



The INTERNATIONAL DIFFERENCE

Part III of A PAINFUL TRUTH: A six-part series on medication and the reform movement in U.S. racing

DEL 75 YEARS MAR



By Bill Finley

Who can give a horse what and when and where around the world tends to be a complicated subject filled with complex words like Erythropoietin and Ethylaminobenzoate and threshold levels and withdrawal times that are one thing here and another thing there. But when it comes to the mentality of U.S. racing versus the rest of the world there is no ambiguity.

"The major difference between the U.S. and the rest of the world, and especially Europe, is that here you back up the veterinary truck to the barn after the horse is entered," said Dr. Rick Arthur, the equine medical director for the California Horse Racing Board. "We did an analysis at Hollywood Park last year and found that the average horse got 5 ½ injections after entering the race before they got their Lasix shot. You don't get that in the rest of the world, where there is a much different way of doing things."

Arthur's 'backing up the vet truck' means doing everything you can within the regulations to get an assist from drugs--some innocuous, some sometimes not so innocuous. Add Lasix to the mix, something given to virtually every horse that races, whether they have a bleeding problem or not, and it pretty much sums up the way business is done in the United States.

That thinking runs counter to the practices and rules virtually everywhere else in the world, where the horse is left to its own devices. Elsewhere in the world, the horse more or less cannot race with any drugs in its system on raceday. In North America, Lasix is legal, along with all sorts of other drugs, as long

as they come in under the threshold levels covering each medication.

Who's right? Who's wrong? Adherents on both sides rarely budge from their positions. But the parts of the world where racing doesn't have the love affair with drugs that the U.S. has don't seem to have anything to apologize for. Their racing does just fine without an assist from chemistry.

"Welfare in Europe and welfare in the U.S. is same word, but welfare in Europe means to train the horse without any chemicals and make him race if he can face the challenge," said Dr. Roland Devolz, a veterinarian with France Galop. "In your country, welfare means to be allowed to use as many drugs as possible to ensure the horse will support training and race. It is a totally different culture."

France has among the strictest drug rules in the world. Essentially, there can be no traces of foreign substances in a horse's system when it races.

In 2011, the most recent year in which statistics are available, horses averaged 5.80 starts per year in France. That's an increase from 1995 (the earliest stats available) when horses averaged 5.32 starts per year. The average field size in France in 2011 was 11.46. In 1995 it was 11.25. Wagering in France is also healthy. Combining harness racing, it increased from 8.2 billion Euros in 2005 to 9.9 billion Euros in 2011.

Those numbers are reflective of a healthy racing industry where owners and trainers are getting just as much or more out of their horses now than they were 16 years ago. That isn't the case in North America. From 1995 to 2011, average field size has declined from 8.2 to 7.89 and the



Dr. Rick Arthur, Benoit Photo

average number of starts per horse has declined from 7.73 to 6.20. As recently as 1975, when Lasix was not part of American racing culture, the average number of starts per horse was 10.23. During the same time period (2005 to 2011) in which wagering has increased 20.7 percent in France, it has declined by 25.5 percent in North America.

All over Europe, racing professionals by and large don't understand why we do things the way we do.

"I think the way we do it is the right way," said Caroline Malmberg, one the leading trainers in Sweden. "People in Sweden generally care a lot about the animal, their health. That's why we don't train and race on drugs. We are allowed to give drugs to the horses only when they are resting. If racing here had drugs, the government would stop it. They wouldn't allow us to have racing."

"I can't understand it. How can they use all these drugs with the horses? I saw an article about I'll Have Another and how many drugs



Caroline Malmberg, www.tabygalopp.se

he had when he won and before he was going into the final race of the Triple Crown. How can that be allowed? To me, it doesn't seem like a worthy winner when he had all these drugs when he was running. If trainers say take away the drugs and I won't run, that is bad to me. That is not a real trainer, not a person that can train the proper way."

