

# WADA Technical Letter – TL26 Clomifene

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Written by:	WADA Science	Approved by:	WADA Executive Committee
Reviewed by:	WADA Laboratory Expert Advisory Group		
Date:	September 2025	Effective date:	01 January 2026

## Clomifene

### 1.0 Introduction

WADA wishes to draw the attention of the Laboratories to the following observations and instructions on the analysis and reporting of clomifene (CLO) findings in urine *Samples*.

CLO is prohibited at all times (*In- and out-of-Competition*), and as such is included in the *WADA Prohibited List* under section S4.2 Anti-estrogenic Substances <sup>[1]</sup>.

However, CLO may be used as a fertility enhancer in hens to increase egg production <sup>[2-4]</sup>. Therefore, there is also the possibility that the presence of CLO and/or its *Metabolites* in urine *Samples* may result from food contamination, as CLO residues may be present in contaminated poultry meat and eggs <sup>[5]</sup>.

#### 1.1 Considerations on Pharmacokinetics of CLO from Contaminated Food Intake

After the consumption of CLO-containing poultry eggs or meat, (Z)-4-OH-CLO has been identified as the most abundant CLO *Metabolite* present in urine *Samples*. In contrast, (Z)-3-OH-CLO has been identified as the most abundant *Metabolite* after direct human intake of CLO <sup>[6]</sup>. In addition, it has been demonstrated that CLO parent compound can be detected in urine *Samples* after consumption of two (2) CLO-containing eggs in concentrations up to 25 pg/mL (*i.e.*, 0.025 ng/mL) <sup>[6]</sup>.

#### 1.2 Genetic Polymorphism Impact on CLO Urinary Excretion

The genetic polymorphism of CYP2D6 (the main CYP isozymes related to the CLO metabolism) or alterations in its enzymatic activity may influence CLO biotransformation, leading to variations in the expected presence/concentrations of (Z)-4-OH-CLO and (Z)-3-OH-CLO <sup>[7]</sup>.

Furthermore, a two (2)-fold difference in CLO parent compound concentration in blood has been observed due to variations in CYP2D6 activity across different genotype groups <sup>[7]</sup>. Consequently, the concentration of the CLO parent compound in urine *Samples* may also be affected by variations in the CYP2D6 biotransformation process. This suggests that, in combination with the potential ingestion of large quantities of CLO-contaminated poultry products, individual differences could lead to elevated CLO urinary concentrations (beyond 25 pg/mL <sup>[6]</sup>) in food contamination scenarios.

*[Comment to Article 1.2: The total CLO concentration observed in urine Samples resulting from food contamination may depend on the amount and intervals of ingestion of contaminated poultry meat and/or eggs, the extent of CLO contamination, and the genetic polymorphism of the individual.]*

#### 1.3 Analytical Considerations of CLO

The chromatographic and mass spectrometric differentiation of the two (2) hydroxy (OH)-CLO *Metabolites* mentioned above from other OH-CLO *Metabolites* can be challenging due to coelution <sup>[6]</sup>, and unavailability of appropriate Reference Materials (RMs). Therefore, relying on a ratio between (Z)-4-OH-CLO and (Z)-3-OH-CLO concentrations to establish the source of CLO could be misleading.

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## 1.4 Further Challenges on CLO Metabolism Investigation

CLO has a complex metabolic pathway, and several other OH-CLO *Metabolites* have been described. For example, 4-OH-methoxy-CLO has also been suggested as a target Analyte for monitoring CLO misuse due to its longer detection window. However, different producers of RM have commercialized different isomers of 4-OH-methoxy-CLO under the same nomenclature, which negatively impacts the reliability of targeting this specific CLO *Metabolite* by the Laboratories <sup>[8-12]</sup>.

## 1.5 Considerations on Pharmacokinetics of CLO Misuse in Sport

Studies have demonstrated the long-term detection of CLO parent compound in urine *Samples* in the absence of any other *Metabolites* <sup>[13-14]</sup>. In some other cases, OH-CLO *Metabolites* were observed together with the CLO parent compound, although in less abundance than the CLO parent compound <sup>[13-14]</sup>.

Urinary elimination of CLO is nonuniform, and in most individuals in which CLO administration has been studied, the CLO parent compound concentration was detected at a concentration higher than (>) two (2) ng/mL for a prolonged period while taking the drug, followed by rapidly dropping excreted concentrations during the washout phase <sup>[15]</sup>. Therefore, the detection of CLO parent compound at concentrations lower than or equal to ( $\leq$ ) two (2) ng/mL may also be attributed to the washout phase of CLO administration, and not only due to consumption of contaminated food.

