The meeting began at 9 a.m.

1. Welcome, Roll Call and Observers

THE CHAIRMAN welcomed everybody to the meeting of the Executive Committee. He asked members and observers to sign the roll call (Annex).

2. Minutes of the Meeting of the Executive Committee on 7 June 2003

THE CHAIRMAN said that, as far as he knew, there had been no comments on the minutes of the Executive Committee meeting on 7 June 2003. Were the members content with those minutes as circulated?

DECISION
Minutes of the meeting of the Executive Committee on 7 June 2003 approved and duly signed.

3. Management Team

3.1 Acting Director General’s Report

MR HOWMAN referred to his report (Annex), highlighting the second point regarding UNESCO, so that members would be updated as to the progress and the process. One of the issues that would be discussed at the UNESCO meeting in September and October in Paris would be whether UNESCO would agree to the drafting of a convention on anti-doping. A simple majority was necessary at that meeting to approve this going forward. The expert group appointed by the Director General of UNESCO had met in June that year, and had made a recommendation to the General Assembly, saying that a convention would be drafted based on the WADA Code the Anti-Doping Convention of the Council of Europe and the Copenhagen Declaration. The drafting group would be appointed by the Director General, possibly some time that week. Mr Kevin Thompson (AUS) had been hired to take charge of the project and the development of the convention, for which there was an extremely tight time-frame, the objective being for a convention to be in place for ratification at the General Assembly in October 2005. WADA was participating as observers, and intended to continue to do that. WADA had approached Mr François Carrard, the outgoing IOC Director General, to ask if he might serve as WADA’s ambassador to take part in UNESCO meetings relating to the convention. Mr Carrard had agreed, with the proviso that he would not be available until after the end of October, when his term as IOC Director General would finish.

MR HOWMAN also highlighted the fact that the ATP review continued; and that WADA was part of a joint commission with the IOC for the case concerning Jerome Young, and continued to seek information related to the case.
MR RIISKJAER commented on the 50% majority required in UNESCO to pass on the process.

With regard to point 12 of the report, what kind of information would WADA like to have on the professional leagues?

MR HOWMAN replied that any information would be gratefully received, in order to ensure that WADA’s statements about professional leagues were accurate and global.

THE CHAIRMAN noted that professional leagues existed in countries in addition to those in the USA, most of which did not have IF connections. WADA wanted to work out an approach to all leagues.

He was greatly encouraged to hear that the majority required at UNESCO was a simple majority. Did any of the government members have any indication that there might be a problem in taking the next step?

MR DEVILLERS said that it should be a routine process. His intelligence was that there were no booby traps in the process.

THE CHAIRMAN observed that this was a big step for WADA and the Code, as well as for the governments.

DR STRETTON asked about Mr Carrard’s role as ambassador.

MR HOWMAN thought that every country had a UNESCO ambassador, and that WADA needed somebody who would be available to attend the UNESCO meetings. It had been considered a good idea to send somebody more local, rather than somebody from Montreal, and also to have somebody with the integrity, professionalism and background of the sort that Mr Carrard has. The management had felt that Mr Carrard fulfilled the diplomat-type background that this required. Mr Carrard would be briefed by staff on a regular basis, and WADA management would attend the lower meetings if invited.

DR STRETTON asked whether Mr Carrard would take a WADA or an IOC perspective.

MR HOWMAN replied that there would be no IOC connection at all, since Mr Carrard’s term with the IOC ceased at the end of October.

DR STRETTON thought that it was strange; he thought that WADA members would have appreciated a discussion before such a decision had been made. These discussions were going to be difficult, and he felt that a lot of the discussions would be best held in-house. He had no problem with Mr Carrard, it was nothing personal; but he thought that information needed to flow a bit more easily at times, so that members could think and talk about these things before a decision was made.

THE CHAIRMAN said that there had certainly been communication of the decision taken by management, and did not think that the Executive Committee wished to be informed about every decision taken by management.

DR STRETTON said that all he was talking about was the odd phone call to members.

DECISION
Report by the Acting Director General approved.

4. ADAMS – Anti-Doping Administration and Management System (Clearinghouse)

4.1 Discussion Paper / Proposal (for approval)

MR HOWMAN referred to his report and the related attachments (Annex ). The report had led to the proposal that the recommendation contained in the report by CGI be adopted and a business plan for ADAMS be formulated by a management group assisted by representatives from Norway and Australia, and an independent advisor. He asked
the members for a discussion on the recommendation in order to be able to move forward.

THE CHAIRMAN asked if Mr Howman was inviting comment.

MR HOWMAN replied that, unless everybody approved of the recommendation, he would invite comment.

DR STRETTON appreciated very much the way in which Mr Howman and his colleagues had handled the issue since the previous meeting, and agreed with the recommendation in the CGI report. He took it to mean that there were three options still on the table: the NAIS option; the EUGENE/Athletes’ Passport option; or possibly some combination of the two. That being the case, his reservation was with the suggested strategy on page 2 of the paper, which said that the project team should continue working on the basis that NAIS had the technological platform. He thought that the decision on which platform to adopt would be made in November. CGI made the point that WADA should not make any final commitments with any vendor until the extra work had been done, and that also fitted in with the discussion the previous day regarding solutions at the lower end of the scale.

He also thought that, at the top of the paragraph on page 3, WADA should not go out and request tenders until the work had been done. He thought that WADA would be in a position to make the decision in November. The CGI report implied that, under the time-frame, WADA should still be in a position to meet its obligations for Athens. Subject to those slight changes, he was happy to go ahead.

THE CHAIRMAN asked whether all of the members agreed to incorporate Dr Stretton’s suggestions within the resolution that Mr Howman was seeking.

MR HOWMAN thought that it would be possible to proceed with the question being open, but the reason for his suggestion was that it had been reasonably plain from the report that there was certain significance in the Norwegian component, which was the platform; and superior significance on the Australian side, which was their expertise, but there had been no decision as to how to do it all together at the end of the day. The first part was fine; the team was not asking for anything further in the recommendation.

The last component had nothing to do with what WADA might end up with, but it continued a process so that WADA was preparing for an outcome, not actually indicating what outcome it was going to be seeking, so he wondered whether Dr Stretton might reflect on that. He certainly had no trouble with the first part.

DR STRETTON raised the issue of the request for tenders.

MR HOWMAN noted the need for ideas regarding security. It seemed a little silly to withhold progress down that track; it had nothing to do with the final product or which system was chosen, rather it had more to do with the process.

DR STRETTON apologised; perhaps it was just his ignorance, as he had been assuming that infrastructure would in part depend on the architecture.

MR HOWMAN said that this was not the case.

DR STRETTON said that that sounded fine; he had been reacting to the words infrastructure and architecture. He was content with the explanation given.

He had discussed the matter with Mr Howman previously and, just as a way of clearing the air, he supposed he had been surprised when he had come back and read the paper after reading the CGI report, as there still seemed to be that bias there. He had thought that it would be useful to have on record whether WADA had an agreement with NAIS or the Norwegians that would in any way restrict an open assessment of the options being discussed, and had WADA entered into any agreement that might impact on how ADAMS would be delivered.
MR HOWMAN replied that, no, WADA had no agreement. It had entertained a memorandum of understanding with NAIS, and had reached the stage of drafting something, but that had been withdrawn upon realising what the content of the CGI report was, so the matter had been taken off the table for the time being and there was no current contractual or other obligation to any party.

MR REEDIE said that, following on from the previous day’s discussions, he thought that the two most relevant bits of this excellent report included the part half-way down the executive summary of the CGI report which said that there was no independent self-sustaining document describing the functionality and high-level models of ADAMS, so there was nothing to compare what WADA wanted to do with. Secondly, the report said that, after applying the evaluation grid to both the existing solutions, no statistically clear conclusion can be drawn from the final results. Quite simply, it seemed to him that the Executive Committee needed the assurance from Dr Howman and the management team that the group that they would be putting together would have a more than reasonable chance of getting the specifications that WADA needed and, if that was the case, and there was no existing bias in favour of Norway or Australia, then he thought that the Executive Committee should support the recommendation, move it forward and pray that it could be made to work.

MR HOWMAN hoped that WADA would have a positive reaction from both the Norwegian and Australian teams to participate immediately in the process and offer views in a very considerate and professional way.

THE CHAIRMAN asked whether the Executive Committee members were content.

DR SCHAMASCH noted that the IOC agreed with the CGI report and the management team’s approach. The IOC was not a partner in the development, but was willing to help the management team to review various issues. He asked that the shutter on laboratories set up by the IOC and interfaces be taken into account.

THE CHAIRMAN asked whether the members were content with the recommendation.

MR HOWMAN acknowledged the considerable assistance that WADA had received from the IOC. WADA would continue to liaise with the IOC.

**DECISION**

Proposal that the recommendation contained in the independent report by CGI be adopted and a business plan for ADAMS be formulated by a management group assisted by representatives from Norway and Australia, and an independent advisor approved, subject to changes recommended by Dr Stretton.

5. Administration

5.1 Regional Offices

MR HOWMAN referred to his report (Annex) on the regional offices.

Job interviews had been completed for the Tokyo office and WADA was in a position to make a job offer to a candidate. Everything was ready to go in Japan and, if the green light could be given that day, then it would be possible to open the office in Japan on 1 November.

The African office was also ready to start, at no cost to WADA. He had had meetings with Professor Hendricks and Minister Balfour, who were willing to fund it at the extent that they had offered. The audit issues had been conducted and were satisfactory. The African office was ready to start working in October, but he would prefer it if both offices began to work on an official basis on 1 November. It would, however, be possible to
engage the Africans earlier as Mr Swigelaar was going to lead a team to the All African Games in Nigeria in October. This would be a very opportune moment for Mr Swigelaar to be able to progress the regional office and its concepts, as well as all of the other educational and financial components.

The management team was ready to go if approval could be given immediately.

PROFESSOR HENDRICKS noted the fact that the interim office was largely dependent on Minister Balfour remaining in the position of Minister (there would be an election some time between April and September the following year). The office was funded entirely from a vacant position in the ministry, and this might no longer be the case should there be a new minister, which might impact on the office and the vacancy from which the interim office was being funded. If Minister Balfour remained in the portfolio, he could guarantee that the office would be there.

DR SCHAMASCH had a question regarding the office in South Africa and the financial issues. In the 2004 budget, there had been nothing set aside for the African office. If it turned out that no funding would be available the following year, there would be a serious problem. This would be counter-productive, and perhaps it would be better to wait a little longer in order to be sure that this was something that would last.

MR TOKAI said that Japan aimed to open its office on 1 November. The opening ceremony would take place at an appropriate time in 2004. The activities of the regional office would start as early as possible in 2003, and candidates had been interviewed already, however he would also like to have the corresponding pay package ready. The Asian region had not yet finalised all of its contributions, therefore he hoped that the Tokyo office would be able to be more active in the area of securing government contributions.

MR LARFAOUI asked what the report on Cape Town under item 2 meant when it said that all appropriate communication tools... will be secured and substantially met by the South African Government. The French translation appeared rather vague. Why should the possible change in ministers affect the office in South Africa? He was rather surprised that there might be a change in funding if the government ministers were changed.

MR DEVILLERS referred to Mr Tokai’s comment regarding the issue of government payments through the efforts of the regional offices; this was a very important part of the role of the regional offices.

MR HOWMAN responded to the African issues. In June of the previous year, the South African Minister had offered a 12-month period of an office in Africa without charge to WADA. Minister Balfour anticipated being re-elected, but could not determine this. If he continued as Minister of Sport and Recreation, the regional office would continue to be funded by the South African Government. Professor Hendricks had quite rightly put forward the problem that all governments had when there was a change of government. As for the issues regarding costs for South Africa, everything would be paid by the South African Government except the cost of the server (US$ 16-20,000 maximum), which would be paid by WADA for the security of the e-mail system.

