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RANDWICK EQUINE CENTRE

Veterinarians • Equine Medicine & Surgery

Veterinary Surgeons

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18th May 2018

VETERINARY REPORT FOR 'EXCLUSIVE'

Two-Year-Old Grey Thoroughbred Colt

P & P Snowden

Dr Gary Baitz - thank you for referring this case.

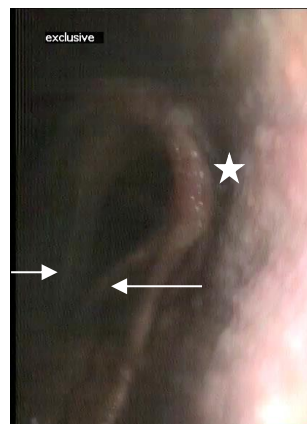
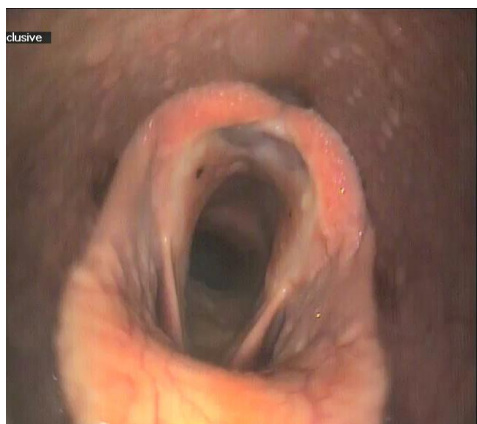
Signalment:

Trainer:

Veterinarian:

On the 18th May 2018, 'Exclusive' underwent a dynamic respiratory endoscopic examination at Randwick Racetrack to assess his upper airway during exercise. The colt was reported to have made an abnormal respiratory noise during exercise, which was thought to have affected performances. A slight improvement in noise was reported when wearing a tongue-tie.

Resting endoscopic examination revealed that there was mild asymmetry between the arytenoid cartilages with the left arytenoid cartilage able to achieve 80% full abduction after swallowing (grade 4/5 left laryngeal function). He was then exercised on the track over 1000 metres in a time of 11 seconds for the final furlong. An abnormally loud inspiratory noise was reported whilst pulling up. A review of the exercising endoscopic examination, including a frame by frame video analysis, reveals there mild collapse of the left side of the larynx (arytenoid cartilage) when the colt was under strenuous exercise, whereby the left cartilage is maintained at ~75% of full opening. This degree of abduction/positioning is similar to that seen following 'tie-back' surgery. In addition, there is full collapse of the left and right vocal folds. These findings are consistent with mild or early progressive left-side recurrent laryngeal neuropathy (also known as 'roarer'). The examination reveals under strenuous exercise 'Exclusive' has mild to moderate airway obstruction, resulting in approximately 25% reduction in the size of the laryngeal airway during exercise. This is likely to be associated with noise during exercise and exercise intolerance at distances greater than 5 furlongs.



Videoendoscopic images of the larynx at rest (left) and at the end of gallop exercise (right). Note the partial collapse of the left arytenoid (star) into the airway and the bilateral vocal fold collapse (white arrows).

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PLEASE ENSURE THAT THIS REPORT IS FORWARDED TO THE HORSE'S OWNER AND THE PERSON RESPONSIBLE FOR THE FUTURE CARE OF THE HORSE, AS WELL AS TO THE INSURER, IF APPLICABLE

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Recommendations for 'Exclusive' are:

- Standing laser resection of the left and right vocal folds under sedation. This procedure will partially improve the laryngeal airway size. The cost of this procedure is ~\$2000 and will require 4-6 weeks rest. As the current degree of left side function, position under strenuous exercise, is equal to that achieved following 'tie-back' surgery it is unlikely that a more invasive tie-back surgical procedure will be beneficial at this time.
- It will be advantageous to limit the colt to 5-6 furlong race distances.
- If there is persistent noise on return to training and progression of the current mild left sided collapse, surgical correction of the collapsing left side of the larynx (prosthetic laryngoplasty/tie-back) would be recommended. The cost of this procedure is approximately \$4,000. The typical period of hospitalisation after the tieback is 4 days; and 6 weeks convalescence will be required prior to the horse resuming training.

Thank you for the opportunity to examine 'Exclusive'. Please contact the clinic should you have any questions regarding this report.



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