olay/tirue

The ABP in 2018 - Status Report

WADA ABP Symposium – 5-7 November 2018 Dr. Reid Aikin, ABP Manager, WADA





Protect the clean athlete

Towards an even playing field



- Reduced prevalence
 - Prevention
 - Deterrence
 - Detection
- Reduced effectiveness
 - Reduced dose
 - Less potent substances
 - Altered timing of doping

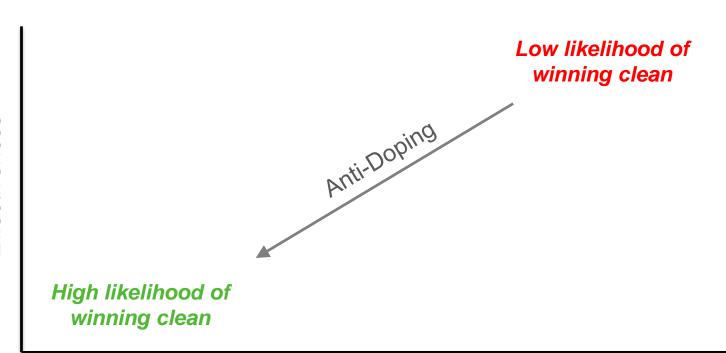


Increase the likelihood that a clean athlete can win

Doping prevalence and effectiveness are independent



Effectiveness



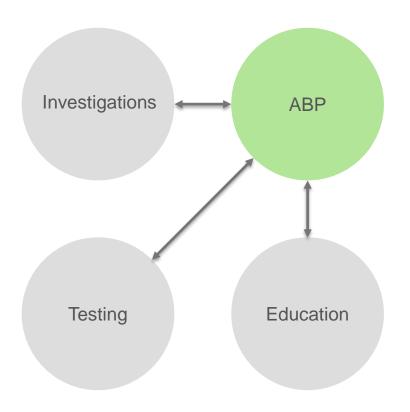
Anti-doping toolbox





This Symposium

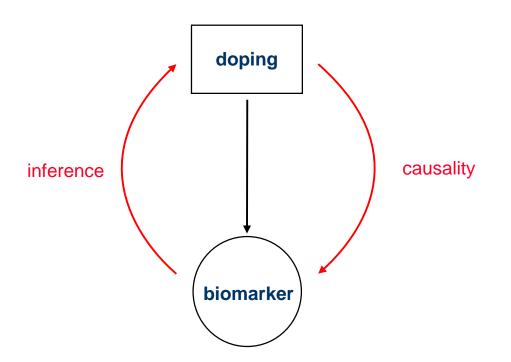




- How can I optimize my role within an ABP program?
- How can I optimize my ABP program?
- How can I optimize the integration of my ABP program within my overall anti-doping strategy?

Detecting doping





Cause

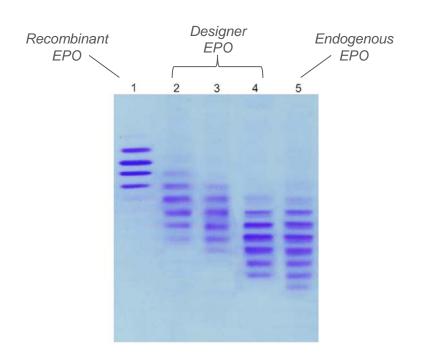
Substance detection Metabolites

Effect

Biomarkers of doping

Why do we need biomarkers?





- Some substances are not easily detectable
- Some substances are rapidly metabolized
- New substances are continuously developed
- Measuring the effect complements substance detection

How do we use biomarkers to infer doping?



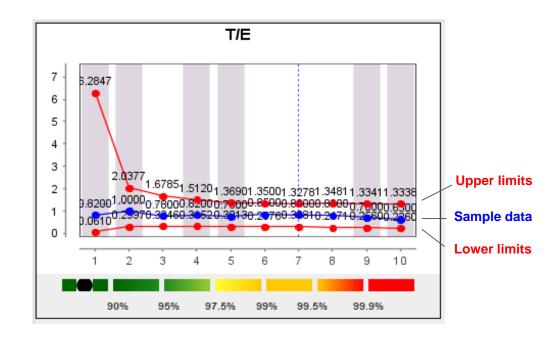


Solution: longitudinal profiling using the ABP



 Personalized thresholds based on athletes own values.

