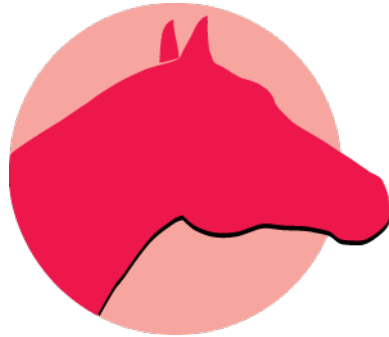


Reformed Racing Medication Rules



Matt Iuliano

Executive Vice President & Executive Director
The Jockey Club



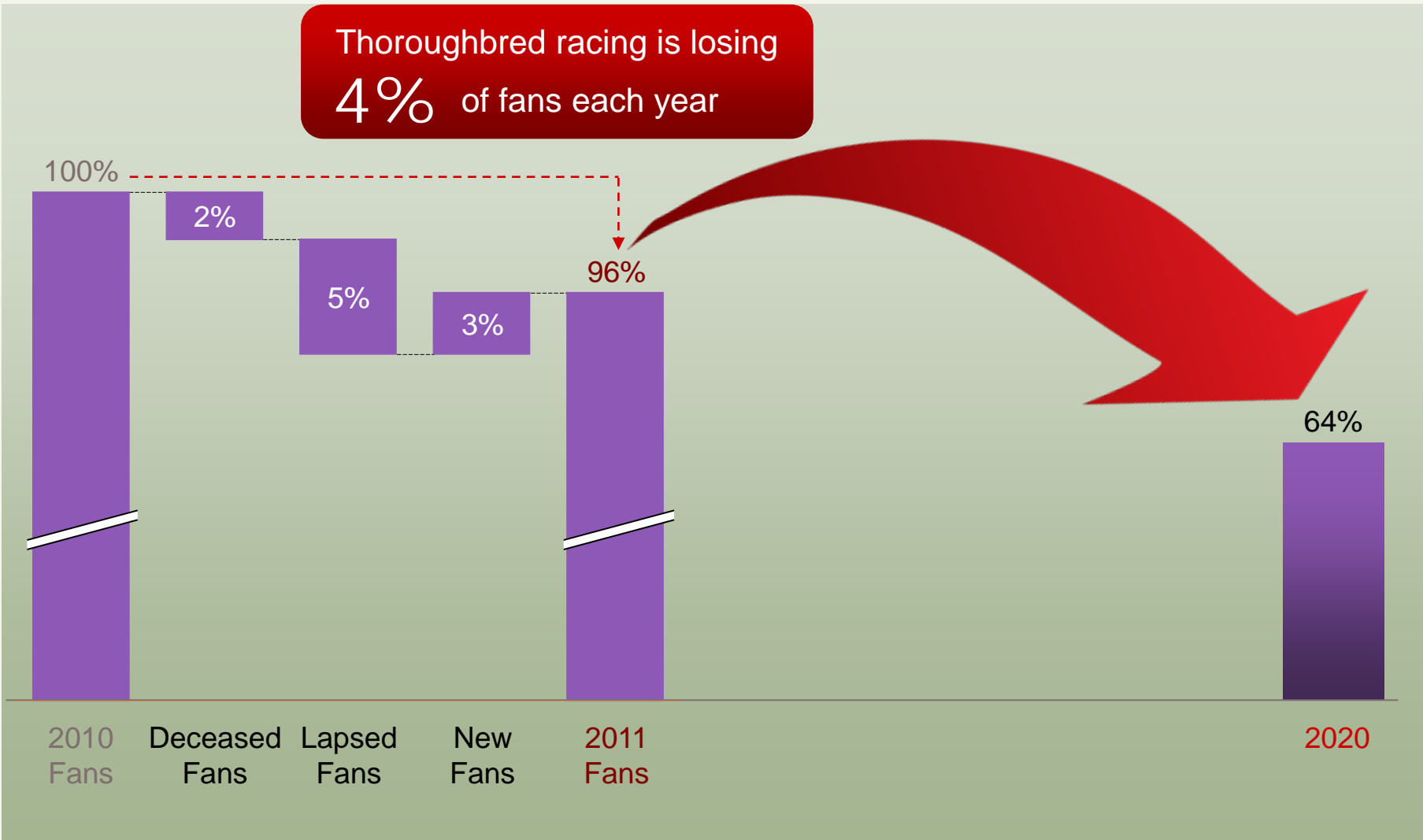
Creating a Uniform National Medication Rulebook

