

CHAPTER 4

DRUGS

Concerns about Drug Use in Racing

4.1 All witnesses and submitters shared concerns over the misuse of drugs in horse racing. The Australian Conference of Principal Racing Clubs in its submission stated:

Determination by the Principal Clubs to eliminate dishonest and unsavoury practices has immediate relevance to the welfare of horses and the image of racing. Probably in horse racing more than any other sport there is a need to control effectively the use of drugs which can effect performance. Racing authorities accept some responsibility for preserving the health and well being of the competitors. The indiscriminate and uncontrollable use of drugs in racing animals is not in the best interests of the horses concerned.¹

4.2 Representatives of the Conference advised the Committee that samples from racehorses are taken at random on the track prior to racing.

4.3 Accordingly, no thoroughbred can race in Australia free from the risk of being tested for drugs.²

4.4 Penalties for offences involving use of drugs are severe.³ Rule 177 of the Australian Rules of Racing provides the disqualification from a race of any horse if any prohibited substance is found to have been administered to it. The Rules also defines the terms drug or prohibited substance. Presently the Australian Rules of Racing define a prohibited substance as:

Any substance having a direct or an indirect action on the central or peripheral nervous system, the cardio-vascular system, the respiratory system, the alimentary digestive system, the musculo-skeletal system, or the uro-genita system of a horse. Prohibited substances include analgesics, anti-histamines, anti-inflammatory agents, blood coagulants, diuretics, hormones and their synthetic counterparts, cortico-

steroids, anabolic steroids, local anaesthetics, muscle relaxants, and tranquillisers. Prohibited substances also include vitamins administered by injection.⁴

4.5 In its submission, ANZFAS identified several prohibited substances used in the racing industry. For example, Phenylbutazone is used to allow a horse to race with an injured limb. This drug is used to treat sprains, painful muscle and soft tissue injury and arthritis. Its analgesic effect is through its anti-inflammatory action. In providing temporary relief to a painful condition, Phenylbutazone enables the horse to race on an unsound limb, placing added stress on the affected region and possibly exacerbating the condition. A more serious breakdown may then occur.

4.6 Another example is Lasix (Furosemide) a diuretic drug used commonly in America for horses prone to bleeding. This drug is also a prohibited substance used in the industry with potentially adverse side-effects for the horse.

4.7 Dr Pascoe, a member of the Australian Horse Council, expressed his strong views on the use of prohibited drugs to the Committee. He stated:

We have bodies like the AJC and QTC and the regulatory bodies, which are ... determined, and I hope successfully so, to counter this [attempts to expand use of drugs] by improved methods of detection and by detection of substances that we do not know about yet.⁵

4.8 In its submission, the Australian Equine Veterinary Association, stated that "on ethical and welfare grounds, we totally abhor the use of any chemical substance administered to directly affect a horse's performance or to suppress symptoms of pain during a race."⁶

4.9 A similar view was presented by RSPCA (NSW) when it advised the Committee:

RSPCA ... is firmly opposed to the use of any drug which is unnecessary and which will alter the animal's normal physiology and performance to the detriment of its health and welfare.⁷

4.10 Other major animal welfare organisation, including ANZFAS, also oppose the use of any substance which may have an adverse affect on the welfare of the animal.

Drug Detection

4.11 In 1989, the Committee was advised of several developments relating to drug detection. The Committee was assured that every effort is being made to introduce new technologies and procedures to combat the use of prohibited drugs.

4.12 Dr Bourke, the Veterinary Steward of the Victoria Racing Club stated:

The standard of equipment and expertise available in racing chemistry laboratories now in favour in four States of Australia is considerable. The laboratories will shortly have, if they do not have already, the capability of dealing with any potential problem.⁸

4.13 Dr Basset of the Australian Veterinary Association also agreed that advances have been made in testing for drugs. He also told the Committee of new laboratories in Sydney, Victoria and Queensland and commented that "on this side of things we were on a plateau for a while, but we are now on the upgrade".⁹ The Committee's inspection of drug testing facilities at Sandown in 1990 confirms that significant advances have been made and highly sensitive detection procedures developed.

4.14 Evidence suggests that the extent of testing at racetracks is also adequate, at least at city race tracks. According to Dr Bourke, five horses in each race are tested before they race. Winners, as well as other horses, are tested at the completion of the race. He estimated that about a third of horses undergo some form of testing.

4.15 It appears that testing is not as extensive at some country race tracks. Dr Bourke explained:

At TAB meetings, usually two or three horses - almost invariably winning horses; at non-TAB meetings, one or two horses. In addition to that, we have testing at 12 country fixtures a year.¹⁰

4.16 The Committee was told that routine drug tests check for stimulants, depressants, local anaesthetics, pain-killing drugs and some hormones.¹¹ Dr Bourke explained that the range of drugs being tested has expanded and that attention is being paid to anti-inflammatory drugs.¹² Results from pre-race testing are available within the hour. Post-race screening is much more extensive and takes about seven days to obtain results.¹³

Use of Drugs During Training

4.17 The Committee was concerned to receive evidence that drugs are misused on horses during training sessions. In particular, the Committee heard evidence from the Australian Equine Veterinary Association that:

It is not unusual to come across a situation in some stables where a horse has had an entire range of the medicine cabinet, which has been got under the counter somewhere. When nothing else has worked people have got us in. But there are needle marks and it is incredible the supplies some people have.¹⁴

4.18 According to the evidence the Committee received, it is easy to obtain prescription veterinary drugs "under the counter". The Committee was also concerned by suggestions from Dr Basset and Dr Heynes of the AEVA that this is a widespread problem.

4.19 AEVA stressed the need to educate trainers. While acknowledging that there are trainers who have developed considerable knowledge of "the horse's locomotion, why horses get injured and the signs of immaturity in a horse", AEVA expressed the view that "there are also a lot of trainers who start off with very little knowledge and finish up with very little knowledge."¹⁵

Conclusions

4.20 The Committee is opposed to the use of any prohibited substance in racing. It is also opposed to the use of prescription veterinary drugs by unqualified personnel. The Committee welcomes recent advances in drug detection and encourages all racing bodies to ensure that racing of all kinds is drug-free.

4.21 The Committee has three main concerns regarding this aspect of horse welfare in the racing industry. Firstly, it considers that it is essential that research into race chemistry be extended in order to counter the introduction of new chemicals and drugs. The Committee is therefore of the very strong belief that allocation of TAB levies to research should be maintained.

4.22 Secondly, the Committee is of the view that pre and post race testing at country events should be increased.

4.23 Thirdly, the Committee considers that heavy penalties ranging from substantial fines to life bans should be imposed on those responsible for the administration of prohibited substances.

ENDNOTES

1. *Evidence*, Conference of Principal Racing Clubs, pp. S 8365-6.
2. *ibid.*, p. S 8368.
3. *ibid.*, p. 8369.
4. Victoria Racing Club, *Rules of Racing and Rules of Betting*, Melbourne, 1988, p. 8.
5. *Evidence*, Australian Horse Council, p. 8874.
6. *Evidence*, Australian Equine Veterinary Association, p. S 8315.
7. *Evidence*, RSPCA New South Wales, p. S 8201.
8. *Evidence*, Victoria Racing Club, p. 8989.
9. *Evidence*, Australian Equine Veterinary Association, p. 8910.
10. *Evidence*, Victoria Racing Club, p. 8987.
11. *ibid.*, p. 8986.
12. *ibid.*, p. 8987.
13. *ibid.*, p. 8988.
14. *Evidence*, Australian Equine Veterinary Association, p. 8910.
15. *ibid.*, p. 8911.