Sir Navigator

Stewards Summary

Review of the race:

Sir Navigator raced evenly early and made a late gain in the stretch to finish fourth, beaten 4 lengths. He began to show signs of distress while walking off from being unsaddled and required the assistance of the KHRC veterinarians. While he was being treated for possible heat exhaustion, he collapsed on the racetrack.

Trainer:

Robertino Diodoro claimed Sir Navigator for $40,000 on May 18th, stated he was very pleased with him and thought the horse had run very well for him. He was looking forward to running him in a stakes race at Kentucky Downs and expected a big effort from the horse in the prep race at Ellis Park on August 4th.

- Jockey:

David Cohen had ridden the horse in 2 races since being claimed by Mr. Diodoro and was pleased with the way the horse had run in the previous races and on this day. He stated that the horse was making up ground in the race, but the leaders were not coming back to him. Cohen was very pleased with the effort and also looking forward to riding him in the stakes at Kentucky Downs. Cohen had unsaddled and was walking to the scales when he heard the commotion and turned to see that the horse had gone down.

Veterinary Summary

- This 7-year-old gelding, trained by Robertino Diodoro and owned by Robertino Diodoro and Randy Marriot, collapsed and died following unsaddling after the running of the 8th race at Ellis Park on August 4th, 2019, a $100,000 Stakes race at 5 ½ furlongs on a firm turf course.
- Prior to its collapse the horse demonstrated signs of heat distress and was attended to by KHRC veterinarians who administered a sedative, a corticosteroid, and attempted to facilitate cooling the horse. Despite these efforts the horse died.
- Blood was collected by the KHRC veterinarians for submission to Industrial Laboratories for analysis.
- The body was transported to Murray State University Breathitt Veterinary Center and submitted for necropsy.

Findings:

- Review of the pre-race exam findings and exam history

  This horse’s fatality was unrelated to musculoskeletal injury. Review of pre-race exam findings and exam history was not informative in this case.

- Review of treatment records

  This horse underwent an endoscopic exam following its race on May 18th. It is reasonable to assume the results of this exam were normal as no medications were administered or airway
therapies recorded on the days following this exam. A vitamin administration and a prophylactic joint therapy drug were administered. An NSAID was administered prior to race day within the parameters of the KHRC rules. This horse received Lasix on race day administered by a KHRC veterinarian.

- 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, the scope is more limited than that which can be applied to a paired blood and urine sample.

  Necropsy report: There was marked hemorrhage along the back between the muscles and the vertebrae starting just behind the shoulder and extending to mid thorax. There was marked hemorrhage involving the soft tissues in the thoracic inlet and extending ventrally around the heart.

  Pathologist’s comment: **Though it could not be located, there was a vascular rupture affecting vessels in the cranial thorax and likely involving the costocervical artery.**

  Sections of the heart were normal. Lung sections were congested with mild edema in the alveoli. Sections of the cerebrum, cerebellum and brain stem were normal.

  Pathologist’s comment: **There is no evidence of an underlying inflammatory issue. A cause for an aneurysm was not noted in the tissues examined.**