2. Increased sensitivity.



Automated Process



- One Athlete One Passport
- Automated calculation and alerts
- Passport sharing
- WADA monitoring



Modules of the ABP



Haematological Module - 2009

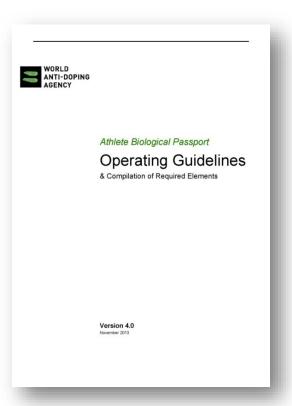
- Aims to detect blood doping
- Matrix EDTA blood samples

Steroid Module - 2014

- Aims to detect steroid doping
- Matrix urine samples

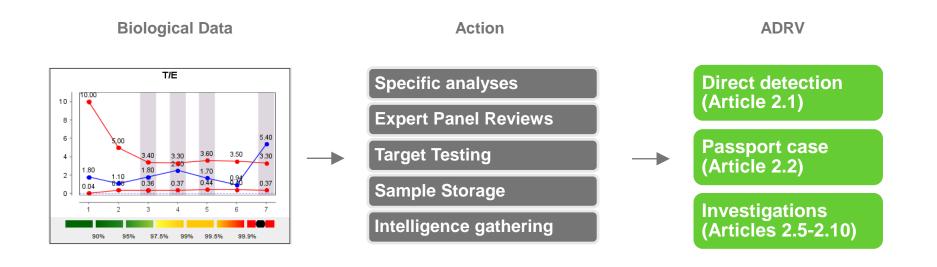
Endocrine Module

- Under development
- Goal to detect GH doping



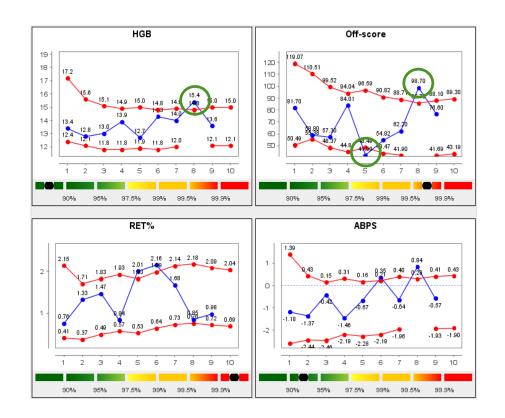
Translating biological data into specific actions





The ABP can be used to directly sanction athletes

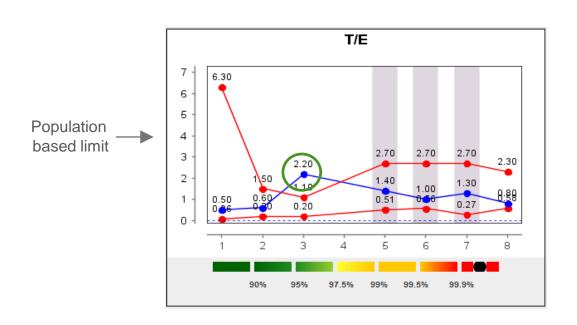






The ABP can direct sample analysis – what to test for?



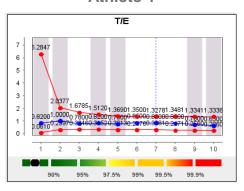




The ABP can direct testing – who to test?



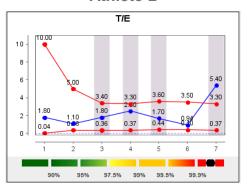
Athlete 1







Athlete 2





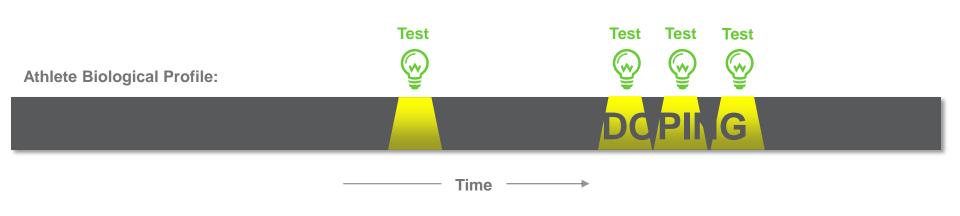


Increase testing

The ABP can direct testing – when to test?



