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RMTC Makes Withdrawal Time Recommendations, Announces Progress of its Drug Testing Initiatives Task Force



Based on the recommendation of its Scientific Advisory Committee, the Racing Medication and Testing

Consortium (RMTC) board of directors has recommended scientifically identified withdrawal guidelines and plasma thresholds for the short-acting bronchodilator glycopyrrolate, the muscle relaxant methocarbamol, and four anabolic steroids, three of which are endogenous (naturally occurring) in the horse. A recommendation of the non-steroidal anti-inflammatory medication firocoxib has also been approved pending resolution of one outstanding issue.

"Administration studies on these medications were developed and funded by the RMTC over the past few years in an effort to provide horsemen and practicing veterinarians with withdrawal guidelines that will enable the therapeutic use of these medications without compromising the integrity of racing competition or the welfare of our human and equine athletes," said Dr. Rick Arthur, chair of the RMTC Scientific Advisory Committee and equine medical director for the California Horse Racing Board.

"The results of these studies have been eagerly anticipated by the industry, and we will continue to conduct important research on other therapeutic medications that are commonly used in managing the health of racehorses."

The board made these recommendations at its meeting at the University of California-Davis on October 12, 2010.

The specific recommendations are as follows:

- ◆ Glycopyrrolate: Threshold concentration of 3.5 pg/ml in serum or plasma, which regulates a 24-hour withdrawal guideline for a single, intravenous total dose of 1 mg.
- ◆ Methocarbamol: Threshold concentration of 1 ng/ml, which regulates a 48-hour withdrawal guideline for a single intravenous dose of 15 mg/kg.
- ◆ Firocoxib: Threshold concentration of 40 ng/ml in serum or plasma, which regulates a 7-day withdrawal guideline when administered at the FDA-approved label dose, pending a review of clinical effects by the RMTC Scientific Advisory Committee.
- ◆ Boldenone: Screening limit no greater than 100 pg/ml in serum or plasma with a confirmatory threshold no greater than 25 pg/ml for all horses regardless of sex, which regulates an 82-day withdrawal time.
- ◆ Nandrolone: Screening limit no greater than 100 pg/ml in serum or plasma with a confirmatory threshold no greater than 25 pg/ml for geldings, fillies and mares, which regulates a 35-day withdrawal time. Male horses other than geldings will not be tested for nandrolone in blood.
- ◆ Stanozolol: Screening limit no greater than 100 pg/ml in serum or plasma with a confirmatory threshold no greater than 25 pg/ml for all horses regardless of sex, which regulates a 47-day withdrawal time.
- ◆ Testosterone: Screening limit no greater than 100 pg/ml in serum or plasma with a confirmatory threshold no greater than 25 pg/ml for geldings, fillies and mares and a confirmatory limit of 2 mcg/ml for male horses other than geldings, which regulates a 30-day withdrawal time.

Meeting business is continued on page 2.

The RMTC board expects to be able to issue recommendations for acepromazine, pyrilamine, mepivacaine, lidocaine, procaine and butorphanol at its next full meeting.



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In addition, the RMTC board of directors approved a plasma threshold of 10 mcg/ml for DMSO, which would allow for the use of DMSO as a topical leg paint but would not allow for the oral or intravenous administration of the drug. The board also recommended that DMSO be reclassified by the RCI Drug Testing Standards and Practices Committee to a Class 4 substance when appearing in samples in excess of the threshold concentration.

Based on a report provided by the Scientific Advisory Committee, the RMTC board expects to be able to issue recommendations for acepromazine, pyrilamine, mepivacaine, lidocaine, procaine and butorphanol at its next full meeting in March 2011.

Also at the meeting, RMTC Executive Director Dr. Scot Waterman provided an update on the progress of the RMTC Drug Testing Initiatives Task Force, which has been working toward drug testing quality assurance and laboratory accreditation since its inception in 2008. He noted that before the task force was initiated, only five of the 18 laboratories conducting drug testing on racehorses were accredited to ISO 17025 standards. Dr. Waterman predicted that number will increase to 11 out of 19 laboratories by the end of 2011. In addition, three additional laboratories have expressed an interest in becoming RMTC-accredited following RMTC Vice Chairman Alan Foreman's remarks at The Jockey Club Round Table Conference in August.



"We are thrilled with the commissions' and their laboratories' response to the challenge laid out by Mr. Foreman as part of his remarks at The Jockey Club Round Table Conference," said Dr. Waterman. "The successful implementation of this program will improve industry confidence in its laboratory infrastructure and put our labs on par with any in the world."

