

# COUNCIL OF EUROPE CONSEIL DE L'EUROPE

## COMMITTEE OF MINISTERS

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### EUROPEAN ANTI-DOPING CHARTER FOR SPORT

#### Explanatory Memorandum

Secretariat Note : This Charter was prepared by a working party of the Committee for the Development of Sport (CDDS) of the Council of Europe in 1982-83. The preliminary draft version and explanatory memorandum were adopted by the working party at its last meeting in November 1983, and subsequently approved by the CDDS; these, with a few changes, were submitted to the 4th Conference of European Ministers responsible for Sport (Malta, 15-16 May 1984). At this Conference, the Sports Ministers adopted the Resolution on the "European Anti-Doping Charter for Sport" and endorsed the text of its accompanying explanatory memorandum and the Secretariat was instructed to revise the latter to take account of remarks made at the Conference. The text of the explanatory memorandum presented herewith is in fulfilment of that instruction. The text of the resolution itself is in document MSL-4 (84) 31 (Resolution No 1).

## I. Introduction

### A. The ethical problem

Doping strikes at the heart of sport : and it may well strike at the heart of those sportsmen or sportswomen who dope themselves.

Doping distorts the ethical and human basis of sport, whether physical recreation or top competition.

It debases man and renders null and void the benefits which sport for all should produce. It turns the person of the athlete into an object : he or she is used, manipulated, and instrumentalised for another aim, an aim which is less than the integral development in freedom and dignity which should be the aim of sporting activity.

In aiming to improve sporting performance artificially, doping attacks one of the basic principles of competitive sport which is to encourage fair and equal competition, "may the best one win". Introducing certain substances into the athlete's organism for artificial purposes replaces the desired testing of human skill by that of misapplied science.

It also attacks the principle that sport should be a healthy activity. Many doping agents are fundamentally dangerous when they are taken for other than strictly medical purposes; the extremely serious long-term effects on health and fertility, and to the integrity of certain organs, should be enough to deter their use, but unfortunately often do not do so.

Top-level sportsmen themselves regard sport competitions as tests where all competitors should have equal chances. Speaking at the XIth Olympic Congress at Baden-Baden in 1981, on behalf of athletes, Sebastian Coe, the 1500m gold medallist in the 1980 Olympic Games, said : "We consider this (doping) to be the most shameful abuse of the Olympic idea : we call for the life ban of offending athletes; we call for the life ban of coaches and the so-called doctors who administer this evil."

### B. The size of the problem

The use of dope in modern sport started in the late 1950s. Since then, the problem has grown : controls at international, regional and national championships have increased and have brought to light an ever increasing number of offences affecting more and more sports. Its use would seem to be most prevalent in developed sports countries. As international performance levels become higher so the insidious temptation to use any means to attain the often daunting qualifying standards, or merely to keep pace with the calendar of competitions, becomes greater; these in turn affect national standards. Evidence is growing of the use of doping agents both in mass sports events and at club level amongst youthful athletes ambitious to represent their country. The degree of specialisation and training required in many sports is now such that many young hopefuls begin to feel they "have to" use dope if they are to have a chance of representing their countries. Techniques, both of administration and of control of doping substances, are now so sophisticated that taking dope for an extra boost

at competitions is often insufficient. In addition to the traditional stimulants, such as amphetamine and caffeine, or new techniques such as blood transfusion taken on the occasion of the competition, many athletes who take doping substances do so as part of a pre-planned scheme to produce results during the training season, which will continue to have an effect during the ensuing competition season even though the use of doping substances may have been temporarily discontinued.

#### C. What is doping ?

As part of their efforts to eradicate doping, many sports organisations (notably the International Olympic Committee, several international sports federations and some national confederations of sport in Western Europe) have published "lists of prohibited substances". These lists contain classes of chemical compounds, with examples of products, or, in some cases, nominative lists of products which it is forbidden to take. The lists prohibit a wide range of substances : from an excessive consumption of caffeine to the intake in any quantity of various pharmaceutical products such as anabolic steroids, or narcotics.

Advances in pharmaceutical and medical science, as well as in the ingenuity of those who encourage the use of doping substances, means that a list of prohibited substances can never be static or complete. It must be flexible, in order to include all types of doping products and to prevent manipulation of natural products for the purposes of artificially increasing performance - such as the misuse of testosterone or hormones.

To construct a fully comprehensive definition of doping is a difficult task. A simple and practical definition is proposed for the purposes of this Charter: "Doping in sport is a contravention of the rules or regulations of the appropriate sports organisations concerning the use of substances or classes of substances which that sports organisation has banned".

#### D. Context of the Charter

The Council of Europe has been aware of the dangers of doping since the 1960s. Work then led to the adoption by the Committee of Ministers of Resolution (67) 12 on the Doping of Athletes. In the European Sport for All Charter, defined by the 1st Conference of European Ministers responsible for Sport (Brussels, 1975) and adopted by the Committee of Ministers as Resolution (76) 41, member states agreed to take measures "to safeguard sport and sportsmen ... from practices that are debasing and abusive, including the unfair use of drugs". At their 2nd Conference (London 1978), the Sports Ministers adopted a Resolution on the dangers of doping and this resolution was used as a basis for Recommendation (79) 8 adopted by the Committee of Ministers on Doping in Sport.

All these texts drew attention to the ethical and medical dangers of the misuse of drugs and proposed measures which should be taken by governments and sports organisations both jointly and severally in their specific fields of competence.

These activities by the Council of Europe were only part of, and to some extent either guided or reflected, initiatives and measures being taken in the wider context of international and national sports developments. The International Olympic Committee instituted its first compulsory doping controls at the Winter Olympic Games (Grenoble, 1968) : since then, controls have been extended at each succeeding Olympiad. Various international federations, starting with the Union Cycliste Internationale, have also adopted anti-doping regulations. Some of these are specific regulations, others - the majority - are based on those of the IOC.

Laboratories for screening and analysis have been set up. The IOC and the International Amateur Athletic Federation have a jointly agreed system of accreditation of laboratories : such accreditation guarantees that laboratories will carry out controls and analyses in accordance with their regulations and to the highest possible standards.

