







Centre Universitaire Romand

> Médecine Légale









Managing sample validity, analytical and pre-analytical issues in the ABP









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WADA ABP Symposium

November 5th-7th, 2018 Rome









www.curml.ch

Athlete Passport Management Unit (APMU)

TD2019APMU

- → Timely management of the passports in ADAMS.
- → Assessment of passport for target testing
- → Management of atypical passports (APMU reports, liaising with Experts, ABP doc pack, declaring APFs)
- → Review of sample validity in consultation with the Experts or Laboratories.
- → Support the Passport Custodian to set priorities (costs, special analyses, target testing, ...)





Invalidity – what does that mean?

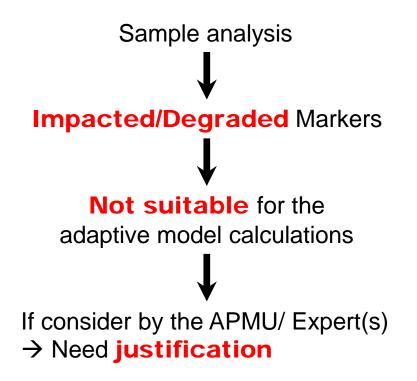
"Sample is presumed as **valid**" (D. Leroux)

L.2.1.4 Departure from WADA ABP requirements

If there is a departure from WADA *ABP* requirements for *Sample* collection, transport and analysis, the biological result obtained from this Sample affected by the non-confirmity shall not be considered in the <u>Adaptive Model</u> calculations (for example, reticulocytes are affected but not haemoglobin).

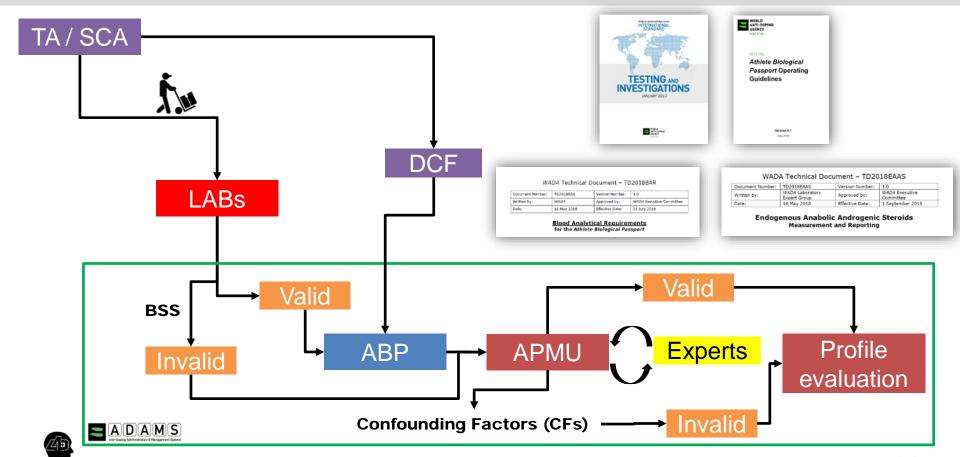
The part of the result which is not affected by the non-conformity can still be considered in the <u>Adaptive Model</u> calculations. In such case, the <u>APMU</u> shall provide the specific explanations supporting the inclusion of the results. In all cases, the <u>Sample</u> shall remain recorded in the Athlete's <u>Passport</u>. The <u>Experts</u> may include all results in their review provided that their conclusions may be validly supported in the context of the non-conformity.

