Putting the Horse First:
Veterinary Recommendations for the Safety and Welfare of the Standardbred Racehorse
Introduction

The American Association of Equine Practitioners was founded in 1954 by 11 racetrack veterinarians. While the association has grown to serve nearly 10,000 members worldwide who work with all equine breeds and disciplines, the AAEP's horse racing origin brings a unique understanding of the health and welfare needs of the racehorse.

It is with this perspective and commitment to equine safety and welfare that the AAEP formed a Racing Task Force in July 2008 to evaluate the safety and welfare issues affecting Thoroughbred horse racing. Medication usage, injuries, and a changing societal view of the appropriate use of horses in competition present formidable challenges to those entrusted with the care of the racehorse and the structure of the industry.

In recognition of the breed differences inherent in Thoroughbred, Quarter Horse and Standardbred racing, the AAEP Racing Committee has created breed-specific recommendations, respectively, for each industry.

The AAEP Racing Committee developed this white paper with the intent of recommending practices that place the welfare and safety of the Standardbred racehorse first while supporting those who seek to make meaningful change. As equine veterinarians, we are committed to working with the Standardbred racing industry to implement procedures that protect the horse. In addition, the AAEP expects its veterinary members to abide by the rules of all jurisdictions where they practice.

General Principles

The AAEP has long held position statements that address many aspects of racehorse health and safety. We encourage the Standardbred racing industry to support the following essential elements of an overall industry structure that promotes horse safety and welfare:

- Commitment to the humane treatment of horses, modern and progressive horse care as insured by periodic examination and disease prevention by licensed veterinarians.
- The adoption of uniform rules of medication usage, testing, security and enforcement by all industry participants.
- Priority funding for regulatory functions, including state-of-the-art testing and racetrack security.
- Continued identification and implementation of procedures and strategies that will significantly reduce the injury rate of horses, such as pre-race inspections, identification of safe shoeing practices and optimization of racetrack surfaces.

The AAEP makes the following recommendations for the Standardbred racing industry in four key areas: societal change and the public perception of horse racing, the racing business model, the owner-trainer-veterinarian relationship, and medication.
Societal Change and the Public Perception

Since the turn of the century, American society has drifted far from its agrarian roots to the point that only 15 percent of Americans today are involved with agriculture of any form. The horse, which was once an icon of American agriculture and general transportation, has become less of a beast of burden and is now viewed by some to be a companion animal, much the same as a dog or cat. In this societal context, welfare issues affecting the horse resonate with the public like never before. Dog racing was recently eliminated in the state of Massachusetts, a bellwether event that serves as a stark warning to all animal spectator sports.

On the other hand, the history of Standardbred racing is such that there are closer ties to agriculture and farm life than with Thoroughbred racing. The Standardbred industry has a close relationship to the original transportation use of the horse. Nevertheless, if we do not take care of the horse both during the racing years and after he or she can no longer compete, the public will not support racing and will turn their attention elsewhere. While there are a number of welfare initiatives in place in the Standardbred industry throughout the U.S., consistency is needed to demonstrate a sincere industry-wide commitment to equine welfare.

To address any change in societal perception of the Standardbred racing industry, the AAEP recommends:

- Racing industry support for a strategic plan that places the safety and welfare of the horse among its highest priorities. The AAEP recognizes and supports existing efforts by the United States Trotting Association (USTA) and The Hambletonian Society to accomplish this goal.

- The continued collaboration of multiple racing organizations (USTA, RMTC, AQHA, NTRA, TOBA, HBPA, ARCI, The Jockey Club, AAEP, racetracks and sales companies and others) to address the challenges that affect racing of all breeds.

- When the substantive issues of race horse welfare have been addressed by the industry, an aggressive public relations effort must be mounted to educate the public about what is being done to protect the welfare and safety of the horse (e.g.: racetrack injury reporting program, racetrack surface testing and medication studies).

The Business Model of Standardbred Racing

The Standardbred racing industry is a $4.5 billion industry in the United States. The business model of Standardbred racing favors an extended racing career with horses racing until 14 years of age, or even greater in amateur racing. While their peak earning potential is in the three-year-old year, there is increased emphasis on support for racing older horses.
Standardbred racehorses are raced in three general categories. County fair racing includes both purse only and pari-mutuel wagering events. Overnight and claiming horse racing at pari-mutuel racetracks is the largest segment of the industry based on number of horses entered and number of races conducted. The stakes or Grand Circuit horses race in age, gender, local and entry restricted races. These races require various payment programs from the owners to boost the purse fund and perpetuate the stakes program. These stake races are the high purse races that showcase the best racehorses and the horses often travel from track to track to participate in the stakes programs throughout the country.