Nationally, some countries have used legislative powers to ban doping in sport : Belgium and France, 1965; Italy and Turkey 1971; Greece 1976. In others, national sports confederations have adopted binding regulations on their members, notably the Swiss Sports Association since 1967, the Deutscher Sportbund and the Norwegian Confederation of Sport in 1977, the Danish Sports Federation in 1978, the Swedish Sports Federation in 1979 and the Finnish Sports Federation in 1982. As from 1984, the Nordic sports organisations have agreed to test, both on a random basis as well as at competitions, sportsmen or women from other Nordic countries on their territory.

Effective action against doping requires co-operative action, not only between governments and non-governmental organisations, but also internationally. The Charter's prime objective is to make a European contribution to a problem which affects sport world wide.

PART A : MEASURES TO BE TAKEN BY GOVERNMENTS

Article 1 : Legislative and/or other measures

In nearly all member States, governments will be concerned to know that adequate anti-doping regulations exist. The fact that doping undermines the social role of sport, and the use of doping agents by young sportsmen, are only two topics of legitimate public concern. Doping in sport is a part, even if a rather special part, of the general problem of abuse of drugs in society.

This public concern can be translated by governments in several ways as proposed in Article 1 :

- by using existing legislative powers;
- by adopting new legislation;
- by obliging sports organisations to adopt appropriate measures and providing aid for them;
- by intergovernmental cooperation.

The method, or methods, finally chosen will depend on each member State's legal system and its traditions and possibilities, bearing in mind the political and technical realities of the moment. Each member State, though, will take whatever steps or measures are deemed to be the most effective in its own national context and ensure that they are energetically implemented.

An example of a measure, which could be used in States with adequate dope control facilities, is for governments to make it a condition of public money being given to a sports federation (either directly or indirectly) that that federation has instituted and continues to carry out a correct and approved doping control programme.

A further problem which intergovernmental cooperation could help resolve lies in the pharmaceutical distribution systems in member States.

Certain doping agents can be obtained freely in some countries and, in others, only from a pharmacist on presentation of a doctor's prescription. A priority should be to harmonise regulations so that doping agents are only available on a doctor's prescription. Some unscrupulous entrepreneurs have a 'mail-order' catalogue of forbidden substances. Legal measures controlling distribution and availability of doping agents should be introduced to make profitable trafficking in these agents impossible.

Article 2 : Setting-up of laboratories

- 2.1 In all member States, the public authorities should be responsible for setting up and running doping control laboratories. Such laboratories would in principle be attached to a University, a teaching hospital or a research institution. Countries which regularly host international sports competitions should have a laboratory. Neighbouring countries which host such competitions occasionally could agree to set up a joint laboratory (as Norway and Sweden have done).
- 2.2 These laboratories must be of a high technical standard and operate to the highest quality. They will practise controls for sports organisations and on sportsmen/women who will come not only from the country of the laboratory but also, and inevitably, from many other countries as well. They must therefore be the subject of full confidence by all parties in regard to the rigour, quality and certainty of their analyses. Meeting such standards is also necessary as laboratories may, in cases of dispute, have to be capable of defending their analyses before competent sanctioning authorities. It is therefore advisable that these standards should meet the requirements adopted by the IOC and the IAAF for the reasons explained.
- 2.3 Meeting such standards, and achieving such quality will require the training and provision of properly qualified experts. Member States should provide a training aid programme to train such personnel, and to ensure that retraining and the training of replacement staff is properly guaranteed.<sup>1</sup>
- 2.4 As indicated above, doping controls have an in-built international aspect, as well as fulfilling purely national purposes. The need, therefore, for internationally recognised procedures is evident. Member States may have additional requirements and specifications, but the basic core of regulations and procedures should be internationally agreed. The assurance of neutral recognition and supervision provides not only for international harmony but also for international confidence. At international competitions, controls should be carried out by laboratories of an internationally recognised standard.
- 2.5 It is therefore advisable that member States coordinate and harmonise their standards, regulations and procedures with those approved by the IOC, and agree to the neutral accreditation and subsequent verification of their laboratories by, for instance, the IOC medical commission. This common alignment would not prevent member States from adopting more stringent national standards in addition for national purposes, if they so wished.
- 2.6 An indication of the standards required, at the moment the Charter was adopted, is given at Annex I.

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1) As regards European cooperation in training, see para. 3c. of Recommendation (79) 8.

### Article 3: Research

- 3.1 As a consequence of the policy advocated in paragraph 2.3 above, member states should make provision in the laboratories for a basic research programme in analytical chemistry and bio-chemistry so as to ensure that staff are fully conversant with new developments in their fields.
- 3.2 The publication of research results is regarded by the scientific world as a vital step in the adoption of new techniques, or in the detection of new doping substances. As techniques advance continuously, it is necessary for at any rate the major conclusions or principles deriving from research to be rapidly brought to the attention of other laboratories. Governments could aid with the speedy publication of research results, and in ensuring its rapid dissemination to other laboratories, by helping with secretarial and translation costs and in purchasing or distributing the relevant scientific journals, and in ensuring that research showing harmful health effects is distributed to the sportsmen themselves.
- 3.3 An additional need is for member states to assist with research into attitudes towards doping in sport.

Research in Norway (1982) has shown that sportsmen were taking more doping agents than generally believed; that sportsmen paid less attention than might be expected to warnings about the dangers to their health of taking dope; that information and publicity campaigns directed towards specific groups of sportsmen should go hand in hand with random and continuous controls. The research also showed the need for more information on the circulation of doping agents nationally and internationally and how sportsmen obtain these agents. The use which policy-makers can make of such research in anti-doping campaigns and making them more effective is self-evident, as the campaign needs both psychological elements and technical facilities. Public authorities should therefore help the sports organisations with such research projects and in the evaluation of their findings. More specific proposals for action deriving from research results are set out in the following paragraph (4.1).

