



IPF ANTI-DOPING Q & A

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INTRODUCTION

Doping in Powerlifting is the burning issue of our sport. It has become a complicated political, moral and technical battlefield, but the IPF remains committed to winning the war on drugs.

Many lifters and officials find the now extensive rules and regulation on anti-doping difficult to keep up with. However as anti-doping work intensifies, it is necessary to close loopholes, allow for reasonable exceptions, make penalties fairer and so on, to create a balanced but effective system, but this increases the complexity of the system.

Thus all those in Powerlifting owe it to themselves and their sport to remain abreast of the IPF anti-doping system. To help with this, following are some of the typical questions asked by athletes and others about IPF doping control. Answers are kept as simple as possible and reflect the changes to the system which commenced on 1st January 2009.

However the following information is no substitute for close study of the full IPF Anti-Doping Rules. If in any doubt the athlete should rely on those Rules. The answers here are merely signposts to that complete document.

Robert Wilks
Chairman IPF Anti-Doping Commission
1st January 2009

Q1. WHAT IS DOPING?

Doping in sport is the practice of an athlete using, or attempting to use, one or more specified drugs which may enhance their athletic performance. The concept of doping extends from this to also include instances of the athlete not cooperating with doping control methods, trafficking drugs, possessing a performance enhancing drug or being involved with another athlete carrying out a doping practice.

Q2. WHY IS DOPING PROHIBITED?

Doping is prohibited in Powerlifting and virtually all other sports as it is universally regarded as a practice which renders sport artificial. Sport is a social institution, based on the athletes' expression of their skill, native ability and dedication. If athletic contests are significantly determined by the arbitrary use of external chemical agents, then those ideals are rendered meaningless and the pedagogy and beauty of sport is lost. Further, many prohibited doping agents involve significant negative health effects, further undermining the value and purity of sport and exposing athletes to needless risk.

Q3. HOW DOES THE IPF CONTROL DOPING?

The IPF has involved itself in the definitive world-wide anti-doping initiative, the **World Anti-Doping Agency (WADA)**. The IPF follows the practices and regulations of WADA in terms of directly conducting drug-testing on its international standard athletes and imposing penalties if such tests reveal the presence of performance-enhancing drugs in the athlete, as well as regulating other doping practices such as trafficking, tampering, etc. In turn, the IPF requires its member nation federations to conduct similar national-level doping control programmes and oversees those national programmes. **The IPF Anti-Doping rules** set out the IPF anti-doping regulations. Click here for the IPF Anti-Doping Rules -

http://www.powerlifting-ipf.com/fileadmin/data/Anti-Doping/IPF_Anti_Doping_Rules_2009-final.pdf

Q4. WHAT EXACTLY IS WADA? WHAT IS THE WADA CODE? AND WHAT IS AN ADO?

WADA is a world-wide agency founded in 1999 by the resolve of many national governments. Its mission is to promote and coordinate the fight against doping around the World. WADA's guiding document is the **WADA Code**, a series of articles setting out its principles and methods. That Code is supplemented by many WADA technical documents. WADA's head office is in Montreal, Canada and it has branch offices around the world. More details about WADA are available on its website: <http://www.wada-ama.org>

The IPF is connected to WADA by being recognized as an **Anti-Doping Organization (ADO)**. That is, the IPF has been formally accepted by WADA as the only international Powerlifting body which has set up anti-doping rules and practices consistent with the WADA Code. This recognition of the IPF began in 2004 and WADA has since monitored the IPF's performance as an anti-doping body and has found the IPF to be code-compliant i.e. satisfactory in its rules and practices. It is this status as an ADO that gives the IPF its authority to apply anti-doping programmes to its athletes and to supervise national doping programmes

Q5. WHERE DO APPROVED LABORATORIES SIT IN THE ANTI-DOPING SYSTEM?

Analytical laboratories may be set up by governments, universities or private organizations and these offer the service of analysing the urine or blood samples taken from athletes, to determine if prohibited substances are present in a sample. Such laboratories will generally seek to be approved by WADA. That is WADA will examine the soundness of the laboratory's technical and other procedures; if satisfactory WADA will add a laboratory to its list of approved labs and ADOs, such as the IPF, may use that laboratory for the analysis of samples taken in drug-testing. For a list of approved laboratories see -

<http://www.wada-ama.org/en/dynamic.ch2?pageCategory.id=333>

Q6. WHAT IS THE WADA PROHIBITED LIST?

WADA publishes a list, updated at the beginning of each year, of substances and methods that are prohibited in sport. This includes various anabolic agents, hormones, diuretics, stimulants, narcotics and other drugs and methods, including gene doping.