Standardbred racing operates on a year-round schedule in 17 separate racing jurisdictions in the United States. Standardbred racehorses frequently race on a weekly schedule, with qualifying races required if the horse is out of racing for a period of one month. Stakes events often require entry in preliminary races in order to qualify for the final race. These races are usually scheduled seven days apart. Although this business model of racing does not appear to be associated with a high prevalence of catastrophic injury, racing at short intervals does place the Standardbred racehorse at risk of musculoskeletal injury due to the frequency of high-speed cyclic loading.

A concerning trend in the spread of the racino business model is an increasing number of racing executives that do not have experience in horse racing or horse care. We believe it is imperative that senior racetrack management become knowledgeable about the issues and business practices that directly affect the welfare and safety of the horses that race at their tracks. We recommend that a senior executive in these organizations act as a liaison between horsemen and facility management. Further that racing executives review USTA on-line publications that provide insight into the important operational considerations that help to assure the health and welfare of the horse.

Other practices that will improve the safety of the racehorse include the development of a consistent protocol for pre-race examinations by regulatory veterinarians as well as uniform criteria for scratching horses. The consistent use of a thorough pre-race inspection is a valuable tool available to help decrease racing injuries. Currently there is variation in these procedures among the 17 harness racing jurisdictions in the U.S. There also is lack of uniformity in reporting racehorse injuries, particularly those that occur during morning workouts. Judicious application of a standardized reporting system will increase the racing industry's ability to monitor and reduce racing and training injuries.

The AAEP encourages continued attention to risk factors associated with Standardbred racing. Underrun heels and long toes have been recognized as risk factors for injury in the Thoroughbred racehorse. This conformation may be found in Standardbred racehorses as well and may predispose them to fetlock injury as well as tendinitis of the flexor tendons and desmitis of the suspensory ligament. The Standardbred trains and races at a gait and speed that is unique. Even though the catastrophic injury rate of Standardbred racehorses may be less than that seen in other racing breeds, it is important for Standardbred race tracks to consistently participate in a national standardized injury-reporting system in order to accurately document the prevalence of injury in horses that are racing. This is a necessary component of a strategic plan to reduce injury in Standardbred racehorses. The USTA ETrack reporting system is an important commitment to this initiative. However, at this time participation is voluntary and the reporting by individual racetracks is sporadic. Initial data review confirms the existing impression that catastrophic
injuries in harness racing are rare and are usually associated with racing accidents. Efforts should be made to achieve consistency in injury reporting throughout the harness racing industry. The InCompass Solutions Equine Injury Database operated by The Jockey Club should serve as a model for a similar injury reporting system that could be developed by the USTA and used to document injury rates in Standardbred racehorses. The Thoroughbred racehorse injury summit held in 2006 resulted in an action plan that primarily addresses Thoroughbred racing. Some of the bullet points apply to Standardbred racing as well. The AAEP recommends that the Standardbred industry organize a similar summit for harness horses.

The “gold standard” of the Standardbred racing industry is the finish time recorded by the winning horse. Racetracks are conditioned to be hard and fast to encourage continual improvement of race times. While this paradigm is well-engrained in the Standardbred business model, it should be recognized that this emphasis will eventually result in diminishing returns. Based upon recent research by Mark Denny from Stanford University, there are natural limits to racing speed, and as we approach that speed, the structural limitations of the horse will be more likely to fail. This viewpoint should be given consideration in the long-range strategic plan of the Harness racing industry.

At this time it is appropriate for the industry to consider wide-spread adoption of best practice procedures that will emphasize safety of the racing surface. Continued USTA efforts are encouraged to monitor and improve driving techniques. Standardbred racing officials should continue to be proactive in the safety and humane issues of the equipment the horse wears, shoeing and hoof care, and the safety of the race bikes. Track surface recommendations, banking of turns, and racing under certain weather conditions should be re-evaluated and racing programs adjusted to provide for the welfare of the horse. If necessary, research on these factors should be initiated to provide the best and safest environment for the racehorse. The AAEP is willing to help partner in these safety and welfare initiatives. Standardbred racing organizations are to be commended for programs to educate judges who are trained to consistently apply the rules and penalties for drivers throughout the U.S. and Canada, as many drivers regularly drive in several states and both countries each week.

The USTA has created additional initiatives to ensure the health and welfare of the racing Standardbred racehorse, including enforcement of drivers’ uniform whipping reform, support of the industry’s Racing Medication and Testing Consortium (RMTC) and national movements through the Association of Racing Commissioners International for uniform medication rules. The Hambletonian Society supports the American Horse Council, the RMTC and the Standardbred Investigative Services (SIS).

