

## VET FORUM: A DAY AT THE RACES

By EMMA BERRY



# Nothing left to chance

**The veterinary cover provided at each of Britain's race meetings means that the day's runners are under constant scrutiny by a team of experts**

Anyone who watches racing regularly cannot have failed to notice the vehicles following the horses from the inside of the track during each race.

No corners are cut when it comes to safety for both horses and jockeys, meaning that, while ambulances and doctors are on duty at every meeting, one of the cars in the convoy will be occupied by a vet, who heads to the start of each race and then keeps a watching eye on the field throughout.

At jumps meetings there are three veterinary surgeons on duty, while Flat meetings have two, usually supplied by local veterinary practices. Each meeting is also attended by a BHA veterinary officer and team of assistants to help with regulatory aspects, such as micro-chip scanning for identification of each runner and post-race drug testing.

For Newmarket's two racecourses, veterinary cover is provided by the team at Newmarket Equine Hospital (NEH) – a state-of-the-art facility situated conveniently close by, adjacent to the July Course.

On racecourse duty on the day that *Thoroughbred Owner & Breeder* tags along for the ride are Charlie Smith and Jan Pynn, who are relieved halfway through the meeting by David Dugdale and Denis Coman. With Newmarket's extensive programme in 2015, covering the meetings is a big commitment from the duty vets.

NEH partner David Dugdale, who is also the ROA's veterinary representative, says: "We work closely with the veterinary officer on duty, who is a BHA representative. He or she will ensure that each horse's passport is in order and that the microchip matches the horse on arrival. They also deal with any regulatory aspects, such as checking that the

vaccinations are up to date and signs of any infectious diseases, such as ringworm.

"There's a lot of discussion regarding whether all horses should be examined prior to racing, as happens in Hong Kong, but at the moment that doesn't happen except with a few notable exceptions, such as the Grand National, where all horses are examined prior

to running."

Despite no official examinations on a routine raceday, the vets are situated alongside the parade ring prior to each race. Happily, incidents requiring their services at this stage are few and far between, but they will run their eye over each runner to ensure that there are no physical issues which would

## On-track equine welfare in action...

The Horse Comes First campaign has been at the forefront of efforts to promote the high level of care provided to racehorses in the UK. Indeed, more than £27 million in veterinary research and education has been invested by British racing, via the Levy Board, since 2000, with the aim of benefiting all breeds of horse.

Talking about the current procedures for treating a horse with a potentially serious injury, Simon Knapp, the Racecourse Association's veterinary consultant, and the senior vet at Sandown and Kempton, said: "Over the years the quality of racecourse cover, medical and veterinary, has improved dramatically. We will be at the scene within 60 seconds of the incident occurring.

"As soon as we arrive we get intravenous access by placing a catheter before blood pressure drops and shock takes over, so whatever happens to the horse we're prepared for the next stage.

"We will set up 360-degree screening, not because we have got anything to hide but so we have no distractions and the

horse has no distractions. They act as a pacifier."

He continues: "Our aim is to take the horse off the track and move it to the on-course veterinary unit, where there is a quiet environment, with diagnostic equipment such as ultrasound and x-ray. X-rays can be emailed, giving access to top orthopaedic specialists who can tell us what's possible.

"The vast majority of horses can be moved humanely from the track, but it's a fact of life that a small minority can't, in which case we do what's right by them on the track."

Within the last 20 years the equine fatality rate in British racing has fallen from 0.28% of all runners to 0.22%.

### British racing equine fatalities

Year	Runners	Fatalities	Percentage
1994	71,475	202	0.28
2010	92,066	223	0.24
2011	94,776	181	0.19
2013	91,146	196	0.22
2014	86,456	189	0.22



prevent them going out to race. Once the jockeys are mounted the vets split, with Smith taking to his car to follow the runners to post while Pynn takes up her position in the head-on viewing box occupied by the stewards. They keep in radio contact with each other and the raceday officials through the day.

Smith says: “We assist the starter and we’ll be there to assess any kicks or knocks if a horse has become unsettled in the stalls or bursts out. If a horse takes a very strong hold on the way to the start we’ll be asked to assess whether it’s fit to run or not.

“If a jockey is unhappy with a horse’s action on the way to post he’ll notify the starter and then we will be asked to assess the horse by trotting him up. If there’s any doubt, we’d always err on the side of caution.”

BHA veterinary officials keep a register of horses who are noted bad movers. Any horse whose trainer has reported that he or she moves with a ‘scratchy’ action will be assessed on course before being allowed to run.

### Dealing with on-course injuries

Tragically, there can be accidents on occasion at the stalls, the most notable incident at Newmarket in recent years being the fatal spinal cord injury sustained by Gray Pearl ahead of the start of the 1,000 Guineas of 2012. In the worst-case scenarios, euthanasia is now carried out by lethal injection, rather than with a gun.

“We all carry injections so that on the very rare occasion that a horse needs to be humanely destroyed we can do that, but generally we’ll take a horse to the hospital for further assessment if we think there’s a chance he can be saved,” says Dugdale.

“Every now and then you get an injury which is serious enough that euthanasia is the only option, but dealing with injured horses now is much more professional and efficient.”

In the case of Newmarket, injured horses can be transferred to NEH within ten minutes.

He adds: “If a horse is injured the screens go up – that doesn’t necessarily mean that a



**From top left: identifying a horse by microchip scanner; vets Charlie Smith and Jan Pynn chat with trainer Charlie Appleby; David Dugdale oversees runners at the start as the horses are loaded; a vet’s eye view of the racing action; Newmarket wash bays**

horse is fatally injured but it allows the vet to assess the injury calmly. If a horse is walking we would aim to get him to the veterinary box for further assessment. If it’s a serious injury we’ll splint the horse or make him comfortable and take him to the hospital.”

The racecourse vets, who are required to undergo refresher courses every five years to be able to comply with BHA rules, can also be called upon for less serious incidents, such as post-race scoping if a horse has run unexpectedly badly.

“The veterinary surgeon following in the car will assess any horse who is pulled up during a race, while the vet near the finish will check that all horses have pulled up

sound after the race and are not in any distress,” explains Dugdale.

“In the summer, the heat can sometimes be an issue but all courses now have water in a number of places like the winners’ enclosure and unsaddling enclosure. Newmarket also has showers which you can stand a horse under if you’re worried about heatstroke.”

Days of extreme heat are rare in the UK but the fact that even jump racing went ahead at Worcester on the recent hottest day of the year – with temperatures reaching 35 degrees – is testament to the forethought which goes into the welfare of horses on racedays, as well as the expert veterinary care provided as a matter of routine on Britain’s racecourses.