



Doping: harms and harm reduction

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Outline

- Doping and performance enhancement: definitions and regulations
- War on drugs, war on doping: similarities
- Doping and myths of harms
- Doping and harms
- Doping and causes of harm
- Doping and harm reduction

What is doping?

- “Doping is defined as the occurrence of one or more of the anti-doping rule violations set forth in Article 2.1 through article 2.8 of the World Anti-Doping Code.” (WADA)
 - =Use of a substance on the list of forbidden substances defined by the WADA
- Enhancement: use of a variety of substances, including medications, procedures and even devices that are intended to improve performance (sports, cognitive, other) in a healthy individual. Some of these substances are naturally occurring, easily available and completely legal while others are manufactured, illegal, or banned

War on doping

- World Anti-Doping Agency (1999) aims at « eradication of doping »
- Means: tracking and punishment for violations of the anti-doping rule
 - use or attempted use of prohibited substances,
 - presence of a prohibited substance, or its metabolites or markers, in an athlete's urine or blood sample (strict liability rule)
 - violation of the athlete's obligation to inform about his/her 'whereabouts'
 - tampering or attempted tampering with doping control procedures
 - possession of prohibited substances

Anti-doping today

- ‘Whereabouts’ (obligation to announce in advance where the athlete is, 365 days/year)
- Urine, blood, hair analysis
- Athlete (biological) passport
- DNA
- ‘Strict liability’
- In several countries accompanied by national legislation allowing repression, property searches and punishment
- Other problem: false positive/negative lab results

War on doping, war on drugs: similarities

- zero-tolerance approach
- ideology encroaching on human rights and public health principles
- arguments justifying prohibition lacking scientific evidence
- high cost using public money for repression and control
- impossibility to attain their declared objective: doping and drug use continue
- unintended side-effects of prohibitions such as black markets controlled by organized crime
- tendency to merge: cannabis=forbidden substance

IHRA (2009)

- *“Politicians, policymakers, communities, researchers, frontline workers and people who use drugs should ascertain: What are the specific risks and harms associated with the use of specific psychoactive drugs? What causes those risks and harms? What can be done to reduce these risks and harms?”*

Doping and harms

Harms at different levels:

- Harm that the doping athlete inflicts to her/himself
- Harm to other athletes
- Harm to the sport
- Harm to the spectators and to society in general

Doping and myths of harms

- The war on doping is accompanied by strong rhetoric on the excessive danger of performance enhancing drugs (ex: doping deaths)
- *'The issue of 'doping deaths' has become a baseless cliché in the expert literature as well as in the lay press, serving an ideological agenda: the one promoted by anti-dopism in order to advance its stance on performance-enhancing substance intake in elite sport, and to ensure a broad acceptance of a 'politics of fear' to eradicate it.'* (López, 2013)

Tom Simpson, 1967

- A steep and long climb, hot day
- Amphetamines?
- Or a heatstroke and lack of emergency care?



Doping and harm to the individual

Preliminary remarks:

- Anti-doping argument: « protection of the health of the athlete »
 - But....sport as such and accepted « natural » enhancing techniques have a high baseline risk
- Athletes live longer than the general population

Doping and harm to the individual

- Doping: direct and indirect consequences
- Direct harms:
 - related to the substance (e.g. high anabolic steroid use
-liver damage, hormonal changes; high EPO-high
hemoglobine-blood clotting/thrombosis)
 - good data lacking (hidden populations)

Doping and harm to the individual

Indirect harms:

- Harms related to the way substances are used (injections: abscesses, hepatitis)
- Harms related to impure or mislabelled uncontrolled substances from the black market
- Consequences of the regulations of anti-doping for the athlete: loss of autonomy, consequences of “where-about rules” and of public blaming
- Consequences of the rules of sports federations or clubs to “punish” athletes who are tested positive on doping tests (NB false-positives!)

Other harms of doping

- Harm to other athletes:
 - Coercion
 - Bodily harm to others due to effects of doping
- Harm to the spirit of sport:
 - Contrary to the « spirit of sport »?
 - Savulescu (2004): exclusion of performance enhancing substances is illogical
- Harm to the society:
 - Belief that « doping works », so potential of increase of use, but data are scarce
 - Criminality related to the black market

What causes harm in doping?

- Much of the harm of doping - be it for the individual athlete, the other, the image of sport or the society - seems to be **more related to anti-doping** than to the use of the performance enhancing methods or substances as such
- The important pressure on athletes to perform, the almost religious admiration and the important financial incentives for the winner can be considered also indirect causes of harm (Kirkwood 2009).

What can be done to reduce these risks and harms?

- Reconsider « war on doping » and test alternative policies (e.g. max haemoglobin level)
- Reconsider the list of doping substances, based on scientific evidence (e.g. take out cannabis)
- Introduce « harm reduction » in doping and enhancement policies:
 - elite and amateur athletes should have access to clear and objective information on advantages and risks of performance enhancement practices and substances
 - populations with documented risk such as anabolic steroid users should have access to sterile injecting equipment, hepatitis B vaccination and screening for HIV and viral hepatitis. Examples exist (UK)

What can be done to reduce these risks and harms?

- Abandon the “spirit of sport” criterion for inclusion of substances on the “list”, only health arguments
- Access to medical care should be made possible; physicians should be knowledgeable and have a non-judging attitude towards performance enhancing substances and methods.
- Athletes and non-athletes with problems in quitting substance use should have low threshold access to care
- Stop stigmatizing athletes who test positive for doping

Difficulties in introducing a HR approach in the field of doping

- UNESCO has formulated an International Convention against Doping in Sport, based on WADA code, signed by many member states
- IOC imposes WADA code for participation
- Commercial interest (laboratories, etc)
- Lack of « user's movement »
- Not clear who can take the leadership for change

Summary

- Performance enhancement, doping and anti-doping can induce harms at different levels.
- These harms are not well evaluated, often based on myths, and for an important related to anti-doping
- Any doping policy should include harm reduction measures, as part of a coherent policy, that protects the health of the athletes
- Alternative policies should be tested and their impact evaluated

Thank you for your attention!



[Milk. Natural doping]