- Reactive testing is critical.
- Individual samples can support the evidence in neighboring samples and be linked together into one biological response to doping.



The ABP can be used to direct investigations



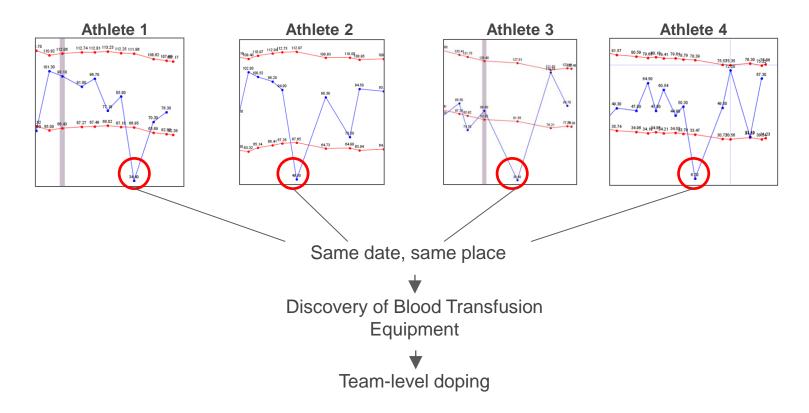
The ABP provides robust forensic evidence

- Correlate with other intelligence
- Identify individuals and group of athletes



Spatial-temporal analysis of ABP patterns





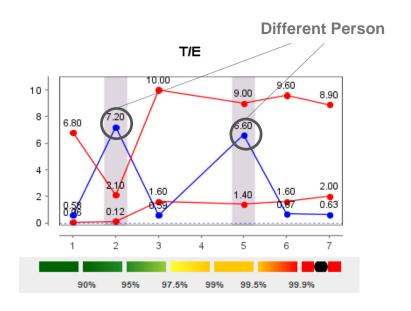
The steroid module assists in fighting corruption



Sample switching – DNA analysis

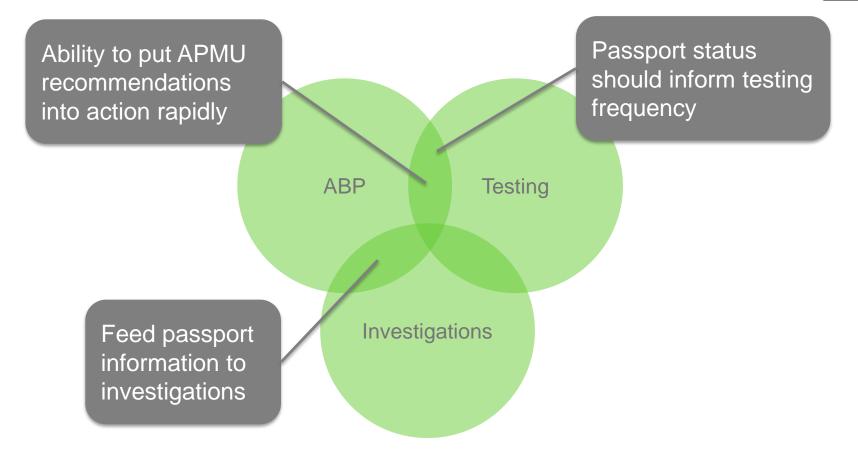
Confirm sample identify

Use in investigations



Integration of the ABP into an anti-doping program



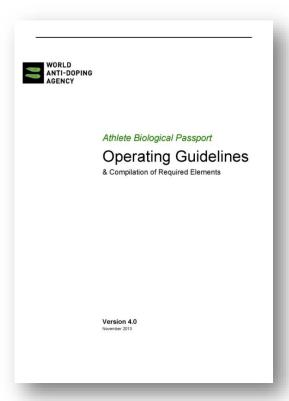




Status of the ABP - 2018

Growth in the use of the ABP





- 119 ADOs running compliant ABP programs
- There are presently 113 ADOs working with Lab-associated APMUs (58 NADOs and 55 IFs)
- With growth had come increasing complexity and specialization of individual roles.