ISTI, Jan 2017

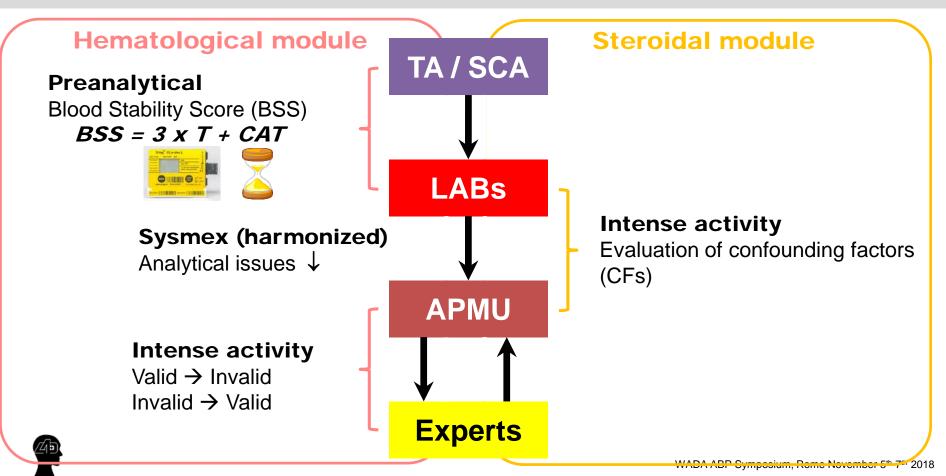




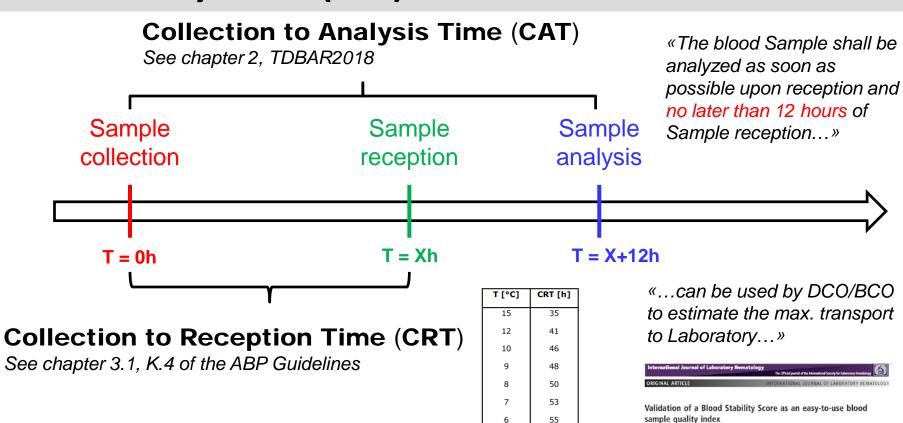
From Sample collection to Passport evaluation



From Sample collection to Passport evaluation



Blood Stability Score (BSS)



5

60



 $BSS = 3 \times T + CAT$

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Invalid blood data

- According to ISTI (Annex L, \$L2.1.4)
 - «...If there is a departure from WADA ABP requirements..."
 - Rules are not clearly defined and leave space for APMU and Expert evaluation
- ADAMS automatic evaluation
- Reasons
 - 1. If the BSS > 85
 - 2. If the datalogger is switched **ON too late**, or **OFF too early**
 - 3. If the temperature goes **below 0°C**
 - a) Going below 0°C was at any point before July 2018, even before Sample collection
 - b) Since July 2018, going below 0°C must be during the Collection to Analysis Time (CAT)

