



WORLD ANTI-DOPING AGENCY

# **INDEPENDENT OBSERVER REPORT**

**FIFA 2003 World Youth Championship**

UNITED ARAB EMIRATES

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# 1. INTRODUCTION

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Within the framework of the Independent Observer Programme, which has been operating since the Olympic Games in Sydney in September 2000, FIFA invited WADA, for the first time, to appoint a team of observers for the 2003 World Youth Championship, which took place in the United Arab Emirates from 28/11/2003 to 15/12/2003.

WADA appointed two medical doctors to carry out this mission:

- Dr Jacques Huguet, Chairman of the FIBA Medical Commission
- Dr Alain Garnier, Medical Director of the World Anti-Doping Agency

The observation was carried out within the period of 12/12/03 to 15/12/03, which included the quarter- and semi-final matches, and not for the whole Championship. During this period, all of the phases of the doping control procedure were observed under satisfactory conditions, from the selection of athletes to the dispatch of the samples collected to the laboratory which, in this case, was the Swiss Doping Analysis Laboratory in Lausanne. It should be noted that the agreement made between FIFA and the laboratory provided for the systematic analysis for EPO in all of the urine samples that were taken. This principle, and procedure, which bears witness to significant financial and technical efforts, is commended. Nevertheless, considering the protocol used by the athletes who have recourse to EPO, the moment for testing is probably not the most appropriate (controls performed at the end of the match). Unannounced tests carried out during training, out-of-competition, could certainly prove to be more effective.

Due to the absence of an on-site laboratory, the analytical phase itself was not, therefore, observed, nor was the management of positive results, in that no positive case was revealed during the observation period and therefore the ad hoc disciplinary commission did not meet. No request for the use of a prohibited substance for therapeutic use was brought to our attention during our stay.

We therefore did not have the opportunity to observe the authorization procedure for therapeutic use exemptions employed by FIFA.

Furthermore, given that such procedure was not described in the FIFA anti-doping rules provided, we shall not be able to comment on it in this report.

## 2. CONTEXT AND PROGRESS OF THE MISSION

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The observers would like to emphasise the excellent quality of the reception that they received, as well as the excellent conditions under which they were able to carry out their mission.

This mission took place in an atmosphere of mutual trust and transparency. All of the necessary information was provided, and access to all of the documentation was facilitated. The transport and accreditation conditions at the respective venues were entirely appropriate for the objectives of the mission. The observers would like to thank FIFA, in particular Professor Dvorak and his team, for their availability and cooperation.

## 3. PROGRESS OF THE FIFA PROCESS AND REFERENCE TEXT

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There was no specific regulatory text for this event. The general rules concerning doping control for FIFA competitions were applicable (document provided).

The "Sports Medicine Commission" is entirely responsible for the implementation of doping control at all FIFA competitions. It should therefore be noted that this responsibility is not delegated to the local event organisers.

With regard to the reference list of prohibited substances, FIFA applied the 2003 List that was released jointly by WADA and the IOC. Consequently, we have no comments to make regarding this list. Our only remark concerns the phrase that appears under the title of this list in the FIFA rules: "subject to adaptation if necessary".

We do not clearly understand the meaning of this. Insofar as the List constitutes the legal element of reference of all anti-doping regulation, we

think that it should be particularly precise and rigorous in its presentation and drafting. We therefore believe that this wording is unwise from a legal point of view, as there is no mention either of adaptations that may be made or of the body that would be responsible for making them.

## 4. GENERAL OBSERVATION

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### a. Control Premises

The location of the anti-doping control station in each of the two stadiums was appropriate, as it was very close to the players' changing room.

Sign-posting in order to reach the control station was satisfactory. The internal set-up comprised a waiting-room, the control room itself and the room for the collection of urine samples.

The area set aside for the collection of urine samples was suitable, and was sufficiently large to allow for the presence of a witness. It contained a lavatory, a shower and a mirror to allow for the observation of micturition.

The waiting-room was also in accordance with the requirements, with an adequate supply of sealed cold drinks, as well as a television for the athletes.

However, we observed that there was no separation between the waiting-room and the control room itself, which did not sufficiently ensure the private nature of the control phase during which the athlete is liable to provide confidential information.