With regard to the Japanese position, the management was preparing, and had progressed to some degree, the job description for the regional office, which would pertain not only to Tokyo and Cape Town, but also to Lausanne. This would be submitted to the Executive Committee members in November, after it had been possible to speak to each of the regional directors, because it would be unfair to impose without discussing the issue further.

THE CHAIRMAN suggested that WADA have both offices starting officially on 1 November. The African one could be unofficially open and go to the All African Games, as that was important. He would not want to be seen to prefer one region or another.
With regard to South Africa, he hoped that the office would be kept going by the South African Government.

MR TOKAI wondered when the official decision would be made for the director of the regional office.

MR HOWMAN informed Mr Tokai that this decision would be taken the following day.

MS ELWANI thanked South Africa for assuming the costs of the regional office, whilst WADA was having problems gathering funds from many richer governments.

**DECISION**

Regional offices report approved; both offices to start work officially on 1 November, 2003.

### 5.2 Strategic Plan / Operational Plan

MR WADE spoke very briefly about strategic planning, since there had been an extensive meeting on the matter the previous day. He referred to the report in the members’ files (*Annex*).

**DECISION**

Report on the Strategic Plan / Operational Plan approved.

### 5.3 Athens

MR HOWMAN referred to his report (*Annex*) which tied in somewhat with the financial report. The WADA management was in the process of finalising its planned presence at the Olympic Games in Athens the following year. There would be a meeting with the IOC in Lausanne in a couple of weeks’ time to delineate the various tasks even further. The pre-Games Testing Team had had significant advances in the partnership with the IOC, and he thanked Dr Schamasch in that respect. Things were progressing nicely; it was just the financial impact that everybody should be aware of. He would be happy to answer any questions, but WADA was really in the drafting stage of how to proceed.

DR STRETTON saw the Outreach programme as being part of the education programme. Would Dr Barthwell, given the limited education budget, prefer to spend US$ 200 thousand on this type of activity or on something else? He had not seen any evaluation to show that such activity had a significant ongoing effect.

MR BARNES said that he knew that Dr Barthwell had supported the idea of sending Outreach to the Pan-American Games, but he also agreed that it would be very helpful to receive after-action reports to indicate the success of these sorts of missions.

MR HOWMAN noted that this was the only Outreach programme for 2004, and he did understand the concerns expressed. WADA should remember its tasks to educate and assist in providing information to athletes. WADA was also expanding the programme to cover not only athletes, but also officials, coaches, support personnel, and so on. It was seen as a programme that went beyond the athletes, but ideas regarding a review would be helpful.

MR REEDIE said that the Olympic Games constituted the only occasion every four years when all of the NOCs were in the same place at the same time. WADA needed a well-positioned Outreach booth in the middle of the Olympic Village. In his view, WADA would miss the Olympic Games at its peril.

MS ELWANI felt that Outreach was a very good thing for athletes, because sometimes they did not know anything about doping; so it was very important to have such a programme. There was also the athlete entourage at the Olympic Games, which were a very important event, as all sports were present there.
DR SCHAMASCH thanked the WADA administration for the good collaboration regarding the pre-Olympic Games task-force to avoid duplication of tests, etc. He appreciated all of the help given by WADA.

MR WADE said that the Outreach programme had been the most effective vehicle to disseminate information in the past, and it was even more important in light of the introduction of the new World Anti-Doping Code and the related information. The Outreach programme, as WADA expanded, would cut across many areas of the organisation, and it was felt that the Olympic Games offered a very important opportunity to WADA to make its mission known.

DECISION
Athens report approved.

6. Finance

6.1 Quarterly Accounts / Cash Situation

MR REEDIE referred the members to his report and the related attachments (Annex). Income and expenditure were shown quarter by quarter. The report showed the quarterly accounts for the period from 1 April 2003 until the end of June. It also showed accounts for the year to date, in other words, the first six months.

The third portion of the report, which he thought was likely to be the most valuable of all, was over a six-month period, to show the members a year to date figure on both income and expenditure, compared with the annual budget set one year previously. He was proud to draw the members’ attention to the World Conference on Doping in Sport expenditure, which was pretty accurate. He hoped that the information would let the members see the financial effects of the operations of the agency over the past six months.

If there were no questions, he suggested that the members note the second quarter, the first six months, and the comparison of the year to date against the budget.

MR LARFAOUI asked whether Mr Reedie could provide information on the advance of US$ 70 thousand made regarding the doping case investigation.

MR NIGGLI noted that the money had been advanced by WADA, and should have been reimbursed by USOC. WADA had agreed to receive the reimbursement in kind, and the Colorado Springs workshop that had been planned for November would be paid for by USOC.

MR LARFAOUI asked how the cash advance could be reimbursed in kind in terms of accounting.

MR NIGGLI said that this had been a question of finding a solution for both parties. An understanding had been reached, and the accounts would not show expenditure for the event organised.

DECISION
Quarterly accounts / cash situation approved.

6.2 Governments

− Contributions, 2004 Timing, Action on Unpaid Government Contributions, Government Committee (Restructuring of Payment System)

MR REEDIE referred to the report (Annex). Everything was shown on the WADA website and was updated on a daily basis, so everybody would be aware when countries had paid. The Finance and Administration Committee had looked at how it could
encourage contributors to pay. He had personally approached two of the major European countries, Turkey and Ukraine, and Turkey had immediately paid its contribution. Italy had had to change its domestic law to make its contributions to WADA, and he was confident that the money would be paid for 2003 and 2003.

THE CHAIRMAN thought that maybe Ms Elwani could mention to Mr Bubka that, as Chair of the IOC Athletes’ Commission, it did not look good that Ukraine had not paid.

MR DEVILLERS said that this issue had been covered the previous day in detail but, as for the situation regarding the Government Representatives’ Committee and the work that was being done to come up with a more realistic payment timetable, the Executive Committee had agreed at its previous meeting that a report could be made by the governments. This report would be done in two stages. There had been a breakfast meeting the previous day, and a final report would be made at the meeting in November with recommendations on what changes could be made. Other formulas would be looked at, and that would be part of the November recommendations.

The UNESCO Anti-Doping Convention was seen as a real necessity for governments to be able to get their house in order. It was necessary to have a formal document that governments could sign on to, to have the proper authorisation to deal with their various parliaments and houses of representatives. It had been his priority to see that a formal mechanism was put in place to which governments could sign on. He was glad to see that the governments seemed to making progress. The issue of some of the larger countries not paying their share was being looked into. The governments were looking for assistance from the Olympic Movement in making some of that outreach, and that raised the whole issue of sanctions for non-complying countries; if the IOC would amend its policy of only matching payments as opposed to making its payment in accordance with the WADA understanding, he thought that that would facilitate that outreach with countries that had not paid. The governments were also looking for assistance from WADA to advertise its services and its value for service to certain regions that felt that they did not have that contact with WADA.

The governments had agreed, with the assistance of WADA staff, to send a letter to non-compliant countries, asking them precisely why they had not paid, and would see if some of those concerns could be addressed. He would be coming back to the November meeting with a full report and recommendations.

THE CHAIRMAN asked if there were any notice requirements if the WADA Statutes were amended.

MR NIGGLI informed the Chairman that the point simply had to be on the agenda.

THE CHAIRMAN asked the governments to ask WADA for assistance, if necessary. He warned that the governments should not hold their breath for the IOC to pay as a gesture of good faith, as respective governments had shown no such good faith. He was sorry to say that, as he had given the IOC the same kind of line, but he could tell Mr DeVillers that it was not going to work.

MR DEVILLERS said that, if WADA was asking others to be in compliance, then everybody should be in compliance as much as possible.

MR REEDIE noted that, if it was necessary to put on the agenda of the Foundation Board meeting a change in the Statutes, and if that was to be based on the potential of a change in the rules to representation or sanctions, then the Finance and Administration Committee really needed a direction from the Executive Committee of what it wanted to do.

As THE CHAIRMAN understood it, there would be a possible change in the Statutes regarding the payment of amounts by stakeholders. He had thought that WADA had generally agreed that the European model was quite good; that, if a representative was from a country that had not paid, then he or she would not sit at the table.
MR DEVILLERS said that this would be notice of the possible change in the time of payment and, at the Executive Committee meeting before the Foundation Board meeting, the details could be filled in.

THE CHAIRMAN added that the policy should apply to the Executive Committee, the Foundation Board, committees and laboratories.

MR REEDIE assumed that members should put proposals forward, for example, the question of 31 December being an impractical date would probably need to be reviewed, and if the members were going to talk about the non-eligibility of members, then WADA should put these on the agenda and could simply withdraw them if the problem had gone away by the time of the meeting.

MR NIGGLI asked whether the Executive Committee was in agreement that the fact that countries that requested laboratory accreditation had to have paid their dues could be added to the laboratory standards.

THE CHAIRMAN said that the proposal was that, as a regular part of the laboratory accreditation procedure, there would be a requirement that country to be up-to-date in its contributions; in other words, that there should not be an accredited laboratory in countries that had not paid.

MS ELWANI noted that some laboratories were private and had nothing to do with their governments, so WADA would be punishing individuals.

THE CHAIRMAN replied that this had been thought about and the conclusion had been that it was one further element of pressure that could be brought to bear, as the laboratories would be in a position to complain to the government.

MR LARFAOUTI agreed. It was like the problem of the Executive Committee or Foundation Board members being excluded because of their governments. The laboratories did good work, and should not be excluded because of the actions of their governments.

THE CHAIRMAN thought that WADA would need to avail itself of all possible method of putting pressure on governments to make their contributions.

MR NIGGLI noted that most of the laboratories were partly or totally state-held. Around the Executive Committee table, nobody’s country had not paid.

THE CHAIRMAN felt that the European model was very sound in that respect. It was a peer pressure issue.

DR SCHAMASCH asked if this decision referred to new laboratories or for re-accreditation.

THE CHAIRMAN replied that it would apply to both.

DECISION

Proposal that the countries of those representatives wishing to sit on the WADA Executive Committee, Foundation Board, and committees, and those seeking laboratory accreditation, must have paid their annual contributions to WADA, approved.

6.3 Finance and Administration Committee Minutes and Draft Budget 2004

MR REEDIE referred to the report and all of the attachments (Annex ), drawing the members’ attention to the minutes of the Finance and Administration Committee meeting.

Under WADA’s Statutes, the budget summary would have to be approved by the Foundation Board in November. The Finance and Administration Committee had tried to
keep a careful eye on general costs, which included meetings. The cost of communications was also very high. There were noticeable finance costs, and a very substantial warning shot had been fired regarding cost to WADA’s auditor, who had agreed. The regional office costs had been examined, and he was delighted that it would be possible to handle both the Tokyo and the Cape Town offices. He noted the high costs of IT and telecommunications.

In general terms, if all of the stakeholders fulfilled their dues, WADA should generate approximately US$ 23 million in 2004 to finance WADA, but the Finance and Administration Committee was not entirely unrealistic, and had listened to the debate the previous day so, recognising that reality, WADA had based its planned expenditure for the following year on an expenditure of US$ 17.5 million. If the Finance and Administration Committee were allocating it, it would allocate 70% of that to research, which was roughly US$ 3.8 million, and US$ 800 thousand to out-of-competition testing, and US$ 800 thousand to education. If that came about, that would be a very happy outcome.

DR SCHAMASCH fully agreed with the explanation provided, and thanked Mr Reedie. As the budget had to be endorsed in November at the Foundation Board meeting, and because this represented an increase of 21.1 to 22.9%, he would not accept the budget as it was that day, and suggested that Mr Reedie, with all of his skills, try to explain the differences to the IOC in order to have the budget approved in November; he could not accept the budget as such.

PROFESSOR HENDRICKS said that the funding from the South African Government was intended to be interim funding, with a view to the establishment of a permanent office in Cape Town. If the funding ran out by 1 November 2004, he was rather concerned that no provision had been made for the start-up of the permanent office in Cape Town, and asked for some clarification on that.

MR LARFAOUI noted that the 2004 draft budget was almost 10% higher than the 2003 budget. The 2003 receipts had not yet been made definite. He wondered whether the current budget should not stay as it was, and whether the 2004 activities should not be curtailed. ASOIF and his IF did not agree with the draft. It was necessary to be realistic.