- 3.4 A further requirement is for more research into the real effects of various doping agents : some such agents may not have the effect of improving performances to the extent that had been anticipated. A clearer knowledge of the known effects of doping substances would also help in the promulgation of lists of banned substances (paragraph 6.2).

Article 4: Educational programmes

4.1 As indicated in paragraph 3.3 above, evidence has been cited that some of the original campaigns did not have the desired effect. It would seem that publicity campaigns by themselves are likely to be insufficient: sustained, well argued and convincing educational programmes should be devised, and put into effect in schools, in clubs and in national federations. Younger sports people need specially designed educational and information campaigns. This task involves governments, national sports organisations, club leaders/coaches, teachers and parents working in co-operation but each with a specific responsibility. The mass media can also help with these educational campaigns. Positive ethical values should be encouraged and supported so that young sportsmen do not turn to the use of doping agents as if it were normal; this can be helped by showing the effectiveness of controls, the probability of detection and the ensuing penalty. Education and deterrents must be used in complementary ways. This Charter could itself become an important element in educational and information campaigns.

4.2 A scheme whereby each party involved (the sportsman, the sports organisation, the trainer and the doctor) can acquire positive responsibilities has been adopted in Norway. Two basic concepts are of importance:

- the need for a general awareness by all parties involved of all aspects of the problems of doping in sport;
- the need to enhance mutual co-operation amongst athletes, leaders, trainers and doctors according to their competence and responsibilities.

Such mutual co-operation could provide a basis for devising scientifically based training programmes, leading to positive results without recourse to the use of drugs, and thus re-emphasising the ethical values of sport.

For an example of the information that could be used for deterrence purposes, Annex II lists the known dangers to health of various doping agents.



Article 5: Subsidies for dope controls

- 5.1 At international competitions, the rules of the relevant international federation will apply, and the cost of controls will usually be met by the host organisation. As a general rule, public subsidies will be available to help with these, and other, costs of hosting international competitions.
- 5.2 It is, however, at national level that the major effort has to be made by national sports organisations. The basic work to eliminate doping has to start at national level in order to be effective, for reasons of both numbers and continuity.
- 5.3 While it is not true that the costs of controls are elevated, they are still expensive and few sports organisations have sufficient resources to pay for continuous testing on an adequate scale. For this reason, and bearing in mind the connections between doping in sport, drugs in society and the danger to young people, member states could find it appropriate to pay, via specific subsidies, a proportion of the cost of the dope control measures instituted by the sports organisations: these costs include the technical organisational expenses, as well as the analysis of samples sent to the laboratories. The proportion of the costs borne by public authorities may be as high as 100% subsidy, as is for example the case in the Federal Republic of Germany, Switzerland and the United Kingdom. In Switzerland an athlete whose sample proves to be positive has to pay the cost of the analysis.

PART B: MEASURES TO BE TAKEN BY SPORTS ORGANISATIONSArticle 66.1 Regulations

A wide variety of regulations exist not only between international but also between national sports organisations. The task of making controls more easily accepted, and of agreeing on how to control and test would be made much simpler if sports organisations were to adopt simple, harmonised regulations. The agreement on regulations between Nordic sports organisations is an example of multilateral co-operation. It provides for the possibility of a sportsman from any of the Nordic sports organisations being tested by any of the other Nordic sports organisations when in that country, whether for a competition or in training, in accordance with that country's procedures. The unified procedures approved by the International Amateur Athletic Federation provide an important practical element. Governments should encourage and stimulate similar agreements on a wider scale. The days when a sport could say "there is no doping in our sport" seem to have passed: now the presumption has to be that there is a possibility of doping in all sports. Proper and regular testing will help substantiate the claims of "clean" sports.

An outline of a model national regulation for implementation at national level is at Annex III.

Procedural regulations approved by the IAAF are at Annex IV and it is suggested that other procedures be harmonised with these. An alternative model for procedural guidelines are those prepared by the IOC for each Olympic Games.

An important requirement of the regulations is that the athlete suspected of contravening the anti-doping regulations be given a fair hearing. This applies both to amateur and to professional sportsmen and women accused of taking doping substances. Hearings should be before a doping committee with, as far as possible, a multidisciplinary composition. In cases of positive samples, the hearing and sentencing procedures - which should take account of relevant personal circumstances - should be based on normal legal practices. Convicted athletes should be able to appeal where appropriate to a higher body in that sport (see also paragraph 2.2).

- 6.2 A similar problem of harmonisation lies in the lists of banned substances. Many sports organisations use the IOC's list of banned substances, or classes of substances, to which some add their own specific substances for their sport; other sports have their own lists. A common core of banned substances agreed by the sports organisations would be an important advance.

In addition, sports organisations should begin to prepare lists of permitted medicines for various ailments or conditions, and inform sports doctors of them, so that they may prescribe permissible drugs. This is a matter of growing urgency. The Council of Europe should study ways of communicating information to all doctors on the generic and commercial names of drugs which are included on the lists of banned substances.

The sports doctor owes a responsibility both to his sportsmen and to the sports organisation to which he is (or should be) affiliated. He should know all the relevant anti-doping regulations nationally and internationally, and know what prescriptions may contain illicit substances for his sportsmen.

In cases where his prescription may conflict with the sports organisation's regulations, or in all cases of doubt, he should make a full report to the competent sports organisation, so that consultations may take place before a competition or a random dope control shows the possibility of a contravention.

### 6.3 Use of dope control facilities

6.3.1 Sports organisations should be encouraged to make proper use of doping control facilities - by a mixture of financial help as proposed at Article 5 and pressure as at Article 1. Such persuasion is in sport's own interest: parents will become more and more reluctant to let their children begin the long and arduous process of training as a hopeful for international competition if the sport cannot show itself to be "clean".

6.3.2 To be effective, these controls must be conducted on a random and continuous basis. Random because nobody should feel likely to be overlooked, nor know when the controls are going to happen; continuous because so many doping substances - and in particular the especially harmful anabolic androgens - can be taken during the training season, abandoned during the competitive season, and whereas their effects are still present there are no traces left in the body to show up in controls. So testing merely at competitions is inadequate. Testing should be year round. It will be up to sports organisations to devise methods and sequences that will apply equally effectively to all sports. Nordic sports confederations and a number of national olympic committees have adopted regulations (binding on the member federations) which submit every potential national level sportsman to the possibility of a duly authorised, but unannounced, control. The place, time, frequency, etc of controls is in the hands of the sports organisations.