Entry into the control station was strictly regulated by a person assigned to ensure the security of this room from the outside, and by the Doping Control Officer.

When the Doping Control Officer was not in the room, it was kept locked. All those authorised to enter the room were in possession of the necessary accreditation.

## b. Personnel

All of the personnel to whom we were introduced had the necessary level of qualification and information for the tasks for which they were responsible. We would like to emphasise the high level of professionalism and the rigour with which each member of personnel worked in our presence.

With regard to the people in charge of the control procedure, FIFA required that these be medical doctors. For these doctors responsible for the controls, we became aware that, as a result of their initial training and probably the spirit transmitted by FIFA during their specific training, they benefited from a global approach, which was both educational and preventative, as opposed to a strictly disciplinary and regulatory approach. We believe this to be an advantage in terms of the relations established with the athletes themselves, as well as with the medical entourage. The open and professional dialogue effectively enabled relevant educational messages to be passed on to the doctors as well as the athletes. The doctor should, nevertheless, take care to ensure that he or she bears in mind his or her strict mission to control, which could at times be in conflict with that of a "caring doctor", in particular within the legal framework of a testimony during the course of a disciplinary procedure.

## c. Equipment Used

For sample collection, Berek kits were used. These were perfectly suitable and in conformity with security requirements. Four different forms were used by FIFA:

- **Medical Declaration Form (0-1):**

A declaration form for medication prescribed for each player during the 72 hours prior to the match, to be filled in by the doctor of each team and to be handed in to the FIFA medical director before the match.

Except for this systematic declaration form, no specific procedure for possible therapeutic use exemptions was presented to us, nor was there any such procedure in the rules.

We would like to make two comments concerning this form:

- The space provided to write the name of the product, the diagnosis, the dosage and the conditions of prescription appeared to be insufficient to cover an entire team (at least for some), and required the addition of non-official sheets of paper in some cases.
- It would be more useful if the International Non-proprietary Name (INN) of the medications were required, rather than the commercial product name, which does not always enable one to find out the composition of the product.

• **Athlete Notification Form (0-2):**

This form notified the athlete that he had been selected at random for a doping control, and that he was required to go immediately after the match to the control station with, if he so wished, one companion (doctor, coach or team official). This document specifies the name of the player, as well as his official shirt number. The document was signed by the FIFA Doping Control Officer.

We observed that this document was not countersigned by the player at the time of his notification. This point could constitute a legal weakness if a player does not present himself at the control station (to justify a report of absence).

There were four copies of the form: one for the player, one for the FIFA Secretary General, one for the Doping Control Officer, and one for the FIFA match commissioner.

• **Urine Sample Record Form (0-3):**

This form had the particularity that it was very simple and easy to fill in compared to existing reports of sample collection.

This effort in favour of simplicity, which appeared to arise from an overall desire to simplify the entire procedure, and administrative formalities in particular, is to be commended in that, in this way, it minimised the potential for error and possible legal flaws.

Nevertheless, the observers noted that there was no space assigned in the form in its actual format for possible remarks or comments by the athlete.

No specific wording made it possible to assert that the athlete was generally satisfied with the procedure carried out, except for the athlete's signature.

However, the form did state whether handling of the process was carried out by the athlete himself or whether this was delegated to the FIFA Doping Control Officer. Finally, we note that medication that might be used by the athlete could not be registered on this form.

The set contained three copies, which were to be given to the FIFA Secretary General (the original), the Doping Control Officer (the blue copy) and the player (the pink copy), and no copy was provided for the laboratory, which received a specific form (cf below).

• **Laboratory Form (0-4):**

This form summarized the samples collected for one match (usually four). It indicated the codes of the A and B sample bottles as well as the pH and specific gravity values for each sample.

In the administrative simplification procedure undertaken by FIFA, one might question the necessity of repeating the code numbers of the A and B sample bottles when they are always identical, and where there was a risk of making a mistake in copying these numbers since this was done manually.

We noted that the laboratory had no information on the player, which could be considered as a favourable element. Nevertheless, we think that at least some information relative to the sex of the player and the medications taken by that player would be of use to the laboratory.