MR REEDIE said that it had probably been a slightly biased hope to expect unanimous approval of the budget. The IOC had always thought that it would be hard to achieve 100% government contributions. He asked the members to bear in mind that the IOC had paid just under US$ 24 million to establish WADA, and had had a very cautious view of the estimates prepared by finance committees and executive committees of what the total income needed to be. From the Finance and Administration Committee’s point of view, it had always wanted to be realistic, and had aimed to maintain the level of contribution at the highest possible level. He was perfectly happy to go back to the IOC President and discuss the matter, and to give Messrs Niggli and Beltran the results of those discussions.

He told Professor Hendricks that, when the budget had been drawn up in August, it had been assumed that WADA would not have the resources to have a Cape Town office. If it did have the opportunity to open the office, then he thought it quite appropriate to build in some provisional funding to maintain the office. The Finance and Administration Committee would need to start to look at what those costs might be.

He heard what Mr Larfaoui was saying. This was ultimately a decision that the Executive Committee members had to take. If members wished to be realistic and keep budgets at a lower level, then this was what the Finance and Administration Committee would do. He would, however, hope that that lower level would be no less than the total amount of contribution requested in 2003, not the amount of contributions received in 2003. If people did not believe that WADA should have an income figure of US$ 22.9 million, but believed that they could live with a budget and an income figure of US$ 21.3 million, then that was what the Finance and Administration Committee would do. He
would, however, be very opposed to having an income figure based on what WADA thought that the expenditure was, of somewhere over US$ 17 million because, in that case, WADA would rapidly run out of money and would have to be closed down.

MR RIIISKJAER agreed that WADA should have a budget based on full government contributions, but he feared that an increase of 10% would cause more governments to hesitate in the payment of their contributions. He would therefore ask for a lower increase, corresponding to inflation for instance.

MR LARFAOUI thought that he had expressed himself badly previously. He had not asked for an adjustment of the budget based on the 2003 income, but had said that the 2004 budget should be kept at US$ 21 million and not US$ 23 million.

THE CHAIRMAN said that this was a very small budget, given all of the things that WADA was expected to do, and it was going to increase, and should increase. The point of all of this was to try and advance the work that was being done. All of the budget figures were based upon necessary and essential programme activities.

MR LARFAOUI proposed that the Executive Committee not take a decision that day, as there would be an Executive Committee meeting prior to the Foundation Board meeting in November at which the Executive Committee members could take a decision (and perhaps the situation might have changes somewhat by then), and then go to the Foundation Board with their proposal.

MR BARNES asked what the timeline was for the proposed changes and the process for building them in?

MR REEDIE said that WADA was clear on what it would spend between then and the year end. As soon as he knew that the large countries had paid, and preferably had also given a date upon which WADA could expect the payment for 2004, so that he could then do cash-flow planning, that made it much easier to budget for 2004. The WADA Statutes provided that, before 30 November each year, the budget for the following year should be approved by the Foundation Board.

Mr Larfaoui had suggested going over the budget again at the next Executive Committee meeting, but a final paper would then have to go to the Foundation Board the following day. If the members wanted a time-line, how about the following day?

THE CHAIRMAN thought that Mr Larfaoui had made an interesting suggestion, which would also give the Finance and Administration Committee a chance to absorb the discussions made the previous day. The recommendation was that the Finance and Administration Committee would get to the Executive Committee, well ahead of the meeting date, a final proposal that could be considered in advance.

DR STRETTON asked how the allocation of funds across the main activities discussed the previous day fitted with the discussion held the previous day.

THE CHAIRMAN thought that the outcome of the previous day should be looked at in terms of what had been done in the absence of that discussion.

DR STRETTON thought that, assuming an expenditure of around US$ 17 million, US$ 2.9 million would go on ADAMS; US$ 2 million on the Out-of-Competition Testing Programme; US$ 2.7 million on research and, of that about US$ 1 million on new research; and about US$ 1 million each on education and communications. That was the distribution across the activities that had been discussed the previous day. His immediate response was that these figures highlighted the importance of getting ADAMS down. If this could be done, then it would be possible to put more money into research and, unfortunately, this would not be known until the November meeting, so it might be possible to do a quick change on the night before the Foundation Board meeting. That was one area where some flexibility would hopefully open up. Did WADA get US$ 1 million worth of value out of communications? He did not know how this could be assessed. He was just trying to work out in his own mind what the distribution looked like.
THE CHAIRMAN said that that was what should be done between then and the date of the next meeting. Were the members content to approve the process and approach suggested?

MR REEDIE thanked Messrs Niggli and Beltran, as well as the finance staff. He was happy with the way in which things were moving in terms of the transparency and openness of the process.

**DECISION**

Decision to be taken on the draft budget for 2004 prior to the November Foundation Board meeting.

7. World Anti-Doping Code

7.1 Signatory Update

MR DIELEN referred to his report (Annex ) and highlighted the changes to it.

Some examples of the new articles of the Olympic Charter in relation to the Code were Rule 48: *The World Anti-Doping Code is obligatory for the whole Olympic Movement*; and Rule 52: *Only sports that adopt and implement the World Anti-Doping Code can be included and remain in the programme of the Olympic Games*. He had also received a document on the Recognised Federations, and the same applied for them. For the International Sport Federations, 16 out of the 28 Olympic Summer IFs had formally adopted the Code (FINA already had the Code in effect, and should be congratulated); four out of the seven Olympic Winter IFs had accepted the Code, and the FIS would have the rules in place by 15 November; 10 out of 28 IOC Recognised Sports Federations had accepted the Code; and seven out of 20 Non-IOC Recognised Sports Federations had accepted the Code. No Non-Recognised International Sports Federations had thus far accepted the Code. The Israeli and Libyan NOCs had adopted the Code, bringing the total number of NOCs to have adopted it to 15 out of 201. The Finnish Paralympic Committee had adopted the Code, as had the Swedish Sports Confederation. Seven National Anti-Doping Agencies had adopted the Code.

In terms of IOC recognition of Olympic sports, to be an Olympic Summer Sport, the sport had to be practiced in a minimum of 75 countries on four continents (for men) and a minimum of 40 countries on three continents (for women). Other requisites included being part of the Olympic Programme, with one or more disciplines, and having adopted and implemented the World Anti-Doping Code. To be an IOC Recognised Sport, summer sports required a minimum of 50 National Federations on three continents, and winter sports required a minimum of 15 NFs on three continents. Again, adoption and implementation of the World Anti-Doping Code were necessary, and other criteria such as gender equity, recognition of the CAS, youth development programmes, fair judging methods, etc., had to be fulfilled. For GAISF membership, summer sports required a minimum of 30 NFs on three continents, and winter sports required a minimum of 15 NFs on two continents. Competitions on a world level were also necessary for GAISF membership, and the IF concerned could not govern a sport which was governed by another member of GAISF.

MS JANSEN informed the members about signatories to the Copenhagen Declaration on Anti-Doping in Sport. As of September 2003, a total of 81 governments had signed the declaration, and there had been 31 new signatories since the World Conference on Doping in Sport, which was a very positive outcome to date. In Africa, 16 out of the 53 countries had signed; in the Americas, 13 out of the 42 countries had signed; in Asia, 14 out of the 42 countries had signed; in Europe, 32 out of the 48 countries had signed; and 6 out of the 14 Oceanian countries had signed. The Danish Government continued to follow up on the signatories in conjunction with WADA Government Foundation Board.
members and WADA staff. The Code deadline for signing the Declaration was the Athens Olympic Games in August 2004.

**THE CHAIRMAN** asked if Mr Dielen saw any danger signs regarding the Olympic IFs.

**MR DIELEN** replied that some IFs that had been critical in the lead-up to the Copenhagen World Conference on Doping in Sport still had to take the decision. The UCI had not yet decided on an actual date and was discussing the matter. The UCI Board of Directors would be taking a decision in October. As for FIFA, WADA would see what happened at its congress in October.

**THE CHAIRMAN** asked whether there were any countries for which WADA might expect difficulties.

**MS JANSEN** replied that she was not aware of any countries for which difficulties might be expected.

**DECISION**

Signatory update approved.

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**UNESCO**

**MR HOWMAN** thought that the UNESCO item had been covered in his earlier report.

**7.2 Activity Update**

**MR ANDERSEN** noted that the report (Annex) should be self-explanatory. He asked for the members’ opinion on the Level 3 recommended models of best practise.

**THE CHAIRMAN** asked whether it would be possible to report on the CAS discussions that had been held recently.

**MR NIGGLI** said that he had met with the CAS on 11 September, and would be meeting again on 8 October. He had discussed with Mr Reeb ideas regarding what rules should be changed in the CAS in order to integrate the new Code, and to have the proper reference to the Code integrated, but also to create a simplified procedure in relation to TUEs. The CAS rules were adopted by the ICAS, the CAS’s governing body, and this group would meet in mid-October to discuss a first draft of new rules. He hoped for a decision to be taken at that time. It had been made clear to Mr Reeb that things should be in place by the end of the year as, at the beginning of the following year, the CAS would receive the first appeals in relation to the Code. Some proposals had been put to the CAS, and WADA would see how the CAS would proceed with its changes.

**THE CHAIRMAN** asked whether there were any other issues regarding the Code and its application that members would like to raise.

**DECISION**

Activity update approved.

**8. Standards and Harmonisation**

**8.1 Policy – Strategy for Out-of-Competition Testing**

**MR ANDERSEN** said that some of the items related to the issue had been discussed the previous day. Out-of-competition testing was quite a tough challenge; the team would try to do its best with the resources that it had available, the overall aim being to fill in the holes where nobody else carried out testing.

In terms of the strategy for the Out-of-Competition Testing Programme, the principles included focus placed on countries without anti-doping programmes; all doping controls were to be conducted, where possible, on a no-notice basis, which would be a topic under discussion at the workshop in Colorado Springs at the end of October; and all
doping controls were to be conducted in accordance with the International Testing Standards. With regard to criteria, sport ranking would be done by risk assessment (high, medium or low), something that was difficult to do; assessments would be carried out as to when athletes were more likely to use a banned substance in the “off season” (sport specific); assessments would also be carried out as to when athletes were more likely to use a banned substance leading up to competitions; and consideration would be given to an increase or decrease in performance. As far as implementation was concerned, this was related mostly to target testing, but there had to be a random element in order to be non-predictable. There would be focus on testing in the lead-up to major games; athlete rankings and performances would be tracked for target testing; and there had to be coordination with the Clearinghouse for whereabouts information and to coordinate testing. An attempt had been made to divide sport ranking into categories as a guideline only: the high risk sports (disciplines), 65%; the medium risk sports, 25%; and the low risk sports, 10%. In summary, the focus the following year would be on the quality, and not necessarily on the quantity, of the tests; the increase in quality might result in more expensive tests; the less-controlled areas of the world would be controlled; and the overall plan was to be used as a guide, and might vary from time to time.

DR STRETTON noted that the first principle focused on countries without anti-doping programmes. How did Mr Andersen see that being quantified in his mind at that stage?

MR ANDERSEN noted the need to carry out an assessment of the different programmes around the world to see which systems worked. This went for both the National Anti-Doping agencies, the IF programmes, and the need to find out the number of tests and whether these were performed in or out-of-competition. So this would be a total assessment, or an evaluation of the different anti-doping organizations, to see where it was necessary for WADA should go.

MR KOEHLER referred to the actual percentage of the tests to be done in those remote areas. This was really hard to quantify. The whole plan was based not only on those hard to reach areas, but also on performance increase or decrease. Once WADA saw the Clearinghouse and had an idea of what countries were doing, it would be easier to put into effect, so that it would be possible to get a snapshot of what was happening. He did not think it would be possible to give a percentage at that moment, but the majority of the focus would be on those areas.

DR STRETTON asked whether the majority of the focus was the same as the majority of tests.

MR KOEHLER replied that this was the case.