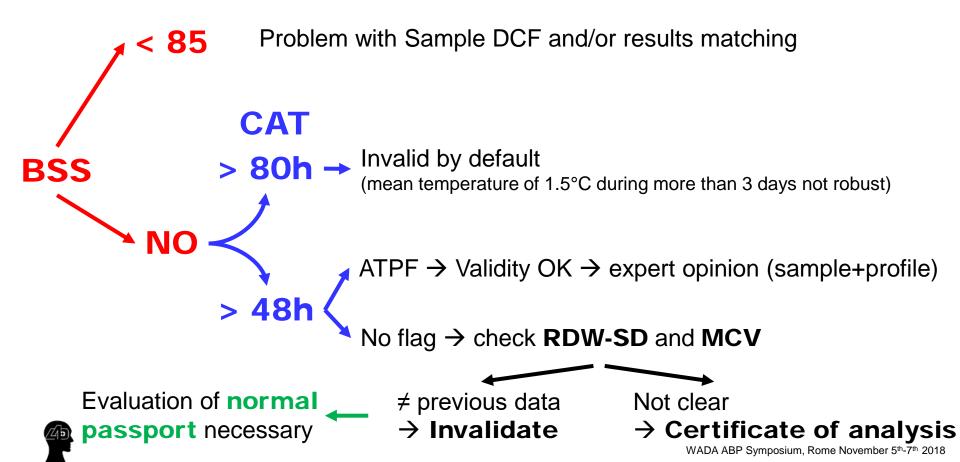


Invalid blood data – Role of the APMU to validate

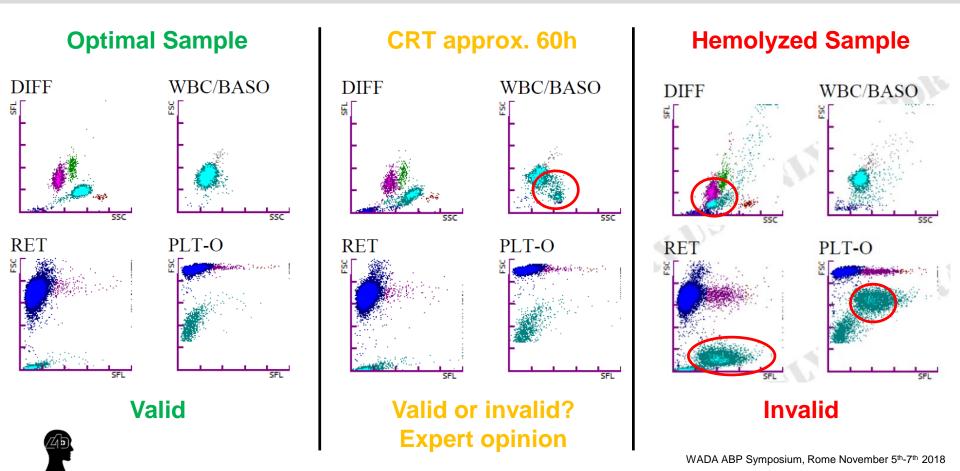
- Estimation of the BSS
 - Temperature plot and CAT not complete
- The degradation markers are not always clear
- Consultation of the expert panel
 - A certificate of analysis is often needed (Sysmex data)
- Process
 - Time consuming
 - Must be documented (APMU expert report in ADAMS)



Valid blood data - Role of the APMU to invalidate



Scattergrams – Valid or Invalid Blood Sample



Urine sample collection and analysis

No acceptance criteria to proceed to analyses but...

WADA Technical Document - TD2018EAAS

Document Number:	TD2018EAAS	Version Number:	1.0
Written by:	WADA Laboratory Expert Group	Approved by:	WADA Executive Committee
Date:	16 May 2018	Effective Date:	1 September 2018

Sample has occurred and the finding be treated as an Anti-Doping Rule Violation.

2.2.1 Validity of (the "steroid profile" of) the Sample

The validity of the *Sample* will be determined automatically upon reporting the "steroid profile" in *ADAMS* in accordance to:

- a) "Invalid": only when the Sample shows signs of extensive degradation¹³, as determined by:
 - ∘ 5α AND/A ≥ 0.1, and/or
 - \circ 5βAND/Etio \geq 0.1
- b) "Valid": in all other situations, including:

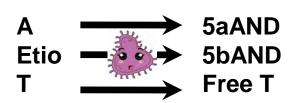
Excessive T°C and ↑
delivery time

→ Microbial contamination



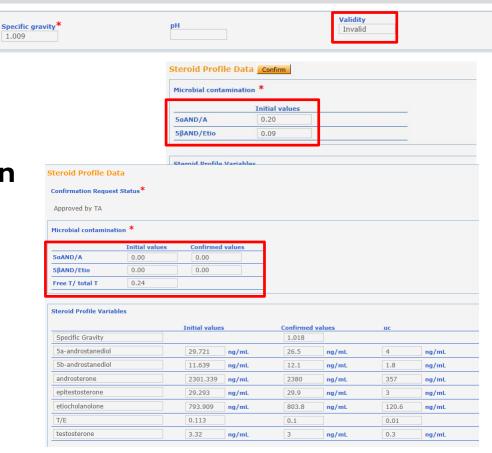


Invalid urine data



1.009

- ADAMS automatic evaluation
- Reasons (microbial activity)
 - 1. ITP provides
 - **a) 5aAND/A** ≥ 0.1 or
 - **b) 5bAND/E** ≥ 0.1
 - 2. Confirmation provides
 - **a) 5aAND/A** ≥ 0.1 or
 - **b) 5bAND/E** ≥ 0.1 or
 - c) Tfree / Ttotal > 0.05





Valid urine data – Role of the APMU

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...In addition, following the reporting of the "steroid profile" in ADAMS by the Laboratory, the Sample may be evaluated as "invalid" by the APMU upon review of the "steroid profile" data, for example, by considering the presence of substances that may alter the "steroid profile" in the Sample



