

Pre and Post race Examination of the racing Greyhound

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Kennelling

The healthy greyhound

- Anatomy and physiology
 - An understanding of what is normal is essential to making the decision about a whether a greyhound is healthy or unhealthy
 - The main systems include :
 - The musculoskeletal
 - Cardiovascular
 - Neurologic
 - Digestive
 - Endocrine
 - Respiratory

Rules pertaining to the health of the racing greyhound in Victoria

- Rule 73 Greyhound suffering injury
- Rule 74 Greyhound suffering central or peripheral nervous system or vision condition
- Rule 76 racing after whelping
- Rule 37 examination of a greyhound for fitness, illness, cleanliness, or contagious condition
- Rule 24 greyhound in season

Characteristics of a healthy dog

- Behavior – changes from the norm
- Physical characteristics
 - Coat
 - Weight
 - Eyes
 - Mouth
 - Gait , stance, symmetry

Clinical examination of the greyhound

- Subjective data - Visual signs
 - Behavior
 - Gait
 - Stance
 - symmetry
- Objective data

- Pain
- Swelling, bruising
- Wounds
- Temperature pulse respiration
- Weight changes
- Discharges – infectious , seasonal
- Hydration
- Eyes – clarity , focus, position , movement
- Nervous system –central and peripheral

Clinical examination of the greyhound

- Contagious disease
 - Fleas
 - Mites
 - Ringworm
 - Diarrhoea
 - Respiratory disease
 - Papilloma

Clinical examination of the greyhound

- Common findings
 - Sand toe
 - Sand burn
 - Split webbing
 - Papilloma
 - Spike wounds
 - Weight variation
 - Dew claw injury
 - General small wounds

Clinical examination of the greyhound

Rectal Temperature	Pulse	Respiration
38.5 – 39.5(Centigrade)	100-130 BPM (beats per minute)	11-38 BPM (breaths per minute)

Clinical examination of the greyhound

- High temperatures can indicate fever caused by infection or heat stress. A temperature over 40 degrees is serious as it can be an indicator of diseases such as distemper but it can also cause permanent brain damage or even death as the overheated blood circulates throughout the body damaging vital organs.
- Animals that suffer from shock (for example after a severe injury or blood loss) can have a lower than normal temperature, as blood circulation is interrupted, their ears and extremities are cold and moist to touch.
- Elevated pulse or heart rate will occur during exercise or racing but the heart rate should return to normal range within half an hour if the

greyhound is physically fit for the amount and type of work it asked to do. Nervousness and excitement can also elevate heart rate as can distress from illness or injury.

- Respiration will also elevate during exercise; the ability to expand the lungs to maximum capacity during exercise is hindered by the action of the diaphragm and the demands for oxygen, consequently the breathing is faster but not as deep as during rest.
- Overheated greyhounds will pant to assist their body to eliminate heat from the body so rapid shallow panting is normal after work but if it occurs in a greyhound that is resting, not sitting in a hot environment it could be an indicator of distress caused by infection, injury or shock.

Clinical examination of the greyhound

Hydration status

- The hydration status test is a quick and basic assessment of the greyhound that indicates if the greyhound has enough fluid available for body functions such as blood composition, joint fluid, tears, saliva production, elasticity of the skin and; it also has an important role in controlling fluid movement throughout the body which is important for cooling off after exercise or on a hot day.
- Indicators of dehydration include dull, dry skin that lacks elasticity, dry sticky mouth, sunken eye, a tucked up appearance in the belly and the passing of small amounts of highly concentrated urine.
- Dehydration can lead to poor performance , cramping , poor recovery and hospitalization .
- Indicator of systemic illness

Pre Race

- Repeat exam
- Tapings
 - Sesamoids
 - Metacarpals / metatarsals
 - Wrists
 - Hocks
 - Track leg
 - Toes – rubber bands

Post Race Examination

Common greyhound racing injuries

- An understanding of what is normal structure and function is essential to assessing whether a greyhound is carrying an injury

Anatomy - skeletal

- Foreleg
- Carpus
- Humerus
- Metacarpal bones
- Phalanges
- Radius

- Scapular
- Sesamoids
- Ulnar
- Cervical vertebra
- Hindleg
- Thorax
- Acetabulum

- Fibula
- Metatarsal bones
- Pelvis
- Sacrum
- Tarsus
- Tibia

Note. The front legs are not attached to the body by bony structures!

Anatomy – muscles, ligaments, tendons

- Achilles tendon
- Biceps
- Biceps femoris
- Collateral ligaments of the toes
- Cruciate ligament
- Deltoid
 - Tensa fascia lata
- Flexor tendon carpal ulnaris (stopper tendon)
- Flexor tendons of the toes
- Gastrocnemius
- Gracilis
- Pectinius
- Pectoral
- Quadriceps tendon
- Rectus femoris
- Sartorius
- Triceps (egg or monkey or pin muscle)
- Vastus lateralis

Racing injuries – why?

- Some injuries are more common than others due to the nature of greyhound racing
- Gait lf rf rh lh then rf lf lf rh on the corner, double suspensory stride
- Age
- Track racing v coursing
- Injury progression – within one structure or causing transfer of weight to other structures
- Bad luck



Racing injuries – signs

- Signalment – patterns of common injury
- Pain
- Swelling
- Gait abnormalities , tail & head position
- Positional deformities
- Heat
- Symmetry
- lameness

Common injuries

- Gracilis injury
- Triangle muscle
- Pectineus muscle
- Triceps muscle
- Achilles tendon injury
- Flexor muscles of the forearm
- Stopper bone attachments
- Hamstring injury
- Pectoral muscle
- Biceps brachii
- Hock injury - Right particularly
- Metacarpal injury – rail side
- Metatarsal injury
- Accessory carpal bone injury
- Lumbo-sacral injury
- Sharp rib pain
- Split webbing
- Sand burn
- Stopper pad injury
- Sprung toe
- Knocked up toe
- flexor tendon injury
- Cramping
- Track leg

Stand down Times

- Muscle injury
 - Stage 1 – 3 to 7 days
 - Stage 2 - 7 to 21 days
 - Stage 3 – 21 to 28 days
- Tendon injury
 - Stage 1 – 5 to 10 days
 - Stage 2 – 14 to 21 days
 - Stage 3 – 28 days
- Bone injury – 21 to 28 days

First aid

What are the aims of first aid?

- To preserve life
- Protect an unconscious victim
- Prevent the condition from worsening
- Relieve pain
- Promote recovery

Medications and equipment

- Medications
 - Sedation – eg ACP, domitor, xylazine
 - Antibiotic –eg Licocin, amoxycillin
 - Pain relief – NSAIDS or opiates
 - Local anaesthetic – 2% lignocain
 - Fluid therapy
 - Antiseptic
 - Euthanasia solution
- Equipment
 - Bandaging/splinting materials
 - Surgery kit
 - Needles syringes