

## **Will Call**

### Stewards Summary

Review of race:

Will Call finished well back, returned to be unsaddled and, while walking off began to show signs of distress. While he was being treated for possible heat exhaustion, he collapsed on the racetrack.

Trainer:

Brad Cox stated that the horse had been always been scoped post-work and post-race as is standard with his horses and had no issues. The horse had undergone colic surgery as a 3 year-old. He noted that the horse had not run as well after coming back from a layoff after his Breeders' Cup race in November 2018 and had no soundness issues.

Jockey:

Tyler Gaffalione stated that he had never been on the horse. He said that the horse warmed up fine and he had no concern about him in the post parade. He thought the horse was ready to make a move around the 5/16 pole, but the horse didn't respond and began to drop back in the race. He stated that it was a very hot day and that the horse appeared to begin to overheat as he returned to be unsaddled. After he dismounted, the groom emptied a bucket of water on the horse who reacted by becoming unsteady on his feet and began to show signs of distress.

### Veterinary Summary

- This 5-year-old horse, trained by Brad Cox and owned by Klein Racing and Madaket Stables, collapsed and died following unsaddling after the running of the 9<sup>th</sup> race at Churchill Downs on June 29, 2019, a \$104,000 Allowance at 5 ½ furlongs on a firm turf course.
- Prior to its collapse the horse demonstrated signs of distress and was attended by KHRC veterinarians who administered a sedative and attempted to facilitate cooling the horse. Despite these efforts the horse died.
- Blood was collected by KHRC veterinarians for submission to Industrial Laboratories for analysis.
- The body was transported to the University of Kentucky Veterinary Diagnostic Laboratory and submitted for necropsy.

Findings:

- Review of pre-race exam findings and exam history

This horse's fatal condition was unrelated to musculoskeletal injury. Review of pre-race exam findings and exam history is not informative in this case.

- Review of treatment records

This horse was treated with furosemide (Lasix) on breeze days as prophylaxis for Exercise Induced Pulmonary Hemorrhage (EIPH). He underwent an endoscopic exam following each breeze. It is reasonable to accept that the results of those exams were normal as no medications were administered or airway therapies recorded on the days following the exams.

The horse did undergo an endoscopic exam following his race on June 1 at Churchill Downs and was prescribed the bronchodilator Ventipulmin (Clenbuterol). The withdrawal interval for Clenbuterol is 14 days, and given that the horse next raced 28 days later on June 29, the total duration of treatment could not have exceeded 14 days. No antibiotics were prescribed following the June 1 race, therefore it is more likely that the results of the endoscopic examination revealed increased mucus in the airways rather than hemorrhage. Because blood is a favorable medium for bacterial growth, most veterinarians will prescribe a course of antibiotics when blood is observed in the airway on endoscopic exam. Other medications in the treatment record were supportive of musculoskeletal health.

- Analysis of risk factors and other criteria (Case horse compared to unaffected cohorts in the same race)

Risk factors identified by Parkin and others are related to musculoskeletal injury which was not related to this horse's cause of death. (See Necropsy Report summary below).

- Review of necropsy report and drug testing results
  - Drug testing: No prohibited substances detected. No therapeutic medications detected above regulatory threshold concentrations.  
Note: Only blood was submitted for analysis. Urine collection typically does not occur for horses-post-mortem. The diagnostic laboratory is instructed to collect urine if it is present in the horse's bladder, but it rarely is. So while a blood-only sample is subjected to the broadest scope of analysis possible, that scope is reduced compared to what can be applied to a paired (blood and urine) sample.
  - Necropsy report: Extensive and diffuse hemorrhage in subcutaneous tissues of the head and throat, and intramuscular hemorrhage and edema throughout the body. Pulmonary hemorrhage was observed in the lungs.
  - Toxicology report: Negative for anticoagulants (including rodenticides); normal ranges for heavy metals in liver tissue.
  - Pathologist's comment: *A cause for the pronounced subcutaneous hemorrhage and edema in this case could not be determined and it is not clear if this is a primary or secondary disease process or if it was in fact responsible for the death of the horse. While this horse did collapse, the level of hemorrhage and edema far exceeds that which could be produced simply by the trauma of falling in normal circumstances.*