Sweden's drug rules are also very strict, and they have to be. The nation's racing industry was not doing well in the seventies and the government stepped forward to get it on the right track, giving control over all the harness and thoroughbred tracks to an organization known as the ATG in 1974. In return for giving the ATG a monopoly on all racing, the Swedish government insisted that the sport had to adhere to the strictest standards of integrity. As is the case in France, horses may not have anything in their systems other than hay, oats and water when competing.

"The trainers say, yes, this makes their lives very tough," explained Göran Åkerström, who is the chief veterinary officer for ATG. "They

are very afraid of getting caught in a doping test. So they are aware of everything that is going on in their stables because they don't want to get caught. I spoke to a guy today and he said, 'I am so happy we have this system because I have seen what other systems do to the horse and the whole apparatus and we are still going and our racing is doing better than just about anyone's.'"

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***--Caroline Malmberg,
a leading trainer in Sweden***

For those who are against the liberal use of drugs in racehorses, the ideal set up is the one they have in Hong Kong, another nation, coincidentally or not, where the sport is flourishing. No drugs are permitted in the racehorse when they are competing and Lasix is not allowed in training. Horses are subject to pre-race, post-race and out-of-competition testing.

Getting away with something is

virtually impossible. Every horse that races in the country is stabled at one place, Sha Tin Racecourse. The only vets permitted to work with the horses are employees of the Hong Kong Jockey Club. The only drugs available come from a pharmacy at Sha Tin, which is also under the direct supervision of the Hong Kong Jockey Club. Hong Kong's drug testing lab is believed to be among the best in the world.

"The best part of the way the system works here is that everybody knows the lab is very sophisticated and that everything that is in place is a deterrent for cheating," said Bill Nader, the executive director of racing for the Hong Kong Jockey Club and a former executive with the New York Racing Association. "No one is trying to trip up anyone. But the policies and procedures in place are a great deterrent to cheating. Everyone recognizes the environment they're in and understands that the playing field really is level and that you don't cross the line."

"When you think of the turnover



Bill Nader, *Horsephotos*

on each race here, which is now averaging about \$15 million U.S. per race, it's important that the confidence in our product is there and the integrity is there. Hong Kong is No. 1 in the world in average amount wagered per race. It's important that we do it the way we do it and that there's never a breach in integrity."

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Without drugs, be they therapeutic or performance-enhancing, in their system, horses in Hong Kong are averaging more than eight starts per year. The average field size is 12.6. Having huge purses and a very limited racing schedule is certainly a big factor, but Nader also believes that drug-free Hong Kong horses are able to race more often than U.S. horses.

"What I have seen here is the ability of horses to run well without medication and come back and have their next race within a short period of time and run well again," he said. "That to me was an eye-opener, a game-changer in terms of how you look at it. A horse would run at a high level in a high-class race, really



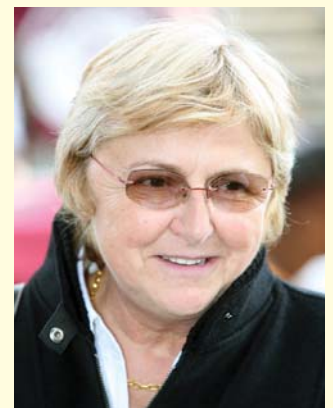
Hong Kong drug testing lab, www.hkjc.com

Last week, this series discussed the case of Coronado Heights, who suffered a catastrophic breakdown and was euthanized at Aqueduct February 25, 2012, one of 21 horses to suffer that fate during the meeting. That figure prompted a review of safety and medication by the New York Task Force on Racehorse Health and Safety, and led to some changes in policy.

After the publication of the story ([click here](#)), several European trainers weighed in with their comments. Some chose not to discuss the case specifically, but did address the topic in general. Below is a sampling of their comments.

Criquette Head, President of the European Trainers Federation:

"Obviously, we don't race with any of those things here. If you ran a horse with even half of those drugs in its system, you would lose your license for a very long time - longer than Al Zarooni - and if you used all of them, you would risk going to jail. This is a real problem in America, and it absolutely has to change. Because not only is it a problem for racing, but afterwards, these horses are stood as stallions, and it is ruining the breed."



