



## FROM THE ANTI-DOPING DIRECTOR

Date: November 22<sup>nd</sup>, 2009

**To: all IDSF Members**

Additionally to the release of the 2010 Prohibited List, we would like to clarify two issues:

### **1. Declaration of Use**

The 2010 List identifies a number of substances and methods that are not prohibited but require a Declaration of Use (see art. 8 of the IDSF TUE Procedure). Athletes should declare their use on the doping control form (DCF) at the time of testing. Athletes may also add this information in the appropriate section of ADAMS (left hand tree, click on "new" and fill out the form). Failure to file a Declaration of Use will not be considered an anti-doping rule violation. Nevertheless a specific anti-doping organization (ADO) with jurisdiction over an athlete may impose consequences other than an anti-doping rule violation.

### **2. Beta-2 agonists** (asthma, see art. 4 of the IDSF TUE Procedure)

Inhaled salbutamol and salmeterol have been taken off the 2010 List. They are permitted by inhalation without any documentation; however it should be noted that suprathreshold dosages may result in a urinary level of >1000 ng/mL which could result in an adverse analytical finding (AAF), that constitutes an anti-doping rule violation.

There has been some concern about potential for "abuse" of these substances. At normal therapeutic levels, when taken by inhalation, these substances are not considered ergogenic and therefore not prohibited. Although WADA's role is not to interfere with medical practice, there is nothing preventing ADOs to educate their athletes. A clear diagnosis with appropriate tests (e.g. pulmonary function tests) should be recommended for all athletes before taking medications for a particular condition.

Presently the relationship between normal inhaled therapeutic dosages and urinary threshold levels for alternate Beta-2 agonists (e.g. terbutaline and formeterol) is being investigated and therefore these substances remain prohibited and still require a therapeutic use exemption (TUE) from the relevant ADO. The request for a TUE should include a complete medical file with a clear explanation of why an alternate medication is being prescribed. It should be noted that, at least for 2010, the intent is not to deny the use of alternate Beta-2 agonists because there is now a permitted substitute (salbutamol/salmeterol), particularly where a treatment regimen has already been established. For athletes newly diagnosed with asthma, permitted Beta-2 agonists should be considered as primary treatments unless otherwise justified.

Please publish this information on your own website to inform your athletes.

We thank you for your continuous cooperation.

Ko de Mooy  
IDSF Anti-Doping Director