

PHARMACOEPIDEMIOLOGICAL STUDY OF FOREIGN SUBSTANCES IDENTIFIED IN POST RACE URINE SAMPLES ASSOCIATED A MORTALITY AT LA RINCONADA RACETRACK, CARACAS VENEZUELA, 2008-2012 A PRELIMINARY REPORT

Abelardo Morales Briceño1*, Aniceto Mendez Sanchez1, Kimberly Brewer2, Thomas Tobin2

¹Department of Anatomy and Comparative Anatomic Pathology, College of Veterinary Medicine. University of Cordoba, Spain. ²Maxwell H. Gluck Equine Research Center, University of Kentucky, Lexington USA.

*Correspondência: Email: <u>aamorales13@gmail.com</u>

ABSTRACT

We report a pharmacoepidemiological study on foreign substance identifications at La Rinconada racetrack, Caracas Venezuela from 2008 to 2012. During this period 59904 horses started at La Rinconada in 4992 races of average field size 12 starters per race. At "La Rinconada" all winners and other randomly selected horses are tested yielding a total of 12.644 samples tested over the four year period of this review. Of these samples 126 were reported positive for at least one substance considered reportable under the rules of racing in Venezuela. No ARCI class 1 and two substances were identified in these samples. The most frequently identified substances were furosemide, 31 identifications, followers by no steroidal anti- inflammatory agents, 25 in total, and including phenylbutazone, dipyrone and Flunixin meglumine. Corticosteroids identified include dexamethasone and triamcinolone, for a total of 43 identification of methocarbamol was reported, somewhat unusually, numerous identifications of pangamic acid, the supposed vitamin b-15. Review of these substances show that all of these substances are considered or have been classified as therapeutic medications and that no ARCI class 1 or 2 substances with a high potential to enhance performance have been reported during these 4 years of racing at "La Rinconada".

KEY WORDS: Equine, Foreign Substances, Horses, Thoroughbreds.

INTRODUCTION:

Foreign substances in performance horses are defined as the "illegal application of any substance, except normal diet, that might modify the natural and present capacities of the horse at the time of the race" (Ungemach, 1985). Horse foreign substances cases worldwide have been reported since 1962 (Clarke, 1962), alkaloids (Debackere, et al., 1968), Trans-pai-oxocamphor (Fujii, et al., 1970), procaine (Kunde & Frey, 1971), sulpyrine, aminopiryne, antipirine (Momose & Tsuji, 1972), caffeine (Fujii, et al., 1972), chlorpromazine and phenobarbital (Fujii, et al., diazepam (Courtot, 1975), et al., 1975), corticosteroids (Schubert, 1977), local anesthetics (Delbeke, et al., 1981), psychotropic drugs (Jaeschke, 1983), etorphine (Woods, et al., 1986), (McDonald. morphine et al.. 1988). betamethasone (Rodchenkov, et al., 1988). furosemide (theobromine (Delbeke & Debackere, 1991), methandienone (Hagedon, et al., 1992), non-steroidal anti-inflammatory drugs (Gonzalez, et al., 1996), dexamethasone (Ribeiro, et al., 1997), dipyrone (Klaus, et al., 1997), Cortisol (Brooks, 1999), clenbuterol (Harkins, et al., 2001), glycopyrrolate (Rumpler, et al., 2012), multiples foreign substances have been used to alter the performance purposes of the horse during the race, to the present 2013 with using anabolic steroids in Dubai and United Kingdom and USA.

Many of these foreign substances with multiple side effects, with direct consequences on the health of the horse and in many cases end up with irreversible damage and even the death, sudden dead or euthanasia of the horse. Also have been detected over the years illegal substances in horse racing have perfected the techniques of foreign substances detection in liquid blood and urine. Test using gas chromatography-mass spectrometry (1972), Radioimmunoassav (1986) enzyme-linked immunosorbent assay (ELISA) (1987), highperformance liquid chromatography (HPLC) (1990), particle concentration fluorescence assay (PCFIA) (1990), Ultra High Performance Liquid Chromatography (UHPLC) (2012).

