

The Importance of the Radiographic Repository at the Del Mar Yearling Sale

The Del Mar Yearling Sale

In its ongoing efforts to assist breeders/consignors who are planning to sell their stock at the 2002 Del Mar Yearling Sale, the CTBA Sales Committee has decided to provide a set of guidelines for the event.

Here is the fifth in a series of articles featured in California Thoroughbred in the months leading up to the sale.

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The concept of pre-sale radiographs, taken of yearlings and 2-year-olds in training, has become a common practice at major sales of young Thoroughbreds over the past several years. For the 2002 Del Mar Yearling Sale, a full set of radiographs must be placed in the repository.

These radiographs are placed in a central location at the sale referred to as a repository. Prospective buyers can employ a veterinarian to review the radiographs of horses they are considering. The veterinarian is looking for signs of bone or joint abnormalities, which may have an adverse affect on the young horse's ability to withstand training and racing.

Prior to the advent of a repository containing radiographs taken before the sale, buyers would frequently employ a veterinarian to examine prospective purchases and often this

examination included taking radiographs. If several buyers were interested in the same horse, the horse may have had more than one set of radiographs taken.

Sale catalogues, particularly for select sales, now contain very precise language regarding the conditions of sale. In some sales there are specific abnormalities that, if present, must be announced at the time of sale. Alternatively, certain announcements can be made by placing a veterinary certificate in the repository. If they are not announced and the abnormality is identified immediately following the sale the horse may be returnable to the seller. With the introduction of pre-sale radiographs in the repository, the prospective buyer has the opportunity to have their veterinarian review the radiographs before bidding on the horse. At some sales, the language is such that if pre-sale radiographs are in the repository and an abnormality is identifiable on those radiographs, the conditions of sale regarding returning the horse are more stringent. The requirements for announcing such an abnormality may also change. Buyers are warned that conditions of sale relating to the repository may vary with each sale and therefore they need to refer to the conditions of sale as listed in the catalogue.

The basic premise of an auction sale still prevails—all horses are sold 'as is' except as set forth in the condi-

tions of sale in the catalogue. Nowadays, however, many additional conditions of sale have been included in the catalogue, so the basic premise has been tempered. Although some still oppose the idea of a repository of pre-sale radiographs, the repository is now a fact of life at many of the major sales, a situation that is unlikely to change in the foreseeable future. The placing of radiographs in the repository, though, is sometimes voluntary and not a requirement of sale. However, most buyers have now accepted that there will be pre-sale radiographs in the repository and, thus, will not consider horses that don't have them.

A prerequisite is to have a complete set of good quality radiographs. This reduces the chance of an abnormality being missed because of positioning, or radiographic quality. An inadequate radiographic study may show what appears to be an abnormality but which, in fact, is an artifact caused by incorrect positioning or poor quality. In another instance, a significant abnormality may not be evident in the radiograph if the positioning is incorrect or the radiographic quality is poor. Consignors need to check with the sale company to ensure that the veterinarian taking the pre-sale radiographs has a list of the recommended views for that particular sale, since there is often some variation in this respect.

Once a good set of radiographs is in

the repository the next issue is the correct interpretation of the radiographic findings. The interpretation of the findings will vary to some extent between veterinarians, not only as to what constitutes an abnormality but more often the clinical significance of the finding as it relates to future racing performance of the horse. It must be remembered that radiographic interpretation, as it relates to the significance of the findings, is subjective. It is certainly not an exact science. Attempting to predict what radiographic abnormalities will adversely affect the horse in the future is extremely difficult. The veterinarian is relying on his/her own knowledge and experience when relating what he/she is seeing today, to abnormalities seen in the past and their significance.

The wishes of a prospective buyer also play a significant role. For example, if the horse is being purchased for re-sale, the buyer may want no radiographic abnormalities. Alternatively, another buyer may be willing to accept certain radiographic abnormalities because their experience, and the experience of their veterinarian, is such that they have seen many horses perform well even though they had a radiographic abnormality.

Therefore, in each individual case it becomes a judgment call. There are many, many factors, which affect the ultimate outcome regarding a young horse's ability to be a successful runner. Although there certainly are joint conditions that will limit a horse's potential, every small abnormality should not be viewed as a major problem regarding the horse's future. We need to remember that we are not racing radiographs, we are racing horses. The major abnormalities need to be identified and dealt with, while the minor abnormalities need to be kept in perspective.

If a veterinarian is unsure of the significance of a radiographic finding it is important that he consult with another veterinarian to get a second opinion, and buyers need to encourage the use of such second opinions.

Unfortunately, there has come into common use terms such as: the horse

DEL MAR YEARLING SALE MINIMUM RADIOGRAPHIC VIEWS FOR THE SALE REPOSITORY

CARPUS:

Lateral Oblique
Medial Oblique
Flexed Lateral

FETLOCK:

FRONT
AP Elevated 15°
Medial Oblique
Lateral Oblique
Flexed Lateral

REAR

AP Elevated 15°
Medial Oblique
Lateral Oblique
Standing Lateral

Obliques should be elevated slightly to separate the sesamoid and PI interface

HOCK:

Medial Oblique
Lateral Oblique
Off Center AP (Slightly Lateral)
Lateral

STIFLE:

Lateral

PA

LABELING:

Standard markers for radiographic views are either lateral or anterior. For oblique views, the marker is located anteriorly on a lateral oblique, and posteriorly on a medial oblique. For an AP view, the marker is located laterally, for a lateral view the marker is located anteriorly.

“didn't vet”, “didn't pass the vet” or “didn't vet sound”, etc. We would all be better off if these terms didn't exist or at least if they were only used privately. The danger is that a horse may get branded unfairly if all conversations between prospective buyers and veterinarians are not confidential. Radiographic changes that may be of concern to one veterinarian and buyer may not be a major concern to another veterinarian and buyer.

Consignors can avoid some problems at sale time by having their prospective sale yearlings carefully examined by their veterinarian in advance of the sale. If a joint abnormality is found on physical examination, radiographs taken at the time will demonstrate if there is an abnormality present in the joint. Yearlings that have exhibited lameness or joint swelling in the past, should be carefully evaluated and the affected joints radiographed. The goal is to avoid going to the expense of preparing a yearling and taking it to the sale, only to find out at the last minute that

there is a radiographic abnormality that may seriously affect the horse's ability to sell at a competitive price.

It is counter productive for sellers and consignors to enter horses in select sales that have significant radiographic abnormalities. These individuals tend to sell poorly and have a negative impact on both the consignor and the sale.

Buyers can best take advantage of the repository by inspecting the horses early, thus allowing their veterinarian adequate time to review the radiographs and consult with them and get a second opinion, if necessary. It is very difficult to do a thorough evaluation of 34 radiographic views at the last minute.

Some recent studies have started to define which radiographic abnormalities are most significant. By utilizing the experience of the veterinary community it will become more clearly defined in the future what constitutes significant joint abnormalities. However, there always will be an element of judgment because each horse is an individual and they do not all react in the same way to a given abnormality.