When an athlete's urine or blood sample is taken in a drug-testing process, that sample will be sent to a WADA-approved laboratory and the laboratory will report back to the ADO (i.e. the IPF) whether a substance on the prohibited list has been detected in the sample or a prohibited method (e.g. urine substitution) has been attempted on the sample. To view the Prohibited list see –

http://www.wada-ama.org/rtecontent/document/2009_Prohibited_List_ENG_Final_20_Sept_08.pdf

Athletes should study the WADA Prohibited List and be quite familiar with its content, as the **principle of strict liability** applies i.e. if a laboratory reports to an ADO, such as the IPF, that a prohibited substance has been found in, or a prohibited method applied to, an athlete's urine or blood sample, that is an absolute finding, the athlete almost certainly cannot be excused for having that irregularity with their sample.

One question that is often asked is whether caffeine is on the Prohibited List. Caffeine was removed from the list some years ago, but remains a substance monitored by WADA, with the possibility of it again being added to the list if there is evidence of abuse of caffeine by athletes.

Q7. BUT WHAT IF FOR GENUINELY MEDICAL REASONS I NEED TO TAKE A DRUG WHICH IS ON THE WADA PROHIBITED LIST?

The WADA and IPF anti-doping system allows for this, if the athlete can establish that there is a genuine medical need for this drug.

To do this, the athlete must make an application for a **Therapeutic Use Exemption (TUE)** by means of completion of a standard form, which is submitted to the IPF Medical Committee. Click here for an IPF TUE application form –

http://www.powerlifting-ipf.com/fileadmin/data/Anti-Doping/TUE_Application_Form.doc

The TUE form requires medical documentation of the athlete's need for the drug. Efforts have been made to simplify the TUE process as from 2009, but it remains an area where athletes must be vigilant. For example, where an athlete needs to use an inhaled **beta-2 agonist** as a treatment for asthma, up to 2008 they had been required to submit an abbreviated TUE in advance. However, from 1st January 2009 only high-level athletes who are in the IPF's Registered Testing Pool (See Question 9) need an approved Standard TUE for asthma prior to using the substance. Athletes not in the IPF's Registered Testing Pool who inhale formoterol, salbutamol, salmeterol or terbutaline to treat asthma or one of its clinical variants do not need a TUE in advance of participating in an international competition, unless for some special reason requested to do so by the IPF. Generally such non-RTP athletes must declare their use on the Doping Control form at the time of testing. Also any such non-RTP Athlete may apply for a retroactive TUE subsequent to a competition, if the medication is found in their drug-testing sample - see article 7.13 etc. of the International Standard for Therapeutic Use Exemptions (ISTUE). Any such granting of a retroactive TUE has to comply with the criteria set forth in this ISTUE. See

http://www.wada-ama.org/rtecontent/document/TUE_Standard_2009_Final_031008.pdf

Athletes using the substances listed above by inhalation must have a medical file justifying this use and meeting the minimum requirements outlined in Annex 1 to the ISTUE.

No retroactive TUE will be granted if the requirements of Annex 1 to the ISTUE are not met - meaning that any positive sample reported by the laboratory in these circumstances will be counted as an anti-doping rule violation!

Another area where declaration of use is needed is in the case of **Glucocorticosteroids (GCS)** used by non systemic routes, namely intraarticular,

periarticular, peritendinous, epidural, intradermal injections and inhaled route. With these the athlete must provide a simple declaration of use to the IPF Medical Committee that includes the diagnosis, the name of the substance, the dose undertaken, and contact information of the medical doctor who administered the treatment, this at the same time as the use starts. In addition, the Athlete must declare the use of the substance in question on the Doping Control form at the time of testing.

http://www.powerlifting-ipf.com/fileadmin/data/Anti-Doping/Declaration_of_Use.doc

Once again, it can't be emphasized too much that it is essential that athletes who use any medication which may be on the Prohibited List familiarize themselves with the List, the requirements of the IPF and WADA TUE process and if still in doubt should contact the IPF Medical Committee. Remember any lack of vigilance on your part can end with you having a positive drug test result and serving a suspension!

Q8. IS IT OK TO USE SPORT SUPPLEMENTS?

Many supplements are commercially available, often heavily advertised as being performance enhancers. These range from protein powders, to herbal products to various exotic substances. The claims made for those products almost invariably exceed their substantiated benefits.

From the anti-doping perspective, the danger with many commercial supplements is that they may be tainted with prohibited substances. Alarming high rates of such contamination have been documented in independent analyses of supplements purchased over the counter in health food shops or the like. The contamination can come about either inadvertently, through less than sterile conditions in the manufacturer's production facility, or deliberately, such as when a manufacturer laces a supplement with an anabolic steroid, to give it an effect it would not otherwise have. Remember, the **principle of strict liability** (see Question 6) applies in drug-testing and if an athlete has inadvertently ingested a prohibited substance via a supplement and that is detected in his or her sample, which will almost certainly stand as a doping offence.