### 6.4 Eligibility

Many federations include in their regulations clauses laying down the conditions under which sportsmen are eligible to take part in competitions - for example, on amateurism, age, experience, qualifying standards, etc. Sports organisations are invited to prepare an eligibility clause which would require potential competitors to be prepared to submit to official controls at any time. A refusal to submit to an officially authorised control - be it requested at any time - would make disqualification automatic. The declaration which all competitors sign on agreeing to participate in competitions should also include a specific reference to the medical code of the responsible sports organisation.

## 6.5 Penalties

- 6.5.1 At the XIth Olympic Congress in 1981, the athletes called for a life ban on athletes and coaches and "so-called doctors" using or administering drugs.
- 6.5.2 There are, however, as in all offences, degrees of gravity and of intention, and it would not be just if a life ban was the sole penalty. Any sportsman found guilty of contravening the doping regulations should be continuously rechecked during the suspension period, if he/she wishes to take part again in official competitions.
- 6.5.3 Doctors, coaches, or any other person found guilty of encouraging or facilitating the use of drugs should have their official recognition withdrawn for longer periods : they are often at least as, if not more, guilty than the athlete. Where applicable, penalties could include as well action under the professional code of conduct.
- 6.5.4 Experience from Norway shows that there is support from sportsmen for the strict measures advocated above. The probability of discovery leading to substantial penalties, is welcomed because if athletes feel that the chances of discovery are slight, then there is less incentive to stay clean. Sportsmen are looking for leadership from both the international and national sports organisations. Such leadership once given will be warmly welcomed if it will be effective in eradicating an unhealthy, an unethical and an illicit practice.

## 6.6 Qualifying standards

There is some evidence to suggest that qualifying standards for participation in international events in certain disciplines may themselves be based on performances in the past which may have been attained with the help of doping agents. It is therefore necessary for sports organisations to ensure that their qualifying standards are such that they can be achieved without athletes using drugs. The same precautions apply in professional sports, where the "employers" must ensure that the athletes are not subjected to such pressures that they are obliged to take drugs in order to keep up with the demands made on them. The protection of such sportsmen's rights is an important area for study.

A N N E X ISTANDARDS FOR DOPE CONTROL LABORATORIESStandardised Analytical Procedures and Quality TestsRequirements for Neutral Recognition and Subsequent Verification of LaboratoriesI. Essential Equipment :

1. Gas Chromatography (GLC)
2. Thin Layer Chromatography (TLC)
3. Mass Spectrometry (MS) preferably in connection with a Gas Chromatograph (GC) and a Computer (COM)

II. Analytical Procedures :

(Note : Definite identification of a doping substance requires analysis by mass spectrometry)

For the screening step, use of the following procedures :

1. For "Volatile Doping Agents" - GC screening with a nitrogen specific detector (N-FID) and Apiezon L on alkali washed (impregnated) Chromosorb-W, de-activated with Igepal or Carbowax 20 M.

Alternative suitable GLC systems may be used.

2. For "Heavy Volatile Doping Agents": screening after acid hydrolysis and extraction at pH 9.5, derivatisation, GC on OV 17 on Chromosorb Q, detection with a nitrogen specific detector (N-FID) or by mass fragmentography (mass specific detection).

In addition TLC may be used.

## 3. Screening Procedure for Anabolic Steroids

## 3.1 Free steroids :

After extraction at pH 8.0-9.0, trimethyl silylation and detection by mass fragmentography (mass specific detection).

## 3.2 Conjugated steroids :

After enzymatic hydrolysis, extraction, trimethyl-silylation and detection by mass fragmentography (mass specific detection). Alternatively an extraction of the free and conjugated fraction, eg with XAD-2 may be performed, followed by a separation of the two fractions, treated and analysed as described above.

- 3.3 RIA may be applied after appropriate preparation of the sample. (It should be noted that RIA may give positive results in certain circumstances, even when anabolic steroids are not present - (false positive) - and the possibility of negative results, when anabolics are present (false negative).

### III. Accreditation of Analytical Laboratories :

Analytical Laboratories which demand accreditation must fulfil the following requirements :

1. List of substances prohibited by the IOC which must be identifiable by analysis in the laboratory (dope agents and metabolites).

Reference substances must be available.

2. Minimum concentration, which can be determined (detected) after the administration of the drugs to humans.
3. The maximum time required to obtain a result after receipt of the sample for analysis :
  - (a) for anabolic steroids
  - (b) for other doping agents.

4. The control samples are to be analysed in the presence of a member of the Medical Committees of the IOC or the IAAF or a designated expert.

The control samples will be made available under the direction of the IOC or IAAF Doping Committees.

5. The laboratory seeking accreditation will be required to analyse and report its results on 10 control samples to the IOC or IAAF Doping Sub-Committees.

The report should include :

1. Complete description of the analytical procedures
2. Copies of the GC-, MS- and COM- protocols.

After considering the results the Doping Sub-Committee will make its recommendations to its superior body.

6. Every two years accredited laboratories will be required to analyse six new control samples as part of the continuing accreditation programme and report their result to the IOC or IAAF Doping Sub-Committees.
7. The laboratory seeking accreditation has three days to detect the positive samples in the presence of the representative. It will then have a further eight days to seek detailed information and documentation and establish with absolute certainty the identity of the drugs contained in the positive samples.

8. The control samples will contain 3-5 steroids and 4-6 stimulants. There will be no more than one narcotic substance.
9. Before arrival, the representative visiting the laboratory will have received full documentation on the samples to be used for accrediting a given laboratory.

If during the three days of the visit the laboratory draws up a complete, accurate and well-documented report, the representative will discuss the results with the laboratory team. Otherwise the representative will submit a written report on receipt of the official report (4 copies).