MR RIIKSJAER welcomed the rethinking of the concept of out-of-competition testing. He asked whether one of the principles should not be a focus on sports that did not have testing programmes in place, especially if there were high-risk sports among them.

MR ANDERSEN said that it was necessary to assess those anti-doping organisations and try to develop them. To do tests where no tests were being done was the aim.

THE CHAIRMAN noted that the question was a little broader: the first of the principles should be the focus placed on countries and sports without anti-doping programmes, and he would assume that that was a variation with which the members would agree.

PROFESSOR LJUNGQVIST observed that it had emerged the previous day that more than 50% of IFs did not conduct out-of-competition testing, which meant in non-compliance with the Code. This was a sensational piece of news. This was very important target for WADA’s activities. In an ideal world, all IFs and countries needed to conduct out-of-competition testing, which would mean that WADA testing activity would no longer be needed, but the situation seemed to be far from this ideal. One item needed to be repeated over and over again: what was out-of-competition testing? It was no-notice out-of-competition testing, but this did not prevail by many who conducted out-of-competition testing, as they practised short or long-notice testing. He would
welcome a report on the extent to which true out-of-competition testing took place. It was frustrating to the few who tried to perform no-notice out-of-competition testing. He asked for relevant figures regarding out-of-competition testing so that this could be properly evaluated.

MR LARFAOUI said that, during competitions, testing had value only if it was no-notice testing. An out-of-competition test with notice made no sense at all.

MR ANDERSEN said that he would provide the members with statistics, as out-of-competition testing was confusing, and many were not clear on the definition. He would like to define it as no-notice testing, which meant knocking on an athlete’s door and chaperoning him or her from that moment until the test.

THE CHAIRMAN warned that care should be taken, in WADA’s statistics. His recollection, regarding volleyball, for example, was that the IF did not do any testing, but pushed down the responsibility for testing to the NFs. It would not be totally fair to volleyball to say that there was no anti-doping programme; it would be fair, however, to say that the IF had washed its hands of the matter and placed responsibility in the hands of the NFs. WADA should obtain the numbers on such cases before saying that more than half of IFs had no testing programmes.

DR STRETTON assumed that somebody would write to the IFs. He thought that this more focused approach should be encouraged, and he thanked the team for developing it. He thought that WADA was looking for fairly detailed reporting every year to make sure that it had managed to meet those targets and that the staff levels were maintained at the current levels. Subject to that, he thought that this was a significant step forward.

PROFESSOR LJUNGOVIST noted that it had been discussed that WADA would target athletes according to a ranking system. Would this ranking system involve the NFs? He thought that the NFs would have to be involved, as it was amazing how quickly ranking changed in sports. It was very hard to keep up with the proper ranking, even month by month.

MR ANDERSEN said that thought had been given to this matter in part of the development of ADAMS. WADA was reliant on the IFs, but was also reliant on the NF top-ranked athletes in testing pools. It would be a red flag for WADA if an athlete jumped 15 places up in a ranking.

THE CHAIRMAN asked the Executive Committee members whether they approved the principles that had been put forward with the amendment proposed by Dr Stretton.

DECISION
Proposed out-of-competition testing strategy principles approved subject to the amendment proposed by Dr Stretton.

8.2 Out-of-Competition Testing

MR KOEHLER referred the members to his report (Annex), providing them with additional information. To date, 3590 tests had been completed or were in the field awaiting confirmation. One of the things that was important had been raised the previous day: the establishment and development of whereabouts information systems was under way. This was an education process in terms of the IFs. As for the pre-games testing programme with the IOC, the focus of the testing would be in line with the strategy presented that day, and he wished to thank Dr Schamasch for his support and coordination with the group which had been very productive to date. The drug testing service agreement with the federations was being revised. He had passed around the sample collection form that had been developed, with the intention of standardising the sample collection form worldwide and providing the opportunity to National Anti-Doping Agencies and IFs to use the form by changing the logo and not the contents. This form had been produced following comments from all of the stakeholders, and a second draft
would be produced over the next few weeks. Finally, the athlete guide had also been passed around. This guide had been developed to help athletes with the process, and had so far been very well received.

**THE CHAIRMAN** asked whether anybody had any comments or questions.

**DR STRETTON** understood that the DFSC provided an annual report that he had never seen. It would probably be a good idea to distribute this report to Executive Committee members.

**MR KOEHLER** agreed that this should be done.

**THE CHAIRMAN** asked how voluminous the report was. Only those people that made the request should have the report.

**DR SCHAMASCH** referred to the form, which was just a draft. Would comments be invited?

**MR KOEHLER** replied that the first round of comments had been received following circulation of the form, and the Athletes’ Commission had sent notable comments.

**DR SCHAMASCH** said that the IOC and the CAS would provide some comments.

**DECISION**

Out-of-Competition Testing report approved.

**8.3 In-Competition Testing (for approval)**

**MR ANDERSEN** proposed that the decision on in-house management of the fee for service in-competition testing programme be postponed until a later stage, as new elements might come into the picture.

**DECISION**

Proposal to postpone the decision on in-house management of the fee for service in-competition testing programme approved.

**9. Science**

**9.1 Prohibited List Standard (for approval)**

**PROFESSOR LJUNGVIST** wished to inform the members about the background to the List, which was important. The background was, of course, the current List and the List of earlier years, the so-called IOC Medical Commission List. For more than 30 years, it had been the gold standard for the world. It had been developed in a somewhat fragmented fashion since 1968. Initially, only classes such as stimulants and narcotic analgesics had been prohibited. Others were added between 1976 (anabolic agents) and 1998 (insulin). He had joined the IOCMC in 1987, and had personally experienced what had happened since then. Dr Schamasch had joined the IOC Medical Department and Commission in 1992. It had been agreed that much of the philosophy could be termed as catching up with the cheating athletes and their pharmacological advisors. A major reason for the inclusion of a substance on the List had been that the athletes were using it. No in-depth overhaul had ever been undertaken, nor had any scientific examination as to whether the substance actually improved performance been performed, and this was long overdue. One reason could have been that radical changes might result in legal problems, another aspect was certainly the limited time scheduled for reviewing the List (one day annually). Initially, the entire IOCMC had been involved with the List, and this had remained so until 1990. Substances had mostly been added to the List, and there had never been talk of removing or reviewing substances. Minor changes had occurred, however: in 1986, the IOCMC had agreed to remove the need to notify as to the use of beta-2 agonists. The decision had been rescinded in 1993. A gradual and somewhat
haphazard removal of mild narcotic analgesics that had important therapeutic uses had occurred. During the nineties, the responsibility for the List had become increasingly that of the Doping and Biochemistry Sub-Commission, within the IOCMC. It had then been possible to raise matters at plenary sessions of the IOCMC. That had been done on a number of occasions, and had resulted in the inclusion of salmeterol as the first long-acting beta-2 agonist in 1996, and the inclusion of diuretics in 1996. Codeine had been removed from the List in 1994. Since 1998, at the time of the annual review of the laboratory accreditation exercise, that group had scheduled and met in Lausanne in December. The 1997 meeting had taken place in Monte Carlo during the Congress. The List had to be modified and available within 12 hours for presentation and acceptance by the IOC Executive Board (except in 1997, when the time had been longer), because the meeting of the review group was scheduled immediately before the Executive Board meeting and, customarily, it was then legal from 1 January. He thought that this background reflected facts.

The List that they had today had been established following intense examination, review and discussion by a working group of five people, who had met on several occasions for a total of five days up to and including 2002, and had spent approximately 400 to 500 man-hours on the matter. The review had resulted, in 2002, in a number of recommendations to the IOC and to WADA because, as the members were aware, the 2003 List was a joint IOC / WADA List. In order to find a common attitude, the IOCMC representatives and WADA representatives had met in Lausanne to finalise a 2003 List. It had then become quite clear that the many recommendations issues by this particular scientific working group had been rejected. The 2003 List was very similar to those that had been in existence previously. Since the 2004 List would be a WADA List, this particular group, composed of experts in doping analysis, heads of laboratories, clinicians, etc., had reached a result after a very intense year and numerous meetings and man-hours. He thought that this process was important to report, in order to understand the result.

The List Committee had been working as a sub-committee to the Health, Medical and Research Committee, but with a clear independent role, in the sense that WADA, through its Health, Medical and Research Committee, had been seeking scientific advice as to how to structure the List for 2004. The Health, Medical and Research Committee had therefore been very reluctant to make any changes to the List Committee’s proposal.

The document that the members had before them (Annex ) included some proposals as to changes, but many proposals had come along as time had passed, and extensive consultation had been made with the stakeholders. The first draft that he had seen from the List Committee was more drastic than the final result. One example of what the List Committee had had in mind in 2002 for the 2003 list (which had been rejected by the IOC and WADA) was the removal of groups of substances that had not been felt to be performance-enhancing but were still being used by athletes, and where there was a fear of removing something and sending out the wrong signal to the athletes. The List Committee had then proposed, and the joint IOC / WADA working group in 2002 had already proposed, a separate list that included certain substances that would not be acceptable for use by athletes for reasons other than performance-enhancing. This had been called a Code of Conduct List, but the idea of having two lists had been rejected.

The documentation presented to the various groups had included scientific reports, and reference material regarding what was known about the misuse of substances, side effects, etc. He wished to have it understood that very serious work had been conducted and, based on his experience, which went back to 1987, work with a list such as the one that had been produced over the past two years had not existed previously. This was the first scientifically-based review of the List. The Executive Committee had on the table a compromise, although there were still great reservations expressed by stakeholders regarding certain items.

THE CHAIRMAN thanked Professor Ljungqvist for the background. The way in which the List had been prepared and distributed was to highlight the changes that might be
discussed or proposed by one or more of the stakeholders at that Executive Committee meeting.

**MR WADE** noted several things, one of which was that there had been an extensive review, with over two years of work involved; and an initial review leading up to the 2003 List. The well-qualified WADA List Committee members were Professor Ljungqvist, Professor Fitch; Dr Pipe; Dr Ruijsch van Dugteren; Professor Mueller; Professor Kuipers; Mr Verbiest; Professor de Rose; Dr Wadler; and Professor Segura.

Once the World Anti-Doping Code had been finalised, there had been a significant shift. The initial work had been done with the focus on one criterion: performance-enhancement. When the World Anti-Doping Code had been adopted, three criteria had come into play: performance enhancement, health and the spirit of sport. Following the World Conference on Doping in Sport, there had been an extensive scientific health and ethical review; a re-draft of the 2004 List; a consultation process; following which feedback had been reviewed and the proposed list modified accordingly. With regard to the consultation process, the draft List had been sent out with a description of the approach taken; and a questionnaire had been circulated on certain sensitive issues. It had been sent out to stakeholders with a degree of confidentiality, as the 2003 List had been in place and WADA had not wanted to cause any confusion by having a draft 2004 List out there at the same time. In terms of the action plan and timelines, the deadline for the receipt of feedback had been 15 August 2003; there had been a meeting of the Working Group to finalise the recommended 2004 WADA List on 4 and 5 September 2003; this had then been endorsed by the Health, Medical and Research Committee. The WADA Executive Committee would be asked to endorse the WADA 2004 List, the important point being the need to decide on a final WADA 2004 List, to be posted by 1 October 2003. The issues that the members needed to consider as they went through the List included beta-2 agonists as stimulants; stimulants and related substances; and glucocorticosteroids. There was also a document in the members’ files on glucocorticosteroids (Annex).

**THE CHAIRMAN** asked whether anybody else wished to make any introductory comments. One good thing was the process: an integrated process was being done for the first time, and he thought that everybody appreciated the scientific views that had been expressed by people who had given freely of their time for this purpose. The Code was not just a scientific or technical document; it had elements that were political, and the messages that were sent out through it were important. If WADA made major changes, it would really need to prepare the ground, or risk sending out the wrong message. The feedback received from the important stakeholders should be taken into account, especially in areas where on-the-ground experience with some of these substances was at stake. Many of the early substances on the List had been there because people had been using them. The other element that WADA had to consider was that courts had to be able to interpret and apply the Code (which had to be thought of as a legal, as well as a political and scientific document). He thought that the Executive Committee needed to discuss the draft version of the 2004 Prohibited List, as he knew that there were views that were more or less strongly held on certain elements of it, and unless somebody had a different idea as to how to accomplish this efficiently, the members should work through it and see what came out of it.