Steroid profile and confounding factors

WADA TD2018EAAS, chapter 1.1

Additionally, alteration of the urinary "steroid profile" can occur for a number of reasons including, but not limited to the following confounding factors:

- the administration of other anabolic steroids (e.g. stanozolol);
- the administration of human chorionic gonadotrophin (hCG) in males;
- the administration of aromatase inhibitors and anti-estrogens;
- the administration of inhibitors of 5α-reductase (e.g. finasteride);
- intake of alcohol (ethanol);
- the administration of ketoconazole or other similar compounds;
- the use of masking agents (e.g. probenecid) and diuretics; or
- microbial growth.

Profile evaluation by **APMU**Check for validity



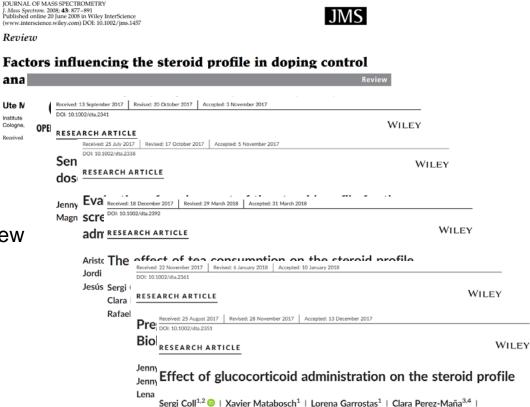
How APMU can evaluate the validity of a urine Sample?

Confounding factors (CFs)

- → Measurable
- → Relation with the **labs** needed
- → Objective information

Constant evolution of CFs

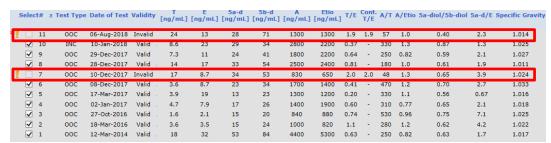
- → Scientific publications review
- → Research projects ongoing

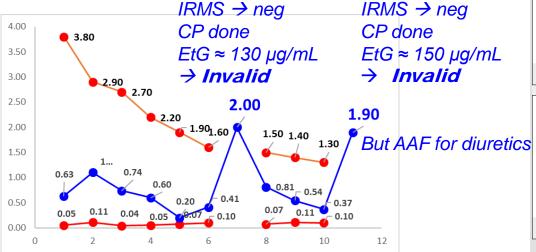


Rosa Ventura^{1,2}

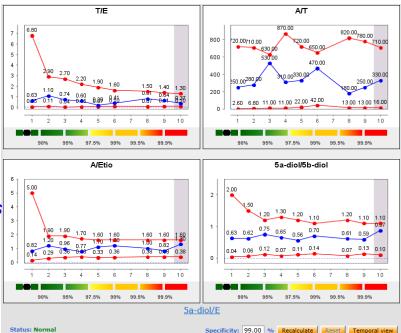


Example of urine invalidation by the APMU





EtG \rightarrow T/E \uparrow and A/T \downarrow





Interaction between APMU and Partners

Which information are **available** for the APMU in ADAMS

- → Steroid profiles data (ITP and confirmation)
- → Sample validity (microbial contamination)
- → GC-C-IRMS data if any
- → Presence or absence of CFs

But...

- → No information about the concentrations or identification of the CFs
- → **Importance** for evaluation of the confounding factors impact on the profile

Communication

- → ADAMS expert report sent to Passport Custodian (PC)
- → PC should read and contact the appropriate laboratory (agreement between PC APMU)
- → Feedback from the Laboratories, PC and/or TA are not easily available for the APMU



Conclusion

Hematological module

- → Validity of Sample needs more information than available by default (ADAMS)
- → Long history of markers in clinics

→ Confounding factors come from declaration of the athletes (not measurable in the Sample)

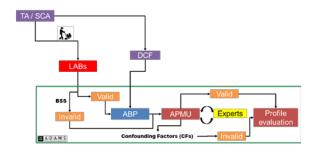
Steroidal module

→ Validity clearly defined by TDEAAS

- → No history or background of the markers and CFs coming from the clinicians (antidoping related tool)
- → Confounding factors come from analytical results (measurable)



Conclusion





Case by Case Management



https://www.knowledgedesk.com/collaboration-trumps-management/