## 2.0 CLO Analytical Testing Strategy and Reporting Requirements

### 2.1 “A” *Sample*:

a) The Minimum Required Performance Level (MRPL) for CLO parent compound is set at 2.0 ng/mL. Therefore, the Limit of Detection (LOD) of the Initial Testing Procedure (ITP), as estimated during Test Method validation, shall be not higher than ( $\leq$ ) 1.0 ng/mL (50% of MRPL).

b) The “A” Confirmation Procedure (CP) shall confirm the presence of the CLO parent compound in compliance with the effective TD IDCR <sup>[16]</sup>.

*[Comment to 2.1.a: The Laboratory may monitor the presence of CLO phase-I and phase-II *Metabolites* in the ITP and CP to strengthen the interpretation of the test results; however, the concentrations of the CLO phase-I and phase-II *Metabolites* shall not be considered for the application of the MRL.]*

c) The Limit of Identification (LOI) of the CP, as estimated during Test Method validation, shall be less than (<) 2.0 ng/mL.

d) To exclude the potential food contamination scenario, a *Minimum Reporting Level* (MRL) in urine, applicable to the free-fraction CLO parent compound only (as the sum of both CLO isomers: zuclofenone and enclofenone), is set at the MRPL value of 2.0 ng/mL.

e) To estimate the concentration of the CLO parent compound in the “A” *Sample*, the “A” CP shall follow the requirements established in the effective TD MRPL <sup>[17]</sup> for Non-Threshold Substances

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with an *MRL*.

## f) *Adverse Analytical Findings (AAF)*

As per the *TD MRPL* reporting requirements for Non-Threshold Substances with an *MRL* <sup>[17]</sup>, an *AAF* for CLO shall be reported if the CLO parent compound is confirmed in the “A” *Sample* at an estimated concentration (adjusted for specific gravity (SG), if needed), which is confidently higher (as determined by comparison with a 120% *MRL* single point calibrator – see *TD MRPL*) than (>) the *MRL* of 2.0 ng/mL. This is applied irrespective of the presence of any other *Metabolites*.

*[Comment to Article 2.1 f): This Technical Letter is an integral part of the International Standard for Laboratories (ISL) <sup>[18]</sup> and supersedes any previous publication on a similar topic, including Technical Document(s) (e.g., TD MRPL) and/or the ISL]*

## g) *Atypical Finding (ATF)*

In addition, the Laboratory shall report the presence of the CLO parent compound (as the sum of both CLO isomers: zuclofenone and enclomifene) in a urine *Sample* at an estimated concentration equal to or below ( $\leq$ ) the *MRL* of 2.0 ng/mL as an *ATF*. If an *ATF* is reported, the Results Management Authority (RMA) shall conduct a mandatory investigation to determine whether evidence exists that establishes that the consumption of contaminated poultry meat and/or eggs is more likely than not the explanation for the *ATF*. If such evidence exists, the RMA will take no further action in respect of the *ATF*. If such evidence does not exist, the RMA will progress the finding as an *AAF*.

*[Comment to Article 2.1 g): Depending on the circumstances, the consumption of contaminated poultry meat and/or eggs may lead to very low concentrations of CLO parent compound in the urine of the consumer of the contaminated food. Therefore, the presence in urine of CLO parent compound at a concentration of 2.0 ng/mL or less ( $\leq 2$  ng/mL) shall be reported as an ATF, even though the likelihood of a contaminated food consumption scenario decreases the closer the urinary concentration gets to that 2.0 ng/mL limit. Upon receipt of the ATF, the RMA shall conduct a mandatory investigation to determine whether there is sufficient evidence to support contaminated food consumption as the more likely than not explanation. This investigation may include, for example, the evaluation of the Athlete’s longitudinal urinary T/E values and blood testosterone concentrations to assess a possible CLO doping scenario <sup>[15]</sup>].*

## 2.2 “B” *Sample*:

The “B” *Sample CP* shall only confirm the presence, at any concentration, of the CLO parent compound (in compliance with the *TD IDCR* <sup>[16]</sup>) for the *AAF* to be valid. No quantification or estimation of concentration is necessary.

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## 3.0 References

[1] WADA Prohibited List

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[16] WADA Technical Document TD IDCR: Minimum Criteria for Chromatographic-Mass Spectrometric Confirmation of the Identity of Analytes for Doping Control Purposes.

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[17] WADA *Technical Document TD MRPL: Minimum Required Performance Levels* and Applicable *Minimum Reporting Levels* for Non-Threshold Substances Analyzed by Chromatography-Mass Spectrometric Analytical Methods.

[18] The World Anti-Doping Code International Standard for Laboratories (ISL)