

A COMPETITORS GUIDE TO DOPING AND THE MSA ANTI-COPING CODE

The world Anti-Doping Agency (W.A.D.A) anti-doping code, the FIM and MSA anti-doping codes, which incorporate all statues of the W.A.D.A anti-doping code, all come into full effect on 1st July 2004. These codes have importance for all competitors and the codes identify:

1. Those medications, vitamin and nutritional supplements which are prohibited for use by all competitors;
2. Those methods which are prohibited for use by all sports competitors;
3. The sanctions which may be applied for violation of articles of the anti-doping codes.

The MSA anti-doping code, furthermore, identifies medications, vitamin and nutritional supplements which are allowed for general use by sports competitors.

MSA does not tolerate the use of prohibited substances, recreational drugs or alcohol in competitive motorsport. It is, therefore, vital that every motorsport competitor obtains from the MSA offices and reads the MSA anti-doping code. Failure to comply with this suggestion may result in competitors being identified as having violated the anti-doping code through ignorance and thus, being liable for sanctions.

What is Doping?

The detection of the presence of any prohibited substance or any of its breakdown products in a specimen provided by a competitor under strictly regulated conditions, constitutes a violation of the anti-doping code. This applies equally to confirmed evidence of the use of a prohibited method.

Responsibility and Liability

The presence of a prohibited substance in a bodily sample or evidence of the use of prohibited method by a competitor is the sole responsibility of a competitor and nobody else. It is, therefore, essential that every competitor knows exactly what is going into their body in the form of food, medication and vitamin and nutritional supplements. For this reason, the MSA anti-doping code itemises, in detail, all both allowed and prohibited substances available in South Africa and every competitor is urged to consult the anti-doping code prior to taking any substance.

All officials, support personnel, parents, trainers and medical and paramedical personnel who are found to have supplied or administered the prohibited substance or method to a competitor are equally liable to be sanctioned. This may, in the near future, include the laying of criminal charges.

Evidence that the administration of the prohibited substance or method resulted from the actions of another person will not reverse the doping code violation but may, only may, result in a reduced sanction.

Chronic or Life Threatening Diseases.

Although many drugs that are utilised for the treatment of life threatening conditions are included in the list of prohibited substances, all the anti-doping codes make provision for these substances to be taken legally. Should a competitor identify that they are currently taking a prohibited substance, the competitor is requested to apply for a therapeutic use exemption or T.U.E. The application forms are available from MSA Head Office. There are 2 types of form, the abbreviated and standard T.U.E. form; The abbreviated form is used for certain asthma inhalers and cortisone inhalers and drops, and the standard form for all the other prohibited substances, for example, insulin in diabetes, high blood pressure medication, etc.

The appropriate form must be completed in detail by the competitor and their medical practitioner. The completed forms must be submitted to MSA Head Office, who will forward the form to the South African Institute for Drug Free Sport (S.A.I.D.S) who will reach a decision and notify the competitor directly of their decision.

T.U.E.S. will not be granted for all applications as W.A.D.A. has determined that certain drugs are totally prohibited.

The failure of a competitor who is taking a prohibited substance to apply for a T.U.E. will mean that, should the competitor test positive for a prohibited substance, the competitor has no defence against a doping violation.

Emergency Treatment

Should a competitor suffer an acute illness, such as an allergic reaction to a bee sting, which must be treated by the intravenous administration of prohibited drugs like adrenaline and cortisone, in the week before a race, the competitor must obtain a detailed medical report from the treating doctor. A copy of the report must be submitted to the Clerk of the Course and the Chief Medical officer/Co-ordinator for the event.

The 2005 Prohibited List

1. Caffeine has been withdrawn from the list of prohibited substances.
2. Intravenous fluid infusions are now prohibited as a doping method, but may be used for legitimate acute medical purposes.
3. Alcohol, recreational drugs and cannabis remain prohibited in competition.
4. All asthma inhalers are prohibited both in and out of competition.

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PROHIBITED LIST OF SUBSTANCE AND METHOD 2005.
MODIFICATION TO THE 2004 PROHIBITED LIST

THIS PUBLICATION REPLACES SPECIFIC ARTICLES OF THE 2004 MSA ANTIDOPING CODE.