## 5. SPECIFIC OBSERVATION OF CONTROLS

The specific observation included the following matches:

12/12/03 in Dubai Raschid

UAE / Colombia

Japan / Brazil

12/12/03 in Abu Dhabi

Canada / Spain

USA / Argentina

15/12/03 in Dubai Rashid

Colombia / Spain

15/12/03 in Abu Dhabi

Argentina / Brazil

For each of these matches, the observation dealt with the following phases:

- The setting up of the doping control mechanism prior to the match
- The selection of players to be tested
- The notification to the selected players
- Sample collection
- Packaging and Dispatch

In this way, 24 controls were observed by the team of Independent Observers. Insofar as the FIFA procedure, according to the documentation provided (Doping Control Rules for FIFA Competitions), was followed to the letter for all of the matches throughout the entire period of observation, we shall not detail our observations match by match; rather, we shall provide an overall view of our observations.

#### a. Setting up of a mechanism prior to the match

In all of the cases, the FIFA Doping Control Officer in charge of the controls was present at least one hour prior to the start of the match. In our presence, he proceeded to the inspection of the facilities and the preparation of the necessary equipment. Together with the assisting doctor of the local organising body, a review of the necessary personnel (chaperones and security personnel) was also carried out during this preliminary phase.

During this period, the FIFA Doping Control Officer received the official players lists of each of the two teams, and their shirt numbers. Furthermore, the medical form (0-1), duly completed, was handed personally by each team doctor to the FIFA Doping Control Officer. He/she then checked that there were no prohibited substances among the treatments declared as having been administered during the 72 hours preceding the match. The name of the product, the diagnosis, the

dosage, the date and the prescription conditions were included in this form. The form was kept in medical confidentiality and its content could be revealed only in the event of a positive test result.

The observers did not note the presence of a prohibited substance pointed out by the Doping Control Officer during the period of their observation. Furthermore, no request for authorisation of a substance to be declared in advance was made known to us during our presence at the location. Consequently, it was not possible to observe these two types of procedures.

Observation of this stage led us to make the following comments:

*- We thought that the preparation of the equipment and personnel for the following operational stages was excellent, and that it was carried out with a high degree of professionalism.*

*- With regard to the declaration of medication taken during the 72 hours prior to the match, we note that a treatment could, if necessary, be prescribed between the handing in of the specific form (0-1) and the control, without the procedure making any provisions to mention this. Furthermore, in certain cases, it turned out that the form did not provide sufficient space for the treatment prescribed to each player to be written in a legible and precise manner. Finally, in order to be able to verify in an efficient, reliable and prompt manner that no prohibited substance appeared on the list mentioned, it would be useful to request the International Non-proprietary Name (INN) as well as the commercial product name. Indeed, the commercial name of the product does not always provide sufficient information for the Doping Control Officer, and the composition tends to vary from one country to another (sometimes under the same name), which makes it difficult to identify a possible prohibited substance.*

## **b. Selection of players to be tested**

The FIFA Doping Control Officer made this selection by way of a random draw, which took place at half-time in the presence of an official representative of each of the two teams.

Plastic tokens bearing the numbers of each of the players appearing on the match sheet (including eligible players and injured players on the bench, if any) were spread out in advance on the desk of the doping control station (this measure was carried out by the Doping Control Officer during the preparatory phase that preceded the match), with a different colour for each team. The representative of each team was asked to verify with the match sheet that all members of his team were included and that no relating number was missing. The same request was carried out by cross-examination for the two teams present. Once this verification was completed, the tokens were placed respectively in bags made of opaque material, with a different colour for each team.

After having shaken the contents of the bag, the Doping Control Officer withdrew four tokens one after the other from each bag, and placed them, one after the other and without looking at them, in envelopes numbered from 1 to 4. Each envelope was immediately sealed and signed as soon as the unidentified token was inserted by the Doping Control Officer. The Doping Control Officer then asked the representatives of the two teams to countersign each of the sealed envelopes.

Each bag, with its remaining contents, was then also placed in a separate and sealed envelope. Everything was placed in a cupboard in the station, and the cupboard door was kept locked at all times and guarded in the absence of the FIFA Doping Control Officer.

Fifteen minutes before the end of the match, the FIFA Doping Control Officer requested that the two representatives of each team attend the opening of the envelopes 1 and 2 of each team in the doping control station. The notification form (0-2) was then filled out by each of the four players identified, and a copy was handed to the representative of each team and the match commissioner. The additional players, whose numbers were in envelopes three and four, were used only if the first players were unable to be tested for a particular reason.

