COUNCIL OF EUROPE CONSEIL DE L'EUROPE

European Treaty Series - No. 135

ANTI-DOPING CONVENTION

Strasbourg, 16.XI.1989

Preamble

The member States of the Council of Europe, the other States party to the European Cultural Convention, and other States, signatory hereto,

Considering that the aim of the Council of Europe is to achieve a greater unity between its members for the purpose of safeguarding and realising the ideals and principles which are their common heritage and facilitating their economic and social progress;

Conscious that sport should play an important role in the protection of health, in moral and physical education and in promoting international understanding;

Concerned by the growing use of doping agents and methods by sportsmen and sportswomen throughout sport and the consequences thereof for the health of participants and the future of sport;

Mindful that this problem puts at risk the ethical principles and educational values embodied in the Olympic Charter, in the International Charter for Sport and Physical Education of Unesco and in Resolution (76) 41 of the Committee of Ministers of the Council of Europe, known as the "European Sport for All Charter";

Bearing in mind the anti-doping regulations, policies and declarations adopted by the international sports organisations;

Aware that public authorities and the voluntary sports organisations have complementary responsibilities to combat doping in sport, notably to ensure the proper conduct, on the basis of the principle of fair play, of sports events and to protect the health of those that take part in them;

Recognising that these authorities and organisations must work together for these purposes at all appropriate levels;

Recalling the resolutions on doping adopted by the Conference of European Ministers responsible for Sport, and in particular Resolution No. 1 adopted at the 6th Conference at Reykjavik in 1989;

Recalling that the Committee of Ministers of the Council of Europe has already adopted Resolution (67) 12 on the doping of athletes, Recommendation No. R (79) 8 on doping in sport, Recommendation No. R (84) 19 on the "European Anti-doping Charter for Sport", and Recommendation No. R (88) 12 on the institution of doping controls without warning outside competitions;

Recalling Recommendation No. 5 on doping adopted by the 2nd International Conference of Ministers and Senior Officials responsible for Sport and Physical Education organised by Unesco at Moscow (1988);

Determined however to take further and stronger co-operative action aimed at the reduction and eventual elimination of doping in sport using as a basis the ethical values and practical measures contained in those instruments,

Have agreed as follows:

Article 1 – Aim of the Convention

The Parties, with a view to the reduction and eventual elimination of doping in sport, undertake, within the limits of their respective constitutional provisions, to take the steps necessary to apply the provisions of this Convention.

Article 2 – Definition and scope of the Convention

1 For the purposes of this Convention:

a "doping in sport" means the administration to sportsmen or sportswomen, or the use by them, of pharmacological classes of doping agents or doping methods;

b "pharmacological classes of doping agents or doping methods" means, subject to paragraph 2 below, those classes of doping agents or doping methods banned by the relevant international sports organisations and appearing in lists that have been approved by the monitoring group under the terms of Article 11.1.b;

c "sportsmen and sportswomen" means those persons who participate regularly in organised sports activities.

2 Until such time as a list of banned pharmacological classes of doping agents and doping methods is approved by the monitoring group under the terms of Article 11.1.b, the reference list in the appendix to this Convention shall apply.

Article 3 – Domestic co-ordination

1 The Parties shall co-ordinate the policies and actions of their government departments and other public agencies concerned with combating doping in sport.

2 They shall ensure that there is practical application of this Convention, and in particular that the requirements under Article 7 are met, by entrusting, where appropriate, the implementation of some of the provisions of this Convention to a designated governmental or non-governmental sports authority or to a sports organisation.

Article 4 – Measures to restrict the availability and use of banned doping agents and methods

1 The Parties shall adopt where appropriate legislation, regulations or administrative measures to restrict the availability (including provisions to control movement, possession, importation, distribution and sale) as well as the use in sport of banned doping agents and doping methods and in particular anabolic steroids.

2 To this end, the Parties or, where appropriate, the relevant non-governmental organisations shall make it a criterion for the grant of public subsidies to sports organisations that they effectively apply anti-doping regulations.

