

Trainer's Newsletter

Standardbred

Inside

Meet your New Judges

Executive Director's Letter

Tim Schmitz Testimonial

Indiana Equine Drug Testing Program for 2015

Advice on Avoiding Positives

An RMTC Q & A

Q & A with Scott Piene



Mike Hall, Presiding Judge

Relocating from Delaware, **Mike** brings twenty-five years of officiating experience to Hoosier Park's judge's stand. He began his career in 1990 as an associate judge at Northfield Park, before moving into a presiding judge role for the Ohio Racing Commission. His years of presiding judge experience includes working at tracks such as Yonkers Raceway, Pompano Park, and most recently at Harrah's Chester and Casino Racetrack. He has also been featured in Hoofbeats' *Ask the Judge* column on several occasions.

Originally from Illinois, **Kevin** has served as an associate judge since 2008 and has many years of race office experience prior to that time. Kevin holds a bachelor's degree in political science from DePaul University. He has worked at several racetracks in the Midwest, including Colonial Downs, Running Aces, Maywood, Balmoral Park and most recently Dayton and Miami Valley Raceway in Ohio.



Kevin Gumm



Dave Magee

Dave makes the transition from race bike to the stand – bringing with him many years of driving experience. The Hall of Fame inductee has accumulated 11,868 driving wins and more than \$101,000,000 in purse earnings. His resume includes several milestones, including being named 1994 HTA Driver of the Year, representing the United States in the biennial World Driving Championship on two occasions, winning that event in 1995. He was inducted into the Living Hall of Fame in 2001. Dave brings an immense amount of industry knowledge with him to his new role as associate judge.

Director's Letter



Dear Trainer,

Welcome to the 2015 racing season.

In order to train successfully in Indiana you will need to know our rules and policies. The Commission's medication rules are, of course, among the most important for you to know. You want to train your horse to its maximum abilities while avoiding a positive test and the associated penalties.

This newsletter is intended to assist you in reaching that goal. I have asked Dr. Dionne Benson, Executive Director of the RMTTC (Racing Medication & Testing Consortium) to provide advice on avoiding positive tests.

Also included is an excerpt from a newly produced Q & A by the RMTTC. It is a *must read* for all trainers and veterinarians. Read our excerpts and then go online to www.rmtcnet.com/content_faq.asp to read the rest. You aren't likely to find a better source document to inform you of the state of medication policies in the United States.

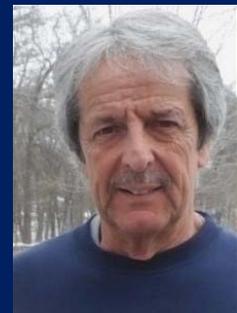
Also in this newsletter, you will read about some new happenings with our drug testing program - including the commission's new primary testing laboratory, cobalt testing news, out of competition testing and quality assurance testing. With the selection of a new lab, we are confident the timeliness of reporting test results from last year will not carry over to 2015.

Lastly, I want you to be forewarned about Qualifiers. The Commission has authority to test qualifying races and we will be doing so a few times this season. Qualifying races are held to the same medication rules as pari-mutuel races.

Best of Racing Luck,

Joe Gorajec

Tim Schmitz Testimonial



As we open the 2015 race meet, Tim Schmitz will not be in the judge's stand for the first time in almost 20 years.

Tim came on board as Presiding Judge in 1996 and is leaving behind a legacy of regulatory excellence. No person is more responsible for Hoosier Park's reputation for strict but fair racing than Tim Schmitz.

While Tim won't be around on a daily basis, his impact will continue to be felt. The Commission has retained Tim as a consultant for 2015. He will help the new judges with the transition, and he might even fill in occasionally. You will continue to see him, of course, at the Indiana State Fair. If you have a really good horse, you'll see Tim in Delaware County, Ohio, where he will continue to preside over the Little Brown Jug.

Indiana Equine Drug Testing Program for 2015

Indiana's 2015 drug testing program includes a new primary testing laboratory, a unique-to-the-industry audit laboratory, expanded out-of-competition testing and cobalt testing. Several new elements in this year's program are consistent with recommendations made by The Jockey Club in their much publicized 2014 McKinsey Report titled *"Raising the Standard of Testing and Enforcement."*

Primary Laboratory: Truesdail Laboratory in Tustin California has been selected by the Indiana Department of Administration to be the Commission primary laboratory. Truesdail is accredited by the Racing Medication and Testing Consortium. Truesdail's contract will include performance based metrics ensuring the quality of its testing and the timeliness of reporting.

Quality Assurance Program: The quality of Indiana's testing will be further ensured by the addition of an audit laboratory, which will perform periodic testing. A number of samples will be sent to this laboratory for quality assurance. The Commission has committed up to \$100,000 towards the audit program. Industrial Laboratory in Denver, Colorado will perform this important function for the Commission.

Out-of-Competition Testing: The Commission will increase its target for out-of-competition testing to 500 horses for 2015. This increase doubles the Indiana Horse Racing Commission's historical average of annual out-of-competition tests. The new benchmark will raise Indiana's out-of-competition tests to more than 10 percent of the total number of horses tested annually. Indiana was among the first states in the nation to initiate an out-of-competition testing



program. Since 2007, Indiana has conducted more than 2,000 such tests. In Indiana, out-of-competition testing is conducted at race tracks, training centers, and private farms.