In other RMTC business:

- ◆ Board members received updates on funded research for several potential doping agents and a progress report on research on corticosteroids.
- ◆ Dr. Heather Knych, who was funded by the RMTC post-doctoral research fellowship program, presented a summary of her ongoing corticosteroids research.
- ◆ The RMTC will develop a penalty structure for the 2ug/ml threshold limit for phenylbutazone to recommend to the RCI for their consideration at the next RMTC board meeting.
- ◆ Meeting attendees were given a guided tour of the Kenneth L. Maddy Equine Analytical Chemistry Laboratory and a demonstration of the equine treadmill at the UC-Davis Veterinary Medical Teaching Hospital.

"I would like to thank Dr. Scott Stanley and everyone at the Ken Maddy laboratory who helped host our group at this incredible facility," said RMTC Chairman Dr. Robert Lewis. "We truly appreciated their hospitality and willingness to provide our board members with a unique learning experience."



For more information on AAEP white papers, visit aaep.org. Copies can also be found on the RMTC website—rmtcnet.com

AAEP Releases Standardbred Welfare Recommendations

The American Association of Equine Practitioners (AAEP) Racing Committee has modified recommendations that the group previously developed for Thoroughbreds and Quarter Horses for the harness racing industry. The white paper, "Putting the Horse First: Veterinary Recommendations for the Safety and Welfare of the Standardbred Racehorse," provides guidelines specific to the breed that are concentrated in four main areas: the racing business model, the owner-trainer-veterinarian relationship, medication, and the public perception of racing.

The recommendations are as follows: standardization and enhancement of pre-race and post-race veterinary examinations across the 17 U.S. jurisdictions that hold harness racing; consistent participation by Standardbred tracks in a national injury reporting system; adoption of best practice procedures that emphasize safety of the racing surface; increased racetrack security to ensure compliance by all racing participants with medication rules; and a modified structure for claiming races, which allows claims to be rescinded if the post-race drug test is positive (horses that do not finish or sustain a catastrophic injury during the race or while leaving the track should remain the property of the original owner unless the individual with the claim decides to accept the horse).

Excerpt from Alan Foreman's Report to The Jockey Club Round Table

We encourage all of the laboratories who perform drug testing for racing in this country to commit to accreditation to the RMTC Standards. These standards are so important that at a minimum, beginning in 2012, we should not allow drug testing of our Triple Crown, Breeders' Cup and graded stakes races to be performed at any laboratory not accredited to the RMTC Standards. Indeed, for the sake of our sport, each and every one of you should demand that the drug testing for all of our races, regardless of when and where, be tested by a laboratory accredited to the RMTC accreditation standards. Our regulators need to take the necessary steps in their contracts for testing services to require that the laboratory they engage be accredited to the RMTC Standards. For those who say we could never get this done because there was no way to pay for it, let me tell you about leadership by example. The New York Thoroughbred Horsemen's Association, the owners and trainers who race in New York, is providing the funds necessary for New York's new laboratory to become accredited to the RMTC Standards, and The Jockey Club, demonstrating its ongoing commitment to this effort, will provide financial assistance to any laboratory seeking RMTC accreditation.

It is one thing to achieve accredited status. It then becomes important to ensure that the laboratory is able, on a continuing basis, to accurately detect drugs at concentrations relevant to our sport and with results that are correct. This is accomplished through quality assurance and proficiency testing. Through blind and double-blind testing, the assessor is able to determine whether a laboratory can detect a drug and whether its results are correct. Quality assurance and laboratory proficiency go hand-in-hand with accreditation. In our racing industry, quality assurance and laboratory proficiency have historically been divided between two separate organizations of our scientists, each of whom tested themselves and with no collaboration between the programs. Following up on the recommendations of the [RMTC Drug Testing Initiatives Task Force], these two programs are now being merged into a single new Equine Quality Assurance Program developed by the RMTC, but which will be administered and monitored by an independent third party. This is a totally new concept for our industry and another major step forward.

Consolidation of our existing 18-laboratory infrastructure, and creating one or more industry-sponsored research and reference laboratories, while absolutely essential for the future of our industry, is, and was always deemed to be, the most ambitious and difficult recommendation to achieve. There are political and funding issues that we knew would limit short-term progress and that was to be expected. Without further comment, I can tell you that I believe significant consolidation of our current laboratory structure is already under way at this time, and you will be hearing about this consolidation in the coming months.

