Happiness is horses

BY CARMEN PEOYA

Each morning Mary Vomacka, MD, pulls on a snowmobile suit or bib overalls and heads out to the barn.

“Good morning,” she calls to the four horses inside, continuing to talk as she scoops grain into buckets. “They’re always happy to see me because they know I represent food and attention,” she explains. They have “a little chitchat” while the horses munch their breakfast and then it’s out to the paddock for the horses and off to work for Vomacka, a psychiatrist for Carris Health in Willmar.

Vomacka loves this daily ritual, which is mirrored each evening, with the added task of stall cleaning. In fact, she loves any time she spends with horses. She has been smitten with them for as long as she can remember.

As a child in Montevideo, Minnesota, she pestered her father until he bought her a Shetland pony at age 7. Then she pestered her peers. “I think every time I’d raise my hand in show-and-tell, kids would just roll their eyes because they knew I’d be talking about a horse again,” she says. Today, she pesters whomever is in earshot at the clinic. “Are you not so thankful to know all these facts about horses?” she recently asked her nurse, she admits, laughing.

Vomacka’s love for horses didn’t wane when she left for Concordia College in Moorhead to major in music and pre-medical school and residency at the University of Minnesota. In fact, it was a factor when it came time to deciding where to practice. “That was part of my goal in coming out here,” she says of her decision in the 1990s to settle on an acreage in the Willmar area. “I knew I needed to get back to horses.”

Therapy partners

Vomacka was beginning to be aware that if she was going to be good for anyone, she needed to do things she loved. In her patients, she saw what happened when people didn’t tend to their own needs. “If you don’t learn to undo life stressors, you are going to pay either physically or emotionally,” she says. “If I didn’t find some outside things, I was going to be in trouble.”

At first the horses were only a personal passion. She loved to groom them. She rode as much as schedule, weather and mosquitos allowed. But soon she started thinking about using horses to help others. She became certified in equine-assisted therapy, an approach in which a horse handler and psychotherapist work together using a horse to help someone deal with a mental health challenge. She developed a seminar using the approach and for two years took groups to a ranch in Montana.

Vomacka points out that horses add to the therapeutic process because they bring issues to light. “They’re social, large and incredibly honest, and have a good way of reading humans as well as mirroring what they see,” she says.
Her own horses pick up on signals she's sending. “If I’m in a good mood, happy, upbeat, they’re far more responsive,” she says, adding that her 9-year-old Arabian is especially attuned to people. “He’s not going to come for getting his neck scratched if I’m not in a place where he wants to deal with me.”

Worth the work
Vomacka herself may have a bit of that kind of horse sense when it comes to her patients. Her reputation for being sensitive and empathetic is what led internist Janae Bell, MD, to begin referring her patients to Vomacka. “I could tell from feedback from patients who'd met her that she was a very involved, empathetic physician who listened to her patients very closely and cared very deeply,” she says.

Vomacka does both talk therapy and medication management, believing most people with mental health problems need both. “It’s labor-intensive. It isn’t well-reimbursed,” Bell says. “But that’s the way she feels it needs to be done.”

It’s work that can take a toll. With the youngest of her three daughters about to leave for college, Vomacka is beginning to think about the future. She’d like to expand her skills and develop a program in equine-assisted psychotherapy. “I want to be working with horses and utilizing my psychiatry because I know I’m healthier when I am working at something that I value,” she says.

For now, she’s happy to spend mornings and evenings in the barn. The fresh air and physical work clear her mind, and she simply likes tending to the Morgan and three Arabians who’ve become part of her life. “That’s part of what really brings me joy,” she says. “I love just taking care of them. It keeps me very balanced.”

Bell says that for Vomacka, being with horses “feeds her soul” and the doing of daily chores “is a meditation in and of itself.”

Vomacka explains herself in simpler terms. “It’s so worth it,” she says of the work involved in caring for horses. “They truly make me happy.”

Carmen Peota is a Twin Cities freelance writer
Hiroki, of Cottage Grove, is 8 years old. Cognitively, he has progressed to approximately age 2. He enjoys spending time with his family, playing with his brother, and walking to the mailbox each day.

At the time of his diagnosis at 1 years old, Hiroki was 1 of 600 in the world known to have Phelan-McDermid Syndrome (PMS), a rare genetic condition commonly characterized by intellectual disability of varying degrees, delayed or absent speech, low muscle tone and motor delays.

Around age 3, Hiroki was diagnosed with epilepsy and autism spectrum disorder (ASD), which are both common characteristics of PMS. He also has a number of other conditions such as asthma, dysphagia, autoimmune dysfunction, and hip dysplasia.

Misa and Dan, Hiroki’s parents, characterize their lives as “Before” and “After” medical cannabis because of the stability this medicine has brought to the family. Before, most of their family’s days were stressful, repetitive and rushed. On every outing, Hiroki would get upset at seemingly small things, and cry if they took a left rather than a right. He was constantly stressed and anxious, and he would have a hard time sleeping at night.

Every 2 weeks to 2 months, Hiroki would experience grand mal seizures so critical that he would often stop breathing. His last seizure was so severe that it left him unconscious for more than 30 hours. At one point in time, Hiroki was being seen by 22 specialists and taking up to 8 different medications per day. His parents were determined to find a more holistic tool for them to help treat symptoms of his diagnoses.

Misa and Dan feel like he is making cognitive gains each day and they have been able to potty train him to some degree, which is rare for children with his condition. He can now scoot down the stairs on his own. He can also drink from his sippy cup, a new freedom for Hiroki that wasn’t possible until now.

Visits to the pharmacy and the number of prescriptions he takes have drastically declined. He now actively sees only three specialists and is taking 2 medications.

His mother believes Hiroki’s, as well as the entire family’s, quality of life has gone from a 1 to a 10 since he began medical cannabis. “There is nothing that has changed our lives more significantly than the availability of medical [cannabis],” she shared.

Since starting medical cannabis 3 years ago he has not had a single grand mal seizure. Although he still becomes anxious with changes to his routine, his cognitive speed and functioning have increased and his ability to cope with daily changes has improved significantly.

He is more aware and present, and he’s beginning to show more interest in interacting with family and peers. He can spend time comfortably at home and walk on the treadmill. “Team Hiroki” has been able to teach him how to use his iPad to communicate simple sentences. His parents are grateful for the simplest of “typical” family routines like eating a meal together at home, playing family games and dancing together in the living room.

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