European Society of Orthopaedics and Traumatology  
14th ESVOT Congress  
September 12th–14th, 2008, Munich, Germany  

Abstract Submission / Instructions for Authors

The organising Scientific Committee of the 2008 ESVOT CONGRESS invites authors to submit scientific abstracts for oral presentation at Congress. Papers relating to recent research into any aspect of veterinary orthopaedics and traumatology will be accepted in both small and large animal species. Papers from practitioners are particularly welcome. A maximum of two papers for each Author could be accepted. The short communication sessions will run concurrently with the main scientific programme on the 13th and 14th September. All papers must be written and presented in English. Fifteen (15) minutes will be allotted for presentation of each paper, including a short discussion time.

Abstracts should report recent clinical research; preliminary findings and single case reports will be considered. Reviews are not acceptable. Research abstracts must have ethical standards approval. Research must not have been published nor accepted for publication by the closing date of submission (1st May 2008).

The presenter of each accepted abstract must register to the Congress and he will get a 30% reduction on the Congress registration fee.

Abstracts will be accepted in digital form only and must be prepared according to the following instructions. Abstracts are to be submitted online! The deadline for submission is 1st May, 2008. Authors whose abstracts have been accepted will be notified by June 15th, 2008. Submit the abstracts to: info@orthovetsupersite.org

Two abstracts are required:  
a full single page abstract. Text length: 8,000 characters  
for evaluation by the Programme Committee and for the Proceedings book and a  
second short abstract. Text length: 2,600 characters  
for publication in V.C.O.T. Journal, fitting in the space shown in this form

The prescribed number of characters should include parameters of the template and spaces (from the task bar, click on "Tools", "Word Count", "Characters with spaces").

File format: Microsoft WORD (Version Microsoft MS WORD 95 or higher) or WORD for Macintosh.
File type: Word documents must have the file extension .doc – also important for Macintosh users!

Authors:
• Max. 7 authors. Mark the presenting author with an asterisk.
• Indicate affiliation to an institute with superscript numbering e.g., Smith T1, Patterson C2.
• Enter institutes in numerical sequence after the parameter <Institution>
e.g. 1 XXXXXX, 2 XXXXXX

Text:
• Use Arial font, 10 pt, and on no account any other font type or size. Do not change the typeface (bold, italic, underline) in the template. Important: by copying text into the template the format will have to be reset!
• At the end remove any double spacing using 'Search and Replace' under Edit in the menu bar.

Return:
Use Return only at the end of a paragraph, and not at the end of each sentence.

Hyphenation and blank lines:
On no account should a line be left blank or should hyphenation be used at the end of a line.

Special characters which cannot be presented in Arial font:
Indicate the character’s position by placing the hash symbol # before and after the special symbol (without any spaces before or after the number sign), e.g., #alpha#. The corresponding symbol will be inserted during typesetting.
Please do not submit any tables or figures in the short abstract.
UPWARD FIXATION OF THE PATELLA IN HORSES: PREVALENCE AND RESULTS OF CONSERVATIVE TREATMENT

M. Dumoulin, F. Pille, P. Desmet, A. Martens, F. Gasthuys
Dept of Surgery and Anaesthesiology of Domestic Animals, Faculty of Veterinary Medicine, Ghent University, Casinoplein 124, Gent, Belgium

Introduction
The purpose of the present study was to assess the incidence of upward fixation of the patella (UFP), to determine the type of patients affected with this condition and to evaluate the effectiveness of conservative treatment, with particular emphasis on the efficacy of corrective trimming and/or shoeing (CTS). The authors have used CTS in horses with UFP for years, but the use of this treatment lacked scientific evidence. In a recent study however Back et al. (2003) investigated the effect of a lateral heel wedge on stifle joint motion of trotting Shetland ponies. The present study evaluates the outcome of this measure in the long term.

Materials and methods
Medical records of horses diagnosed with UFP between 1991 and 2003 at the veterinary teaching hospital, Ghent University were analyzed retrospectively. Diagnosis of UFP was based on descriptions given by owners and clinical observation of the horses at the time of admission. Only records of patients with complete intermittent or permanent UFP treated conservatively were selected. CTS consisted of rotating the hoof capsule outward by trimming selectively the inside hoofwall or by applying a lateral heel wedge. Medial breakover was encouraged by rounding the toe medially or by applying a shoe rounded at the medial aspect of the toe. When indicated, additional treatment was installed to improve the horse’s condition. A reference population consisted of all orthopaedic patients admitted during the same period.