Addressing increased specialization in the ABP





- Reference Guide for Experts via Adel platform
- Webinar series

TD2019APMU

- Harmonize APMU role
- APMU approval process

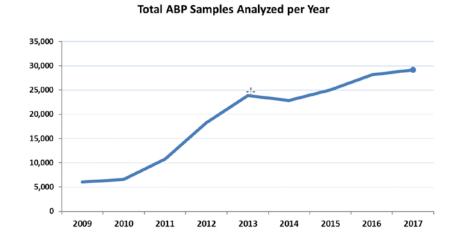
Improvements to ADAMS

- Improve communication between stakeholders
- Provide new tools to manage passports

Status of the Haematological Module



- 91 ADOs running haematological module
- ABP Blood testing (2017)
 - **-** 29,130 tests
 - 10,788 athletes
 - Average of 2.7 tests per athlete
- Haematological Module becomes mandatory for endurance sports in 2019 (TDSSA)
- BSS went live in June 2017



Steroid Testing in 2017



- 224,167 tests (avg 1.5 tests per athlete).
- Of IRMS positives, >75% are on first test.

First Sample	SSP-CPR system fit for purpose
At least two Samples – T/E over 4	Reduction in costs as less IRMS
At least two Samples – T/E less that 4	Increased sensitivity

Adverse Passport Findings continue to increase



40 APFs in 2017

 7 new ADOs declaring APFs in 2017 (15 ADOs in total)

 5 APFs where no ADRV was delivered



Outcomes of the ABP



- Over 150 athletes sanctioned directly using the ABP
- 30 APFs in results management
- >500 ESA positives
- Improved sensitivity to steroid abuse at low T/E levels
- Efficient targeting of IRMS with longitudinal profiling
- Detection of urine exchange
- Investigations
 - IC, IP, LIMS, Kenya
 - ADOs

Changes in Behavior



- Reduction in atypical passports
- Effectiveness (potency) of doping regimes has significantly diminished
 - Reduced doses, less effective substances.
- Athletes are doping at less effective times
 - Doping during the off-season for training
- Evidence of effects on performances

Increasing the likelihood that a clean athlete can win



Future of the ABP

The development of the ABP is driven by stakeholders



- ABP Expert Groups:
 - Haematological
 - Steroid

- Working Groups:
 - BSS
 - APMU
 - Endocrine/IGF-1
 - Biomarker of Doping



Challenges with biomarkers in the ABP



- Limited to blood and steroid doping
- No new biomarkers

Sensitivity

Windows of detection

 Important confounding factors without biomarkers



Development of the ABP



 Implemented, legally validated framework to which new biomarkers can continuously be added.

- Strategy continuously add new biomarkers to the ABP.
- Goal is to make it virtually impossible to dope.



The way forward – WADA Biomarker Working Group

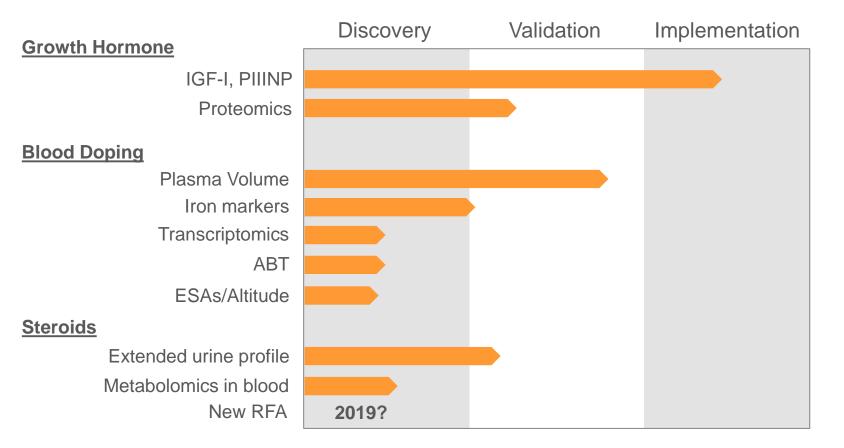


- Targeted research for biomarker discovery
 - First RFA in 2017
- Link with other funding agencies (ex. FRSQ)
- Promote interactions with other biomarker specialists
 - Sample analysis
 - Data analysis
 - Learn from other fields



ABP Biomarker Development Pipeline 2018





Perspectives



- The effectiveness of the ABP is dependent on:
 - Testing quantity
 - Testing quality
- Anti-doping data is growing and becoming more complex.
 - Roles within the ABP are becoming more specialized and complex
 - Data management is increasingly important
- The ABP is reliant on strong collaboration between stakeholders