Criquette Head, *Horsephotos*

Mark Johnston: "I cannot, for various reasons, comment on the specific treatment, by a veterinary surgeon, of a specific horse. I will give you some general comments on drug use.



Mark Johnston, *Horsephotos*

Firstly, let's be clear that I am not against the use of drugs in racing for the legitimate treatment of, and/or prevention of, injuries and ailments in racing horses. Much recent controversy surrounds the use of anabolic steroids and, for those, even although I consider them to be the most specifically performance-enhancing of drugs, I would still have cases where I would want to use them if they were permitted in this country. They are not, however,

and I feel very strongly that, for international competition, we should all be playing by the same rules.

It seems however that, in the USA, indiscriminate use of drugs with no obvious intention of treating a specific ailment is widespread and it is hardly surprising that this will lead to an increase in catastrophic fractures.

The non-steroidal anti-inflammatories (phenylbutazone, flunixin, etc.) and the cortico-steroids (depo-medrone etc.) are amongst the most useful of drugs for treating inflammation and, as, in some soft tissue injuries, the inflammatory process itself can cause permanent damage, there are some strong arguments for the prophylactic use of these drugs. However, it doesn't take a veterinary surgeon to work out that some very serious injuries such as stress fractures, cracks, etc. can be masked by the anti-inflammatory and painkilling effects of these drugs and their indiscriminate use would certainly lead to an increase in catastrophic fractures. I am using a 14-day withdrawal time (absolute minimum) for phenylbutazone and flunixin (we almost never use flunixin within a month of a race) and months for depo-medrone.

Lasix's use is obviously widespread in the US and, while some would claim that its effectiveness for preventing bleeding is beyond doubt, it is inconceivable to think that all those horses given Lasix in the US require it for that reason.

The last time I attended Woodbine for the Canadian International, there were only two horses on the whole card that were not on Lasix. One was Mick Channon's filly which won the fillies Group 1, and the other was Jukebox Jury who finished 2nd in the Canadian International."

Thierry Doumen: "Giving bute to a horse with a problem is caring for a horse. Giving a horse bute and racing it is doping."



Thierry Doumen, www.geny.com

run well, and then come back in two weeks' time and put in a similar performance without the assistance of medication. It's impressive to see that. It's not that it happens once in a while. It happens on a regular basis."

Like most countries, Hong Kong abides by the International Agreement on Breeding, Racing and Wagering that came together through the International Federation of Horseracing Authorities. Article 6 of the agreement covers drugs and calls for race-day samples to be free of medications beyond levels that are considered inconsequential.

The IFHA provisions covering drugs are still in the process of being ratified but it's clear that the U.S. and Canada cannot sign on. The use of Lasix alone forces North America to opt out of the drug provisions.

In other countries, especially European countries, it is not taken lightly when someone steps outside the boundaries of the rules. In England in April, Godolphin trainer Mahmood Al Zarooni was caught giving steroids to 11 of his horses, which has been widely labeled as the biggest doping scandal in British horse racing history and comparisons have been made between Al Zarooni and Lance Armstrong. Al Zarooni was handed an eight-year suspension.

That the rest of the world goes in one direction and the U.S. another has ramifications beyond the racetrack itself. Foreign buyers seem increasingly wary of purchasing American-bred horses, fearing that drugs have created a weakened breed and that the performance of the sires and dams might have been influenced by chemicals. More and more foreign buyers are setting their sights on the major sales in Europe where drugs are not part of the genetic equation.

"Drugs are seriously affecting the U.S. bloodstock market," said breeding market analyst Bill Oppenheim, who writes for the Thoroughbred Daily News. "It's seriously affecting breeders who are basically being excluded from the most important and robust international market there is--the European market or the market that is described as European money and includes Middle Eastern money. The Dubai people are now buying almost exclusively in England and France."