The national and international regulations are rigorous in terms of therapeutic medications permitted for horse racing as well as sampling for post-race foreign substances control. But today are still no cases of illegal substances in horse racing severely affecting the equine industry worldwide.

The aim of this study was to describe a pharmacoepidemiological study foreign substances associated mortality in Thoroughbreds horses in the national racetrack "La Rinconada", Caracas Venezuela.

MATERIAL AND METHODS:

Were studied 126 Thoroughbred horses (51 female and 75 male), between 2-5 years old, in the national race Track "La Rinconada" Caracas-Venezuela. During this period 59904 horses started at la Rinconada in 4992 races of average field size 12 starters per race. At "La Rinconada" all winners and other randomly selected horses are tested yielding a total of 12.644 samples tested over the four year period this review. The Venezuela National of Regulations of Horse Racing, in effect in 1995, states: Administration of any medication to horses registered for racing is prohibited, likewise any chemical, drug or substance of any nature which seeks to alter or modify in any way the horse's normal or locomotors capacity (Tobin, et al. 2012).

No medication may be administered from five (5) days prior to participating in public competition until the horse ceases to be under the control of the horseracing authorities. Exceptions from compliance with the time provided herein, is the use of furosemide and phenylbutazone, which may be administered by veterinary prescription under the following scheme: The administration of furosemide may be up to four (4) hours before competition which will include a maximum dose of 250mg (Tobin, et al. 2012).

The administration of phenylbutazone may be up to twenty four (24) hours before the competition in which the animal will participate, at a dose not exceeding two (2) grams (in force, year 1995) (Tobin, et al. 2012). The equine registration card must record the administration of furosemide and/or phenylbutazone (Tobin, et al. 2012). Clinical signs are presented in the table number 1.

Samples of blood and urine for toxicology studies were taken immediately after death and analyzed using the competitive Enzyme-Linked Immunosorbent Assay (ELISA) specifically for Furosemide: Furosemide ELISA Kit (1042191 NEOGEN Corporation), Boldenone ELISA Kit (Cat.N.FA650 TECNA); Nandrolona: Nortestosterone ELISA Kit (BIO K 208 BIO Diagnostic. Dexamethasone: Dexamethasone ELISA Kit (101519 BIOKITS). MaxSignal® Clenbuterol ELISA Test Kit (Bioo Scientific ISO CI#: SARA-2009-CA-0114-02-A); Caffeine/Pentoxifylline ELISA Kit (Neogen Corporation106419); Phenylbutazone ELISA Kit Neogen Corporation 104719-1; Nandrolone ELISA Kit Neogen Corporation 104619; Triamcinolone Acetonide ELISA Kit Neogen Corporation 105119; MaxSignal® Flunixin ELISA Test Kit BO_5050; MaxSignal® Acepromazine/Tricyclics ELISA Test Kit BO_5014 and Methocarbamol ELISA Kit from Neogen Corporation 108019. All equine were study by necropsy (Aluja and Constantino 2002). Samples of tissue were collected from the adrenal glands, gastric mucosa, pancreas, kidneys, liver, spleen, lungs, heart, skin and adenohypofisys (Aluja and Constantino 2002). Tissue sections were fixed in 10% buffered formalin, prepared and stained with Hematoxilin & Eosin (H&E) for light microscopy (Banks 1996).

RESULTS:

A total of 12.644 samples tested over the four year period of these review only 126 samples were positive approximately 0.99% and 4992 races 2.5% test positive.

Sudden Death latrogenic: This group of horses (26/126) was medicated injected into the jugular vein and developed a type I hypersensitivity glottis lung edema and sudden death. Were observed pulmonary edema, congestion and hemorrhage. Sub-endocardium petechial hemorrhage. Spleen foci of acute coagulation with necrosis. Hydronephrosis severed renal. Liver accentuated lobular pattern. The rest of the organs with edema, congestion and petechial hemorrhage. In all cases it was observed thrombophlebitis of the left jugular vein and hematoma. The histological sections showed severe pulmonary edema, congestion and hemorrhage. Diapedesis bleeding in heart tissue, liver and spleen. Severe acute renal tubular necrosis. Foreign substances detected in toxicological examination pangamic acid (21/26), boldenone (01/26), furosemide (02/26) and phenylbutazone (02/26).