In summary, we would like to make the following comments regarding the selection of players:

- The selection method was rigorous and reliable, and is unquestionably a model that could be copied, at least for a manual method.

- The selection was carried out at a very suitable moment, as the players were identified at a very late stage during the match (this applied to all those involved).
- The number of players selected was in conformity with FIFA's rules: two for each team. Nevertheless, if this number cannot be systematically increased, it would undoubtedly be of benefit if the provisions for enlargement set out in the FIFA rules could be used more frequently. Indeed, any suspect player may be chosen by the match commissioner or by the Doping Control Officer for a control, as may any player who is handed a red card, which, to our knowledge, did not happen at any point during this entire tournament.

*An additional remark is made on the way in which the draw was carried out:*

*We did, indeed, note a habit that should be corrected in order to avoid any risk of dispute regarding the totally random nature of the selection of players. Upon the introduction of the final handful of tokens into the opaque bag, the handler was noticed to have systematically left his hand inside the bag as he shook the bag to ensure that the numbers were mixed. An accusation could therefore be made against him by a player or his defence that one of the numbers taken from the table (and seen) could voluntarily have been retained by the handler, which would amount, purely and simply, to designation.*

### **c. Notification of a Control and Chaperoning Procedure**

Once the four notification forms (0-2) were completed, a copy of each was handed out to a person identified by a *Control* sign. This person was then responsible for notifying the athlete concerned and escorting him to the control station. The athlete was then led directly from the field of play to the control station without delay.

With the exception of the absence of the athlete's signature on the written notification (which has already been mentioned), which would authenticate the reception of this notification, we found this phase to be in accordance with the FIFA rules, and have no particular comment to add to

it; the quality of the work carried out by the chaperones was completely satisfactory.

#### d. Sample Collection Procedure

The sign-posting to reach the control station was good and, in fact, superfluous, since the athlete was accompanied from the moment of his notification on the field of play and taken as quickly as possible to the station by the person in charge of escorting him. Access to the station was well controlled, and security was assured by a person specifically responsible for this.

This procedure took place in stations that were perfectly suitable, clean and modern, with the exception of the absence of a division between the control registration room itself and the waiting-room, which did not ensure the respect desired for information of a confidential nature that might be given by the athlete being tested.

Other than this issue, the size of the area was totally appropriate for the number of tests to be carried out.

Overall, all of the procedures observed took place in accordance with the rules set out by FIFA.

Only several minor differences shall therefore be raised in this report:

- After being notified, the player was led immediately to the control station, and the control started as soon as the athlete was able to produce his urine sample. In order to facilitate their micturition, four players asked to use the shower, a request which was granted. In one case, we observed that the player was left alone under the shower and locked himself in for seven to eight minutes without being watched. We believe this to be contradictory to the respect of a continued observation from the moment of notification to the production of the sample.

The fact that a shower was used should also be discussed, insofar as it could enable the person concerned to relieve himself and, contrary to the aim, thus eliminate an initial urine sample.

- We noted that the chaperone accompanying the player was not given the opportunity to sign the control report.

- The urine collection equipment was of a satisfactory quality and sufficient in number for the amount of controls to be carried out. No defect or leakage after it was filled was noted. The player had a sufficient number of sample bottles from which to choose.
- One of the observers pointed out that the undressing of the athlete for micturition was sometimes insufficient, and observation of micturition was discontinuous.
- After micturition, the entire handling process was carried out by the FIFA Doping Control Officer in a very strict and professional manner, after he had asked the player whether he wished to do it himself. Other than this reduced but accepted participation by the athlete, we observed that very little information was provided to him regarding the overall progress of the procedure, his rights and his responsibilities. It was unfortunate to note this since this was a junior championship, in which the players were certainly not used to the international controls and procedures in force.
- The pH and specific density values were taken simultaneously by colorimetry on a single strip. As has already been noted during previous independent observations, it would be preferable to have recourse to an analysis by optical densitometry for the specific gravity of the urine. Furthermore, in one case, the observer noted that the batch of strips used displayed an expiry date that had been exceeded (July 2003). Nevertheless, a cross-analysis of the measures carried out at the time with those received from the laboratory showed very good coherence, with the exception of some significant pH variations.
- The doping control session ended with the signature of the sample collection form (0-3), upon which there was no space set aside to allow for possible comments by the player or the person accompanying him. The only confirmation clearly mentioned by the player was the authentication of the codes on the sample bottles, but nothing was said about the general agreement regarding the procedure carried out. No information regarding the possible use of medication before or during the match was requested from the athlete, whilst the medical form was handed in by the team doctor for all of the players before the match.