Given that there is significant risk and little objective gain in using supplements, athletes are advised to avoid using these altogether.

Q9. HOW DOES THE IPF CHOOSE WHO TO DRUG TEST?

Fundamentally, the IPF can test any athlete at any time, as long as that athlete is a member of an IPF-affiliated national federation.

More particularly, IPF testing can be divided into in-competition testing (ICT) and out-of-competition testing (OCT).

ICT is conducted at international competitions, such as when 2 or 3 or more athletes are selected immediately after competition in a particular weight class is completed.

OCT can be conducted at any time, any day of the year, at any location. To be able to carry out OCT, the IPF requires a number of high-level lifters to provide an ongoing log (called Whereabouts) of their daily location around the year, using WADA provided software called ADAMS (Anti-Doping Athlete Management System) – see Appendix 3 of the IPF Anti-Doping Rules. However the IPF can also use national federation information, competition entry forms and other sources to locate athletes to conduct OCT.

For both ICT and OCT, selection of particular lifters for testing is not necessarily random. Selection is mostly targeted, on the basis of criteria suggested by WADA e.g. changes in performance, abnormalities in previous tests, behaviour indicating doping and so on – see Appendix 4 of the IPF Ant-Doping Rules.

In addition to the IPF ICT and OCT systems, each national federation is expected to conduct a national-level ICT and OCT programme and many nations do so with government assistance.

Q10. WHAT DO I ACTUALLY GO THROUGH IF I'M SELECTED FOR A DRUG TEST?

Appendix 4 of the IPF Anti-Doping Rules gives a sense of the process of the conduct of a drug test.

Essentially, be it at a competition or out of competition (such as at your home or training venue), you will be approached by the **Drug Control Officer (DCO)**, informed that you have been selected for a drug test and given a written notification of that, which you will be asked to sign. From there you will be accompanied by a **Chaperone** and/or the DCO until you attend at the testing facility. A representative you choose may also accompany you through this process.

At the testing facility you will be called on to provide a urine and/or blood sample, with a Chaperone of the same gender observing the process. Then with you observing, the sample will be split into two (the **A and B samples**) and sealed into separate, secure containers and you will be asked to sign that you have been satisfied with the sample collection process. You will also be asked to declare any medications or supplements you may have taken in the preceding 7 days.

From there you will be excused and the sealed samples will be transported in conditions of medical-standard security to the WADA accredited laboratory. There sample analysis will be carried out and in due course the IPF and then yourself will be notified of the result.

As Appendix 4 indicates, the full process is more complex than in this simple description and involves many technical features to ensure the integrity of drug-testing. Suffice to say that this process has been refined over some decades now and is very sound indeed.

Q11. WHAT HAPPENS IF I DO RECORD A POSITIVE DRUG TEST RESULT?

The IPF Anti-Doping Rules set out a process for the careful handling of seemingly positive drug test results. These are described mostly in Articles 7 and 8 of the Rules.

In essence, if a sample result is received from a laboratory which has been determined by that lab to be an “**adverse analytical finding**”, the first step is for the IPF Disciplinary Committee to check whether the athlete has a TUE (previously lodged or retroactive - see Question 7) which might explain the finding, or whether there might be some other departure from normal standards in the laboratory which could explain the abnormal result.

If that first examination does not clear up the adverse finding, the lifter is notified and allowed the option of having the second half of his or her sample (the B sample) analyzed, with the athlete and/or their representative allowed to be present at that analysis. If the B analysis confirms the A analysis (or the A analysis is accepted due to the athlete not making a B analysis request), the athlete, his or her national federation and WADA are notified and also the athlete is usually provisionally suspended by the IPF (after allowing for a provisional hearing on the matter).

After that, the case will be referred to the IPF Doping Hearing Panel (DHP). The DHP will appoint three independent persons, at least one of whom is a lawyer, who will conduct a hearing on the case. In such a hearing, the athlete has the right to be represented, to respond to the alleged violation, to present evidence and to question witnesses. Subsequent to the hearing the DHP will present its decision in writing, that including the penalty to be applied.

Cases where the alleged violation does not involve an adverse test sample, such as tampering or possession, follow a similar progression to the above, although with the IPF Disciplinary Committee conducting a more wide-ranging investigation.

Q12. WHAT PENALTIES CAN APPLY IF I AM ULTIMATELY FOUND TO HAVE COMMITTED AN ANTI-DOPING VIOLATION?

In past years, penalties for anti-doping violations were somewhat standard, often being 2 years suspension for a first offence and life for a second offence.