10. One copy of the official report will be sent to the IOC Secretariat and to each member of the IOC's Doping Sub-Committee.

#### IV. Cost of accreditation

The laboratory seeking accreditation will pay a sum of US\$5,000.00, and will also be liable for the travel and subsistence expenses of the representative of the IOC Doping Sub-Committee.

The cost of the continuing accreditation programme is US\$1,000.00.

A N N E X IITHE DANGERS OF DOPING

The many risks and dangers associated with the use of such products and procedures must be stressed :

- i. Amphetamines : over-excitement, insomnia, tachycardia, hypertension, vertigo, trembling, loss of weight, mental disturbance with delirium, addiction, suppression of fatigue (the body's alarm signal), *death* by collapsus (greatly increased by extreme heat and over-exertion).
- ii. MAOIs : sudden and sometimes *fatal* reduction of arterial tension after violent effort; in other cases, surges of hypertension with extremely serious cerebral complications, possibility of mental disturbance and convulsion.
- iii. Morphine and related substances : digestive and cardiac troubles, addiction and *death* by respiratory arrest.
- iv. Corticoids : gastro-duodenal ulcers with perforation and haemorrhage, oedema, risk of diabetes and fractures, muscular fusion, mental disturbance with delirium, poor healing of sores, infection, appearance of viral ailments (shingles, chickenpox), surrenal insufficiency (*fatal* in the event of abrupt cessation of treatment).
- v. Hormonal anabolisers (inc. testosterone) : oedema, disturbance of hepatic functions, aterogenic effect (decrease in serum HDL-cholesterol) sudden rupture of tendons, inhibition of growth in young athletes, bone accidents, aggressiveness, possibility of tumours. For men : azoospermia, decrease in testicular size, impotence, prostate disturbances. For women : masculine pilosity, lowering of voice, disruption of menstrual cycle; in female children of women who have taken hormonal anabolisers during pregnancy there are anomalies of external genital organs (hypertrophy of clitoris, more or less incomplete separation of labia majora).
- vi. Stimulation by electrical apparatus : this technique may cause rupture of tendons, muscles and muscular aponeurosis, permanent muscular cramp, skin irritation, superficial phlebitis.



A N N E X IIIOUTLINE FOR A MODEL NATIONAL REGULATION

As it is very important to have similar rules and regulations in all sport organisations all over the world, member States have agreed to propose the following regulations for antidoping work at national level and to encourage all sports organisations to use them, when international regulations do not stipulate otherwise.

1. Drugs and Methods

The (National Sports Organisation's) regulations concerning doping controls for sports participants are valid for checking on all prohibited drugs and methods and are based on the IOC's standard lists of prohibited drugs and methods. These regulations apply also to participants living and training abroad who might represent ... .

2. Where and when

Doping controls may be introduced within all the member bodies affiliated to the (National Sports Organisation). Controls may be carried out at any time of the year, both in training periods and in the competition periods.

With respect to future efforts, controls should be directed particularly towards branches of sports and training groups where doping has occurred in the past, and in addition, controls during the training period should be increased considerably.

3. Who can be controlled

Doping controls may be made on any member of a federation affiliated to the (National Sports Organisation) regardless of age, sex, and achievement level.

The (National Sports Organisation) also requires that any sportsman apprehended for misuse of doping drugs be checked during the suspension period as well, if he/she wishes to be allowed to take part in (national) sports competitions in the future.

Sportsmen wishing to take part in official competitions may have to go through a minimum of 3 controls in the preceding 12 months before the competition. These controls must be decided by officially authorised units.

4. What is a doping control

A doping control entails the participant producing a certain amount of urine under supervision of the person(s) who are responsible for carrying out the check.

5. Responsibility

The (National Sports Organisation) is responsible for determining where/when the control procedure is to be introduced, and in addition, for drawing up the guidelines for selection of those chosen to be controlled.

6. The members of the (National Sports Organisation) mentioned under 1, 2 and 3 can also be checked for doping during training and competitions in other countries for drugs and methods according to the IOC's list.

7. Checking Group

The (National Sports Organisation's) control group is responsible for what happens during the control. In most cases the control group consists of a leader and one or two to three assistants. One of the assistants is appointed by the member sports federation/event organiser. The remaining members of the checking group will in most cases be appointed by the (National Sports Organisation). For carrying out "random checks" the entire checking group will in most cases be appointed by the (National Sports Organisation). The leader of the group has the main responsibility for the control.

The (National Sports Organisation's) group for controls abroad on its own members will consist in most cases of one representative from the (National Sports Organisation) and one representative from the member sports federation concerned.

For controls on foreign athletes taking part in events in ... , the leader of the control group should be a doctor, in order to satisfy international regulations on this point.

All the members of the control group must have been thoroughly trained and duly authorised.

8. Advance Information

The member sports federation in question is usually informed 1 to 3 days in advance regarding where and when a control will take place :

BUT CONTROLS MAY ALSO BE CARRIED OUT WITHOUT ANY PRIOR NOTICE.

9. Analyses of the doping test

All analyses have to be done at an IOC accredited laboratory.

10. The procedure and equipment for doping controls

The procedure for the control and the equipment used must be in accordance with the international manual.

A N N E X IV

PROCEDURAL GUIDELINES FOR CARRYING OUT DOPING CONTROLS  
UNDER THE JURISDICTION OF THE IAAF

1. INTRODUCTION

In order to ensure that the entire procedure of doping control leaves no possibility for errors or manipulation, and that it is carried out with the necessary accuracy and seriousness in all its phases, the IAAF Medical Committee, in accordance with IAAF Rule 144 "Doping", has approved the following procedural guidelines for carrying out doping controls under the jurisdiction of the IAAF.

These guidelines shall be followed as closely as possible at all competitions under Rule 12, 1 a., b., c., d., e., f. and g.

2. RESPONSABILITIES2.1 The Responsibility of the IAAF Council

The IAAF Council shall decide annually within an appropriate period prior to the competitions of the following year :

- 2.1.1 at which meetings of category 12, 1 a., b., c., d., e., f. and g. of the IAAF, doping controls shall be carried out;
- 2.1.2 to confirm the composition of the Doping Committee responsible for the respective meeting.