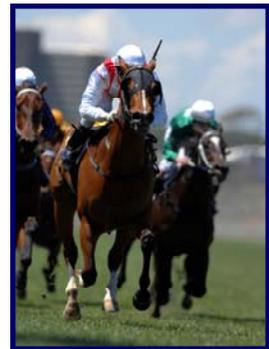
As to the recommendation for one or more industry-sponsored research and reference laboratories, four of the laboratories seeking RMTC accreditation — New York, California, Pennsylvania and Kentucky — are, or will become, recognized research and reference laboratories, the kind envisioned when we made these recommendations. These are all state-of-the-art programs that combine drug testing and research. They will collaborate on all of our testing and research issues, an unprecedented and monumental step for our industry. They will help us answer the questions that continually arise about drug testing in racing and make it possible for us to deliver a coherent explanation. More importantly for this moment, two of our laboratories are presently collaborating on the identification and confirmation of certain gene and blood-doping agents, the new generation of drugs that I warned of two years ago, that are now finding their way into the equine sport. Funding for this effort is being made possible by the RMTC. I am confident that you will be hearing about the fruits of their labor in the not too distant future. For a full transcript of this and other reports at the 2010 Round Table Conference, please visit jockeyclub.com.

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-Alan Foreman

Upcoming Industry Meetings and Conferences

- ◆ AAEP 56th Annual Convention: December 4-8
- ◆ University of Arizona RTIP Symposium on Racing & Gaming: December 6-9
- ◆ Dr. Waterman's presentation to the Kentucky Thoroughbred Farm Managers' Club: March 2
- ◆ National HBPA Winter Convention: March 17-21
- ◆ RCI Annual Conference: March 23-26



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THE INTEGRITY
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UPDATE:

**The RCI board of
directors approved
the RMTC
phenylbutazone
recommendation that
decreases the
threshold for that
medication from
5 mcg/ml to 2 mcg/ml.**

Our Mission

The RMTC strives to develop and promote uniform rules, policies and testing standards at the national level; coordinate research and educational programs that seek to ensure the integrity of racing and the health and welfare of racehorses and participants; and protect the interests of the racing public.



Industry News

AAEP Develops Guidelines on Racehorse Care

The American Association of Equine Practitioners (AAEP) recently developed the white paper, "Clinical Guidelines for Veterinarians Practicing in a Pari-Mutuel Environment," to provide guidance for veterinarians treating racehorses. The guidelines encourage medical practices that place proper emphasis on the health, safety and welfare of the racehorse. Its main focus is the practice of treating a horse based on the entry date for its next race. The white paper expresses that to ensure a horse is recovered before it races, treatment should be based on a veterinary diagnosis with appropriate time allowed for a follow-up evaluation.

"Our purpose is to reinforce sound medical principles within the unique environment of racing," said AAEP President Dr. Nat White. "As horse racing continues its pursuit of increased safety, we understand the need for us, as veterinarians, to examine our role in medication usage and medical treatment. These guidelines affirm the already excellent medical care provided by many veterinarians."



The use of therapies such as shockwave therapy and hyperbaric oxygen therapy are also addressed, along with recommendations on maintaining medical records and changing the current racetrack veterinary business model to one that bases billing on professional services rendered, rather than the dispensing or administration of medication.

To view the full paper, go to www.aaep.org/white_papers.htm.

Breeders' Cup Passes Drug Ban Rule for Trainers

In an effort to increase international participation in the Breeders' Cup World Championships, the Breeders' Cup board of directors approved a new international nominations program and extended its ban on trainers with medication infractions to include Class I substances in any racing jurisdiction in the year prior to the event.

Class I drugs are stimulants and depressants that have the highest potential to affect the outcome of a race and have no accepted medical use in horses, according to the Association of Racing Commissioners International's guidelines. The vote was passed unanimously and will go into effect in 2011.

Kentucky Approves Out-of-Competition Testing

The Kentucky Horse Racing Commission enabled the state to meet Breeders' Cup World Championships standards by approving out-of-competition testing as an emergency regulation, immediately in effect.

Ned Bonnie, who headed the joint committee that developed the rule, believed it was necessary that it be passed as an emergency regulation due to concerns about equine welfare and safety, and for the protection of the betting public.

Out-of-competition testing targets blood-doping substances such as erythropoietin (EPO) that fail to be detected in post-race testing.

The commission recommended a five- to 10-year license suspension for the owner and/or trainer of the horse, a fine of up to \$50,000 and a forfeiture of purse money.