



## The Cowichan Therapeutic Riding Association

1843 Tzouhalem Road  
Duncan BC, V9L 5L6  
250-746-1028 (phone) 250-746-1033 (fax)  
[www.ctra.ca](http://www.ctra.ca) (website) [info@ctra.ca](mailto:info@ctra.ca) (email)

### **Contraindications and Precautions to Therapeutic Riding (Please Review and Forward to Physician)**

If an individual has any of the following medical conditions, riding is very unlikely to be a beneficial activity for him/her, and is even likely to be harmful. Before an individual is accepted into the Cowichan Therapeutic Riding Association program, both physician and medical committee (CTRA) should be consulted concerning the suitability of therapeutic riding for that person. CTRA may require further medical documentation from any individual at any time in order for that person to continue to participate in mounted therapies. CTRA reserves the right to deny riding opportunities in the best interest of safety.

#### **Contraindications**

- Moderate to severe **agitation** (confusion, excitement) and/or very disruptive behaviour.
- **Seizures** which are not controlled by medication
- **Spinal instability**, including subluxation (partial dislocation) of cervical (neck) vertebrae.
- **Severe osteoporosis**, which is most common in senior citizens, involves brittleness of the bones – hence increasing the possibility of fractures.
- Pathological fractures arising from a condition, such as osteogenesis imperfecta (**brittle bones**).
- Acute stages of **arthritis**.
- Periods of exacerbation of **multiple sclerosis**.
- **Open pressure sores or wounds**.
- The individual is taking **medication** in a type/dosage that induces a physical state that makes riding risky or inappropriate.
- **Hemophilia**, a congenital condition of the blood characterized by hemorrhages (bleeding).
- The individual is taking **anticoagulant medications** (blood thinners).
- **Atlanto-axial instability** (found in individuals with Down Syndrome) – Individuals with Down Syndrome require a Atlanto-axial x-ray prior to participation.
- **Spondylothesis** (subluxation of the lower lumbar vertebra on the sacrum).
- **Coxarthrosis** (degeneration of the hip joint) – riding is too stressful on this joint.
- **Detached retina** (condition of the eye).
- **Acute herniated intervertebral disk**, which may press on spinal nerve roots.
- **Complete quadriplegia**, occurring as a result of a spinal injury.
- **Structural scoliosis greater than 30 degrees, excessive kyphosis** (rearward increase of the curvature of the thoracic spine), **lordosis** (increased forward curvature in the lumbar spine), or **hemivertebra** (a congenital defect in which one side of a vertebra is incomplete).
- **Dislocation, subluxation, or dysplasia** (abnormal development) of the hip(s) with significant restriction or asymmetry.
- Any condition that therapist, physician, or program instructor, medical committee, or manager do not feel comfortable treating through ridden therapy.
- Riders should wait for at least 6 months after a **rhizotomy** (a neurosurgical procedure) before participating in any riding program.