Sudden death post race: This group of horses (32/126)presenting characteristics. clinical necropsy and histological compatible with pulmonary hemorrhage syndrome induced by exercise. These horses during the end of the race or after the race culminated cardio-respiratory collapse acute and sudden death. Epistaxis was observed only in 4 cases. Necropsy of these horses evidenced: massive hemothorax severe congestion and rupture marked bronchial and mediastinal arteries. subserosal petechial hemorrhage to caudo-dorsal lung lobes, severe edema in trachea, bronchus and lung severe bilateral parenchyma. pulmonary hemorrhage in lung parenchyma. Histopathological lesions showed severe congestion, marked edema, acute pulmonary hemorrhage due to rupture of focal bronchial arterioles, replete with red blood effusion. Foreign substances detected in toxicological examination furosemide (26/32).clenbuterol (03/32).aminophilines (02/32) and metocarbamol (01/32).

Metabolic syndrome: This category corresponded to horses (44/126) that developed side effects post-intoxication in the medium and long term. The clinical findings were consistent with polyuria, polydipsia. hyperglycemia, laminitis (tetralaminitis) liver and kidney failure. The necropsy showed: weight loss, loss fatty subcutaneous, xantomathosis of subcutaneous tissue. Were observed multiple abscesses and cellulitis piodermas, Liver was swollen, friable and icteric, with focal telangiectasia, renal cortical and papillary necrosis, and equine gastric ulcer syndrome severed. Histopathology showed: liver with periacinar necrosis with a prominent acinar pattern and fatty degeneration severed necrosis pancreas with vacuolar (glycogen) and degeneration islets of langerhans, fibrosis and chronic, severe acute tubular degeneration, coagulation renal tubular necrosis, glomerulonephritis membranous. Hemorrhages in adrenal cortex, coagulation necrosis of the adrenal cortex and atrophy cortical severed. Foreign substances detected in toxicological examination Dexamethasone 20/44, Triancinolone 14/44, phenylbutazone (7/44) and simultaneous Furosemide (02/44), Boldenone (01/44) and Flunixin meglumine (1/44).

<u>Secondary infectious and failure multiorgan:</u> This category corresponds to the evolution of the

metabolic syndrome (22/126). Basically are secondary infections due to immunosuppression with bacteriemia and septicemia evolution. The commitment affects many organs with irreversible damage. clinical, necropsy and histological included pyothorax, septic peritonitis, bacteremia secondary to gastrointestinal tract disease, pneumonia, endocarditis, pyelonephritis, osteomyelitis, and bite wounds. Accompanied by failure liver with focal telangiectasia, pancreatic and renal. Foreign substances detected in toxicological examination Phenylbutazone (11/22), Dexamethasone 06/22, Dipyrone (04/22),Boldenone (02/22).

DISCUSION:

In the study period there were 126 cases of foreign substances with the death of the horses. The highest percentage of cases associated with metabolic syndrome was 35%. Secondly 25% corresponded to cases of sudden death associated with post-exercise induced pulmonary hemorrhage exercise. In third place with 21% sudden death after drug injection and development of type I hypersensitivity. The fourth and last place corresponded multiorgan failure and secondary bacterial infections with 19%. Relationship a detection of foreign substances by Group NSAIDs: Phenylbutazone 80%, 16% dypirona, flunixin meglumine 4%. The foreign substances detected were 82% anabolic and 18% triamcinolone. The bronchodilators were aminofilinas clenbuterol 60% and 40% respective; diuretics Furosemide only 100%; Methocarbamol 100%, 100% steroid dexamethasone. Other substance detected was Vitamins B15 (pangamic acid) 100%. These results agree with those reported in the literature worldwide where the prevalence of illegal substances cases associated anabolic, steroids and clenbuterol with predominate. To a lesser extent than furosemide and phenylbutazone is high the number of cases that are under therapeutic medications allowed by regulation Venezuela racing. Unlike other racing regulations in other countries that regulate the use of these two therapeutic medications (Tobin, et al., 2012), the foreign substances associated with NSAIDs, steroids anabolic and has as consequences the iatrogenic equine metabolic syndrome whose systemic complications affect the horse practically irreversible consequences and evolution to multiorgan failure and