Welfare and Safety of Racehorse Summit IV
October 16th & 17th, 2012



Estimated Market Changes in Thoroughbred Racing

Thoroughbred racing is losing 4% of fans each year





Five Principal Causes of Market Changes

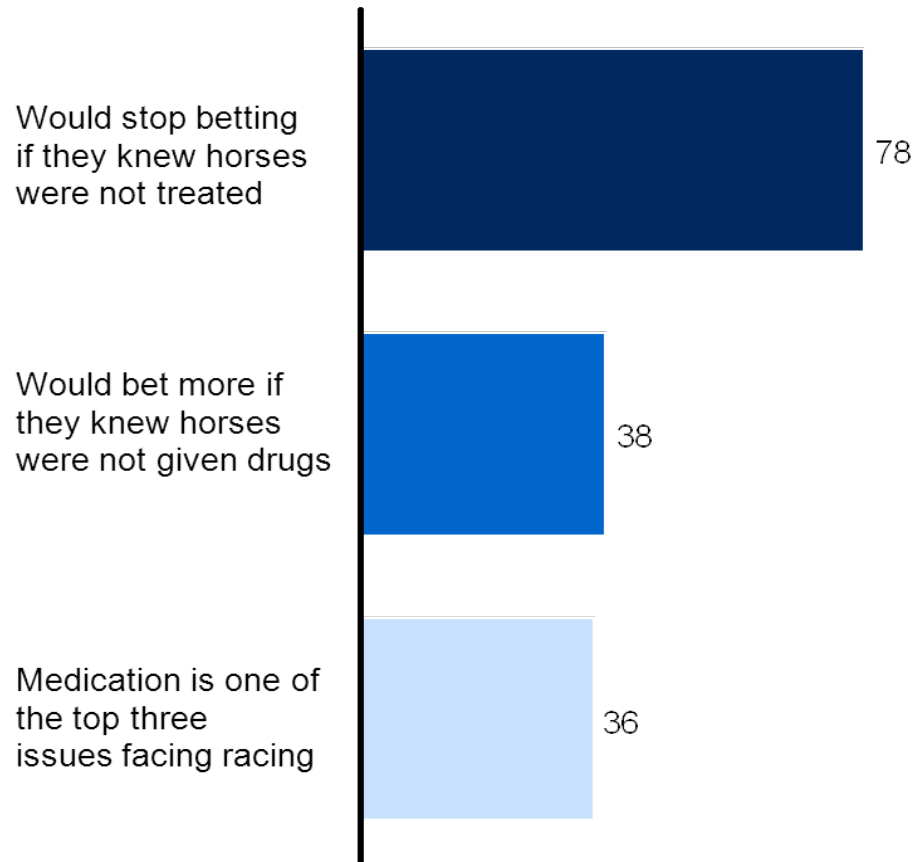




Concerns over animal welfare and medication are consistent themes in consumer and stakeholder research

McKinsey Survey (2011)

% of horse racing fans¹ who agree (to any degree) with each statement



¹ Fan is defined as someone who bets or attends a race 3+ times per year
SOURCE: McKinsey 2011 Thoroughbred Racing Consumer Survey (N=1800)

Stakeholder interviews (2011)

- Medication of horses was highlighted as an issue adversely affecting Thoroughbred racing in 78% of stakeholder interviews

HANA Survey (2009)

- 59% reported they were “extremely concerned” with illegal use of medication and drugs
- Stiffer penalties for drug positives was voted as a top two issue

NTRA Survey (2008)

- Top three concerns among Thoroughbred fans:
 - Health and safety of the horses
 - Performance enhancing drugs
 - Therapeutic overages



PENN
SCHOEN
BERLAND

- The sport's ripest target for more fans and greater share of the gambling dollar ("Likely Racing Fans") told us integrity, drugs, and equine injuries issues dominate how they view Thoroughbred racing

- Every other sustainability challenge is secondary to integrity, drugs, and equine injuries; these issues need to be comprehensively addressed & soon or the future of Thoroughbred racing is imperiled
- The wonder is that so many in horse racing circles think they can ignore drug, health, and safety issues that the Olympics, the NFL, and MLB work so hard to overcome

Range of Regulatory Approaches with Frequently Used Therapeutic Medications

Phenylbutazone	5µg	2µg	2.5µg	2µg (stakes)	Race-day
Corticosteroids	Race-day	24 hours	36 hours	4 days	5-7 days
Clenbuterol	24 hours	72 hours	96 hours	5 days	7 days
Methocarbamol	24 hours	36 hours	48 hours	72 hours	5 days
Flunixin	24 hours	48 hours	10 ng/ml	20 ng/ml	
Acepromazine	24 hours	36 hours	96 hours	120 hours	7 days

Source: Regulatory thresholds from published rules and recommended withdrawal times reported at RMTcnet.com

Thoroughbred Regulatory Rulings™

Search Parameters

Trainer Name:	<input type="text"/>	Date Range:	<input type="text"/>	<input type="text"/>
		(M/D/YY)		
Association:	<input type="text" value="-"/>	Suspension Start:	<input type="text"/>	<input type="text"/>
		(M/D/YY)		
Regulatory Authority:	<input type="text" value="-"/>	Fine: \$	<input type="text"/>	to \$ <input type="text"/>
Horse:	<input type="text"/>			