3 Furthermore, the Parties shall:

a assist their sports organisations to finance doping controls and analyses, either by direct subsidies or grants, or by recognising the costs of such controls and analyses when determining the overall subsidies or grants to be awarded to those organisations;

b take appropriate steps to withhold the grant of subsidies from public funds, for training purposes, to individual sportsmen and sportswomen who have been suspended following a doping offence in sport, during the period of their suspension;

c encourage and, where appropriate, facilitate the carrying out by their sports organisations of the doping controls required by the competent international sports organisations whether during or outside competitions; and

d encourage and facilitate the negotiation by sports organisations of agreements permitting their members to be tested by duly authorised doping control teams in other countries.

4 Parties reserve the right to adopt anti-doping regulations and to organise doping controls on their own initiative and on their own responsibility, provided that they are compatible with the relevant principles of this Convention.

Article 5 – Laboratories

1 Each Party undertakes:

a either to establish or facilitate the establishment on its territory of one or more doping control laboratories suitable for consideration for accreditation under the criteria adopted by the relevant international sports organisations and approved by the monitoring group under the terms of Article 11.1.b; or

b to assist its sports organisations to gain access to such a laboratory on the territory of another Party.

2 These laboratories shall be encouraged to:

a take appropriate action to employ and retain, train and retrain qualified staff;

b undertake appropriate programmes of research and development into doping agents and methods used, or thought to be used, for the purposes of doping in sport and into analytical biochemistry and pharmacology with a view to obtaining a better understanding of the effects of various substances upon the human body and their consequences for athletic performance;

c publish and circulate promptly new data from their research.

Article 6 – Education

1 The Parties undertake to devise and implement, where appropriate in co-operation with the sports organisations concerned and the mass media, educational programmes and information campaigns emphasising the dangers to health inherent in doping and its harm to the ethical values of sport. Such programmes and campaigns shall be directed at both young people in schools and sports clubs and their parents and at adult sportsmen and sportswomen, sports officials, coaches and trainers. For those involved in medicine, such educational programmes will emphasise respect for medical ethics.

2 The Parties undertake to encourage and promote research, in co-operation with the regional, national and international sports organisations concerned, into ways and means of devising scientifically-based physiological and psychological training programmes that respect the integrity of the human person.

Article 7 – Co-operation with sports organisations on measures to be taken by them

1 The Parties undertake to encourage their sports organisations and through them the international sports organisations to formulate and apply all appropriate measures, falling within their competence, against doping in sport.

2 To this end, they shall encourage their sports organisations to clarify and harmonise their respective rights, obligations and duties, in particular by harmonising their:

a anti-doping regulations on the basis of the regulations agreed by the relevant international sports organisations;

b lists of banned pharmacological classes of doping agents and banned doping methods on the basis of the lists agreed by the relevant international sports organisations;

c doping control procedures;

d disciplinary procedures, applying agreed international principles of natural justice and ensuring respect for the fundamental rights of suspected sportsmen and sportswomen; these principles will include:

i the reporting and disciplinary bodies to be distinct from one another;

ii the right of such persons to a fair hearing and to be assisted or represented;

iii clear and enforceable provisions for appealing against any judgment made;

e procedures for the imposition of effective penalties for officials, doctors, veterinary doctors, coaches, physiotherapists and other officials or accessories associated with infringements of the anti-doping regulations by sportsmen and sportswomen;

f procedures for the mutual recognition of suspensions and other penalties imposed by other sports organisations in the same or other countries.

3 Moreover, the Parties shall encourage their sports organisations:

a to introduce, on an effective scale, doping controls not only at, but also without advance warning at any appropriate time outside, competitions, such controls to be conducted in a way which is equitable for all sportsmen and sportswomen and which include testing and retesting of persons selected, where appropriate, on a random basis;

b to negotiate agreements with sports organisations of other countries permitting a sportsman or sportswoman training in another country to be tested by a duly authorised doping control team of that country;

c to clarify and harmonise regulations on eligibility to take part in sports events which will include anti-doping criteria;

d to promote active participation by sportsmen and sportswomen themselves in the anti-doping work of international sports organisations;

e to make full and efficient use of the facilities available for doping analysis at the laboratories provided for by Article 5, both during and outside sports competitions;

f to study scientific training methods and to devise guidelines to protect sportsmen and sportswomen of all ages appropriate for each sport.