- Furthermore, the sample registration form to be sent to the laboratory (form 0-4) itemized all of the samples collected for one match (4). For this reason, the form was frequently filled out without the presence of the athlete; therefore he was unable to certify that the information to be sent to the laboratory was totally anonymous. For the same reason, as the set of collection records did not include a copy to be sent to the laboratory, as is usually the case, the laboratory had no information about the sex of the athlete (which is obviously not a problem in football, in which mixed events do not exist) or about any possible medication consumed.
- Once the form to be sent to the laboratory had been filled in, the sample bottles and the corresponding forms were set aside by the FIFA Doping Control Officer in a cupboard until the dispatch phase. There was no refrigerated storage space available. At one venue, we observed that the samples collected remained on the desk in the control room until the end of the controls for the two matches. For the dispatch, all of the A and B samples in their respective containers were placed in a special box provided by DHL, along with the yellow form that went with them. There was no additional security seal on the overall packaging, which unquestionably reduced complexity and therefore the risk for error as was noted during more complex procedures such as at the Olympic Games. In our opinion, the DHL procedure with permanent tracking options for the parcels was in accordance with the requirements.

With the exception of isothermal packaging (a polystyrene box) for the transport of the kits themselves, there were no refrigeration options available.

- With regard to the administrative procedure, the Doping Control Officer immediately addressed the copies (forms 0-3 and 0-4) to be sent to the Secretary General to the FIFA headquarters. The documents were then filed in a folder by the Chairman of the FIFA Medical Commission. We found this folder in the medical office at the FIFA general headquarters and noted that it was not kept in a safe, whilst access to

this room was, in practice, possible. Insofar as these documents enable the identification of the player and the analysis records received from the laboratory follow the same storage procedure, we believe that there was a risk of a breach of security. This risk is obviously theoretical, but in light of some unfortunate past experiences, we believe that it would be preferable to avoid any unnecessary risk by keeping the elements in a secured safe.

## 6. CONCLUSIONS

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This observation brought to the forefront the quality of the control procedures applied by FIFA and the high level of professionalism with which they were implemented. We found the quality of the equipment used, as well as the training of personnel, to be excellent. The observers would also like to underscore the substantial efforts undertaken by FIFA to obtain a simple and efficient procedure. Nevertheless, this report highlights some points to which FIFA should pay attention in order to optimise the effectiveness of its mechanism and above all to avoid any risk of dispute, which is always detrimental, resulting from a positive control. In this regard, we would like to point out the following:

- The possibility of improving the various forms by proposing the signature of the athlete on the control notification form, the signature of the chaperone on the sample collection form, as well as the possibility for the athlete to make remarks and comments on the conformity of the procedure; by requesting the International Non-proprietary Name for the medical form and by giving the athlete the opportunity to declare medication taken immediately prior to, or during, the match at the moment of the control; and finally by supplying the laboratory with a minimum of information on the products used by the athlete, and possibly the athlete's sex.
- The need to provide the athlete with more detailed information on his rights and the procedures being carried out.

- The necessary adaptation of the control station to allow the respect of the athlete's privacy, who should not be overlooked, even in the context of a control.
- The need for uninterrupted chaperoning of the athlete between notification and the moment of the urine sample collection.
- The possibility of improving the security network by conserving the samples prior to dispatch, as well as sensitive confidential documents.
- The wording regarding the list and its possible adaptation should be reviewed.

## 7. MEMBERS OF THE INDEPENDENT OBSERVERS TEAM

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- Dr. Jacques Huguet – Medical Doctor (FR)  
***Chair of the Independent Observers***  
Chairman of the FIBA Medical Committee
- Dr. Alain Garnier – Medical Doctor (FR)  
***Independent Observer***  
Medical Director, WADA