



**WORLD ANTI-DOPING AGENCY**

**MEETING OF THE HEALTH, MEDICAL AND RESEARCH  
COMMITTEE**

**OCTOBER 29, 2002  
MONTREAL, CANADA**

**SUMMARY NOTES**

- Present:** G. Wadler (Chair)  
C. Ayotte  
E. DeRose  
K. Muller  
J.C.Mbanya  
Bengt Saltin
- Apologies:** Barbara Drinkwater  
T. Friedmann  
M. Irie  
A. Ljungqvist
- Teleconference:** K. Fitch  
A. Pipe (for the Prohibited List)
- Staff:** R. Andersen  
A. Garnier  
O. Rabin  
C. Wade

**1) Welcome**

The Chair welcomed the Committee and thanked them for taking the time to attend. He also welcomed Dr. Olivier Rabin, our new Director of Science, Olivier introduced himself and gave a resume of his background.

## **2) Review and Approval of Previous Meeting Summary Notes**

The minutes were reviewed and accepted as is.

## **3) Presentation and discussion on HMR relevant sections of the 2<sup>nd</sup> version of the Code. Presented by R. Andersen (see Annex 1)**

A new draft of the code was completed October 10<sup>th</sup> 2002, and a copy was given to the Committee.

Copies of the draft code are to be sent out November 10<sup>th</sup> 2002, and feedback from stakeholders must be received no later than December 10<sup>th</sup>, 2002.

Following the receipt of feedback a new draft copy should be completed by February 20<sup>th</sup>, 2003. The Code is planned to be approved by all stakeholders at the World Conference early March, and subsequently approved at a WADA board meeting scheduled for March 5<sup>th</sup>, 2003.

Comments were made on a new board to be in place as of January 2003, which may not be fully aware of the process which led to the existing Code. WADA indicated that this point will be raised at the coming Executive Committee meeting.

In the transition phase from March 2003 to January 2004, the Code and Standards will be implemented, with the objective of August 2004 for full implementation by Sport Organizations and acceptance by the Governments. Government implementation will come in August 2006.

The major changes from version 1.0 to version 2.0 based on the valuable feedback from more than 120 entities were presented. All comments were very supportive of the Code, even when sometimes some criticisms were raised.

A clarification on section 1.4.3 of the Code was made to indicate that all substances can be monitored, even when not included on the Prohibited List. Social drugs will be monitored only in competition, not out of competition.

**4) Update on Laboratory standardization. Presented by C. Wade (Annex 2.)**

Action Plan:

November 10-11<sup>th</sup>, Laboratory standards to be sent out, with feed back to be received by January 10<sup>th</sup>.

WADA's approach based on ISO 17025 accreditation of laboratories by national bodies was presented, with one addition, WADA's LAROS (Laboratory Accreditation Requirements and Operating Standards) for accreditation by WADA. LAROS will cover Proficiency testing program, financial guarantee, experience and competence, sharing of knowledge, research, and adherence to a Code of Ethics.

A transition period is planned in 2003 between the IOC and WADA. A mixed IOC/WADA group has been constituted to make recommendations and prepare a common Action Plan for the transition period.

The following question was raised: can a laboratory other than the ones accredited by WADA be used for sample testing, for example when a sample needs to be analyzed very quickly?

The Code allows such possibility but a good rationale is needed. As a rule, laboratories must be accredited by WADA to give full validity and credibility to sample analyses.

The decision for Laboratory Accreditation will be internal to WADA based on a Committee decision.

Source samples for proficiency testing program will be handled through a contractor, likely to be identified following a tender.

**5) Therapeutic use exemption. Presented by C.Wade.**

Standards are mandatory as a need for a therapeutic approval process as indicated in the Code. A group chaired by Ken Fitch will establish a document by November 10<sup>th</sup>. Such documents will be circulated to stakeholders for review. Some elements may be kept in level 3 documents to address some specific medical conditions.

An issue was raised to know who will approve and monitor the therapeutic exemptions. WADA will establish criteria, but there is a need for a national level (i.e NADOs). WADA could establish a commission for a second level of control on a random basis and for special cases.

All data on therapeutic exemptions should be centralized in WADA clearing house. If abnormal cases arise, WADA should have the right to

investigate. WADA should give firm guidance on therapeutic exemptions (i.e to IFs and to NADOs) to minimize grey areas and double interpretations.

#### 6) **Update on Nutraceuticals. Presented by MC Asselin (Annex 3)**

Overall, there was little support for a product testing program. Arguments against included:

- Accredited labs would be unable to meet demands for testing
- Accredited labs should never be involved in any certification / guarantee program for supplements
- Would require enormous resources
- Would be unethical for WADA to get involved in such program
- Contradiction with education message
- Dangers of a positive test from a tested products and all liability attached

There was a general agreement that education is key and the first priority: maintaining the message that “supplements are not needed and represent a risk of positive test”.

#### Other suggestions:

- Need more scientific evidence to support the education message
- Use and promote more position papers published by health professionals regarding supplements
- Put onus on sport physicians, team doctors and other health professionals to be responsible for what their athletes ingest
- Engage in a campaign to governments to call for tighter laws on the supplement industry
- Work on changing the social environment to bring society to frown upon athletes who take supplements – create a supplement-free culture in sport
- Issue WADA position statements targeted at athletes, governments and then the sport community in general.