1. Article 3 and Article 4, Page 25 are replaced as follows:

1.1 Substances and methods prohibited at all times (Both in and out of competition)

1.1.1 Prohibited substances (Code S)

- S1 Anabolic agents (Both Endogenous and Exogenous)
- S2 Hormones and related substances
- S3 Beta 2 agonists
- S4 Agents with anti-oestrogenic activity
- S5 Diuretics and other masking agents

1.1.2 Prohibited Methods (Code M)

- M1 Enhancement of oxygen transfer.
- M2 Chemical and physical manipulation of urine samples
- M3 Gene Doping

1.2 Substances and methods prohibited in competition

All categories under section 1, plus;

- S6 Stimulants
- S7 Narcotics
- S8 Cannabinoids
- S9 Glucocorticosteroids (Cortisone products)

1.3 Substance prohibited in particular sports (Code P)

- P1 Alcohol
- P2 Beta Blockers

1.4 Specified Substances

2. The following specific changes have been made to specific categories, substances or methods:

2.1 Substances and methods prohibited at all times (Both in and out of competition)

2.1.1 S1 Anabolic Agents

2.1.2 Anabolic Androgenic Steroids

2.1.2.1. Exogenous (Synthetic products not produced in the body)

Nine substances have been added to the list which includes: Calusterone, Delta 1 Androstenediol, Ethylestrenol, Furzibol, Methyl-dienolone, Methyl-Trienolone, Norclostebol, Tetrahydro Gestrinone. The term Biological replaces Pharmacological.

2.1.2.2. Endogenous (produced naturally in the body)

This list is close as all known Endogenous Anabolic steroids have been identified. These substances are taken by competitors to either enhance performance or to alter steroid profiles in urinary analysis, thus masking results. The T/E ratio (Testosterone/Epi-testosterone) ratio has been reduced from 6:1 to 4:1. A T/E ratio or further investigations are not required where the anabolic steroid identified is an exogenous product.

- 2.1.3 Other Anabolic Agents
Zildaterol has been added to this list.
- 2.1.4 S2 Hormones and related substances
The term biological replaces pharmacological. Mechano growth factors (M.G.Fs) have been added. Substances previously identified as prohibited in men only are now prohibited in all competitors, men and women.
Gonadotrophins now form 1 category.
- 2.1.5 S3 Beta 2 Agonists
All Beta 2 agonists are prohibited in and out of competition. Only Formoterol, Salbutamol, Salmeterol and Terbutaline may be used after approval of an abbreviated T.U.E.
- 2.1.6 S4 Agents with Anti-Oestrogenic Activity
This category has been divided into the following subsections:
- 2.1.6.1 Aromatase inhibitors;
 - 2.1.6.2 Selective Oestrogen receptor modulators;
 - 2.1.6.3 Other Anti-Oestrogenic Compounds. Substances previously identified as prohibited in men only are now prohibited in all competitors, men and women.
- 2.1.7 Diuretics and other masking agents
Accent is placed on diuretics.
Albumin is now included as a masking agent. Alpha Reductase inhibitors (Finasteride, Dutasteride) have been included as masking agents. Mersalyl has been removed from the list of diuretics, metolazone has been added.
- 2.1.8 M2 Chemical and Physical Manipulation
Intravenous fluid infusions are now prohibited as a doping method. Such fluids may be used for legitimate medical indications.
- 2.1.9 Gene Doping
The modulation of gene expression is now recognised as a doping practice.

3. Substances and methods prohibited in competition

All the categories already mentioned are prohibited in competition. The additional categories prohibited in competition include:

- 3.1. Prohibited substances
- 3.1.1. S6 Stimulants
Fencamine and Famprofazone have been added to the list.
Adrenaline is allowed for acute emergencies.
 - 3.1.2. S7 Narcotics
Fentanyl and its derivatives are prohibited.
 - 3.1.3. S8 Cannabinoids
Cannabis is prohibited in competition.
 - 3.1.4. Glucocorticosteroids (Cortisone Products)

Cortisone inhalers and eye and ear drops are allowed with and application for an abbreviated T.U.E.

Cortisone skin creams and ointments are no longer prohibited.

Cortisone products that are administered orally, rectally, intravenously and intramuscularly are all prohibited.

4. Substances Prohibited in Particular Sports

4.1 P1 Alcohol

Alcohol remains prohibited.

4.2 P2 Beta Blockers

Beta Blockers remain prohibited.

4.3 P3 Diuretics

This category which prohibited the granting of a T.U.E. for diuretics in weight classified categories has been removed.

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