This Committee shall consist of at least three persons who are to be responsible for the respective controls :

a. Administration - Medical Delegate

A suitable person should be appointed, if possible from among the members of the IAAF Council or Technical Committee.

b. Member or Representative of the IAAF Medical Committee (Chairman of the Doping Committee)

To be proposed by the IAAF Medical Committee.

c. Medical Official (National Doctor)

In charge of the doping control station, which shall be done at the suggestion of the Federation organising the meeting.

- 2.1.3 to decide the number of samples to be taken at the various competitions;
- 2.1.4 to confirm in which accredited laboratories the tests for stimulants and anabolic steroids shall be carried out, upon advice from the Medical Committee.

## 2.2 The Responsibility of the IAAF Office

The IAAF Office shall be responsible for all necessary administrative measures resulting from decisions taken by the Council and Medical Committee in connection with the proper conduct of doping controls.

These include :

- 2.2.1 to notify the relevant Member Federations of the above decisions of the Council;
- 2.2.2 to notify the appointed members of the Doping Committee and the persons who will be in charge of the doping control station;
- 2.2.3 to forward all the necessary standardised forms and documents to the Organising Committee or National Federation;
- 2.2.4 to notify the laboratories in which the urine samples shall be tested;
- 2.2.5 to provide the National Federation or organiser of the given meeting with a sufficient number of bottles and containers;
- 2.2.6 to provide the sealing apparatus and the seal which shall be handed only to the person responsible for the doping control;
- 2.2.7 to appoint the courier who transfers the control bottles in the container to the designated laboratory;
- 2.2.8 to establish and confirm a uniform payment for the laboratory tests prior to the respective competition;
- 2.2.9 to ensure the contracted payment of the laboratory by the Organising Committee or National Federation;
- 2.2.10 to pay for the materials used in the doping control (bottles, urine receptacles, containers, sealing-wax, etc).

## 2.3 The duties of the National Federations and Organisers

The National Federations entrusted with the holding of competitions as well as the organisers, shall be responsible for :

- 2.3.1 providing the necessary rooms for the doping control, (they should be located beneath the main grandstand if possible);

As a rule the following rooms should be available :

- a waiting room or cloak room with seating facilities for the athletes
- an office equipped with a table and chairs for the members of the Committee
- a bathroom and/or lavatory

2.3.2 properly marking the rooms belonging to the control station and fixing signboards indicating the way to the doping control station;

2.3.3 providing the station with the required materials. These include :

- the necessary forms (1)
- a. notice to the athletes to report to the doping control
- b. the Doping Test Control form for the Chairman of the Doping Committee
- c. accompanying documents on each sample with the code for the laboratory carrying out the analyses
- d. letter accompanying the samples to be delivered to the laboratories
- e. the National Federation must ensure that the requisite material detailed in 2.2.3, 2.2.5 and 2.2.6 is available.

In addition, the following should be made available :

- special adhesive suitable for sealing the receptacles and cold boxes;
- sealing wax;
- a special etching pen for scratching the code number;
- a device for warming the sealing-wax, however at least a candle and matches;
- a signet (seal) of the IAAF or EAA;
- writing utensils, writing paper, envelopes, scissors, cord, wrapping paper;
- a lockable refrigerator for storing the samples;
- towels, soap;
- required material for a possible pH-test;
- mineral drinks (sweetened and unsweetened) for the athletes;
- cold boxes (usually made of foam plastics) and containers for the necessary transit of the samples to the laboratory

2.3.4 providing the personnel who ensure that the work be done properly in the control station, these are :

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(1) The four appendices to these Regulations showing the "necessary forms" are not reproduced in this Charter.

- one male assistant to support the official in charge of the station during the sample taking and at the same time to supervise the sample taking from men;
- one female assistant to fulfil similar tasks with women;
- additional assistants (one or two) to carry out sundry tasks according to the nature of the competition (eg to hand the notice to the athletes, to accompany the athletes to the Doping Control office, etc)

2.3.5 ensuring the invitation, accommodation and working facilities of the Doping Committee;

these include :

- to extend a written invitation to the Medical Delegate and to the members of the Doping Committee;
- to send the air tickets or to re-imburse the travelling expenses to the members of the Doping Committee according to IAAF Rules;
- to provide accommodation and meals and to re-imburse the daily expenses to the members of the Doping Committee;
- to provide transport for the members of the Doping Committee to and from the venue;
- to supply the members of the Doping Committee and the assistants with special identity cards permitting them access to the training and competition sites, accommodation and dressing rooms.

2.4 The Responsibility of the Chairman of the Doping Committee

The Chairman of the Doping Committee shall be responsible to the IAAF Council and Medical Committee for the proper conduct of doping controls, including the laboratory and control tests.

In the case of positive results, he shall ensure that the IAAF Office and the Technical Delegate for the respective meeting are duly notified. The duties as listed under 2.4.1 to 2.4.3 may not be conferred to other persons.

2.4.1 His responsibility up to the opening of the meeting shall be :

- to contact the organiser of the meeting in good time and, if necessary, to visit the venue in order to control the organisational preparations for the tests (2.3.2 and 2.3.3) on the spot;

- to arrive at the venue in time (2 days prior to the competitions) and to ensure that the doping control station is duly equipped and fit for work in accordance with 2.3.2 and 2.3.3;
- to acquaint the members of the Doping Committee as well as the official in charge of the centre with their tasks and to establish their responsibility until the controls have been finished;
- to prepare written information on the organisation and conduct of the doping control for the participating teams, which should be written into the Technical Regulations;
- to explain the organisation and procedure of the control, the duties of the athletes, team leaders or accompanying persons as well as to introduce the members of the Doping Committee and the official in charge of the control station to the team leaders at a meeting with them;

2.4.2 The responsibility of the Chairman of the Doping Committee during the Competition shall be :

- with the other members of the Doping Committee to determine the criteria for selecting the athletes to be controlled, immediately prior to the competition, or during the competition, in the respective events;
- to hand the sealing apparatus and the seal to a member of the Doping Committee;
- to fill in the notice to the athletes, to seal it in an envelope indicating the competition and finishing position and/or starting number and to hand it to an assistant. (Depending on the competition the envelope shall normally be handed immediately at the end of the competition to the athlete);
- to establish a system of code numbers for the A and B bottles and to store them in a secure and confidential place;
- to ensure that the proper work of the control station is supervised, beginning with taking the samples and ending with sealing the samples, as well as to control the container and refrigerator;
- to receive oral and written protests entered against possible violations of the procedural guidelines and to clarify facts.

