

POOL VICTORIA INCORPORATED DOPING POLICY

APPENDIX A

LIST OF DOPING CLASSES, METHODS AND SUBSTANCES

1. DOPING CLASSES

- 1.1 Stimulants
- 1.2 Narcotic Analgesics
- 1.3 Beta-blockers
- 1.4 Diuretics

2. DOPING METHODS

- 2.1 Pharmacological, Chemical and Physical Manipulation.

3. BANNED SUBSTANCES

- 3.1 Pool Victoria accepts the doping definition of the International Olympic Committee. The doping definition of the Olympic Movement Anti Doping Code (OMADC) is based on the banning of pharmacological classes of agents. The definition has the advantage that new drugs, some of which may be especially designed for doping purposes, are banned. This list may be amended from time to time without notice. Any amendments made will be in accordance with latest updates to the OMADC for prohibited classes of substances and prohibited methods.

The following list represents examples of the different classes to illustrate the doping definition. Unless indicated **all substances belonging to the banned classes may not be used, even if they are not listed as examples.** If substances of the banned classes are detected in the laboratory Pool Victoria will act. It should be noted that the presence of the drug in the urine constitutes an offence, irrespective of the route of administration.

EXAMPLES AND EXPLANATIONS

1. DOPING CLASSES

1.1 Stimulants examples:

| | |
|-------------------------------|---------------------|
| amfepramone | fenproporex |
| amfetaminil | furfenorex |
| amineptine | mefenorex |
| amiphenasole | mesocarbe |
| amphetamine | methamphetamine |
| benzphetamine | methoxyphenamine |
| caffeine* | methylephedrine |
| cathine | methylphenidate |
| chlorophetermine | morazone |
| clobensorex | nikethamide |
| clorprenaline | pemoline |
| cocaine | pentetrasol |
| cropropamide (from "micoren") | phendimetrazine |
| crothetamide (from "micoren") | phenmetrasine |
| dimetamfetamine | phentermine |
| ephedrine | phenylpropanolamine |
| etafedrine | pipradol |
| ethamivan | prolintane |
| etilamfetamine | propylhexedrine |
| fencamfamin | pyrovalerone |
| fenetylline | strychnine |

and related compounds

* For caffeine the definition of positive depends upon the following: if the concentration in the urine exceeds 12 micrograms/ml

Stimulants comprise various types of drugs, which increase alertness, reduce fatigue and may increase competitiveness and hostility. Their use can also produce loss of judgement, which may lead to accidents to others in some sports. Amphetamine and related compounds have the most notorious reputation in producing problems in sport. Some deaths of sportsmen have resulted even when normal doses have been used under conditions of maximum physical activity. There is no medical justification for use of 'amphetamines' in sport.

One group of stimulants is the sympathomimetic amines of which ephedrine is an example. In high doses, this type of compound produces mental stimulation and increased blood flow. Adverse effects include elevated blood pressure and headache, increased and irregular heart beat, anxiety and tremor. In lower doses, they e.g. ephedrine, pseudoephedrine, phenylpropanolamine, norpseudoephedrine, are often present in cold and hayfever preparations which can be purchased in pharmacies and sometimes from other retail outlets without the need for medical prescription.

THUS - NO PRODUCT FOR USE IN COLDS, FLU OR HAYFEVER PURCHASED BY A COMPETITOR OR GIVEN TO HIM OR HER SHOULD BE USED WITHOUT

FIRST CHECKING WITH A DOCTOR OR PHARMACIST THAT THE PRODUCT DOES NOT CONTAIN A DRUG OF THE BANNED STIMULANTS CLASS.

1.2 Beta2 agonists

The choice of medication in the treatment of asthma and respiratory ailments has posed many problems. Some years ago, ephedrine and related substances were administered, quite frequently. However, these substances are prohibited because they are classed in the category of "sympathomimetic amines" and therefore considered as stimulants. The use of only the following beta2 agonists is permitted in the aerosol form:

| | |
|---------------|-------------|
| bitolterol | salbutamol |
| orciprenaline | terbutaline |
| rimiterol | |

