

HERE WE GO AGAIN!

THRESHOLDS, LASIX AND THE NEVER-ENDING IDIOCY OF ZERO-TOLERANCE



Steven A. Barker, MS, PhD

Section Head, Louisiana Animal Disease Diagnostic Laboratory

Professor, Comparative Biomedical Sciences

Director, Analytical Systems Laboratory,

Laboratory for Drug Residue Studies and

the Equine Medication Surveillance Laboratory

State Chemist, Louisiana State Racing Commission



ZERO TOLERANCE:

- 1. A medical condition in which otherwise rational people lose their minds.**
- 2. A regulatory approach that does not require any thought or any input from science and that places limited strain on the diminished intellectual capacities of regulators.**
- 3. An analytical chemistry approach that allows the varying limits of detection of varying technology between analytical labs and between different drugs to determine a trainer's guilt or innocence.**
- 4. A proven mechanism that assures that every trainer keeps a gun to their own head whenever one of their horses goes to a test barn. See "Russian Roulette".**
- 5. A random approach to drug testing that permits Commissions to charge trainers with serious violations regardless of the nature or source of the substance or the control the trainer has over the circumstances or the drug's effect on the horse or the race, etc. See "Sole-Insurer Rule".**
- 6. With the adoption of the "Point System", a sure-fire way to eliminate more trainers from the industry...because we know they are all guilty of something anyway.**

THRESHOLDS:



Akin to Zero Tolerance but with arbitrary numbers attached;

Arbitrary numbers extracted from the dark nether-regions of pseudo-scientists, who have determined the values so stated from published science they've apparently never read, that form the basis for charging trainers with medication violations when they exceed them, even though the trainers actually followed recommended dosing and withdrawal times.

Numbers that are subject to change, either increasing or decreasing, depending on "data from new research", how many lawsuits are filed, who the positive is called on or when the authorities are actually caught in the act of "just making it all up".

Such changes are not retroactive or subject to apology.

Numbers derived from secret studies that you can't see so don't ask.

Just "trust us".

Common sense tells us that regulation of medications should be based on good science and practicality, not just technology (LOD, LOQ of instruments). Thresholds have to make sense and be based on something.



With improving technology the “ZERO” in Zero Tolerance is getting smaller every day and Zero Tolerance is a constantly moving target, lab-to-lab, State-to-State and drug to drug. It is the very definition of “arbitrary and capricious regulation.”

Medication regulations should permit adequate therapeutic treatment of horses, not limit the use of effective drugs based on “public opinion”, emotion, hyperbole or uninformed or unproven speculation and mythology.

Commissions and Associations **must** acknowledge that environmental contamination by drugs exists (stall contamination, food and feed contamination, etc.) and that trace levels of drugs, even category 1 or 2 contaminants from humans, **have no potential** to effect performance, endanger the horse or race participants or to defraud the betting public. Demonizing trainers and playing up such positives in the press **only hurts the industry** and unnecessarily damages reputations and careers.

These facts must be incorporated into regulatory policies.



Thresholds must have a scientific basis (end of the drug's pharmacology), permit reasonable therapeutic use and contain a safety factor that takes into consideration animal-to-animal, breed, sex and other variabilities in drug metabolism and clearance.

They must be based on actual studies that actually cover the recommended withdrawal times and doses and that consider the effects of exercise on drug mobilization, clearance and excretion. **The data and process used to establish these values must be made public.**

Most of the currently recommended withdrawal times and thresholds do not meet these criteria.





Another factor that would prove helpful...

THE RACING ASSOCIATIONS MUST STOP THEIR PROPAGANDA CAMPAIGN!

The coordinated, continuous drumbeat that paints the industry as corrupt, that any medication is doping, that uses coercion, threats of government take over and bullying to get their way must come to an end.

You are damaging the industry,
not helping it!

LASIX:



Lasix administration causes diuresis and loss of approximately 20 pounds of body weight (about 2%). This fact is used to claim that horses have a racing advantage from weight loss.

However:

A healthy horse can have up to 4, 12, or 24 bowel movements per 24 hours. The average 1,000-pound horse produces nine tons of manure each year and approximately 50 pounds/day.

Thus, it follows;



To level the playing field...

We should ban lasix use in the horse
on raceday...

And ban defecation by the horse
within 24 hours prior to the race.

DR. BARKER'S PATENTED PLAYING-FIELD-LEVELER



Cheaper by the dozen! Instructions for use on every box!

Steps to Take

- 1. Leave Lasix alone. It works. But use 3rd party administration.
- 2. Abolish the concept of “Zero Tolerance”.
- 3. Establish thresholds that are based on real science and that incorporate reasonable safety factors, breed and sex differences, etc.
- 4. Establish rational thresholds that eliminate the possibility that “trace” contamination will be called as a positive.
- 5. Establish special areas for drug treatment, drug administrations, drug clearance.
- 6. Remove feces, urine, standing water, etc. in a timely manner to an area that will not permit contamination.
- 7. Build stalls and facilities coming into contact with horses out of materials that are easy to clean and that are non-absorbent.

8. Drug test all individuals coming into contact with horses. Obtain list of prescribed medications and instruct individuals in how to avoid contamination. **Stop urination in stalls by employees.**

9. Maintain “retention samples” of feed, medications, supplements, etc. Record name, date and lot numbers.

10. Ban drug-containing foods from stall and barn areas.

11. Have veterinarians properly certify identification of horses (chipping) and turn in all syringes used to treat a particular horse, to be retained until samples clear.

12. Veterinarians should maintain “retention samples” of feed, medications, supplements, etc. Record name, date and lot numbers for drugs administered.

13. Avoid the use of compounded materials, herbal supplements and drugs bought at “too good to be true” prices.

14. Assure that test-barn personnel are wearing **FRESH** gloves. Establish a “right-side/left-side” administration/collection protocol for blood samples.

15. Establish a **National Equine Drug Positive Review Panel** to examine data before a positive result is reported to assure that inadvertent and irrelevant drug positives are not prosecuted.

National Equine Drug Positive Review Panel

1. Members should be drawn from scientific societies with expertise in equine pharmacology or pharmacology/toxicology in general, analytical chemistry and/or the forensic sciences. The panel would follow guidelines based on the science of pharmacology to determine if a case should be pursued.
2. Current or former members of Commissions or Associations or current or former practicing equine Veterinarians should be excluded to prevent conflicts of interest, or to prevent carrying out personal or group agendas or vendettas. **Actual and perceived independence is required.**
3. Commissions and/or trainers could request a review and report. The panel would have a choice as to whether or not a review request would be accepted, so as to eliminate repetitive and frivolous submissions.
4. The decision of the Panel would be final. No “positive” would be reported until such a report was issued.

**This panel would act as the independent
“Supreme Court” for racing to provide
true uniformity in drug regulation.
With the advent of the “point system”
decisions about serious positives cannot
be left up to the Commissions, the usual
“authorities” and the industry’s
compromised and politicized “experts”.**