In most racing jurisdictions there is no institutional program to care for horses that can no longer race. The view of most racing facilities is that the responsibility for the care of horses rests entirely with the owner. This point of view may be justified on the basis of the individual owner’s obligation to care for his own horse. However, if a horse owner does not provide responsible care for retired racehorses, the industry becomes vulnerable to attack for apparent lack of concern for equine welfare. The resulting negative impact on horse racing’s image can contribute to disenfranchisement of racing fans. Fortunately, many retired Standardbred race horses can transition into second careers because they are versatile and adaptable to training for other disciplines. A few Standardbred racetracks support events that benefit the Standardbred
Retirement Foundation and New Vocations, which are rescue and rehabilitation organizations that are devoted exclusively to providing secondary careers and homes for racehorses.

The USTA supports the listing of all retired Standardbred racehorses in the horses available section of The Horse Magazine website (www.thehorse.com) and provides a forum on their own website for the adoption, retraining and maintenance of Standardbreds that can no longer race. In addition, the Standardbred Pleasure Horse Organization has chapters in many states and provides opportunities to show retired Standardbred racehorses in horse shows. The USTA and other Standardbred groups support the Unwanted Horse Coalition.

The AAEP acknowledges that the following recommendations for modification of the business model of racing will have significant economic implications (some positive, some negative) for racing managers. We do not make these recommendations lightly. Further, we emphasize that one of our highest priorities as an industry must be to reduce equine injuries and improve the welfare of our equine athletes. The greatest potential for decreasing injury exists in making procedural and policy changes within the business model of racing, particularly in the claiming arena.

In order to put the safety and welfare of the horse first in the business model of racing, the AAEP recommends:

- Continued vigilance by the Standardbred racing industry of the safety and welfare implications of the current schedules, procedures and policies surrounding the conditioning, sale and racing of two-year-old horses.

- Trainers and racing managers are encouraged to adopt a long-term view of a horse’s racing schedule that incorporates a period of rest in order to provide an opportunity to refresh and diminish the volume of persistent cyclic loading that occurs in the absence of rest.

- Every horse entered to race shall be on association grounds in sufficient time to have a pre-race veterinary inspection for racing soundness performed by a regulatory veterinarian who is experienced in diagnosing equine health conditions. Regulatory veterinarians should be given authority to scratch horses with lameness conditions discovered during this examination. Field size should not be a consideration in the determination of suitability of an individual horse to race.

- Standardization and enhancement of pre-race and post-race veterinary examinations by veterinarians experienced in diagnosing equine health conditions with mandatory cross-jurisdictional sharing of information in order to prevent horses that are on the vet’s list at one racetrack from entering to race in another jurisdiction until they are cleared to race by a regulatory veterinarian.

- Horses should be removed from the Veterinarian’s list when, in the opinion of the official veterinarian, the condition which caused the horse to be placed on the Veterinarian’s list is resolved and the horse’s status is returned to that of racing soundness.
• When warming up a horse prior to coming to the gate, the trainer/driver must, in all cases, jog his horse in a location of the racetrack that allows regulatory veterinarians a clear and unobstructed view of the gait of the horse.

• Uniform participation by all jurisdictions in injury reporting, using standardized forms for both racing and training injuries.

• Investment by all racing venues in capital improvements of the racetrack that will enhance the safety of the horse and driver. For example, all racetracks should ensure that an equine ambulance and trained personnel are available during the hours of racing.

• The development in all racing jurisdictions of a formalized relationship between racetracks and organizations dedicated to the rehabilitation, retraining and adoption for horses whose racing careers have ended. These programs should reinforce owner responsibility and support a secondary market for racehorses. Programs should be widely publicized in order to encourage participation by horsemen and increase public awareness of efforts by the racing industry to care for horses after their racing careers are ended. Any new programs can be linked nationally with the Unwanted Horse Coalition, currently operated by the American Horse Council. Whenever possible, there should be efforts made to follow-up on the ultimate destination of these horses in order to ensure their welfare and safety.

• The generation of funds by all participants in racing to assist in the transition of horses from racing into second careers.

• All racetracks should plan for and have protocols in place for prevention and management of infectious disease outbreaks within their enclosures. Such protocols should be based on guidelines recommended by the AAEP Infectious Disease Committee.

• All racetracks should have a response plan in the event of a natural disaster occurrence. Working with the State’s emergency response team can assist in rapid implementation of procedures to benefit the welfare of the horses and personnel working at the track when such events occur.