Thoroughbred Rulings

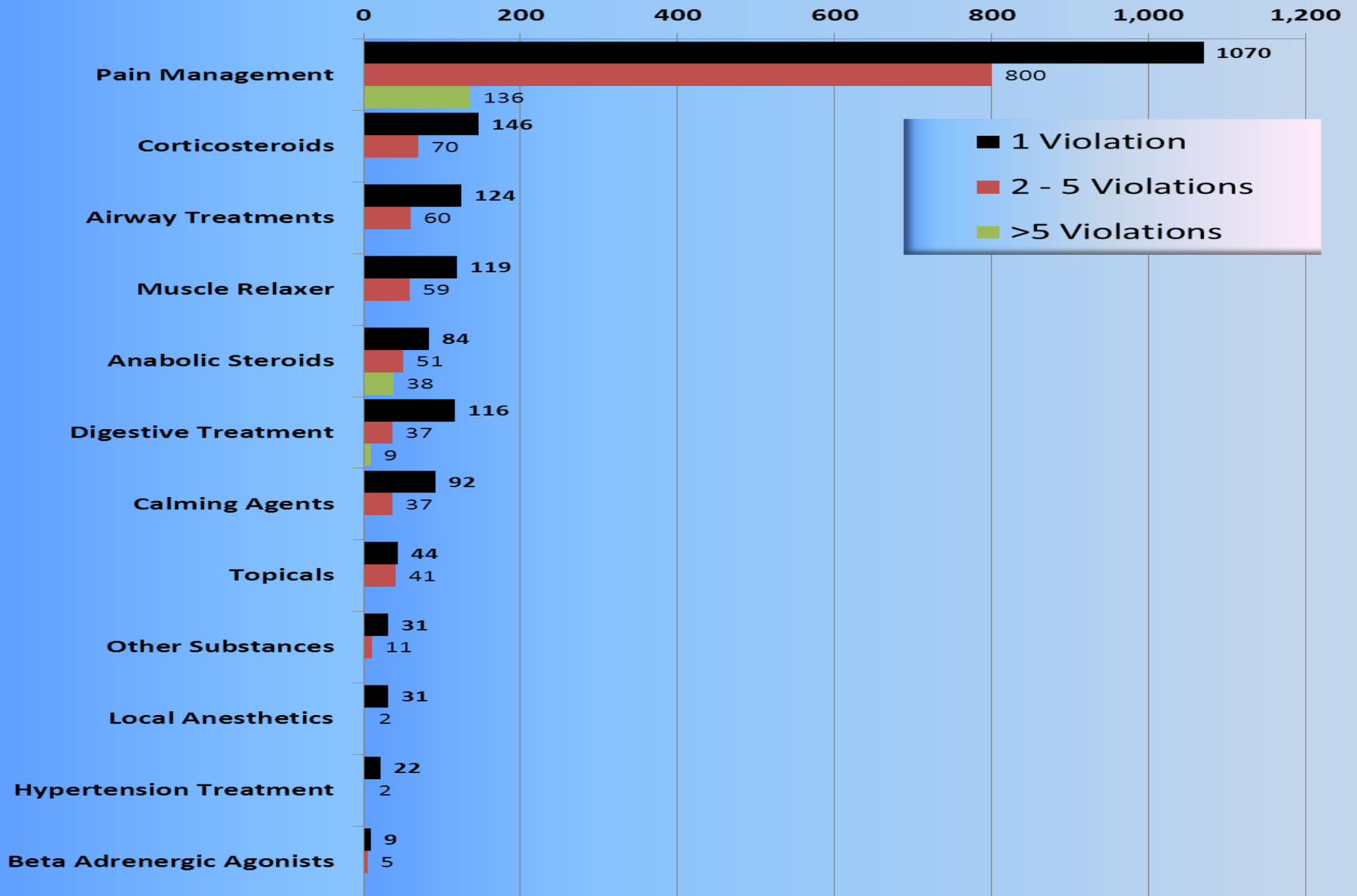
[HOME](#)

[STATS](#)

[By Trainer](#)

[By Regulatory Authority](#)

Number of Rulings Categorized by General Treatment Category



1,909

12,801

~200

REFORMED RACING MEDICATION RULES

AUGUST 12, 2012



Two category system of drug classification including controlled therapeutics and prohibited substances

Regulatory thresholds and administrative guidance to assist horsemen

Stricter penalties meted upon a points system dependent upon reciprocal enforcement among jurisdictions

Improved security of 'in-today' horses based upon industry best practices

Annual review of rules in light of regulatory data to ensure objectives are being met



THOROUGHBRED OWNERS AND BREEDERS ASSOCIATION

AQHA

AMERICAN QUARTER
HORSE ASSOCIATION



Thoroughbred Racing Associations