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## Breeders' has breakdown plan

### Injured horse would be moved to hospital

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It's one of the most horrifying racetrack sights. A horse breaks its leg, a tarp is raised and, in many cases, the horse is euthanized.

The scene played out in last year's Breeders' Cup Classic after European champion George Washington broke down near the finish.

But during this year's \$25.5 million Breeders' Cup at Santa Anita Park in southern California, officials say they will make every effort to move any injured horse off the track by equine ambulance to an on-track hospital, where a more thoughtful judgment can be made about whether it can be saved.

"Having been in that situation enough times, I can tell you that the panic of the moment is the last time to make a decision as to whether an animal ... has a chance to survive or not," said veterinarian Rick Arthur, a former private practitioner who is the California Horse Racing Board's equine medical director. "You're much better off making those decisions under a controlled, less high-pressure environment."

The effectiveness of that system — which has been in place for some past Breeders' Cup events—likely will get extra scrutiny, amid heightened safety concerns that drew national attention when Kentucky Derby runner-up Eight Belles broke both front legs after crossing the finish line.

Some in the industry suggest the policy, which was in place but didn't come into play at Santa Anita in 2003, has a public-relations benefit but may not have much practical benefit beyond this weekend, attempting to take an ugly part of the sport out of the public eye.

But Arthur disputes that, noting improvements in equine medicine provide more chances to save horses. That bears more consideration than you get on the track itself.

"The goal is to take the animal back to the hospital," he said, "and I don't think any of us would want a decision as to whether we're going to live or die made at the scene of a car accident, would we?"

Arthur's Kentucky counterpart, Mary Scollay, said the Kentucky Horse Racing Commission is watching the Breeders' Cup effort, although it would be difficult to adopt in this state, which lacks California's on-track equine hospitals.

She noted that sometimes — in a case such as Eight Belles' — euthanasia is the only option, even if there is a hospital on the grounds. Horses don't recover well lying down, and Scollay said she wouldn't try to save a horse if its potential quality of life was untenable.

"If it's not in the best interest of the horse to anesthetize and transport for further evaluation, then I think you need to say, 'We did what was right for the horse,' and face the music," Scollay said.

The transportation option "may provide enhanced options for some horses," Scollay said, but, "I don't think that the majority of injuries that we deal with" would be candidates.

Eight Belles' trainer, Kentucky native Larry Jones, agreed, noting that while there are better ways to treat horses today than in the past, there are some injuries that can't be treated successfully and some tracks where it isn't logistically feasible to move a horse because of the distance to a clinic.

"So the longer you take to euthanize that horse, the more pain he goes through unnecessarily," Jones said, adding that he has never seen an on-track veterinarian rush to judgment and euthanize a horse that could have been saved.

Kevin Flanery, spokesman for Churchill Downs Inc., said he couldn't address the California plan specifically, but "we're looking at a variety of safety initiatives for the human and equine athletes and will let that evolve over time."

Scollay acknowledged that euthanizing on the track may not sit well with the public and that the California policy could have "benefits to public perception."

"There may be the appearance ... that it is a more thoughtful decision than one that sometimes the public perceives to be made in haste."

Scollay said she hopes the California policy doesn't come into play for the Cup races, "but I'm interested in feedback" about how it will work, "because we could certainly look at modifications that could be used in Kentucky."

Kentucky's track ambulances carry injectible anesthetics, Scollay said, but because tracks like Churchill Downs, Keeneland and Turfway Park don't have hospitals, an injured horse would have to be transported to Lexington, which has two large equine hospitals, or to the one in Simpsonville.

"You have to have a really good plan in place for what you're going to do after you've anesthetized the horse. And at the moment, we don't have a plan in place for transporting an anesthetized horse to a hospital. The injectible that we carry gives you about 15 minutes."

That may not be enough time even in Lexington, she said.

Scollay noted that it's somewhat disingenuous to have a policy about transporting injured horses in place only for big events, like the Breeders' Cup.

"If you're going to have it available for big race days, you should probably have it available every day."

Scollay and Arthur said the California effort could be a starting point.

Seeing what happens there, Arthur said, is "going to make it easier for other racetracks to look at the feasibility of these sorts of procedures and see whether it's appropriate for their environment."

"Maybe five years from now this will be standard operating procedure. I hope so."

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