• Governance change within the horse racing industry to establish uniform regulatory authority to accomplish widespread and consistent compliance throughout the industry.

• Development/coordination of continuing education and accreditation programs for owners, trainers, drivers, stewards, judges, grooms, starters, farriers, veterinarians and security personnel that make the health and welfare of the horse a clear priority.
Claiming Races

There are essentially two groups of harness horses that compete at the racetrack in pari-mutuel races. The sport's top level competitors, representing approximately 20 percent of the total racing population, compete in stakes and invitational races, while the majority of horses (80%) compete in condition, or claiming races. Because the schedules and physical demands on these two groups of horses are unique and quite disparate, the AAEP recommends the following changes to the structure of claiming races in order to protect the welfare and safety of claiming-level horses:

- Claimed horses must be subjected to post race drug testing, as is currently the rule in New York. Horses that test positive may have the claim rescinded at the discretion of the buyer.
- When appropriate, horses that are scratched by the regulatory veterinarian should re-qualify between races in order to display fitness and soundness. This is a practice that is now in place in some jurisdictions, but varies from state to state and even from track to track, based on the reason that the horse was scratched. A uniform policy is recommended.
- Claims should not be announced to the public or horsemen until after the race.
- Horses that do not finish the race or those that sustain a catastrophic injury during the race, or while leaving the track surface should remain the property of the original owner, unless the individual claiming the horse decides within 30 minutes to accept the horse, allowing for circumstances in which horses do not finish the race due to broken equipment or an accident in the race.

Owner-Trainee-Veterinarian Relationship

Open and consistent communication between the owner, the trainer and the veterinarian will develop a relationship built on trust and shared philosophies. The result will be decisions that are made in the best interest of the horse. The current reality of racetrack operations is that the owner is often excluded from the communication chain, and we as veterinarians would like to change that. State-of-the-art veterinary services to optimize performance in race horses come at a cost. It is important for the owners to know that veterinary care is not given to any racehorse without the trainer’s direct or implicit approval. Without open communication, differing management philosophies often result in confusion and dissatisfaction. In order to provide complete transparency for the owner-trainer-veterinarian relationship, the AAEP recommends the following:

- Trainers should include horse owners in all major health care decisions.
- In circumstances where the trainer requests veterinary services on behalf of the owner(s), signed documentation should be used to affirm that the trainer is acting as agent for the owner when doing so.
- Owners should have a thorough understanding of the medication and training philosophy of their trainer with particular emphasis upon the level of medical care provided to their horses.
• Veterinarians should be readily accessible to owners and trainers for consultation and discussion of medical treatments. When appropriate, veterinarians are encouraged to provide information to owners and trainers regarding the estimated costs and potential risks associated with invasive medical or surgical procedures.

• Veterinary invoices should accurately indicate all examinations, treatments and procedures performed on individual horses. Both the invoice and the medical history should avoid colloquial terminology and use common medical terminology. It is recommended that the invoice with payment history be delivered directly to the owner or owner’s agent with a copy to the trainer at least monthly. All communication with owners and trainers should be consistent with a transparent owner-trainer-veterinary relationship.

**Medication**

While much progress toward uniformity has been made by industry stakeholders such as the Racing Medication and Testing Consortium in recent years, medication remains the flash point for much of the public's scrutiny of horse racing today. There is a common perception by casual racing fans, core fans and racing insiders that medication use in harness racing provides an unfair advantage to a small segment of horsemen. U.S. racing jurisdictions impose medication regulations that vary from one jurisdiction to the next. This disparity in medication rules presents significant challenges to owners and trainers who race horses in more than one jurisdiction, and often leads to confusion about how to best implement appropriate therapeutic regimens. In addition, many racing jurisdictions have their own testing laboratory, which currently do not operate by a uniform accreditation standard. World Anti-Doping Agency testing protocols may be the ultimate model to adopt in racing medication testing (http://www.wada-ama.org/).

While the veterinarian is ultimately the provider of medical care for the horse, treatment philosophies should be determined in conjunction with input from the owner/trainer and based primarily upon the safety and welfare of the horse. Veterinarians accept full responsibility for treatments they administer to horses and are held accountable by state licensing boards to this effect.

The racing industry should address the reality that individuals other than veterinarians currently are medicating horses on the backstretch and at training centers without veterinary input or oversight. Veterinarians cannot be held accountable for the acts of other individuals who medicate race horses without the knowledge or approval of the attending veterinarian. Such behavior ultimately is not in the best interest of the horse, and may place the attending veterinarian, trainer and owner in jeopardy of the consequences of a medication violation.