consequent secondarv bacterial infections bacteremia and septicemia. Despite horses who died of pulmonary hemorrhage were medicated with furosemide was not possible to quantify the dose also were detected in 5 cases illegal bronchodilators. One possible reason that accounts for the development of induced pulmonary hemorrhage in horses exercising furosemide medicated can be associated with a pharmacological interaction of phenylbutazone with furosemide in these cases as well as a underdosing (concentration and volume) of furosemide and time application. The sudden death associated with the administration of therapeutic medications was associated mainly to the administration of a drug (trade B15 vitamin complex), which presents the main components being pangamic acid and sodium selenium has been reported to induce toxicity at high doses in the horse. The main limitation of this study was quantification of foreign substances the concentration which was observed only positivity but not the substances concentration. Although urine is the sample of choice for foreign substances medications tests in racehorses, it is rarely obtained following the sudden death of a racehorse on the track while racing (Uboh. et al., 1995). Thus, in the absence of urine and blood samples following sudden death, postmortem tissue samples are equally useful for forensic toxicological investigations of racehorses (Uboh, et al., 1995). Below is described the cases of illegal substances in horses most relevant and recent global. In Central and South America have reported cases of foreign substances in 1991 Horse racehorses: Racing Classic Caribbean (The Caribbean Horse Racing Confederation), Venezuela was disqualified for using banned therapeutic medications (phenylbutazone and lasix). Argentina was N-Butilescopolamina Bromuro detected in Thoroughbreds horses racing in 2012 and a case of acepromacine. Brazil cases of foreign substances Thoroughbreds horses racing was detected Flunixin mealumine in 2009. Chile in 2010 illegal substances for clenbuterol was detected in Thoroughbreds horses racing. Colombia: four Colombian Paso horses were positive a caffeine and theophylline in 2010, in Mexico two cases positive for clenbuterol at the Hippodrome of the Americas in 2011, in Panama 14 cases of horses was positive a cocaine in 2005, Puerto Rico nine cases positive a

Ethorphine in 2005, in Uruguay 12 cases was positive a caffeine in 2012, 17 foreign substances cases in 2011 and 29 illegal substances cases in 2010. Many of the causes of death have not been determined or related to foreign substances or poisoning. Studies are performed multidisciplinary to determine the etiology of sudden death in postrace horses. Reports in the literature suggest among its causes pulmonary hemorrhage induced by exercise (ruptured bronchial artery), aortic rupture, warfarin poisoning, heart failure and recently a case of acute renal failure. In conclusion, this study reported 126 cases of foreign substances in Thoroughbred horses with subsequent mortality. Multidisciplinary studies are needed to elucidate the foreign substances in horse racing worldwide, as well as immediate consequences in the short and medium term health of the horse.

References

Brooks RV. Detection of cortisol administration in the horse. Equine Vet J. 1999 Jul;31(4):266-7.

Clarke EG. The doping of racehorses. Med Leg J. 1962;30:180-95.

Courtot D, Mouthon G, Roux L, Jeanin E. [Effect of tranquilizer doping on the muscular activity of the sport horse. II. -- Diazepam (author's transl)]. Ann Rech Vet. 1975;6(2):117-29.

Debackere M, Laruelle L. Isolation, detection and identification of some alkaloids or alkaloid-like substances in biological specimens from horses with special reference to doping. J Chromatogr. 1968 Jun 4;35(2):234-47.

Delbeke FT, Debackere M, Desmet N. Detection of some local anesthetics in horse urine and plasma by gas-liquid chromatography. J Chromatogr. 1981 Feb 27;206(3):594-9.

Delbeke FT, Debackere M. Urinary excretion of theobromine in horses given contaminated pelleted food. Vet Res Commun. 1991;15(2):107-16. Fujii S, Inada S, Yoshida S, Kusanagi C, Mima K.[Pharmacological studies on doping drugs for race horses. IV. Chlorpromazine and phenobarbital (author's transl)]. Nihon Juigaku Zasshi. 1975 Apr;37(2):133-9.