Did anybody have anything to say about pages 1 to 8? And page 9?

**MS ELWANI** referred to the explanation of cathine on page 9. She thought that the wording should read ...is considered a doping violation if... as opposed to ...is prohibited when...

**PROFESSOR LJUNQVIST** advised caution with regard to the terminology. This document was not a list of violations, it was a list of prohibited substances.

**MS ELWANI** objected that, when athletes read the wording, they would think that it was similar to caffeine, in that one could have as much of the substance as one wished, as long as not too much existed in the urine. This was the message that she got.
PROFESSOR LJUNGQVIST admitted that it was true that cathine was prohibited above a certain level.

MS ELWANI asked whether athletes could take the substance until it showed in their urine.

PROFESSOR LJUNGQVIST replied that that would be a risk, obviously.

MR LARFAOUI said that he was no scientist, but asked whether, in the old List, there had been a threshold level for cathine and ephedrine.

PROFESSOR LJUNGQVIST responded that there had been a threshold level of 10. A long time ago, the level had been 5, but this figure had been increased to 10 six years previously.

MR LARFAOUI noted that caffeine was no longer in the List, but it had also had a concentration level when it had been included in the previous List.

PROFESSOR LJUNGQVIST said that caffeine had been the subject of one of the longest scientific debates. The decision had been taken by the List Committee and had been endorsed by the Health, Medical and Research Committee. The List Committee had arrived at a conclusion based on what it knew about caffeine metabolism and its effects. Caffeine was a mild stimulant, which was why people drank coffee. If people were to take too much caffeine into their bodies, they would suffer side effects. If caffeine were to be prohibited, then it would be necessary to go down to levels that would prevent athletes from drinking coffee. Athletes, however, had to be allowed to behave like other people in society. To keep caffeine with a level of 12 would mean nothing, as the stimulant effect was there at a much lower level and, at the level of 12, serious side effects were experienced and would not make anybody a better athlete. The logics were either to ban caffeine or remove it from the List, and since it was a very mild stimulant used widely by society, it had been thought that it would be wrong to prevent athletes from drinking coffee.

THE CHAIRMAN noted that that was a political judgement. The List, as it pertained to cathine and ephedrine, was exactly the same as the existing List. The only substantive change was the removal of caffeine. Was that right?

PROFESSOR LJUNGQVIST said that four more substances had been evaluated and there had been a clear consensus that they should be removed: the mild ephedrine-related compounds that occurred in a large number of food supplements and had a very minor effect, if any. Those were phenylpropanolamine; pseudoephedrine; phenylophrine; and sinephrine. They were very mild ephedrine-related compounds, and there had been a general feeling that they did not classify with respect to the requirements in the Code and did not meet those standards. Ephedrine did meet the standards, although some claimed that it should not be on the List.

DR RABIN referred to the mild stimulants that had been removed from the List; the members had to bear in mind that there was a new process in place, in the form of the Monitoring Programme, through which WADA and the laboratories would keep an eye on potential abuse of substances removed from the List. WADA was taking a new angle and, if there was scientific proof of abuse of substances, then the Monitoring Programme would be able to investigate and put the substances concerned back on the List. The programme was very important, as he believed that there could be cocktails of substances in use. Doping was not necessarily only one substance per athlete. For these reasons, he believed in and wished to emphasise the use of the Monitoring Programme.

MR LARFAOUI referred to the term mild stimulants. A mild stimulant was still a stimulant.

PROFESSOR LJUNGQVIST noted that caffeine was an example of a mild stimulant. These substances were related to ephedrine, which was a mild stimulant. To ban these related substances was, in view of the committee, not in accordance with the requirements in the Code for two out of the three components necessary for classification
as doping substances. The List Committee had tried to focus on what was to be recommended to the sports world, and should there be information from the Monitoring Programme that people had begun to misuse certain drugs that had been taken off the List, then it would be necessary to re-evaluate. If there was no scientific reason to believe that there was any sort of performance-enhancing effect, and if there was no danger to health, then two of the three criteria were eliminated, and the substance should not be on the List. It had been felt that a clause such as related substances would be a hard clause to make use of. The aim had been to produce a comprehensive list of substances to which there was a scientific background that could clearly tell that two out of the three criteria in the Code had been met. The proposal had been to do away with the related substance clause for the stimulants. This had been opposed by many and, if the clause were to be re-introduced, then it would be necessary to mention specifically that the four ephedrine-like compounds should be removed and named.

THE CHAIRMAN asked whether the scientific consensus was that there was no possible performance-enhancing misuse of caffeine.

PROFESSOR LJUNGQVIST said that there was a clear scientific consensus that, if caffeine were to be banned, it would have to be banned without limits.

THE CHAIRMAN noted that that was not an answer to his question. Was there any scientific view that caffeine could be abused within a sporting context? He agreed that it would be preferable not to say that kids could not drink coffee.

PROFESSOR LJUNGQVIST said that he was not aware of the misuse of caffeine. Laboratories already analysed for caffeine and would continue to do so, and would ring a warning bell if they saw signs of increased use of the substance.

DR RABIN said that a few laboratories were concerned by the level of caffeine in some athletes; a measure of five to six micrograms was viewed as rather suspicious. WADA was missing a little bit more information, however, and that was his view. WADA might decide to keep caffeine on the List and gather more information from the laboratories, or put it aside and come back to it the following year with more data and revise the judgement. The members should know that, in the Code, substances could not be on the List as well as on the Monitoring Programme, so the fact that caffeine and pseudoephedrine, for example, were listed on the Monitoring Programme would exclude them from the List, and the athletes abusing these substances would not be sanctioned.

THE CHAIRMAN said that his basic reluctance was to have something on, then off and then back on the list.

DR GARNIER said that there was all the information necessary on caffeine for a decision to be taken. There was possible misuse or abuse of the substance. In France and Italy, customs officers had found significant quantities of injectable caffeine solutions.

PROFESSOR LJUNGQVIST observed that the concentration of caffeine in urine was dependant on the state of hydration of the individual, meaning that the concentration depended on the state of the body; therefore, the concentration of urine was not a good measure.

THE CHAIRMAN asked who was opposed to the proposal to remove caffeine from the List. Mr Larfaoui was opposed to this proposal. He asked who was opposed to the removal of the four minor stimulants from the List. He thought that there was consensus, therefore these substances would go onto the monitoring list.

MR REEDIE said that three people had written to the List Committee, himself, his NOC and the IF concerned. He suggested that WADA consider recognising the situation that had arisen from a positive test during the Salt Lake City Olympic Games regarding the issue of methamphetamine. Methamphetamine L was found in nasal decongestants, whilst methamphetamine D was a narcotic and should clearly be banned. It was his view that methamphetamine should be sub-divided, with methamphetamine D on the list and...
methamphetamine L to be considered a doping substance if above a certain threshold. This would mean that WADA would not have to keep testing and catching people who had made silly mistakes for almost proprietary medicines, and he thought that it was politically reasonable to do that because WADA would be seen to understand what had happened in competition at a recent major event. He also thought that, if this was not acceptable, the List Committee should explain why it had decided not to accept the request from three reasonably reputable sources. He thought WADA would not be adding much to the cost of laboratory analysis, and this had been discussed with a number of eminent experts. If WADA decided to go ahead with his proposal, he thought that it would get a pat on the back from the winter sports community.

PROFESSOR LJUNGVIST noted that the correspondence had been received and considered, and the members would be able to see the result of the discussion on page 18 of the document. The list of stimulants included those that would automatically result in a two-year ban and those that might result in a lower ban. Those specified substances that were looked upon as milder than those that would automatically result in a two-year ban were ephedrine and L-methylamphetamine. This was the conclusion reached by the scientific reviewer. The information he had received from the laboratory was that to introduce a cut-off level of those substances would be irrelevant.

DR RABIN said that this point had been discussed and, based on the request made by Mr Reedie, the L isomer had been added to the list of specified substances.

THE CHAIRMAN asked Mr Reedie if the explanation given was satisfactory.

MR REEDIE replied that he was happy with the explanation.

THE CHAIRMAN asked whether WADA should carry on with the words that used to be there: and other substances with similar chemical structure or similar pharmacological effects.

PROFESSOR LJUNGVIST responded that the four substances that would be removed would have to be added to the Monitoring List.

DR RABIN noted that all of the substances had been discussed correctly, but two of the four would not go on the Monitoring List.

PROFESSOR LJUNGVIST said that this was what he was trying to say: these were related compounds, therefore, if they were not on the Monitoring List, they would automatically be banned and should therefore be named. He asked those concerned to ensure that, if something appeared on the Monitoring List, it would automatically be excluded from the List.

MR BLAIS noted the question of political and legal consideration. In a legal dispute, would this sort of language be defendable? Was it worth going down that road?

THE CHAIRMAN replied that there was a good example from a very recent world championship.

PROFESSOR LJUNGVIST said that the matter was very much related to the particular case, and would be thoroughly evaluated based on that. In Salt Lake City, aranesp had not been on the List, but it was generally recognised as being related to EPO. In Atlanta, the CAS had rejected a case, saying that, if a substance was to be banned, it had to be listed. At the IAAF Championships in Paris that year, an athlete had tested positive for a substance that had not been on the List but which the IAAF felt was a related compound. The case would be interesting; there were certainly differences in opinion. He remembered another example of a case some 10 years back, in which clenbuterol, a substance very much related to anabolic steroids, had been found in two athletes, and the IAAF had claimed that this substance was related to anabolic steroids. The other side had recruited the necessary pharmacological expertise to say that clenbuterol was not related as it acted on different receptors.
THE CHAIRMAN said that, all WADA knew for sure was that, if it did not employ this language, it would have no chance. He strongly recommended that the language be kept.

PROFESSOR LJUNGVIST noted that there was now a new fast-track mechanism for putting new substances on the List, and this had not been possible previously.

THE CHAIRMAN said that this meant that the first through the door would get away with cheating.

PROFESSOR LJUNGVIST said that his people knew what got onto the market. He did not think that this was a major item of conflict.

THE CHAIRMAN said that the Executive Committee would give Professor Ljungqvist the substances that he wanted to take off the List, but wished to keep the term related substances. Either the substances were on the Monitoring List, or they had been specifically taken off.

MR NIGGLI noted that this was written clearly in the Code under Article 4.5.

THE CHAIRMAN said that the point was different. On the Monitoring List, one of the three or four substances was specifically listed, and the others were not. He had thought that the ones that would be taken off the List would be put onto the Monitoring List, but this turned out not to be fully correct.

DR RABIN noted that all of the stimulants that had been listed in the 2003 List had been taken one by one and scrutinised, and all of the decisions had been made on a one-by-one basis. It had been his understanding, from the beginning, that the Monitoring Programme was applicable only to the three substances mentioned on the Monitoring Programme.

THE CHAIRMAN said that this was what he was trying to determine.

PROFESSOR LJUNGVIST noted that, if the Monitoring List, according to the clause referred to by Mr Niggli, required the substances to be on the Monitoring List, these would have to be named.

MR HOWMAN suggested adding, for the sake of clarity, a small clause at the bottom of the stimulants saying those substances named on the Monitoring List are not prohibited.

MR LARFAOUI said that WADA was an organisation set up to fight against doping in sport. In the new List, were there any additional products or had products been withdrawn only?

PROFESSOR LJUNGVIST said that the substances to be removed had been decided, and there were substances that had been added to the List.

MR LARFAOUI asked if this had been done in a general manner, not only having to do with stimulants.

PROFESSOR LJUNGVIST replied that this had indeed been the case.

THE CHAIRMAN said that, as the Executive Committee members went through the List, Professor Ljungqvist would specify the additions and withdrawals made.