With regard to medication policy in the United States, the AAEP recommends the following:

- Universal adoption in all racing jurisdictions of the Association of Racing Commissioners International (ARCI) model rules, as proposed by the Racing Medication
and Testing Consortium (RMTC), including no race-day medication except furosemide (Salix®). The industry should work with the RMTC, where advisable, to make progress toward uniform medication rules that are in the best interest of the horse.

- Continued research, with industry support, to determine the causes and appropriate treatment of exercise-induced pulmonary hemorrhage (EIPH) in the race horse.

- Collaboration between the RMTC and the IFHA to create an international model rule of racing that can be uniformly administered worldwide.

- Establishment of a limited number of regional confirmation/reference laboratories that are adequately funded to meet the current challenges of drug testing.

- Establishment of minimal requirements, accreditation and monitoring of all testing laboratories.

- Development of uniform testing protocols for accredited laboratories.

- Adoption of uniform out-of-competition testing protocols by all racing jurisdictions.

- Adoption of uniform Total Carbon Dioxide (TCO2) testing protocols by all racing jurisdictions. TCO2 testing is intended to limit the potential performance-enhancing effect of elevated levels of TCO2 that would counter the natural accumulation of lactic acid during a race, thereby limiting fatigue and increasing endurance.

- Universal adoption of the penalty structures recommended in ARCI model rules and proposed by the RMTC.

- Adoption of uniform reporting practices for medication violations by all racing jurisdictions.

- Management of medication violations by racing jurisdictions with three objectives in mind: (1) to discover how the medication entered the system of the horse in order to determine responsibility and to prevent future positive tests; (2) to manage and report sub-therapeutic levels of therapeutic medication overages in a way that does not further degrade the public image of racing; and (3) to sufficiently penalize violators whose horses test positive for illegal performance-altering drugs and discourage further attempts to violate the rules.

- The key to successful implementation of these medication recommendations is increased racetrack security to promote enforcement and achieve uniform compliance. Since many Standardbred racehorses are stabled in training centers or fairgrounds off the grounds of the racetrack and ship in to race, arrangements must be made to provide an appropriate degree of security at all facilities that are under the regulatory authority of the local racing commission. The USTA is to be commended for their support of Standardbred Investigative Services, which conducts investigations into alleged wrongdoing, and for creation of the USTA Integrity Hotline as a source of intelligence used to maintain
Further clarification on the uses and any side effects of intra-articular medication. There have been many advances in equine joint therapy including the use of intrarticular (IA) Polysulfated Glycosaminoglycan (PSGAG) (Adequan™), IA and systemic hyaluronic acid (HA), and Interleukin-1 Receptor Antagonist Protein (IRAP™) based on scientific research and addressing specific biological targets. The proper use of IA corticosteroids is also appropriate but there are differences between products. The AAEP is going to produce a position on IA corticosteroids in the near future and this will be based on scientific review of their efficacy, the durations for which they are effective, as well as other advantages and disadvantages relative to newer biological therapies.

**Horses Intended for Sale at Public Auction**

The treatment of horses intended for sale at public auction should be regulated in a similar way as for horses that are racing. The adoption of similar regulations will protect the horse and ensure the integrity of the sales process, recognizing that the sales process is a unique experience for immature horses.

The AAEP recommends the following actions in regards to medication usage in race horses intended for sale:

- Yearling and mixed training sales should institute stringent medication rules that are similar to RMTC guidelines.
- Yearling and mixed training sales should institute random testing of horses consistent with RMTC testing protocol recommendations.
- Any health problems that require medical treatment on the sales grounds must be announced in a timely manner, giving the buyer time to consult with a veterinarian prior to purchase.
- A list of all medications administered to a horse while the horse is on the sales grounds and being displayed to potential purchasers should be submitted to the sales company. If testing results vary from this list, the sale may be voided at the buyer's discretion.
- Penalties for medication violations at auctions must be significant to deter consignors from medication practices that may place the horse at increased risk of injury and/or compromise the integrity of the sales process.

The AAEP’s mission is to promote the health and welfare of the horse. The focus of the AAEP Racing Committee has primarily been the Thoroughbred racing industry, but nearly all of the recommendations put forth are relevant to other racing breeds in the United States. The Racing Standardbred Sub-Committee has addressed differences between the Standardbred racing industry and the Thoroughbred racing industry in this document and emphasized the need for consideration of all aspects of horse care. In summary, the AAEP is eager to assist the Standardbred racing industry in reforming policies and practices in order to enhance the safety and welfare of the horse by putting the horse first. We believe that this effort, based upon what's best for the horse, will also be the key to restoring public confidence in the racing industry. Simply put, what is good for the horse is good for racing.
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