Fujii S, Inada S, Yoshida S, Kusanagi C, Mima K. [Pharmacological studies on doping drug for race horses. II. Caffeine]. Nihon Juigaku Zasshi. 1972 Jun;34(3):135-41.

Fujii S, Inada S, Yoshida S, Kusanagi C, Mima K. Pharmacological studies on doping drugs for race horses. 1. Trans-pai-oxocamphor. Nihon Juigaku Zasshi. 1970 Dec;32(6):307-17.

González G, Ventura R, Smith AK, de la Torre R, Segura J. Detection of non-steroidal antiinflammatory drugs in equine plasma and urine by gas chromatography-mass spectrometry. J Chromatogr A. 1996 Jan 5;719(1):251-64.

Hagedorn HW, Schulz R, Friedrich A. Detection of methandienone (methandrostenolone) and metabolites in horse urine by gas chromatography-mass spectrometry. J Chromatogr. 1992 Jun 10;577(2):195-203.

Harkins JD, Woods WE, Lehner AF, Fisher M, Tobin T. Clenbuterol in the horse: urinary concentrations determined by ELISA and GC/MS after clinical doses. J Vet Pharmacol Ther. 2001 Feb;24(1):7-14.

Jaeschke G. [Doping of performance horses with psychotropic drugs]. Dtsch Tierarztl Wochenschr. 1983 Feb 7;90(2):59-64.

Klaus AM, Schlingloff Y, Kleinitz U, Böttcher M, Hapke HJ. Pharmacokinetic study of dipyrone metabolite 4-MAA in the horse and possible implications for doping control. J Vet Pharmacol Ther. 1997 Jun;20(3):204-8.

Kunde M, Frey HH. Doping with Procaine. Berl Munch Tierarztl Wochenschr. 1971 Jan 1;84(1):14-5. McDonald J, Gall R, Wiedenbach P, Bass VD, DeLeon B, Brockus C, Stobert D, Wie S, Prange CA, Ozog FJ, et al. Immunoassay detection of drugs in racing horses. III. Detection of morphine in equine blood and urine by a one step ELISA assay. Res Commun Chem Pathol Pharmacol. 1988 Feb;59(2):259-78 Momose A, Tsuji T. Studies on doping test by gas liquid chromatography-mass spectrometry. I. Detection and identification of sulpyrine, aminopyrine and their metabolites in the horse urine. Yakugaku Zasshi. 1972

Feb;92(2):187-92.

Ribeiro Neto LM, Salvadori MC, Spinosa HS. Immunoaffinity chromatography in the detection of dexamethasone in equine urine.J Chromatogr Sci. 1997 Nov;35(11):549-51.

Rodchenkov GM, Uralets VP, Semenov VA, Gurevich VA. Gas chromatographic and mass spectral study of betamethasone synthetic corticosteroid metabolism. J Chromatogr. 1988 Nov 18;432:283-9.

Rumpler MJ, Sams RA, Colahan P. Regulatory control of glycopyrrolate in performance horses using validated UHPLC/MS-MS methods. J Chromatogr B Analyt Technol Biomed Life Sci. 2012 Mar 15;889-890:130-7. Schubert B. Chromatographic determination of some corticosteroids, with special reference to horse doping. Z Rechtsmed. 1977 Mar 23;79(2):97-102.

Tobin T, Brewer K, Stirling K, Morales A, Villoria D. World rules for equine drug testing and therapeutic medication regulation. First edition. Wind publications. Page: 5-303.

Uboh CE, Rudy JA, Railing FA, Enright JM, Shoemaker JM, Kahler MC, Shellenberger JM, Kemecsei Z, Das DN. Postmortem tissue samples: an alternative to urine and blood for drug analysis in racehorses. J Anal Toxicol. 1995 Sep;19(5):307-15.

Ungemach FR. Doping control in race horses. Tierarztl Prax. 1985;13(1):35-53.

Woods WE, Weckman T, Wood T, Chang SL, Blake JW, Tobin T. Radioimmunoassay screening for etorphine in racing horses. Res Commun Chem Pathol Pharmacol. 1986 May;52(2):237-49.