Results
Of 10227 orthopaedic patients admitted during the observation period, 556 (5.5%) were diagnosed with a stifle disorder. Seventy-eight of them suffered from complete intermittent or permanent UFP (13.8%). One third of the horses with UFP was admitted in November and December. Shetland and other ponies were significantly more represented than other breeds. Mean age at evaluation was 3.9 years (range between 7 months and 15 years) and there was no sex predisposition. CTS was performed in 71 horses which showed intermittent complete UFP on a regular basis. Follow-up evaluation was possible in 64 of them for a period ranging from 4 months up to 12 years. In 26 horses (40,6%), correcting the foot position was successful in eliminating all clinical signs and no UFP was seen as long as foot position was adjusted. Thirteen horses (20,3%) showed a partial improvement as a result of correcting foot position: locking of the patella still occurred but at a lower frequency and duration. Altogether, a positive effect of correcting hoof position was seen in all 39 horses (60,9%). On inquiry it appeared that in those cases, no other measures beside CTS had been taken. In none of the horses adverse effects related to CTS were observed, even if this measure had been applied for several years. In 7 horses (10,6%), improvement could not directly be linked to correcting foot position alone, because symptoms didn’t disappear immediately. In 6 of those 7 horses, improvement was attained only after improving the horse’s physical condition. In 18 cases (28,1%), conservative treatment was not successful.

Conclusion
UFP affects mainly young horses and ponies during winter months. CTS is an easy and harmless measure that is worth trying before more radical procedures to correct UFP are performed.

References
UPWARD FIXATION OF THE PATELLA IN HORSES: PREVALENCE AND RESULTS OF CONSERVATIVE TREATMENT
M. Dumoulin, F. Pille, P. Desmet, A. Martens, F. Gasthuys
Fakulteit Diergeneeskunde, Universiteit Gent, Casinoplein 124, 9000 Gent, Belgium

Introduction: The purpose of the present study was to evaluate the results of conservative treatment in correcting upward fixation of the patella (UFP) in horses, and in particular the efficacy of corrective trimming and/or shoeing (CTS).

Materials and methods: Medical records of horses conservatively treated between 1991 and 2003 for complete intermittent or permanent UFP at the veterinary teaching hospital, Ghent University were analyzed retrospectively. CTS consisted of rotating the hoof capsule outward by trimming selectively the inside hoofwall or by applying a lateral heel wedge. Medial breakover was encouraged by rounding the toe medially or by applying a shoe rounded at the medial aspect of the toe. When indicated supportive treatment was installed to improve the horse’s condition. A reference population consisted of all orthopaedic patients admitted during the same period.

Results: Of 10227 orthopaedic patients admitted during that period, 556 (5.5%) were diagnosed with a stifle disorder. Seventy-eight of them (13.8%) suffered from complete intermittent or permanent UFP, of which 71 were treated conservatively. One third of the horses with UFP was admitted in November and December; mean age at evaluation was 3.9 years. Shetland and other ponies were particularly affected. Follow-up evaluation was possible in 64 out of 71 conservatively treated patients. The follow-up period ranged from 4 months to 12 years. In 26 of those 64 horses (40.6%), CTS was successful in eliminating all clinical signs of UFP as long as foot position was adjusted. Thirteen horses (20.3%) showed a partial improvement after CTS, meaning that locking of the patella still occurred but at a lower frequency and duration. In all these 39 cases, no other specific measures were taken to correct UFP. No adverse effects were observed, even if CTS had been applied during several years. In 7 (10.6%) horses, improvement could not directly be related to CTS alone because symptoms didn’t disappear immediately. In 6 of them, improvement was attained only after raising the horse’s condition. In 18 (28.1%) cases, conservative treatment was not successful.

Conclusion: UFP affects mainly young horses and ponies during winter months. CTS is an easy and harmless measure that is worth trying before more radical procedures to correct UFP are performed.