"A lot of the reason this has happened is because the European stallion roster has improved dramatically over the last 20 years, beginning with Sadler's Wells. So they have a lot to shop for at home, whereas 20 years ago they didn't. But even given the continuing top performances of American-breds, in increasing numbers they don't come over here to buy. And in emerging markets like Asian countries where they are starting to buy expensive horses, they don't come here. A lot of this is to do with the fact that there is no compelling reason for them to have to come buy American horses that are drugged."

Oppenheim points out that at North America's leading sales company, Keeneland, gross sales have fallen from \$815 million in 2007 to \$410 million in 2012, a drop of 50.3%. Keeneland's European counterpart, Tattersalls has seen a decline of just 14% in that same period, from £256 million to £210 million.

It is sometimes overlooked that the U.S. and Canada are not the only countries to allow race-day medications. Lasix is permitted in South American racing countries, having arrived there about the same time it became permissible in the

Gina Rarick, currently the only American training in France and a former journalist for the International Herald Tribune, has trained a stable at Maisons-Laffitte since 2002:

"I hear from Americans who throw up their hands and say 'well, we have to use these drugs, because our system is just so tough on the horse.' That may well be true, but that is the most damning thing one can say about the sport if that is the case. If the American racing system has devolved so badly that a horse cannot cope without all the drugs, than the system has to change. If racing cannot change to fit the horse, rather than continue to medicate the horse to fit the system, the sport is most certainly--and probably should be--doomed."



Gina Rarick, www.gallopfrance.com

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--BillOppenheim



Mahmood Al Zarooni after suspension, www.racingpost.com

U.S. Argentinian trainer Nicolas Martin Ferro estimates that about 50 to 60 percent of the horses racing in his country race with Lasix.

Much as is the case in the U.S., pro- and anti-drug forces in South America have begun to clash over the use of Lasix. Trainers like Ferro argued that it is an effective tool in treating a serious problem, bleeding. "What would you say to an owner who buys two or three horses and one, two or three need Lasix and cannot run without it?" Ferro said. "What would you say? 'Send them to the farm.' That person is not going to want to spend more money on horses." But, just as in the U.S., others in Argentina see debilitating effects from the drug, claiming that it creates weaker horses dependent on chemicals.

The tide is slowly turning in South America, where anything no longer goes. With a one-step-at-a-time approach, most countries there have banned Lasix in stakes races. In Argentina, Peru and Uruguay Lasix has been banned in all Group I and II races. In Brazil, it is no longer permitted in any Black Type races.

"I agree with the concept of using fewer drugs here and not only due to the use of Lasix," said Dr. Ignacio Pavlovsky, DVM, a racing commissioner with Palermo Racetrack in Argentina. "I think the worst thing we did was to start to use bute with our horses in training. With the horses using bute and Lasix, today our horses are weaker than they were. Horses in Argentina used to be stronger. The horses are running less often and they are not running any faster."

Pavlovsky said that economics played a big role in banning Lasix from stakes.

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"We need to export horses and we need to get into the Asian markets and we need to sell horses free of drugs," he said. "People do not want to buy horses that raced on drugs."

Pavlovsky said the Lasix ban in Argentina will likely be expanded to include Group III races, but he does not believe a total ban will happen anytime soon. There is too much resistance from horsemen to make that happen, a theme that Argentina shares with the U.S. He notes that virtually every trainer in South America under the age of 50 has never known training a racehorse without drugs. Drugs, he believes, have become a part of the sport's culture.

"You speak with someone about driving in Scotland and they'll say

'how can people on the Continent possibly drive on the right?'" said France Galop's vet Dr. Roland Devolz. "The fact that we drive on the right on the continent shows that it is possible. It's the same with drugs. The American trainers who are saying these objections don't know what it means to train without medications. It is their culture. That's the polite answer. The impolite answer is that maybe they are frightened that without medication, they will need to do more work, take more care in their training. In Europe, we are of opinion that medication and drugs are not a tool of training. In your country, when there is a problem during training they use medication to mask or solve the question. They forget about the concept of horsemanship."

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