Article 8 – International co-operation

1 The Parties shall co-operate closely on the matters covered by this Convention and shall encourage similar co-operation amongst their sports organisations.

2 The Parties undertake:

a to encourage their sports organisations to operate in a manner that promotes application of the provisions of this Convention within all the appropriate international sports organisations to which they are affiliated, including the refusal to ratify claims for world or regional records unless accompanied by an authenticated negative doping control report;

b to promote co-operation between the staffs of their doping control laboratories established or operating in pursuance of Article 5; and

c to initiate bilateral and multilateral co-operation between their appropriate agencies, authorities and organisations in order to achieve, at the international level as well, the purposes set out in Article 4.1.

3 The Parties with laboratories established or operating in pursuance of Article 5 undertake to assist other Parties to enable them to acquire the experience, skills and techniques necessary to establish their own laboratories.

Article 9 – Provision of information

Each Party shall forward to the Secretary General of the Council of Europe, in one of the official languages of the Council of Europe, all relevant information concerning legislative and other measures taken by it for the purpose of complying with the terms of this Convention.

Article 10 – Monitoring group

1 For the purposes of this Convention, a monitoring group is hereby set up.

2 Any Party may be represented on the monitoring group by one or more delegates. Each Party shall have one vote.

3 Any State mentioned in Article 14.1 which is not a Party to this Convention may be represented on the monitoring group by an observer.

4 The monitoring group may, by unanimous decision, invite any non-member State of the Council of Europe which is not a Party to the Convention and any sports or other professional organisation concerned to be represented by an observer at one or more of its meetings.

5 The monitoring group shall be convened by the Secretary General. Its first meeting shall be held as soon as reasonably practicable, and in any case within one year after the date of the entry into force of the Convention. It shall subsequently meet whenever necessary, on the initiative of the Secretary General or a Party.

6 A majority of the Parties shall constitute a quorum for holding a meeting of the monitoring group.

7 The monitoring group shall meet in private.

8 Subject to the provisions of this Convention, the monitoring group shall draw up and adopt by consensus its own Rules of Procedure.

Article 11

1 The monitoring group shall monitor the application of this Convention. It may in particular:

a keep under review the provisions of this Convention and examine any modifications necessary;

b approve the list, and any revision thereto, of pharmacological classes of doping agents and doping methods banned by the relevant international sports organisations, referred to in Articles 2.1 and 2.2, and the criteria for accreditation of laboratories, and any revision thereto, adopted by the said organisations, referred to in Article 5.1.a, and fix the date for the relevant decisions to enter into force;

c hold consultations with relevant sports organisations;

d make recommendations to the Parties concerning measures to be taken for the purposes of this Convention;

e recommend the appropriate measures to keep relevant international organisations and the public informed about the activities undertaken within the framework of this Convention;

f make recommendations to the Committee of Ministers concerning non-member States of the Council of Europe to be invited to accede to this Convention;

g make any proposal for improving the effectiveness of this Convention.

2 In order to discharge its functions, the monitoring group may, on its own initiative, arrange for meetings of groups of experts.

Article 12

After each meeting, the monitoring group shall forward to the Committee of Ministers of the Council of Europe a report on its work and on the functioning of the Convention.

Article 13 – Amendments to the Articles of the Convention

1 Amendments to the articles of this Convention may be proposed by a Party, the Committee of Ministers of the Council of Europe or the monitoring group.

2 Any proposal for amendment shall be communicated by the Secretary General of the Council of Europe to the States mentioned in Article 14 and to every State which has acceded to or has been invited to accede to this Convention in accordance with the provisions of Article 16.

3 Any amendment proposed by a Party or the Committee of Ministers shall be communicated to the monitoring group at least two months before the meeting at which it is to be considered. The monitoring group shall submit to the Committee of Ministers its opinion on the proposed amendment, where appropriate after consultation with the relevant sports organisations.

4 The Committee of Ministers shall consider the proposed amendment and any opinion submitted by the monitoring group and may adopt the amendment.

5 The text of any amendment adopted by the Committee of Ministers in accordance with paragraph 4 of this article shall be forwarded to the Parties for acceptance.