Had any substances been added on page 10 of the List?

PROFESSOR LJUNGVIST did not honestly know.

DR RABIN said that he did not have the 2003 List to hand but oxymorphon had been added to the List of narcotics, and four or five substances had been added to the category of anabolic agents. The wording of section B on Endogenous Anabolic Androgenic Steroids had been completely rewritten by the List Committee to make it slightly more flexible, and section 2: Other Anabolic Agents had been added, including zeranol.
THE CHAIRMAN noted that pages 10 and 11 had been approved.

PROFESSOR LJUNGQVIST informed the members that clenbuterol was now on the List. This had had to be done, because of the case he had mentioned previously.

THE CHAIRMAN specified page 12.

MR LARFAOUI asked whether the members could be informed of the changes made on each page.

THE CHAIRMAN said that he was more concerned with what was being taken off the List so, if anything had been removed, that was of more concern to the members.

On page 12, there was an issue regarding corticotrophins, point 6.

DR RABIN noted that point 6 should be looked at in conjunction with glucocorticosteroids.

THE CHAIRMAN agreed to leave this matter aside for the moment.

DR RABIN said that section S6, Beta-2 agonists, was a new section created in order to clarify the reading for this particular class of substances.

THE CHAIRMAN referred to pages 12 and 13, which were different renditions of the same text.

PROFESSOR LJUNGQVIST said that this was a proposal by the office, and could be found on the top of page 13; the more he read it, the more he thought that it was the same thing.

DR RABIN highlighted the wording, which had been fine-tuned with WADA’s legal people. The two proposals were the same; there had been no change to the meaning.

PROFESSOR LJUNGQVIST referred to the bottom of page 12: An Abbreviated Therapeutic Use Exemption (ATUE) must be obtained. But at the top of page 13, no mention was made of the abbreviated.

DR RABIN said that section 8.0 of the TUE standard referred specifically to the abbreviated TUE application process.

PROFESSOR LJUNGQVIST noted that this was an example of fine-tuning.

THE CHAIRMAN said that they would go with the language on the top of page 13.

With regard to glucocorticosteroids, the possible division was that the committee found that there was no performance-enhancing effect, no danger to health and/or something contrary to the spirit of sport. On the other hand, there were those who said that there was a performance-enhancing effect and that these compounds might have the effect of keeping somebody in a competition longer than he or she should be, and that that was contrary to the spirit of sport, therefore, whether or not there was performance enhancement, it should be on the List.

MR LARFAOUI noted that ASOIF proposed keeping glucocorticosteroids on the List. It had been proposed to the IFs concerned that they add substances to their own lists, but he thought that the IFs proposed to WADA the addition of substances. He thought that there was something of a contradiction.

MR KASPER said that 18 IFs had been asked, and 12 were in favour, with six against keeping glucocorticosteroids.

PROFESSOR LJUNGQVIST said that only 18 out of all of the IFs had answered so far, therefore there was no unanimity.

MR RIISKJAER agreed to the proposal to keep glucocorticosteroids on the List. His specialists had advised him to advocate it, and he thought that, if in doubt, substances should be kept on the List.
DR STRETTON said that Professor Ljungqvist’s committee and the List Committee had agreed that glucocorticosteroids were neither performance-enhancing nor harmful. Whoever this mysterious stakeholder was obviously thought that this went against the spirit of sport and was dangerous to health. What was the argument, given that the experts were saying that glucocorticosteroids were not dangerous to health.

THE CHAIRMAN said that the answer was that the experts were wrong, and that they saw from actual experience that there was misuse of these products.

PROFESSOR LJUNGVIST noted that it was not fully correct to say that the experts were wrong.

THE CHAIRMAN pointed out that this had not been his view; he was simply giving the argument.

PROFESSOR LJUNGVIST said that the drugs were used for serious or chronic diseases. The people on the List Committee had done thorough research and had not found that temporary use of such drugs would induce a risk element. That was not the same thing as saying that there was no risk. The use of glucocorticosteroids for temporary injuries or health problems was widespread. By analysing the urine, the route of administration could not be differentiated.

DR STRETTON said that he had two more questions.

THE CHAIRMAN asked if there was anybody who wished to insist upon removing glucocorticosteroids from the List.

DR STRETTON said that he thought that what the Health, Medical and Research Committee and the List Committee recommended, the Executive Committee should agree with. What was currently on the list was fine, but he understood that there was only one laboratory in the world (Paris) that tested for these substances, and only a few sports that required testing for such substances. So, while the substances were on the List, there was not widespread testing for them. What would happen if they were on the List and, now that the Code was in place, all sports would be required to test for glucocorticosteroids, whereas in the past they had not had to test for them? Did this not mean that more laboratories would have to start getting the equipment, doing the work, etc.? He would like clarification of that. He understood that there would be significant implication for NADOs if glucocorticosteroids were left on the List.

DR RABIN advised forgetting about the first criteria, as nobody could judge whether or not there was performance-enhancement. Then the other two criteria remained, one that had been well discussed by Professor Ljungqvist, the other being the spirit of sport. There had been some elements showing that some of these substances might have been used in some sports. The debate had been so intense within the committees because of the differing perceptions.

With regard to glucocorticosteroids, in the past he believed that a hypocritical situation had existed, knowing that the laboratories had been unable to detect the difference between the different forms of administration of these substances. It had been meaningless, to some extent, to test for these substances. Now WADA was saying that the substances should be put on the List. The TUE standard allowed WADA to give exercise full medical control on the use of these substances. The other option could be to remove glucocorticosteroids from the List because, scientifically speaking, it was not possible to tell the difference. The laboratory in Paris had reported a positive case, but there were two other laboratories that also tested for glucocorticosteroids.

DR STRETTON asked what it meant for a NADO if WADA agreed to keep these things on the List in 2004 compared to 2003 or 2002.

DR RABIN said that either a prescription would be given for glucocorticosteroids given systemically, in which case the regular TUE process would apply, or a topical formulation would be taken, in which case the Abbreviated TUE process would apply. The other
proposals on the table were that it could be left to the IFs to decide, or simply remove these substances from the List.

**PROFESSOR LJUNQVIST** said that he did not wish to express an opinion, but was trying to transmit some facts. The French laboratory had analysed for glucocorticosteroids and reported a case during the IAAF Championships in France. The route of administration could not be decided by analytical results.

Since a local application might lead to a positive urine test, all those taking glucocorticosteroids for legitimate reasons should apply to use them legitimately, so 5,000 to 10,000 people would need to apply in order to avoid testing positive. If people applied for TUEs for local injections, knowing that there was no way of telling the route of administration, they might make use of that exception.

**DR STRETTON** asked about the level of positive samples at the recent IAAF Championships in Paris.

**PROFESSOR LJUNQVIST** replied that 405 samples had been analysed, and there had been 23 or 26 positive glucocorticosteroid samples. These results were now being followed up.

**DR STRETTON** said that the reason he supported the committee recommendations was because of the advice that the substances were neither performance-enhancing nor harmful to health. On the political side, there was concern that, by putting these glucocorticosteroids on the list, there would be a significant diversion of funds in doping control programmes from chasing more significant issues, and ASDA had estimated that it would cost ASDA around AUS$ 400 thousand to AUS$ 500 thousand a year if this were to happen. This was not an insignificant share of ASDA’s total budget. It was not at all clear to him, and he supposed that the final reason was that there was a real danger of undermining public confidence in the anti-doping programme. There was the political aspect mentioned by Mr Larfaoui previously, but there was another political side to it, which was that if WADA were seen to focus its anti-doping programme on eczema creams and nasal sprays, when the real cheats were be getting away, this would undermine confidence in the entire programme.

**MS ELWANI** apologised as she had to leave the meeting, but wanted to inform the members that the athletes thought that this was not a problem of being too strict, rather it was a problem of being too lenient. It was better to keep glucocorticosteroids on the List and then revise the List several years down the line, when the proper medical research was available. She thanked the Executive Committee members for all their effort, and would see them in two months’ time.

**MR BLAIS** noted that this was a hard case, and WADA would be dealing with these more and more as it moved forward. Before one rejected that position, he thought that it was important that the threshold remain relatively high. Obviously the role was to look at the matter, but the members should tread lightly. Sometimes, it was more than just a scientific issue; there were also political considerations. The second point was that the science indicated that glucocorticosteroids were not performance-enhancing, yet there might be a perception out there that it was, encouraging the use of it and, by keeping it on the List, WADA was endorsing that perception, thus causing more people to head towards that particular action, and he was wondering whether WADA should be doing that, as it was endorsing what appeared to be a false belief. He was also concerned about the TUE logistics, as the burden of having to do that might detract from other activities that might be more important. He thought that the position of Canada on this would be to remove glucocorticosteroids from the List.

**PROFESSOR LJUNQVIST** said that the List Committee and the Health, Medical and Research Committee had been very careful in trying to live up to the expectations of the Executive Committee, namely to give advice based on science and knowledge. He had two hats (scientific and political) and had been careful not to give a political point of view. His own situation was not that easy, as everybody could understand
**MR BARNES** said that the USA agreed with Canada and the other colleagues who supported the scientists and experts on the List Committee.

**MR REEDIE** noted that he had listened with great interest to the debate. He was not yet convinced that the scientific evidence that he had from the List Committee was enough to prove that the substances were not performance-enhancing. If the IFs believed that they were, they had to believe for a reason, but he did not have that reason. He needed to have an argument on both sides. He needed to have somebody to tell him why the substances should or should not stay on the List. He understood the logic and the argument from the List Committee, but there was obviously a clear opposition of view. It was necessary to reach a conclusion with which everybody was comfortable. He thought that it was a serious risk to sport to have a divided view of what was probably a moderate issue. He needed the IFs and the stakeholder concerned to tell him clearly why, and then he would exercise a vote. The NOCs had no clear consensus, therefore, as an ANOC representative, he had no mandate to say yes or no. He thought that, on balance, WADA would probably be better with the status quo for 12 months.

**DR STRETTON** said that, if Mr Reedie thought that WADA should maintain the status quo, he thought that the best way to maintain this would be the compromise position that the List Committee had put up, rather than leaving it on the List, because the compromise position that the List Committee put up was that it was up to individual IFs to nominate these substances and then test in those sports.

**MR REEDIE** understood that the shaded area at the bottom of page 13 was the status quo. Everything else was a change. Was that not the case?

**MR HOWMAN** said that the current List made reference to substances prohibited in certain sports (and these included glucocorticosteroids), and then had similar phraseology to the 2003 List.

**MR REEDIE** concluded that this was substantially the same as what was at the bottom of page 13.

**MR HOWMAN** agreed.

**DR STRETTON** thought that the current list referred to certain sports.

**MR HOWMAN** said that segment 3 of the current List referred to substances prohibited in certain sports, and under the heading of glucocorticosteroids, it read the systemic use of glucocorticosteroids is prohibited when administered orally, rectally or by intravenous or intramuscular injection. When medically necessary, local and intra-articular injections of glucocorticosteroids are permitted. Where the rules of the governing body so provide, notification of administration may be necessary.

**DR STRETTON** said that he had misunderstood, and he apologised. But he still went back to his other point, which was that few sports actually required testing for glucocorticosteroids, so his strong view was that the compromise position suggested by the List Committee would give exactly that same situation.

**MR LARFAOUI** thought that, if this product was on the List, it had been proposed by experts. The members wanted to take glucocorticosteroids off the List. He did not think that it should be left up to the IFs to decide, as this went against the spirit of WADA. If WADA began to delegate powers when it came to putting substances on the List, then each IF would end up with its own list.

**THE CHAIRMAN** said that he did not think that anybody would persuade anybody of the opposite view. As Chairman of WADA, he would rather be dragged kicking and screaming into taking glucocorticosteroids off the List by overwhelming scientific evidence and public support for it than for WADA to take them off unilaterally. Oddly enough, some of the IFs that were opposed to keeping them on the List had the worst abuses. If public opinion drove WADA to say that it was not a real problem, then that would be fine. But it would be the wrong thing for WADA to make this decision.
unilaterally, especially when there was such a strong split in scientific opinion. WADA could certainly say, if it took the decision to keep them on, that opinion was divided and it might be costly to keep glucocorticosteroids on the List, and that it would seek some kind of consensus resolution.

