



## ***TD2018CG/LH***

### ***Summary of Major Modifications***

The Technical Document on Reporting and Management of Urinary Human Chorionic Gonadotrophin (hCG) and Luteinizing Hormone (LH) Findings in Male Athletes has undergone a revision by WADA's Laboratory Expert Group (LabEG).

The new version of the document, TD2018CG/LH, includes the following main modifications:

The term "GnRH analogs" was replaced by "gonadotrophin-releasing factors" through the text of this Technical Document, in order to reflect the wording used in the Prohibited List 2018.

#### **4.0 Analytical Testing Strategy**

##### **4.2 Analytical Testing for LH**

As the analysis of gonadotrophin-releasing factors is mandatory since 1 September 2017 (as per TD2017MRPL), the last paragraph was updated to reflect this change. Clarifications regarding the use of this method as a Confirmation Procedure for elevated LH findings are provided in footnote 7.

#### **5.0 Interpretation and Reporting of Results**

##### **5.2 LH results**

- It is not necessary to report the measured concentration of LH for every *Sample* analyzed. It is specified that the Laboratory shall report the concentration of total LH only when the Initial Testing Procedure produces a Presumptive Adverse Analytical Finding;
- Since the method for detection of gonadotrophin-releasing factors is now mandatory, when there is a Presumptive Adverse Analytical Finding for LH, and tests performed to detect the presence of gonadotrophin-releasing factors, anti-estrogenic substances and aromatase inhibitors produce negative results, the Laboratory shall report the finding as an *Atypical Finding* for LH.

#### **6.0 Results Management**

##### **6.2 LH findings**

- If an *Atypical Finding* for LH is reported (elevated total LH concentration with negative results for gonadotrophin-releasing factors, anti-estrogens and

aromatase inhibitors), the *ADO* should conduct at least one (1) follow-up no-notice test on the *Athlete* within a reasonable time frame (*e.g.* within 2 weeks) following the initial finding, unless the *ADO* has longitudinal data for the *Athlete* that indicates a follow-up is not warranted;

- The *ADO* should consider the results of longitudinal tests for LH in parallel with the evaluation of the longitudinal “steroid profile” of the *Athlete*. This evaluation should be done in consultation with an Athlete Passport Management Unit (APMU).