could, they are chewing very fibrous food for an average of 18 hours every day – flossing would never work!

Food fibres will continue to pack into the diastemata unless the gap is fully flushed out (using high-pressure) and widened. The space between the teeth (interdental space) is widened using a diamond-encrusted specialist burr. This stops food from trapping in the narrow space. Horses with severe periodontal disease causing ‘pockets’ around the diastemata also benefit from being fully flushed out and packed with dental acrylic to allow healing to occur.

In addition to treating the diastemata present, your vet will also fully visualise the rest of the teeth and oral cavity and correct other abnormalities present. This may include reducing dental overgrowths, smoothing sharp points and reducing transverse enamel ridges (which force food further into a diastema).

What should I expect?

Whilst being the cause of the disease, the food material present actually guards and covers the inflamed gum underneath. By removing this food to widen the diastema, we end up exposing the inflamed gum. Horses react in different ways to this – some will be absolutely fine and others will show temporary discomfort for several weeks after treatment. It is important to remember, whilst your horse may be sore for a short period the benefit to your horses’ welfare, comfort and teeth viability long term is huge. Pain-relief is important here and your Vet will have given an i/v dose of this at the time of treatment.

Follow-up medication?

As patient comfort is so important, we always dispense oral anti-inflammatories (pain-killers) to be given in the days following treatment. We may begin using oral paste formulations which can be administered directly into the mouth, avoiding the need for feeds.
Cost?

An important concern, of course, for all owners. Diastemas are classed as a disease and most insurance companies cover this fully under the normal terms of your policy. The initial cost of the work is dependent on the number of diastemas required to be treated, level of sedation required for the horse. The average cost of treating 2 diastemas on the first occasion sedation, i/v painrelief, oral pain relief for 10 days is approx £250 inc vat. This is a specialised procedure requiring attention and skill, the diamond encrusted burrs are expensive and unfortunately have a limited life span, maintenance and servicing of the different teeth pieces is expensive. Follow up treatment and ongoing treatment is substantially cheaper as rewidening of previously opened diastemas is dramatically cheaper as there is less work involved. It should be remembered that teeth continue to grow and diastemas will hopefully grow out in due course after treatment so it is not an ongoing treatment for some horses.

What about feeding?

Whilst the gum heals, sloppy/dampened short-fibre feeds or pelleted rations are a lot easier for your horse to eat. Long fibres (hay/haylage) may continue to irritate and inflame the gum, not giving it a chance to heal. As a result, if you offer these feeds to your horse, it may quid long strands or show general difficulty in chewing initially. This is expected, but it is easier all-round to alter the diet slightly and aim to be introducing hay/haylage back into the diet from 7-10 days after treatment. Grass is an ideal foodstuff after treatment as it is soft with short-fibre length and is highly palatable.

Does my horse need checked again for this?

Every horse is different and individual requirements will be catered for. Generally after a first treatment, we like to re-assess the horse at 3 months. For more longer-standing cases of cases which are being monitored following previous treatment, 6- or 12-monthly checks may be all that is required.