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Meta-analysis of Clinical Factors Affecting Synovial Infections and Prognosis

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Update on Managing Serious Wound Infections in Horses

1. Meta-analysis of Clinical Factors Affecting Synovial Infections and Prognosis

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This update on managing serious wound infections in horses comprises a series of 4 articles:

1. Wounds involving joints and other synovial structures (part A).
2. Wounds involving joints and other synovial structures (part B).
3. Wounds involving bone.
4. Wounds involving soft tissues.

Wound infections that involve a joint, tendon sheath, or bursa can have disastrous consequences for the horse's athletic career. Some infections cause such severe damage that euthanasia is warranted on humane grounds, so immediate, intensive, and targeted treatment is indicated for penetrating injuries to a synovial structure. There are many good articles on the treatment of synovial infections in horses, and the common threads are these:

- early and intensive treatment, guided by clinical signs and synovial fluid analysis
- large-volume lavage of the synovial space, repeated as needed
- local/regional and systemic antibiotic therapy, culture-guided whenever possible

However, despite our best efforts, treatment is sometimes unsuccessful. It has been said that to understand a problem is to know what to do about it. In that spirit, this series explores the following question: *Why do some infections persist and progress despite seemingly appropriate treatment?*

Most serious wound infections involve at least one, and usually a combination, of these factors:¹

- extensive contamination, or bacterial burden that overwhelms the patient's resources
- refugia which protect the bacteria from host defenses and antibiotic drugs
- immunocompromise
- poor perfusion
- antibiotic insensitivity of the wound pathogen(s)

To have the best chance of success, the diagnostic and therapeutic plan must identify and address each of the factors involved in the case. Identifying the factors involved in the persistence/progression of the infection allows us to formulate a targeted treatment approach that optimizes the patient's defensive and reparative processes and the efficacy of the antibiotic drugs selected.

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