(Written protests shall be answered in writing. Both the protest and the reply must be kept as official documents of the doping control);

- to fill in the accompanying documents for the laboratory testing the samples;

- to hand the container of the A samples to the persons designated, to take them to the testing laboratory;
- to receive and properly store the container of the reserve samples (B), the sealing apparatus, seal and etching pen;
- to complete officially the work at the control station;
- to keep and store properly the relevant documents and reserve samples (the reserve samples to be stored in the sealed box in a cool place until the completion of the tests);

2.4.3 The Chairman's responsibility after the meeting shall be :

- to receive the written report of the laboratory (laboratories) on the results of the analysis;
- in case of negative results, to inform the IAAF Office and the Technical Delegate, and to destroy urine samples and documents of the control;
- to submit a written report to the Council of the IAAF;
- in case of "positive results" to identify the athlete by means of the code number;
- to ensure that the IAAF Bureau informs the Federation to which the athlete showing a positive result belongs and, at the same time, invites (an) official representative(s) (maximum two) of the Federation concerned to attend the control test;
- to arrange for a control test to be carried out in the same laboratory;
- to attend the control test;
- to give final information to the IAAF Office and the Technical Delegate, and to destroy the reserve urine samples when all procedures have been completed;
- to present a written report to the IAAF Council together with the documents relating to the control.

2.5 The responsibility of the other members of the Doping Committee and the Official in charge of the Control Station

The members of the Doping Committee and the official in charge of the control station shall fulfil the tasks specified to them as determined by the Chairman.



They shall be responsible to the Chairman for the proper execution of the tasks assigned to them.

2.5.1 The responsibility of the members of the Doping Committee shall be :

- to prepare the documentation on the sample taking;
- to supervise the choice of the bottles for the urine samples A and B;
- to supervise the choice of the collecting vessel and funnel by the athlete;
- to pour the urine into the chosen bottles A and B and to close and to seal the bottles;
- to place the bottles A and B in the boxes provided for that purpose; to close and seal the boxes together with the accompanying documents;
- to place the boxes into the refrigerator or sealed cupboard; to lock and seal the refrigerator or cupboard;
- to deliver the sealing apparatus, seal and etching pen to the Chairman (in case of competitions of several days duration, this shall be done daily);

2.5.2 The responsibility of the medical official in charge of the control station shall be ;

- to brief the assistants and to assign the functions to them; to supervise their work;
- registration of the athletes by name on the basis of the notice form, as well as registration of the persons accompanying them;
- to keep a list of persons attending the procedure in the control station, with indication of the exact times;
- to ensure that no unauthorised person enters the control station;
- to take care of the entire inventory stock of the control station (see 2.3.2 and 2.3.3) except for the sealing apparatus and seal;
- to ensure that service be provided for the Doping Committee and the other members of the control station during their presence in the station;
- (together with the organiser of the competition) to provide for transport for the members of the Doping Committee to and from the venue, particularly at the end of the day;

### 3. PROCEDURE OF THE CONTROL DURING THE COMPETITIONS

#### 3.1 Taking the Urine Samples

- 3.1.1 Before the athletes leave the stadium after their competition, those selected for testing shall be handed a written notice to report to the control.
- 3.1.2 The athlete shall acknowledge the receipt of the notice to report to the doping control. In this connection, the exact time of handing over the notice shall be entered on the form. This confirmation shall be handed as soon as possible to the official in charge of the control station by the appointed assistant.
- 3.1.3 Athletes selected for testing shall submit to the control station immediately after having completed their event and, in any case, not later than 60 minutes after the event. Documentary proof or identity card should be taken along.
- 3.1.4 Athletes selected for testing who have to compete in another event within the meeting (taking place in the same morning or afternoon), shall notify the control station of that fact. In such cases, the control may be carried out after the second event. The period during which they shall submit to the control may not exceed 60 minutes from being handed the notice, or from the completion of the second event.
- 3.1.5 The athlete selected for testing may be accompanied to the control station by an official representative of the team concerned (who has to prove his identity). He shall have the right to stay at the station during the entire procedure.
- 3.1.6 When entering the control room, the athlete and any person accompanying him shall be identified prior to the test.
- 3.1.7 The Medical Official shall fill in the Doping Test Control Form under the supervision of a member of the Doping Committee.
- 3.1.8 The competitor himself selects a bottle A and the respective bottle B and hands them to the responsible representative of the Doping Committee.

#### 3.2 Activities during and after the taking of urine samples

- 3.2.1 The athlete chooses one vessel each from among those provided for collecting and bottling the urine samples, and reports to the lavatory. He may only be accompanied by an assistant designated for that purpose.
- 3.2.2 The urine sample shall be poured into the necessary number of bottles in the presence of the athlete and the person accompanying him.