MR BARNES said that the use of the term *unilateral* would call into question the legitimacy of the processes that WADA used to determine questions of this nature, namely the List Committee, as well as the credibility of the committee itself.

THE CHAIRMAN did not think so. The List Committee was the List Committee, and the decision was made under WADA Statutes by the Executive Committee, which had all kinds of input from the stakeholders, some of whom felt very strongly that these substances were being abused. He suggested bringing the ‘fors’ and the ‘agains’ together in order to find a resolution. He thought that the members had heard strong feeling from the sports side to keep glucocorticosteroids on the 2004 List. Maybe WADA could bring about a resolution of thing for once and for all.

MR REEDIE asked whether there was any way that the additional laboratories testing for glucocorticosteroids could provide some information in addition to the Paris laboratory.

THE CHAIRMAN said that, any time one in 14 or 15 athletes was found using the stuff, there had to be a question. It was like all the brave asthmatics with salbutamol. It was an issue.

He proposed that glucocorticosteroids be maintained on the List for that year, and that the issue be identified and resolved in a way that satisfied everybody at the earliest possible opportunity. Four votes in favour, with three against (and Ms Elwani had left the meeting) meant that the Executive Committee was divided, but it was decided, and he thought that it was necessary to work towards getting a resolution. He appreciated the views and the strongly held positions, as well as the spirit in which everybody had discussed this.

PROFESSOR LJUNGOVIST said that a prolongation of a final decision was a matter for one year. He would convey to his committee that the matter had been thoroughly discussed by the Executive Committee.

THE CHAIRMAN asked Professor Ljungqvist to convey the Executive Committee’s thanks to the committee for a lot of very good, hard and sound work, as well as the Executive Committee confidence in the committee and the desire to get this difficult question over with.

PROFESSOR LJUNGOVIST wished for confirmation that the decision taken meant that corticotrophins would remain.

MR HOWMAN noted, with regard to alcohol, that each sport wanting alcohol on the List for in-competition testing should nominate a threshold level for alcohol, to be submitted by 30 September.

THE CHAIRMAN noted the language change on page 17.

DR RABIN said that the meaning was exactly the same as before, but had been reworded by his legal colleagues.

THE CHAIRMAN said that he was reluctant to publish a list that asked whether luge was a weight category sport.

DR RABIN noted that this question had remained on the points to be clarified before publishing.

THE CHAIRMAN asked about the language regarding diuretics.

DR RABIN noted that the reason was to be consistent with the previous wording used in other chapters of the standard.
DR STRETTON asked whether diuretics required Abbreviated TUE.

DR RABIN said that these would require a regular TUE.

THE CHAIRMAN referred to page 18, followed by Part 3, the Monitoring Programme with the additions discussed.

DR RABIN said that the List Committee had gone through all of the stimulants one by one, and had made the distinction between the ones that would remain on the List and those that would be put on the Monitoring List.

THE CHAIRMAN said that some had been taken off the List and put on the Monitoring List. Some had been taken off the List and not put on the Monitoring List. Was that correct?

DR RABIN said that this was correct.

PROFESSOR LJUNGQVIST said that there were four ephedrine-related substances that the committee had decided to take off the List. These should be put on the Monitoring List, otherwise they would automatically be included in the Prohibited List as related compounds.

DR RABIN agreed that Professor Ljungqvist was correct.

THE CHAIRMAN asked the members whether they had a List.

MR HOWMAN asked whether the Executive Committee would give him the authority to publish it with all of the approved modifications.

THE CHAIRMAN said that the adopted List should be published no later than 1 October 2003. Everything had to be done over the next few days by the management team.

DECISIONS

1. Glucocorticosteroids to be maintained on the List for 2004; matter to be identified and resolved in a way that satisfies everybody at the earliest possible opportunity.

2. The 2004 Prohibited List adopted, with approved modifications.

9.2 TUE Standard (for approval)

MR WADE described the Therapeutic Use Exemption process. The initial feedback on the Code had identified the need for a TUE standard. A TUE Reference Group had been established to prepare a draft, and it had included the following members: Professor Ljungqvist; Professor Fitch; Dr Jenoure; Dr Schamasch; Professor Mueller; Dr Pipe; Dr Ruijsch can Dugteren; Dr Dvorak; Dr Horta; Dr Wadler; Mr de Pencier; and Dr Roberts. From May 2003 to July 2003, the group had reviewed and modified the standard based on the changes to the draft 2004 List of Prohibited Methods and Substances. It had sought general feedback from stakeholders on the process for reviewing salbutamol in particular; and then changes had been proposed by the TUE Reference Group through various meetings and teleconferences. The standards had been revised, and a fairly short consultation period of one month had been entered into; a draft approach to manage the WADA TUE process and responsibilities as defined in the Code had then been prepared. From August to October 2003, the group had been summarising consultation feedback. The finalised draft standard was now being presented to WADA Executive Committee for approval; and the idea was to post it with the List Standard.

DR GARNIER said that the principle was not entirely new, but the standards submitted to the Executive Committee for approval aimed to harmonise standards around the world and bring the necessary guarantees to avoid abuse in the future.
He briefly went through draft version 3 of the International Standard for Therapeutic Use Exemptions (Annex). He asked the members for a decision on the standards themselves, and not on the forms, which needed to be finalised.

MR LARFAOUI asked whether there would be any possibility for control, and asked about the length of the exemption.

THE CHAIRMAN thought that this was all dealt with in the standard.

DR GARNIER said that the Code provided for WADA to review and change the initial decision, and the duration of the exemption should be mentioned on each authorisation, as well as the dose, etc.

DR STRETTON said that his advice was that the Abbreviated TUE contained many inconsistencies, and there was a lack of clarity as to whether WADA was talking about a notification system or an application. An athlete needed to know that that a form had been received and filled in properly. With regard to 8.3 and the application form, there seemed to be some kind of inconsistency between these. The involvement of the TUEC seemed a little strange. The possible role for NFs in this process also seemed to be ignored. The wording and the process needed to be looked at a bit more carefully before the document was published.

PROFESSOR LJUNGOVIST asked whether the adoption of the standard would include the forms.

DR GARNIER replied that only the text was being proposed. The forms needed to be finalised and accepted before adoption.

THE CHAIRMAN asked whether Dr Rabin accepted Dr Stretton’s observations regarding inconsistencies.

DR RABIN said that Dr Stretton should tell him exactly where the inconsistencies existed in the document, as this would be extremely helpful.

DR STRETTON said that ASDA had sent in detailed comments, but he would be more than happy to give his layman’s view.

MR HOWMAN noted that some of the suggestions given had already been incorporated in the latest version.

THE CHAIRMAN observed that the Executive Committee was being asked to approve the document, but there were clearly some issues that were unresolved or unclear.

MR HOWMAN suggested circulating a draft for a vote or leaving it until November, as it would be unwise to adopt an unfinished document.

THE CHAIRMAN noted that the group would be meeting the following day; it could get a draft out as soon as possible, and approval could be sought by electronic mail.

**DECISION**

A draft International Standard for Therapeutic Use Exemptions to be sent out to Executive Committee members subsequent to the meeting on 24 September 2003; approval to be sought by electronic mail.

**9.3 Laboratory Income Policy (for approval)**

DR RABIN referred to the report in the members’ files (Annex), which sought approval of the WADA Laboratory Income Policy. The preferred internal option would be the first option suggested, which was that of establishing a flat fee of US$ 4,500 per laboratory, which would cover 50% of the WADA 2004 accreditation budget.

THE CHAIRMAN asked whether the members were content with the recommendation.
MR REEDIE advised going for the flat fee from a financial point of view.

THE CHAIRMAN said that it would be interesting to generate some reliable data on the actual costs to WADA.

DR RABIN said that the proposed accreditation fee for a new laboratory was US$ 45,000, applicable as of 1 January, 2004.

MR BLAIS asked when this would become effective. Canada had an application in the pipeline.

THE CHAIRMAN presumed that this would be effective as of 1 January, 2004.

DR RABIN said that it would not be possible before 1 January, 2004. The question could apply to the laboratories in the process of accreditation, but he believed that the fee would be applicable only to the new laboratories coming into the system.

**DECISION**

WADA Laboratory Income Policy, including establishment of a flat fee of US$ 4,500 per laboratory, approved.

### 9.4 Accreditation of Cuban Laboratory (for approval)

DR RABIN referred to the report in the members’ files (Annex), requesting WADA accreditation of the Havana Laboratory. Based on the technical information, he recommended that the Cuban laboratory be given full IOC / WADA accreditation status.

MR HOWMAN said that it was not WADA’s decision to accredit laboratories, but WADA would recommend to the IOC that this laboratory be accredited, subject to the approval of the Executive Committee.

THE CHAIRMAN asked the members whether they recommended that the Havana laboratory be approved on the basis of the technical information.

**DECISION**

Proposal to recommend accreditation of the Havana, Cuba laboratory to the IOC approved.

### 9.5 Working Committee

MR HOWMAN referred to the report in the members’ files (Annex). Initially, 15 members of the Health, Medical and Research Committee had been recommended, but the list had been reduced to 12 people from 11 countries, each region of the world providing notable expertise in every area. The committee also contained a balance of members from the public authorities and the sports movement.

THE CHAIRMAN asked whether Mr Howman sought approval of the list.

MR BARNES asked whether the representation of each individual could be reviewed.

PROFESSOR HENDRICKS referred to the issue of female and male representation.

MR LARFAQOUT said that he had been about to say the same thing.

THE CHAIRMAN went through the list of members. Professor Ljungqvist represented the sports side, and was from Sweden; Professor Ayotte, from Canada, represented the public authorities; Professor de Rose represented the sports side, and was from Brazil; Professor Friedman, from the USA, was a geneticist, and had been nominated by the Chairman of the Health, Medical and Research Committee; Professor Fitch, from Australia, represented the public authorities; Professor Kono, from Japan, represented the public authorities side; Professor Hamilton represented the public authorities, and was from the USA; Professor Horta, from Portugal, represented the public authorities; Dr Mbanya, from Cameroon, represented the sports side; Mr Popov, from Russia,
represented the sports side; Professor Saltin represented the public authorities and sport, and was from Denmark; and Dr Schamasch, from France, represented the sports side.

MR BARNES noted that he had written confirmation that any representative of the USA would need to be nominated by the US Government. Could somebody explain why Professor Friedman had been nominated?

THE CHAIRMAN said that WADA wanted access to the genetic research community, and the US representative had been very active in that field.

PROFESSOR LJUNGVIST thought that it was vital for the committee to have the necessary competence. One of the high priority areas would be gene transfer technology for the purpose of enhancing sports performance, and he was happy that the father of gene therapy had accepted to join the committee. If anything, this member represented the international world of science.

MR BARNES said that it was his understanding that it was either sport or government representatives. The issue was that the US Government had recommended two nominees, and this was not one of them.

THE CHAIRMAN said that, therefore, the representative was from the sport side.

PROFESSOR HENDRICKS asked if only one woman had been proposed.

THE CHAIRMAN replied that, as far as he knew, this was the case.

PROFESSOR LJUNGVIST said that everything possible had been done to encourage the inclusion of women. There had been two female candidates, but one of them had gone to the IOCMC.

THE CHAIRMAN urged the Chairman of the Health, Medical and Research Committee to try and improve the balance on the committee.

DECISION

Health, Medical and Research Committee members approved.