Cobalt: The Commission will continue to test for cobalt in 2015. The threshold will remain at 25 parts per billion (ppb). Indiana, the first state in the nation to regulate cobalt, experienced a decrease of 87 percent in horses racing with elevated levels once its regulatory threshold was effective on September 30, 2014. Additionally, cobalt has been included in the list of substances regulated through out-of-competition testing. The Commission has allocated up to \$50,000 for cobalt testing in 2015.

Good Advice on Avoiding Positive Tests

Each of the medications on the Controlled Therapeutic Substances (CTS) list has a corresponding threshold. That threshold represents the permitted concentration of a substance in the urine or blood of the horse. If the horse tests above that threshold, it is considered a positive test. One of the questions often asked is how trainers can avoid getting positive tests for medications on the CTS list. Here are a few suggestions for avoiding medication overages:

Have a good working relationship with your veterinarian. A trainer should be able to ask the vet about the purpose of a medication, potential drug interactions, and any potential side effects for the horse of its administration. The veterinarian also has access to scientific papers upon which the majority of thresholds are based – these should aid your vet when advising you.

Ensure horses are properly dosed. Many of the medications on the CTS list are based upon a milligram of medication per kilogram of the horse dose. For example if a 410 kg (~900 lb) 2-year-old filly and a 500 kg (~1100 lb) 4-year-old gelding are each given 2 grams of phenylbutazone it will result in a much higher drug concentration in the filly and will generally require a longer withdrawal time.

“Use FDA-approved medications whenever available. Other compounds have had 800 percent or more of the label concentration of the active ingredient present – which can lead to overages and health issues for horses.”

Use FDA-approved medications whenever available. FDA approved medications have guaranteed concentrations of the active ingredient. Some compounded medications recently tested have had less than 0.01 percent of the label concentration of active ingredient present – making them essentially useless. Other compounds have had 800 percent or more of the label concentration of the active ingredient present – which can lead to overages and health issues for horses.

Be particularly careful with oral medications. For example, dexamethasone can be given intravenously, intramuscularly, or orally. Absent good communication between barn staff and veterinarians, there have been instances where horses have been administered a dose of oral dexamethasone within 72 hours of racing, administered a dose that exceeds 0.05 mg/kg, or the horse has been administered an oral dose by the barn staff and an IV dose by the vet at 72 hours which would



Dionne Benson, DVM
RMTC Executive Director

increase the necessary withdrawal time.

Use methylprednisolone acetate with caution. Methylprednisolone acetate should likely not be used intramuscularly in a horse that is scheduled to race. Methylprednisolone acetate stays in the joint for long periods of time – up to several months. Because of this, repeated dosing with this medication has a higher likelihood of causing unintentional overages than some of the other intra-articular corticosteroids. Use lower doses – recent research at the University of Kentucky has shown that lower doses of methylprednisolone acetate are actually more beneficial than higher doses, which can cause cell death. Ensure your veterinarian is using the lowest possible dose in each joint to protect horse welfare and decrease the likelihood of an overage.



Q & A

Thresholds...

How were the thresholds developed?

Some of the thresholds are based upon historical data and research (e.g., phenylbutazone, flunixin meglumine and furosemide). The majority of the thresholds, however, were developed using research studies funded by the RMTC or studies shared with the RMTC from similar international studies. In the majority of the RMTC studies, between 16 and 22 horses were used. First, the subject medication was administered at clinically relevant dosages based on either manufacturer's recommendations or input from clinicians and/or veterinary pharmacologists. Once a medication was administered, researchers collected blood, and in some cases urine, at predetermined times post administration. Once the samples were collected, the analytic laboratory analyzed the samples using a validated method and provided their results to the RMTC. Most of these studies have been published or are in the process of being published in peer reviewed journals.

Withdrawal guidelines...

Can I confidently use withdrawal guideline recommendations for all medications on the CTS located on the RMTC website?

The withdrawal guidelines do not guarantee that a positive finding will not occur. There is always the possibility of an outlier – a horse that for some reason metabolizes medication more slowly than others – but the statistical analysis used in determining the thresholds is very robust and designed to minimize

that risk. Moreover, if dosing guidelines for the medication or administration routes recommended are not followed, there is an increased chance of a positive finding.

Furthermore, the experiments performed to set these thresholds do have limitations. The experiments were performed using a specific dose of each medication and did not account for concurrent administration of other medications or other substances – which could affect the length of time required for the medication or its metabolite to fall below the regulatory threshold. Trainers and veterinarians are encouraged to perform their own risk assessment based upon the characteristics of the medication, its rate of clearance, and the dose and route of administration as well as the treatment of the horse with other substances. The use of compounded medications can also cause unintentional overages – even if the recommended dose is used based on label concentration – because in some cases compounded medications do not contain the label concentration of the active ingredient.

