ADVANTAGE EQUINE PTY. LTD.

Office: P.O. Box 52, Ascot Vale, Vic. 3032 ACN: 610 242 861 Phone: (03) 9376 3942 email: admin@advantageequine.com.au



ADVANTAGE EQUINE VETERINARY PRACTICE

Dr. Maxine Brain, BVSc(hons) MACVSc (Equine Medicine)
Dr. Stuart Vallance, BVSc(hons) Dip.ACVS (Specialist Equine Surgeon)
Dr. Emma Wood, BSc BVMS
Consultant: Dr. Richard Selth BVSc MRCVS

7th March 2017

Trainer: Ellerton Zahra Racing Horse: Foxling

Foxling, a 3-year old Thoroughbred filly underwent overground endoscopy at the gallop at Flemington racecourse on the 7th March 2017. The filly has previously suffered from an epiglottic entrapment that responded to rest and medical management. However, the filly continues to have poor performance associated with a noise. The filly has no abnormality noted on endoscopic examination at rest (grade 1 laryngeal function).

The filly galloped on the synthethic track (4 furlongs, home 3) in an unaccompanied gallop. Overground endoscopy revealed:

- Grade A laryngeal function (full laryngeal abduction is achieved and maintained)
- Intermittent dynamic entrapment of the epiglottis that is blocking approximately 50% of the airway diameter
- Mild palatal instability is associated with the epiglottic entrapment.

I would recommend that we correct the epiglottic entrapment with surgery and cauterize the palate in an attempt to alleviate any palatal instability. This procedure is performed under general anaesthesia via the mouth and will cost \$1320. I would recommend a 6-week lay-up from training after performing this procedure (2 weeks box, 1 month paddock).

Please feel free to contact me if you have any questions or concerns.

Sincerely,

Stuart Vallance BVSc (hons) Dip. ACVS

Registered Specialist in Equine Surgery (VPB 5894)

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Larynx at rest. The horse has a smaller than normal shaped epiglottis which may be responsible for the epiglottic entrapment.



Epiglottic entrapment billowing into the airway on expiration obstructing the normal airway and view of the epiglottis