Lower Respiratory Disease in Athletic Horses

Ray J. Geor, BVSc, PhD Diplomate ACVIM R & J Veterinary Consultants Inc Guelph, Ontario, Canada

Outline

 Anatomy and function of the respiratory tract Inflammatory airway disease (IAD) importance causes management Exercise-induced pulmonary hemorrhage epidemiology effect of nasal strips

Anatomy

 Upper airway
 nostrils, nasal passages, throat, trachea
 Lower airway
 bronchi
 bronchioles
 alveoli (air sacs)



Anatomy: Bronchi/Bronchioles





Branching bronchi

Muscle layer

Anatomy: Alveoli



- Small bronchioles terminate in alveoli (air sacs)
- Rich capillary network around each air sac
- Huge surface for gas exchange

Exercise Metabolism



Lung Function: Exercise

- Meet increased demand for oxygen by
 6-7 fold increase in respiratory rate
 2.2 fold increase in
 - 2-3 fold increase in volume of air per breath
- Impairment to gas exchange will decrease performance

Lower Respiratory Disease

- Important cause of "wastage" and poor exercise performance
- Australian study
 - 20% of 2 yr old racehorses had training interrupted by cough or nasal discharge
 - Bailey 1998

Lower Airway Disease

Common Clinical Signs nasal discharge o coughing o no fever decline in exercise performance racehorses - finish races poorly

Lower Airway Disease

Causes: "The Virus"

 Age-old explanation for this clinical syndrome

• Does it exist?

Recent studies in Australia and the UK indicate that viral infections are an uncommon cause of respiratory disease (racehorse studies)

Lower Airway Disease

 Increasing evidence for role of environmental factors inhaled dusts from feed and stable bedding pollutants e.g. ammonia other allergens Direct irritation of the lower airways or triggering of allergic inflammatory response New term: Inflammatory Airway Disease

Respiratory Irritants

 Dust generated from mouldy hay and straw contains large numbers of potential allergens
 fungal and actinomycete spores
 spores deposit in small airways

 Moisture content at the time of baling is critical



Hay samples showing evidence of heavy mould contamination.

INHALATION OF ALLERGENS





NORMAL AIRWAY

Bronchospasm Airway obstruction

INFLAMMED AIRWAY



Clinical Exercise Testing 15 horses (Tb, Stb) with IAD recent decline in race performance excess mucus in trachea post-exercise abnormal bronchoalveolar lavage cytology • 10 control horses no history of poor performance normal respiratory examination

Arterial Oxygen Tension



IAD - Diagnosis

History

 Poor performance may be only presenting complaint
 Endoscopy
 post-exercise
 mucopus in the trachea



IAD - Management

• Main aims relieve airway obstruction control inflammation Combined approach environmental control drug treatments anti-inflammatory agents bronchodilator drugs

Environmental Control

 The MOST effective method for alleviation of clinical signs of inflammatory airway disease

 Keep horses outdoors as much as possible

 Hygiene of diet and bedding

Environmental Control

 Removal of *dry* hay from the diet regardless of visual quality of the hay Soak hay prior to feeding Alternative forages or feeds hay cubes (wet), haylage, complete feeds Bedding material other than straw shredded paper, wood shavings, peat moss, rubber mats

Drug Treatments

 Bronchodilators Short term relief from airway obstruction due to bronchospasm pre-exercise administration Anti-inflammatory agents inhaled corticosteroids Aerosol drugs therapeutic effect without side effects

Exercise-Induced Pulmonary Haemorrhage (EIPH)

• EIPH - "bleeders" Common occurrence in athletic horses endoscopic surveys: >80% of racehorses have blood in trachea postrace Possible with other strenuous exercise e.g. eventers



EIPH - Severity

Bleeders from the nose is quite rare
 369 of 250,000 race starts = 0.15% (Japan study: 1992-1997)
 more likely in older horses, after short races

 Minor bleeding (e.g. visible in trachea) is most common



What causes **EIPH**?



• Very high pressures across lung tissue-blood vessel interface causes physical tearing Caudodorsal area of lung Lung scarring with repeated episodes increased severity of bleeds over time

Does EIPH Affect Performance?

- True effect on performance is unknown
- Severe bleeding could impair gas exchange and decrease exercise capacity
- Blood in the airways causes inflammation
 - contribute to development of IAD?

Is EIPH Preventable?

 EIPH is a physiologic phenomenon related to the intensity of exertion

- North America
 - furosemide, a potent diuretic, is administered pre-race
 - enhances performance independent of effect on EIPH?

New Approach to EIPH





Equine Nasal Strips



 Designed to support airways that may "collapse" during exercise

- Iower resistance to airflow
- decrease the work of breathing

Research Study

To determine the effects of the FLAIR™ equine nasal strip and furosemide, alone and in combination, on EIPH in Thoroughbred horses



Experimental design

8 Thoroughbred horses in race training
Treatments
Control
FLAIR™ nasal strip
Furosemide (0.5 mg/kg IV, 4 hr pre-exercise)
Furosemide and FLAIR™ nasal strip

Experimental protocol

Exercise test

Treadmill at 3° incline
5-min warm-up at ~50% VO_{2max}
2-min sprint at speed equivalent to ~115% VO_{2max} (14.2 ± 0.2 m/s)



Bronchoalveolar Lavage

 30 min post-exercise
 endoscopic examination of trachea
 bronchoalveolar lavage (BAL)
 Counted number of red blood cells in BAL fluid



Red Cell Numbers in BAL Fluid



* P<0.05 vs. Con ** P<0.05 vs. FLAIR •Shows a significant difference between the Control and Flair

 No significant difference between FLAIR and Furosemide (Lasix) or combination of both.



- Non-infectious lower airway disease is common in athletic horses
- Inhalation of organic dusts and other irritants contributes to development of airway inflammation
- Obstruction of small airways can result in poor exercise performance



 Repeated episodes of EIPH can worsen airway inflammation role of nasal strips in long term management Regardless of cause, treatment of horses with chronic airway problems involves environmental control In the drug the rapy to alleviate airway obstruction and inflammation