6 Any amendment adopted in accordance with paragraph 4 of this article shall come into force on the first day of the month following the expiration of a period of one month after all Parties have informed the Secretary General of their acceptance thereof.

Final clauses

Article 14

1 This Convention shall be open for signature by member States of the Council of Europe, other States party to the European Cultural Convention and non-member States which have participated in the elaboration of this Convention, which may express their consent to be bound by:

a signature without reservation as to ratification, acceptance or approval, or

b signature subject to ratification, acceptance or approval, followed by ratification, acceptance or approval.

2 Instruments of ratification, acceptance or approval shall be deposited with the Secretary General of the Council of Europe.

Article 15

1 The Convention shall enter into force on the first day of the month following the expiration of a period of one month after the date on which five States, including at least four member States of the Council of Europe, have expressed their consent to be bound by the Convention in accordance with the provisions of Article 14.

2 In respect of any signatory State which subsequently expresses its consent to be bound by it, the Convention shall enter into force on the first day of the month following the expiration of a period of one month after the date of signature or of the deposit of the instrument of ratification, acceptance or approval.

Article 16

1 After the entry into force of this Convention, the Committee of Ministers of the Council of Europe, after consulting the Parties, may invite to accede to the Convention any non-member State by a decision taken by the majority provided for in Article 20.d of the Statute of the Council of Europe and by the unanimous vote of the representatives of the Contracting States entitled to sit on the Committee.

2 In respect of any acceding State, the Convention shall enter into force on the first day of the month following the expiration of a period of one month after the date of the deposit of the instrument of accession with the Secretary General of the Council of Europe.

Article 17

1 Any State may, at the time of signature or when depositing its instrument of ratification, acceptance, approval or accession, specify the territory or territories to which this Convention shall apply.

2 Any State may, at any later date, by a declaration addressed to the Secretary General, extend the application of this Convention to any other territory specified in the declaration. In respect of such territory the Convention shall enter into force on the first day of the month following the expiration of a period of one month after the date of receipt of such declaration by the Secretary General.

3 Any declaration made under the two preceding paragraphs may, in respect of any territory mentioned in such declaration, be withdrawn by a notification addressed to the Secretary General. Such withdrawal shall become effective on the first day of the month following the expiration of a period of six months after the date of receipt of the notification by the Secretary General.

Article 18

1 Any Party may, at any time, denounce this Convention by means of a notification addressed to the Secretary General of the Council of Europe.

2 Such denunciation shall become effective on the first day of the month following the expiration of a period of six months after the date of receipt of the notification by the Secretary General.

Article 19

The Secretary General of the Council of Europe shall notify the Parties, the other member States of the Council of Europe, the other States party to the European Cultural Convention, the non-member States which have participated in the elaboration of this Convention and any State which has acceded or has been invited to accede to it of:

a any signature in accordance with Article 14;

b the deposit of any instrument of ratification, acceptance, approval or accession in accordance with Article 14 or 16;

c any date of entry into force of this Convention in accordance with Articles 15 and 16;

d any information forwarded under the provisions of Article 9;

e any report prepared in pursuance of the provisions of Article 12;

f any proposal for amendment or any amendment adopted in accordance with Article 13 and the date on which the amendment comes into force;

g any declaration made under the provisions of Article 17;

h any notification made under the provisions of Article 18 and the date on which the denunciation takes effect;

i any other act, notification or communication relating to this Convention.

In witness whereof the undersigned, being duly authorised thereto, have signed this Convention.

Done at Strasbourg, the 16th day of November 1989, in English and French, both texts being equally authentic, in a single copy which shall be deposited in the archives of the Council of Europe. The Secretary General of the Council of Europe shall transmit certified copies to each member State of the Council of Europe, to the other States party to the European Cultural Convention, to the non-member States which have participated in the elaboration of this Convention and to any State invited to accede to it.

APPENDIX

ANTI-DOPING CONVENTION (ETS No. 135)

AMENDMENT TO THE APPENDIX[1]
approved by the Monitoring Group
under Article 11.1.b of the Convention
at its 28th meeting (Strasbourg, 12-13 November 2008)

THE 2009 PROHIBITED LIST

WORLD ANTI-DOPING CODE

DATE OF ENTRY INTO FORCE : 1 JANUARY 2009

The use of any drug should be limited to medically justified indications

All Prohibited Substances shall be considered as "Specified Substances" except Substances in classes S1, S2, S.4.4 and S6.a, and Prohibited Methods M1, M2 and M3.

