## The Impact of Changes to the Prohibited List on the Use of Overthe-Counter Medication by Athletes

## **EXECUTIVE SUMMARY**

The research project was set-up to address whether the re-classification of mild stimulants, commonly found in over-the-counter (OTC) medication, from the Prohibited List to the Monitoring Program has influenced the use of these drugs amongst elite athletes.

A questionnaire was developed to assess athletes' use of OTC medication and also their knowledge and understanding and views and opinions of OTC prohibited substances and issues relating to anti-doping and OTC medication. Distribution was by traditional and electronic mail to elite athletes on the athlete testing pool register via personnel from the national anti-doping organisations of Australia, Canada, the UK and the USA. Data from the Monitoring Program was used to compare the proportion of urine samples testing positive for stimulants on the Monitoring Program and those categorised as specified substances on the Prohibited List with their reported use via the questionnaire.

A total of 557 athletes from the four nations completed and returned questionnaires representing the sports of track and field athletics, canoeing, cycling, gymnastics, hockey, rowing, swimming, triathlon, volleyball and weightlifting. The two independent variables deemed to be the most indicative of exposure to anti-doping measures were age of respondents and the number of occasions drug tested. Overall there was an 80:20 split between those aged 20 years and over and those aged below 20 years and almost two thirds had been drug tested on one or more occasions whilst approximately one third had not been tested.

Whilst no athletes reported use of OTC medication containing substances present on the Prohibited List, 38 percent of all respondents had used OTC medication containing substances that are part of the Monitoring Program, during the preceding 12 months. The use of pseudoephedrine was most prevalent followed by the use of phenylephrine with the use of other stimulants negligible. Direct comparisons with the Monitoring Program data would be invalid; however there would appear to be disparity in terms of phenylephrine use with laboratory data suggesting negligible use in recent years. Most athletes used OTC products for therapeutic purposes whilst only a small proportion for their reputed ergogenic properties. Overall, athletes demonstrated limited knowledge relating to the penalty incurred following a doping violation involving a banned OTC stimulant; the terms Monitoring Program and Specified Substance List; and the status of OTC substances in relation to the Prohibited List. Nevertheless, if unsure of the prohibitive nature (or otherwise) of an OTC product almost all respondents would consult someone for advice, with the WADA and national anti-doping organisations most commonly cited. Younger athletes were more likely to consult an individual, such as their coach, training partner or team doctor for advice. On the whole, athletes were of the opinion that: stimulants found in OTC medication were not

performance enhancing; they posed a risk to health; their use was against the spirit of sport; and yet should remain off the Prohibited List.

The findings from this research project suggest that whilst the use of stimulants contained in OTC medication is significant amongst athletes, their use is primarily for therapeutic purposes. There is also an apparent lack of knowledge and awareness of OTC medication in reference to anti-doping amongst elite athletes, suggesting that ignorance remains an important factor in the use of drugs amongst athletes. This is only tempered by their willingness to seek advice from reliable sources. The inability of the Monitoring Program to provide valid evidence to support the misuse of substances contained in OTC medications highlights the need to expand the current programme to all WADA-accredited laboratories and to include continual qualitative assessment of the situation.