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Veterinary report

Pferd: "v. Sir Donnerhall x Fidertanz", geb.: 01.01.2022, Rasse: Westfale, Farbe: braun, Geschlecht: Wallach

The above mentioned gelding was presented on the 16th of June at the equine hospital Telgte for further investigation of a heart murmur.

At admission, the general condition of the horse was good (BCS 5/9). The heart rate was 36 beats per minute and the rhythm was regular. On the left hemithorax, a holosystolic murmur Grade II/VI with a punctum maximum over the mitral valve was detected. On the right hemithorax, no murmur was audible. The pulse of the arteria facialis was regular and normal beaten. The mucous membranes and jugular veins were without abnormalities. No edema or retrograde pulsation of the jugular vein was observed. The respiratory rate was 8 breaths per minute with a normal costoabdominal breathing pattern.

During the echocardiographic examination, the following findings were recorded:
Normal proportions between the different heart chambers. Morphologic measurements and appearance of the heart valves within normal limits. The fractional shortening of the left ventricle was within normal limits.
The dopplerevaluation showed a mild regurgitation with 2 jets at the mitral valve and a trivial regurgitation at the pulmonary valve and tricuspid valve.

The resting ECG showed a sinus rhythm with a mean heart rate of 36 beats per minute.
The exercising test at the longe consisted of 5 minutes walk, 10 minutes trot and 5 minutes of canter. At walk the maximal heart rate was 60 beats per minute. At trot, a maximal heart of 137 beats per minute was detected and during canter, the heart rate increased to maximum 160 beats per minute. Arrhythmias were not detected. The heart rate decreased to 60 beats per minute after a recovery time of 5 minutes.

Diagnosis

Mild mitral valve insufficiency

Prognosis

The prognosis in this case is estimated to be favourable. Since the regurgitation is mild at the time of examination and the dimensional measurements are within normal limits, we do not expect an impact on the horse's performance and the horse can be trained and compete as usual.

Progression of mitral valve insufficiencies is possible during the further sporting career. This could possibly lead to a dilation of the left atrium which could decrease the horse's performance and promote the development of arrhythmias (atrial fibrillation). Whether and when the regurgitation could become progressive can only be determined with the help of follow-up examinations.

A follow-up examination is recommended in one year and thereafter annually or biennially. If any signs of heart failure should develop (cough, shortness of breath, decreasing edema, exercise intolerance), an earlier follow-up examination is recommended.

Kind regards,

Lisa-Marie Hermans

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Tierärztliche Klinik in Telgte