9.6 2003 Research Projects (for approval)

DR RABIN referred to the 2003 research projects. There had been 34 project applications submitted to WADA in May 2003 (one applicant had subsequently withdrawn). Projects had been submitted by investigators representing 21 different countries and five continents (there had been only 12 countries represented in 2002). Nine of the projects had been submitted in the category Compounds and / or Methods Enhancing Oxygen Delivery; six projects had been submitted in the category Exogenous and Endogenous Anabolic Steroids; one project had been submitted in the category Gene and Cellular Technologies Applied to Doping (he regretted the limited number of projects here); and 16 projects had been submitted in the category Miscellaneous Projects Relating from the List of Prohibited Substances. All of the projects had been submitted for review by an independent panel of scientific experts. All of the projects had also been submitted to ethical reviews (local and WADA). The research proposals had been reviewed by the Health, Medical and Research Committee on 7 September, 2003, and the Health, Medical and Research Committee recommendations were being presented to the Executive Committee for approval that day.

Nine of the research projects had been selected to be recommended for approval. In group A, two projects had been selected: The Improved Detection of Recombinant Erythropoietin in Urine using Immunoaffinity Chromatograph; and GASEPO2 – A Software Tool for the Analysis of EPO Images after Isoelectric Focusing and Double Blotting.

In group B, three projects had been selected: Influence of Changes in Diet on the Dynamics of 13C/12C in Selected Urinary Steroids; Detection of Doping with 1-Testosterone; and Metabolism and Excretion of 3, 6, 17-Androstenetrione.
In group C, one project had been selected: Application of Microarray Technology for the Detection of Changes in Gene Expression after Doping with Recombinant Human Growth Hormone (it was proposed to reduce this to a pilot study and fund it for one year only before making any further commitment).

In group E, three projects had been selected: The Dose of Inhaled Beta-2 Agonists on Athletic Performance in Non-Asthmatic Elite Athletes: Competitive or Statistical Significance?; Mass Spectrometric Characterisation and Identification of Endogenous and Synthetic Insulins; and Development of Methods for the Detection of the Misuse of the Aromatase Inhibitors Anastrozole, Letrozole and Vorozole in Urine.

The research funds requested for year 1 (2003) were US$ 793,408.60 for 2004; US$ 168,396.60 for year 2 (2005) and US$ 18,100.00 for year 3 (2006). The total funds requested were US$ 979,905.20. The Health, Medical and Research Committee had decided to be extremely reasonable on the budget commitment for 2003 research projects, with the strong recommendation that the remaining budget be allocated to targeted projects identified by WADA. The Health, Medical and Research Committee insisted on the need for these targeted research projects (including gene doping, blood transfusion and related substances). As of that day, none of the nine 2003 research projects could be funded and, if nothing was done, these would not be funded.

THE CHAIRMAN asked the members if they wished to approve the nine projects if and when the money came in.

DR STRETTON said that there was no money for 2003, so was this the US$ 1 million that was in the 2004 budget?

DR RABIN said that, if possible, the money would come from the funds paid by those countries that had not paid in previous years.

THE CHAIRMAN said that, if WADA got all of the money that it hoped for that year, there would be a budget of US$ 1 million, and presumed that Dr Rabin hoped to spend it in the way that he had explained previously.

DR RABIN said that this was correct. The US$ 1 million would cover only the nine projects proposed; it would not give WADA the flexibility to target additional research, which he believed was absolutely essential in order to play a key coordination role and answer some of the key scientific questions that were being asked.

PROFESSOR LJUNGOVIST noted that one project related to insulin as a doping agent; insulin had been recommended for exclusion from the List by the List Committee. After careful consideration, it had finally been decided that insulin should not be excluded, as more knowledge was necessary. This project emphasised the need for the flexibility of an extended budget to go out and target people to do research on WADA’s behalf.

THE CHAIRMAN asked if the Executive Committee members were happy with the recommended projects.

DECISION
Funding recommendations for 2003 research proposals approved.

10. Communications

MS KHadem said that, one year previously, she had briefed the Executive Committee on the communications strategy that she had drafted upon joining WADA, and one year later she could report that everything that had been on that strategy had been worked through.
10.1 Play True Magazine

MS KHADEM said that the second issue of the Play True magazine had been published, focusing on research. There had been great feedback from most of the recipients of the magazine, and she would appreciate feedback from the Executive Committee members.

The Athletes’ Passport Newsletter was specifically for the 2000 athletes that WADA had on its mailing list for the Athletes’ Passport Programme. Again, any feedback would be welcomed.

10.2 Communications Update

− General Update

MS KHADEM said that observing website figures was a very interesting way to gauge the interest in WADA. There were approximately 30,000 visits to the website every month, a number that had declined over the summer, but then, in September, there had been approximately 60,000 visits, probably to do with the amount of activity that there had been that month, therefore, the more that WADA did, the more interest was shown. As for downloads, there had been approximately 1500 to 2000 downloads of publications; more than 3000 downloads of the Code; and more than 5000 downloads of the List, which was the number one document. She had noticed journalist and public interest in WADA. At the latest teleconference, almost 30 journalists had called up, and there had been up to 149 people at one point listening to the live website broadcast. The possibility of doing some kind of research survey had been discussed. The numbers indicated that there was a great deal of interest in what WADA did, and she assumed that this would only increase.

− Outreach Activities 2003

MS KHADEM said that, with regard to Outreach, it had been a very busy and successful year (Annex). Four major events had been covered that year, all of which had been very successful. Ms Spletzer, the Outreach Manager, was currently in Lausanne briefing the IOC Athletes’ Commission on Outreach. Ms Spletzer had just e-mailed her to tell her that the athletes were particularly interested in the programme and wanted to take it forward. There had been 5000 athletes present at the Pan-American Games in the Dominican Republic and the Outreach team had reached an average of 225 athletes per day. The athletes had been very happy to be informed, and there had been a lot of interest in obtaining as much information as possible.

Through this programme, it had also been possible to focus on partnerships with NADOS and athletes, for example, at the South Pacific Games, ASDA had been instrumental in helping run the programme.

Ms Spletzer and Mr Hoistad had developed a short presentation about the Outreach programme, and this gave a good idea of what the programme was about. The presentation highlighted that there was still a lot of need to be reaching out as much as possible, not only to athletes, but also to athlete support personnel, governments, etc.

THE CHAIRMAN thanked Ms Khadem for her report, and asked if anybody had any comments or questions.

DR SCHAMASCH thought that an issue that had to do with communication was a problem of confidentiality. With regard to the IOC leaks, did WADA envisage doing what the IOC was currently doing in terms of its minutes, which, when produced in full, were a somewhat dangerous element. The IOC minutes were being produced by in a more confidential manner. Could WADA envisage doing the same thing? Minutes could be very dangerous if they fell into the hands of the wrong person, and WADA might look into the problem of confidentiality.
MR BLAIS thanked Ms Khadem for her excellent report. He thought it necessary to ensure that communications were as effective and efficient as possible. Was WADA reaching all of its stakeholders? Was there a missing piece from a language perspective? As for technology, was there a technical barrier to using a significant amount of WADA communications to deliver via the internet when there was a digital divide in some parts of the world? It was important to measure the reach to all stakeholders from a technological as well as a geographical point of view.

MS KHADEM said that she could not agree more with Mr Blais. She had mentioned that WADA was now at a point where it had systems in place to look at the idea of doing some kind of a survey. She did not think that it would have been appropriate before this stage. The topic of languages was one that was very close to her own heart; there was obviously a cost associated with that, but she thought that WADA should invest in this. As for technology, great strides had been made and WADA would continue to explore ways of reaching people. This was why WADA continued to publish on paper: WADA was playing a balancing act at the moment, working out how to reach those who did have internet access, and those who did not.

MR HOWMAN said that Ms Khadem had been very unassuming and had done a great deal of hard work.

With regard to the comments made by Dr Schamasch, WADA was founded on principles of openness and transparency; there were only a few things that WADA would like to keep confidential, therefore it was necessary to be careful about issues of confidentiality prevailing over the minutes, etc. It was important to trust everybody around the table.

THE CHAIRMAN said that this was certainly something that had been dealt with right from the very beginning. He thought that the IOC had made a dreadful mistake in changing its style because, in the great scheme of things, matters of earth-shaking importance were not discussed. It was important for people to know that there would be different views expressed before a decision was reached. That was all part of the process of expanding awareness. One of the ways in which it was possible to increase communications leverage was to get media coverage of the issues that were important. In the daily IOC press reports, there was a great expansion in the amount of coverage of doping issues. He thought that the WADA communications policy of being active and assertive about the importance of doping-free sport was starting to pay dividends. The communications team had done a terrific job; the publications were of a high quality, they were effective, and they dealt with issues that needed to be ventilated.

**DECISION**

Communications report approved.

11. Education

MR WADE noted that the education and communications teams needed to work closely together.

11.1 Update

MR WADE referred to the report in the members’ files (*Annex*).

**DECISION**

Education update approved.

11.2 Short-Term Strategy

MR WADE felt that the committee had not had a lot of time to really roll up its sleeves and look at the various approaches and activities, but it would have the opportunity to do so in October. The committee had focused on the strategy, however, and there had been
full agreement to proceed accordingly, or at least the recommendation to the Executive Committee members was that they should proceed accordingly. There were a lot of things that had not been done in education over the past few years, and it was necessary to get out there and do some things well. There was a need to focus on information regarding the Code and the awareness activities. He referred to the report in the members’ files (Annex), which detailed the various activities.

At the Ethics and Education Committee meeting in October, a bit more meat would be put on this short-term strategy, and the committee would also focus on the five-year game plan.

**THE CHAIRMAN** asked whether Mr Wade was looking for general confirmation that the committee was headed in the right direction.

**MR WADE** replied that this was exactly what he was seeking.

**DR SCHAMASCH** noted the need for an inventory of everything that already existed, in order to avoid reinventing the wheel. In terms of the training of experts and education, he highlighted the need for the proper dissemination, respect and knowledge of the Code. He congratulated the committee on a job well done.

**DECISION**

Ethics and Education Committee short-term education strategy report approved.

### 12. Other Business / Future Meetings

#### Sanctions

**MR BARNES** asked for the position of the Executive Committee on sanctions with respect to flags and national anthems.

**THE CHAIRMAN** replied that this was not something that WADA could do.

**MR BARNES** asked whether WADA staff or management would be recommending to the IOC any sanctions of this nature.

**THE CHAIRMAN** said that WADA would be making such a recommendation to the IOC.

**MR BARNES** asked whether the Executive Committee as a group agreed that it was acceptable to do so.

**THE CHAIRMAN** asked anybody not in favour of using all pressure possible on governments to say so.

**PROFESSOR HENDRICKS** said that he would not go for the banning of the flags from events.

**MR BLAIS** advised against speaking on behalf of some of the people sitting round the table, as a fair discussion had not been held on the matter. He did not want to see WADA wearing the WADA hat on an issue that was not of WADA jurisdiction.

#### Future meetings

**THE CHAIRMAN** said that it was necessary to fix a date for a Foundation Board meeting in June 2004, and colleagues should be given as much notice as possible.

**MR HOWMAN** said that the management team was trying to construct a calendar to avoid clashes with important sporting events.

**THE CHAIRMAN** instructed the management team to suggest some dates as soon as possible. He would assume that WADA would try to have an informal meeting of those members of the Foundation Board who would be in Athens. He made it clear that WADA would not pay for anything more than the coffee at the meeting in Athens.
The next meeting of the Executive Committee would be on 20 November 2003 in Montreal. The next Foundation Board meeting would be on 21 November in Montreal.

He thanked the members for coming to Montreal. The members had had some interesting and meaningful discussions, and they had had a chance to think of some of the issues involving what WADA was and where it was going, and how it was going to get there without much gas in the tank.

He appreciated the effort that everybody had made, especially to prepare for the meeting; good materials made for good preparation, and he thanked the staff for all of the work done, and the interpreters for trying to make sense out of everything that had been said.

**DECISION**

Executive Committee meeting to be held on 20 November 2003 in Montreal. Foundation Board meeting to be held on 21 November 2003 in Montreal.

The meeting adjourned at 4.15 p.m.

**FOR APPROVAL**

**MR RICHARD W. POUND, QC**  
PRESIDENT AND CHAIRMAN OF WADA