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STATEMENT FROM NYS EQUINE MEDICAL DIRECTOR SCOTT E. PALMER, VMD REGARDING THE INCREASED NUMBER OF EQUINE FATALITIES AT THE 2014 SARATOGA MEET

Although New York State has made significant progress in reducing injuries and preventing the inappropriate use of medication in racehorses, the job of equine safety is never done. There will be challenges along the way. We are experiencing such a challenge during the 2014 Saratoga meet. A thorough investigation of all of the racing fatalities during the 2014 Saratoga meet is being conducted. Until that investigation is complete, it would be inappropriate to opine or make any final statements about definitive cause of injury. With that said, the following represents some preliminary observations:

There were eight equine fatalities during the 2013 Saratoga meet:

- There were five racing fatalities.
- There were three training fatalities.
- All eight involved musculoskeletal fractures of the lower limb.

There have been eleven equine fatalities during the 2014 Saratoga meet:

- There were two racing fatalities.
- There were three training fatalities.
- All five involved musculoskeletal fractures of the lower limb.
- There were two cervical fractures and one lumbar spinal injury.
- There were three episodes of sudden death.

Governor Andrew M. Cuomo's [Task Force on Racehorse Health and Safety](#), which I chaired, put forth recommendations in 2012 to reduce the prevalence of musculoskeletal fractures related to training and racing. The number of this type of injury actually decreased from eight in 2013 to five in 2014.

Aside from the musculoskeletal fractures noted above, there were six additional fatalities related to circumstances that cannot be prevented by interventions designed for musculoskeletal injury prevention. These include the cervical and spinal injuries as well as episodes of sudden death. The current challenge is to design new interventions that will address these additional types of fatalities.

Among the steps being considered and implemented by the Commission and NYRA to address the types of accidents that resulted in the cervical and spinal injuries:

- Designing innovative entry and exit ramps at the gap on the backstretch of the racetrack that will improve the ability of outriders and horsemen to catch loose

horses and minimize the chance for injury of horses leaving the track without a rider

- Designing modifications to fencing that controls access from the paddock to the racetrack to minimize the chance of injury
- Modifying hurdles in Steeplechase races so that horses will not fall over a fixed obstacle

Sudden death syndrome is a rare but well-documented cause of death in young athletes, including human athletes who collapse during strenuous athletic competition. The following program is being put in place to address these particular circumstances:

- We are employing a new investigative protocol created in conjunction with [Dr. Katie Kelly, a veterinary cardiologist at Cornell University](#), which will include measurement of cardiac enzymes associated with heart muscle damage. This protocol will also include electron microscopy of the pacemakers and transmission pathways in the heart.
- We are also investigating innovative technology to enable veterinarians to instantly detect cardiac arrhythmias on the track at the time of a horse collapse. Drug testing protocols are already in place to detect use of drugs that might induce cardiac arrhythmias.

The Equine Safety Review Board, made up of members of the Gaming Commission (including myself), NYRA, the New York Thoroughbred Horseman's Association, Cornell University and The Jockey Club, are thoroughly investigating the circumstances leading up to all of these tragic deaths. A similar committee conducts the same investigations of racing fatalities at Finger Lakes Racetrack.

We will leave no stone unturned in our efforts to identify the causes of death in all racing fatalities in New York. As stewards of the racehorse, we have a duty to do all that we can to honor and protect these incredible athletes.

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