The RMTC withdrawal recommendations use the best information available at the time, but ultimately it is the responsibility of the trainer in consultation with his or her veterinarian to do the appropriate risk analysis based on the numerous factors that can effect drug elimination. Drug formulation, route of administration, multiple drug interactions, horse health, size, exercise activity, fitness and many other factors can impact drug eliminations and need to be considered when drugs are used in racing.

Continued on page 6

Picogram Levels...

Why are we regulating medications to levels as low as picograms?

The RMTTC has attempted to regulate as many CTS (Controlled Therapeutic Substances) as possible in blood. Picograms per milliliter (pg/mL) concentrations in blood are pharmacologically active for many drugs. The same is true for some drugs when found in urine. For this reason, several medications are regulated at concentrations expressed in pg/mL in the horse. While pg/mL concentrations may seem small, the concentration of each of these medications falls below nanograms per milliliter (ng/mL) in blood quickly. In fact, in every case where medications are regulated at thresholds expressed at pg/mL in blood, the concentration of

each was below 1 ng/mL at 24 hours in research studies. These include substances such as corticosteroids which we know have effects that last months in the joint. Therefore, regulation at pg/mL is the only appropriate way to control the use of these medications in the racing environment.

It should also be recognized that many of the thresholds for substances on the CTS list are in blood rather than urine. The concentration of a drug in blood is almost always much less than the corresponding concentration of the drug in urine so the switch from urine to blood often necessitates use of a much lower threshold in order to regulate race day or longer use of the drug.

Indiana Horse Racing Commission						
2015 Race Dates						
						Post Time Tuesday - Saturday 5:15 pm
March						
S	M	T	W	TH	F	S
22	23	24	25	26	27	28
29	30	31				
April						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		
May						
S	M	T	W	TH	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						
June						
S	M	T	W	TH	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				
July						
S	M	T	W	TH	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	
August						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					
September						
S	M	T	W	TH	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			
October						
S	M	T	W	TH	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31
November						
S	M	T	W	TH	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14

Standardbred 2015 Race Dates (March 27 - November 14, 2015) approved by the Indiana Horse Racing Commission November 17, 2014.

Five Questions with Scott Peine – Director of Racing Hoosier Park Racing & Casino

How were you introduced to the horse racing industry and what was your first job in the industry? My dad was a standardbred trainer until mid 1990. I basically stayed involved as a fan until 2002 when I got my first horse racing job at Hawthorne Race Course as an assistant clerk of scales. I graduated from the University of Louisville in 2002.

What racetracks have you worked for? Hawthorne, Scioto Downs, Prairie Meadows, Delaware County Fair, Maywood Park, Balmoral Park, Indiana Grand, Running Aces, The Meadowlands, and Hoosier Park.

What is the biggest challenge facing Indiana Harness Racing in 2015? The competition for horses between Indiana and Ohio. With Ohio having slot infused purses, there is serious competition for every type of horse, especially the higher quality ones.

From your perspective, what is the most important attribute that Indiana harness racing has to offer?

Every entity that is involved in the Indiana harness racing industry is committed to making it better and wants it to succeed on a national level. From my point of view, there is great cooperation between all facets of the business that you don't find in a lot of states. In addition, Hoosier Park and Indiana Grand do a great job of promoting live racing.

How has the quality of harness racing in the state of Indiana improved over the last few years?

It's amazing how great the Indiana Sired horses have improved over the years. Looking at 2014, you could argue the top two three-year-old pacers (both sexes) in the country were Indiana Sired horses. In addition, Natural Herbie (also Indiana Sired) was one of the top older trotters in



Scott Peine

“When you look at the open stakes program, we have attracted almost every big name you can think of since the stakes program has expanded.”

the country. We have a great Sires Stakes program and that has enabled the quality of Indiana Sired horses to really grow.

When you look at the open stakes program, we have attracted almost every big name you can think of since the stakes program has expanded. For example, the 2014 horse of the year, JK She'salady, raced at Hoosier Park last year. Also, the 2014 pacer of the year, Sweet Lou, and the 2014 trotter of the year, Shake It Cerry, both raced at Hoosier Park in 2014.

Attention Horsemen

Cobalt Testing

Post-race and out-of-competition samples are subject to analysis for excessive levels of cobalt. The trigger for a cobalt positive test is 25 ppb (parts per billion).

Horsemen have access to the University of Kentucky Veterinary Diagnostic Laboratory to determine cobalt concentrations on their horses.

For more information, visit the Commission's website at www.in.gov/hrc.



Indiana Horse Racing Commission

1302 N Meridian St., Suite 175
Indianapolis, IN 46202

PHONE:
(317) 233-3119

FAX:
(317) 233-4470

Visit us at:

www.in.gov/hrc

Are you shipping-in from out of state?

Be Sure
to Read
This!

HEALTH CERTIFICATES

Horses shipping in from out of state must provide a current Health Certificate from the state of origin. **Example:** If you are shipping from Kentucky, the certificate should be issued in Kentucky.

Horses arriving without current certificates **will not** be allowed entrance to the stable area. IHRC licensed veterinarians will not issue health certificates for this purpose.

INDIANA HORSE RACING COMMISSION

1302 N Meridian St., Suite 175
Indianapolis, IN 46202