However from 1st January 2009 the penalties for anti-doping violations are more complex and flexible. Generally, a positive drug test result for an anabolic agent; possession of same, or like offences, will have benchmark penalties of two years for first and life suspensions for second offences. However aggravating or mitigating circumstances may alter such penalties e.g. the athlete may be allowed a reduced penalty if they assist in establishing anti-doping violations by others. On the other hand, offences such as trafficking now attract penalties of a minimum of four years suspension and a maximum of life for first offences.

Note also that suspension periods apply to involvement by the athlete in competition, coaching, officiating or the like, at any level, be it international, national or local. However during a period of suspension the athlete must remain available for testing. If the athlete does participate in a competition during his or her suspension period, their suspension time can start over again.

Article 10 of the IPF Anti-Doping Rules sets out the parameters for anti-doping violation penalties and presents examples. This should make salutary reading for IPF athletes and the best advice is to avoid any involvement at all with illicit substances!

Q13. IF I WAS COMING BACK FROM A SUSPENSION, WOULD ANY CONDITIONS APPLY?

Yes. Article 10.11 of the IPF Anti-Doping Rules sets this out. Firstly, during the period of suspension the athlete must remain available for OCT by the IPF and thus could be tested any number of times. Article 10.11 also imposes a second requirement, that the IPF test the athlete at least once just prior to the end of their suspension time.

Further, as with almost all aspects of the IPF international anti-doping programme, it is expected that National Powerlifting Federations apply similar rules in their domestic programmes. So if an athlete was suspended on the basis of a national anti-doping offence, they would similarly have to stay a member of the national federation and thus testable for the period of suspension and also be tested at least once at the end of the suspension time.

Q14. I'VE HEARD THAT ATHLETES CAN BEAT TESTING BY USING TESTOSTERONE INSTEAD OF ANABOLIC STEROIDS. IS THAT TRUE?

In the WADA Prohibited List testosterone is a prohibited substance, in the category Anabolic Agents.

Testosterone use by an athlete can be detected, in more than one way. Firstly, in recent years methods have been developed for the direct identification in the sample of the artificially introduced (by injection, patch, tablet, inhaling, etc.) testosterone substance.

However there is also a second method of detection, involving analysis of the pattern of ratios of various natural hormones in the body, which will inevitably be altered by the introduction of large quantities of external testosterone. Thus if an athlete produces a sample which reveals some unusual ratios or quantities of various natural hormones, that data is held and compared with previous test data for the same athlete, or a series of further tests are conducted on the athlete. WADA has provided technical criteria for the interpretation of these series of data and a certain pattern can be declared to show a positive test result.

The total time span over which tests can be made on an athlete and data analyzed can extend to 8 years. Thus use of testosterone can perhaps allow for evasion for a period, but in the end detection is probable.

Q15. IF I DECIDE TO RETIRE FROM POWERLIFTING HOW DO I END TESTING ON MYSELF?

If an athlete wishes to retire from Powerlifting, he or she needs to make a formal, written declaration of this to the IPF if they are on the IPF's RTP list (see Question 9) or if they are currently subject to proceedings for an anti-doping violation or they are serving a period of suspension.

Article 5.6 of the IPF Anti-Doping Rules sets out the basic procedures for retirement and also for comeback if an athlete formally retires and then later decides to again compete. In essence, to retire you should give written notice to the IPF and your retirement date is the date that notice is received. Your involvement in the anti-doping programme would essentially cease at that point. However there are provisions elsewhere in the Rules such that the hearing process for an alleged anti-doping violation cannot be thwarted by retirement, whilst a period of suspension effectively goes on hold if the suspended athlete retires i.e. the suspension clock stops and the time remaining on the suspension stands, to be served if and when the athlete comes back.

If a retired athlete wishes to come back to competition he or she must give written notice of that to the IPF. From the date that notification is received, the athlete must wait 6 months before they can again compete and in that time they are subject to OCT.

Again, those rules on retirement and come back essentially apply to international level athletes, who are on the IPF's RTP or involved in violations or suspensions. However it is also the case that national federations and agencies have similar rules which apply to national-level athletes and you should check these with your federation.

Q16. THIS IS A TOUGH SYSTEM. HOW LONG WILL THIS CONTINUE?

Forever. Unfortunately there is no sign of any method for preventing drug use in sport without a system of surveillance, detection, enforcement and sanctioning. Virtually all sports federations and governing bodies around the world condemn the use of drugs as also do, on the whole, governments and the public. Hence the impetus will remain for creating an even more sophisticated and effective anti-doping system in sport and the IPF will be a significant participant in that.

Robert Wilks
IPF Anti-Doping Commission