- 3.2.3 The bottles A and B shall be closed with stoppers, fastened and sealed. This shall also be carried out in the presence of the athlete and any person accompanying him.
- 3.2.4 Unless a serial number is already etched on the bottle, the code number shall be etched or scratched on the control bottle with the athlete and the person accompanying him (if any) being present.
- 3.2.5 The code number shall be entered on the completed Doping Test Control Form by the Chairman of the Doping Committee in the presence of the athlete and the person accompanying him. After that, the athlete and the accompanying person (if any) shall sign the control form confirming that the sample taking has been carried out correctly.
- 3.2.6 The bottles containing the urine samples shall be placed into separate boxes, ie bottle A into one container and bottle B into another one.
- 3.2.7 When there are sufficient bottles in the boxes, or the taking of the urine samples is completed, the documents shall be placed into the boxes to be sent to the laboratory for testing. The Doping Test Control Forms shall be kept carefully by the Chairman of the Doping Committee who shall also store in a safe place the boxes to be provided for the control test. The boxes shall be closed and sealed, and the date and place of the sample taking written on them. Then the boxes shall be put into a cooling container, refrigerator or sealed cupboard.
- 3.2.8 The National Federation or organiser of the meeting shall provide for the transit of the box/boxes of A samples to the laboratory. The boxes shall be accompanied by a paper giving evidence of the nature of the contents to the customs authorities.
- 3.2.9 The receiving laboratory shall confirm the receipt of the closed and sealed boxes by signature. In case of complaints, a statement about the handing over shall be drafted, containing the essence of the complaints and signed by a person in charge at the laboratory and by the person entrusted with the transport.
- 3.2.10 The boxes containing the control bottles (B) may not be stored in the laboratory where the first analysis is to be carried out. They should be stored in a cool temperature and in a secure place determined by the Chairman of the Doping Committee. Access to these boxes is restricted to the Chairman of the Doping Committee.
- 3.2.11 The Chairman of the Doping Committee shall be responsible for the safe keeping of the seal of the IAAF (or EAA) the prevention from misusing it and its return to the IAAF or EAA Office. He must also supply the IAAF (or EAA) with a copy of the athlete's code immediately after the competition.

4. THE RESPONSIBILITY AFTER THE LABORATORY TEST AND IN CASE OF POSITIVE RESULTS OF THE ANALYSIS

4.1 Information on the result of the analysis

- 4.1.1 The laboratory which is to carry out the test shall analyse the samples within the agreed time but, in any case, not later than up to 10 days after having received the samples. In case of technical problems they shall inform the Medical Delegate (Chairman of the Committee) who has the right to extend this period.
- 4.1.2 The laboratory which carries out the analysis shall notify the Chairman of the Doping Committee in writing of the results of the analysis - even if these are all negative - enclosing all documents. The address of the Chairman is entered on the accompanying letter. This information shall contain the names of the persons who were responsible for carrying out the analysis.
- 4.1.3 The Chairman of the Doping Committee shall be obliged to immediately inform the IAAF Office about the results. In case of negative results, a verbal notification will suffice.

In case of positive results this information shall be submitted in writing (telex or telegram).

- 4.1.4 If the result is positive, the IAAF Office shall immediately inform the National Federation to which the athlete belongs of the facts.
- 4.1.5 The laboratory carrying out the analyses, the Chairman of the Doping Committee and the IAAF Office are obliged to observe strict secrecy concerning the results of the analyses. This applies particularly to any remarks towards representatives of the mass media.

4.2 Action to be taken for preparing the Control Analysis of Sample B

- 4.2.1 Having come to an agreement with the IAAF Office, the Chairman of the Doping Committee shall arrange for the control test to be carried out in the same laboratory and provide for a new arrangement of the team responsible for the analysis.

The Chairman of the Doping Committee together with the laboratory and the Federation concerned shall determine the day and time of the control test, to be held as soon as possible, after the first test, and immediately inform the IAAF Office.

- 4.2.3 The Chairman of the Doping Committee shall ensure that the box containing the control bottles be safely transferred to the laboratory (this is usually done by himself).

#### 4.3 The Procedure of the Control Test

- 4.3.1 The Chairman of the Doping Committee shall ensure that the control analysis is properly carried out and supervised at all times. This test may be attended by 1 - 2 additional authorised representatives of the country of those athletes whose samples will be tested. The IAAF Office may delegate an additional observer.
- 4.3.2 All persons who may be present during the testing procedure shall first control that the seal of the box is not damaged. After that, the seal of the box shall be opened in public and the control bottles shall be identified by means of the Doping Test Control Forms.
- 4.3.3 The control bottle corresponding to the respective code number shall be taken out of the box.
- 4.3.4 All persons being present during the control test shall control that the code number of the documents corresponds with the control bottle and that there has been no manipulation with the stopper and seal on the respective control bottle.
- 4.3.5 Any protest concerning the stopper, seal or other rule infringements shall be entered in writing before opening the control bottles and beginning with the control analysis.
- 4.3.6 In case of written protests, first the protest shall be dealt with and decided upon. The protest shall be deliberated on under the direction of the Chairman of the Doping Committee.
- The official of the laboratory responsible for the control test, a representative of the country entering the protest and, if present, an observer of the IAAF shall be included in this deliberation. The result of the deliberation shall be submitted in writing to the representative of the country entering the protest. It shall be enclosed with all the documentation of the respective doping control.
- 4.3.7 If the protest is accepted, because obvious manipulation has been found to be on the box and control bottle, the control test shall not be carried out.
- 4.3.8 If there is no objection, the seal and the stopper of the control bottle shall be opened by the Chairman of the Doping Committee, and the control bottle shall be handed to the official at the laboratory responsible for carrying out the analysis.
- 4.3.9 The persons who were present during the removal of the seal and opening of the bottle may remain at the laboratory during the procedure of the analysis in order to make sure that the analysis is carried out in accordance with the principles in force.

4.3.10 The official at the laboratory responsible for the analysis shall inform the Chairman of the Doping Committee of the results of the analysis. On these results a record shall be drawn up to be signed by those persons mentioned under 4.3.1.

4.4. Measures to be taken after the Control Test

4.4.1 If the results of the second analysis confirm the positive result of the first analysis, the Chairman of the Doping Committee shall take all further steps which are necessary. This also implies written notification (by registered letter) to :

- the IAAF Office (including the documentation)
- the Technical Delegate of the respective meeting
- the National Federation concerned.

4.4.2 In case of a negative result, no further measures shall be taken.

4.4.3 In case of a positive result, the National Federation concerned shall take the necessary sanctions in accordance with the rules of the IAAF within a period of up to four weeks, and notify the President and General Secretary of the IAAF of the action taken towards the person who was found guilty.