1.3 Narcotic Analgesics examples:

| | |
|----------------------|---------------|
| alphaprodine | ethylmorphine |
| anileridine | levorphanol |
| buprenorphine | methadone |
| dextromoramide | morphine |
| dextropropoxyphen | nalbuphine |
| diamorphine (heroin) | pentasocine |
| dihydrocodeine | pethidine |
| dipipanone | phenazocine |
| ethoheptasine | trimeperidine |

and related compounds

The drugs belonging to this class, which are represented by morphine and its chemical and pharmacological analogues, act fairly specifically as analgesics for the management of moderate to severe pain. This description however by no means implies that their clinical effect is limited to the relief of trivial disabilities. Most of these drugs have major side effects, including dose-related respiratory depression, and carry a high risk of physical and psychological dependence. There exists evidence indicating that narcotic analgesics have been and are abused in sports, and therefore the OMADC had issued and maintained a ban on their use during the Olympic Games. The ban is also justified by international restrictions affecting movement of these compounds and is in line with the regulations and recommendations of the World Health Organisation regarding narcotics.

Furthermore, it is felt that the treatment of slight to moderate pain can be effective using drugs, other than narcotics, which have analgesic, anti-inflammatory and antipyretic actions. It should be noted, Codeine is no longer a banned substance. Alternatives, which have been successfully used for the treatment of sports injuries, include Anthranilic acid derivatives (such as Mefenamic acid, Floctafenine, Glafenine, etc.) Phenylalkanoic acid derivatives (such as Diclofenac, Ibuprofen, Ketoprofen Naproxen, etc.) and compounds such as Indomethacin and Sulindac. The OMADC also reminds athletes and team doctors that Aspirin and its newer derivatives (such as Diflunisal) are not banned but caution against some pharmaceutical preparations where Aspirin is often associated to a banned drug. The same precautions hold for cough and cold preparations, which often contain drugs of the banned classes.

NOTE: DEXTROMETHORPHAN AND PHOLCODINE ARE NOT BANNED AND MAY BE USED AS ANTI-TUSSIVES. DIPHENOXYLATE IS ALSO PERMITTED.

1.4 Beta-blockers examples:

| | |
|------------|-------------|
| acebutolol | nadolol |
| alprenolol | oxprenolol |
| atenolol | propranolol |
| labetalol | sotalol |
| metoprolol | |

and related compounds

The OMADC has reviewed the therapeutic indications for the use of beta-blocking drugs and noted there is now a wide range of effective alternative preparations available in order to control hypertension, cardiac arrhythmias, angina pectoris and migraine. Due to continued misuse of beta-blockers in some sports where physical activity is of no or little importance, the OMADC reserves the right to test any sport that it deems as appropriate. These are unlikely to include endurance events, which necessitate prolonged periods of high cardiac output and larger stores of metabolic substrates in which beta-blockers would severely decrease performance capacity.

1.5 Diuretics examples:

| | |
|----------------|---------------------|
| acetazolamide | bumetanide |
| chlorthalidone | ethacrytic acid |
| furosemide | hydrochlorothiazide |
| mannitol | mersalyl |
| spironolactone | triamerene |

and related substances.

1.6 Cannabinoids are a banned substance.

Cannabinoids are the psychoactive chemicals in the cannabis plant. Any person who records a positive test result will be in breach of this doping policy.

NOTE: SOME CANNABINOID USERS MAY RECORD A POSITIVE READING UP TO ONE MONTH AFTER LAST USING THIS SUBSTANCE.

2. METHODS

2.1 Pharmacological, chemical and physical manipulation.

The OMADC bans the use of substances and methods, which alter the integrity and validity of urine samples used in doping controls. Examples of banned methods are catheterisation, urine substitution and/or tampering, inhibition of renal excretion, eg. by probenecid and related compounds, and epitestosterone application.

* If the epitestosterone concentration is greater than 150 micrograms per ml, the laboratories should notify the appropriate authorities. The OMADC recommends that further investigations be conducted.

3. BANNED SUBSTANCES

- 3.1 Should any player have any concerns about any medication they are using they should obtain medical advice. It is the players responsibility to ensure they are not breaching this policy.
- 3.2 When a person is required to supply a sample of urine they are required to detail all medication they have taken in the previous three days.
- 3.3 Pool Victoria acknowledges the health of members is of the highest priority. However, where alternative medication can be prescribed, which is not in breach of this policy, Pool Victoria strongly promotes the alternative medication to be used. If players have any concerns about medication they are taking, it is advisable to contact Pool Victoria or the **Australian Sports Drug Agency Hotline on 1800 020 506.**