#### More ideas on the WADA Position Statement:

- Since US is considering changing its law to make nandrolone, DHEA, and all other related substances level 3 controlled substances (same as narcotics), the WADA should take a pro-active role and should aim at publishing its Position Statement before March 2003. Such paper should be formatted for and circulated to politicians to help them in their decision to impose better control on such substances. Also a



similar document in a different format should be prepared for athletes and the sport community. Such documents should:

- Include ephedrine and related stimulants in Statement
- Executive Summary format
- Message should include evidence that athletes do not need supplements
- Integrate the manufacturers' point of view into the Statement: Their strength and lobbying position cannot be ignored, so WADA needs to anticipate and consider their possible response to the Statement to counteract their eventual claims.

#### **7) Prohibited List. Presented by A. Pipe (by teleconference)**

Wada's list was approved by the Board. The list was presented in Lausanne and reviewed by the IOC. IOC had the feeling that WADA's recommendations were justified but cannot be implemented. So, many changes have been approved, but no product has been removed for the 2003 list. No recommendation has been made public to avoid any confusion.

It was suggested that should we want to lift a ban on any specific substances, we should think of prolonging the monitoring and documentation period keeping in mind that when we remove these substances from the list it must be permanent, we cannot change our mind after a certain period and put them back on the list without losing credibility. Position papers are in preparation to bring scientific basis to future decisions. We must also keep in mind that the minute this list is approved and released on the internet the ban is considered lifted immediately.

A proposal was made in June to monitor in and out of competition levels of caffeine, glucocorticoids and pseudoephedrine, to support changes to the list for next year. Historical data from anti-doping laboratories could be included. This could give useful information on in and out of competition levels for these three substances. WADA should take the lead in monitoring such substances.

A working group will meet between Jan.10 and Feb.10 in order to prepare the transition period before the WADA Prohibited list becomes official in January 2004.

#### **USADA meeting. Presented by C.Ayotte.**



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The USADA meeting was held earlier in October in Atlanta. Hematologists, sport and IF physicians, IF representatives, IOC, WADA and industry representatives gathered to discuss blood doping.

Preliminary report sponsored by WADA on the EPO urine test was presented by Dr. Peltre.

The conclusions of the meeting were that the EPO urine test is valid for detecting rhEPO. Some technical improvements to the method could probably improve its sensitivity ; Blood sampling should be continued to detect blood transfusions, blood substitutes and other substances to come. Longitudinal follow-up is a need in blood doping. Hemoglobin is a robust parameter for blood testing.

#### **Update on Dr. Peltre's report. Presented by O.Rabin**

Report has been delayed because Dr. Peltre was expecting to receive data on blood detection which are currently submitted for publication by various authors. Dr.Peltre preferred to wait to receive all information to include in his report, to ensure his report encompasses the forefront of science in this area.

A forum of discussion with a limited number of laboratories is being prepared under the auspice of WADA to create a concerted view on the EPO urine criteria. This information will then be shared with other laboratories and administrative bodies. The forum will also be used in the near future to create a discussion on the improvement of sensitivity of the method with all the laboratories practicing this method.

Harri Syväsalmi came to the meeting to welcome Olivier Rabin and Violet Maziar as new members of WADA. He also emphasized the important achievements of WADA over the past two years.

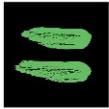
HS indicated that financial aspects will be an important issue at the coming Board meeting. Some countries take longer to pay their contribution than expected.

In January, the Board members will be renewed, some will stay, some will go, and new members will come.

HS also invited the HMR Committee members to reflect upon the changes which could be envisaged for the Committee and the working groups. Now that WADA is structured with a group of 30 people, the Committee roles need to be redefined.

#### **7) Research projects. Presented by O. Rabin and C. Ayotte.**

OR presented WADA financial commitments for research projects in 2001, and the perspectives of financial support for research projects in 2002 and



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2003. Not all contributions having been transferred to WADA, the budget for research projects is very tight. Hopefully more contributions will arrive soon, but WADA has no guarantee and does not exactly know, as of today, how much money will be available to support research projects. As of today, the research project budget is far below expectations. It was emphasized that the delay for funding research projects comes from the delayed contributions and not from the scientific review and approval process.

29 projects were reviewed, 2 were carried over from last year, 4 were rejected since they were too far off from the 5 categories WADA had defined initially. Each project was sent to two independent reviewers for scientific evaluation.

Not all projects are of high scientific value or fully relevant to anti-doping research. In the future, WADA may decide to be more precise and specify exactly what kind of research project we need to fund.

WADA would like to link to other agencies to optimize the research resources, and avoid that a same project be funded twice by two different agencies, including WADA. Any project submitted to WADA, and for which the investigator has deliberately or not omitted to inform WADA of another grant application somewhere else, will be systematically excluded.

Instead of a peer-review process, a proposal would be to have the projects of a same category reviewed by the same independent reviewers. This would ensure better harmonization of the reviews, but would probably be more time consuming.

Next year, it is anticipated that the definition of the research areas will occur in March. Call for projects will run from March to May. The peer-review process could be conducted in June. Recommendations for funding would be made early September, with an ethical review in September. The objective will be to have the projects ready for approval by the Executive Committee early October.

The Ethical process will be closely discussed with the Director of Ethics and Education, an independent but timed review process will be implemented next year.

The projects have been reviewed by the Committee.

Projects will be circulated to the Committee members in the days following the meeting for final decision, as not all peer-reviews have been received by WADA.



**Next Meeting:** The next meeting will be organized in the days surrounding the World Conference in Copenhagen in March 2003 (A date will be proposed after review of the World Conference with Casey).