SUBSTANCES AND METHODS PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

PROHIBITED SUBSTANCES

S1. ANABOLIC AGENTS

Anabolic agents are prohibited.

1. Anabolic Androgenic Steroids (AAS)

a. Exogenous* AAS including:

1-androstendiol (5α-androst-1-ene-3β,17β-diol); **1-androstendione** (5α-androst-1-ene-3,17-dione); **bolandiol** (19-norandrostenediol); **bolasterone; boldenone; boldione** (androsta-1,4-diene-3,17-dione); **calusterone; clostebol; danazol** (17α-ethynyl-17β-hydroxyandrost-4-eno[2,3-d]isoxazole); **dehydrochlormethyltestosterone** (4-chloro-17β-hydroxy-17α-methylandrosta-1,4-dien-3-one); **desoxymethyltestosterone** (17α-methyl-5α-androst-2-en-17β-ol); **drostanolone; ethylestrenol** (19-nor-17α-pregn-4-en-17-ol); **fluoxymesterone; formebolone; furazabol** (17β-hydroxy-17α-methyl-5α-androstano[2,3-c]-furazan); **gestrinone; 4-hydroxytestosterone** (4,17β-dihydroxyandrost-4-en-3-one); **mestanolone; mesterolone; metenolone; methandienone** (17β-hydroxy-17α-methylandrosta-1,4-dien-3-one); **methandriol; methasterone** (2α, 17α-dimethyl-5α-androstane-3-one-17β-ol); **methyldienolone** (17β-hydroxy-17α-methylestra-4,9-dien-3-one); **methyl-1-testosterone** (17β-hydroxy-17α-methyl-5α-androst-1-en-3-one); **methylnortestosterone** (17β-hydroxy-17α-methylestr-4-en-3-one); **methyltrienolone** (17β-hydroxy-17α-methylestra-4,9,11-trien-3-one); **methyltestosterone; mibolerone; nandrolone; 19-norandrostenedione** (estr-4-ene-3,17-dione); **norboletone; norclostebol; norethandrolone; oxabolone; oxandrolone; oxymesterone; oxymetholone; prostanozol** ([3,2-c]pyrazole-5α-etioallocholane-17β-tetrahydropyranol); **quinbolone; stanozolol; stenbolone; 1-testosterone** (17β-hydroxy-5α-androst-1-en-3-one); **tetrahydrogestrinone** (18a-homo-pregna-4,9,11-

[1] Previously amended on 1 September 1990, on 24 January 1992, on 1 August 1993, on 1 July 1996, on 1 July 1997, on 15 March 1998, on 15 March 1999, on 31 March 2000, 1 September 2001, on 1 January 2003, 1 January 2004, 1 January 2005, on 1 January 2006, 1 January 2007 and on 1 January 2008.

trien-17β-ol-3-one)**; trenbolone** and other substances with a similar chemical structure or similar biological effect(s).

b. Endogenous** AAS when administered exogenously:

androstenediol (androst-5-ene-3β,17β-diol)**; androstenedione** (androst-4-ene-3,17-dione)**; dihydrotestosterone** (17β-hydroxy-5α-androstan-3-one) **; prasterone** (dehydroepian-drosterone, DHEA)**; testosterone**
and the following metabolites and isomers:

5α-androstane-3α,17α-diol; 5α-androstane-3α,17β-diol; 5α-androstane-3β,17α-diol; 5α-androstane-3β,17β-diol; androst-4-ene-3α,17α-diol; androst-4-ene-3α,17β-diol; androst-4-ene-3β,17α-diol; androst-5-ene-3α,17α-diol; androst-5-ene-3α,17β-diol; androst-5-ene-3β,17α-diol; 4-androstenediol (androst-4-ene-3β,17β-diol)**; 5-androstenedione** (androst-5-ene-3,17-dione)**; epi-dihydrotestosterone; epitestosterone; 3α-hydroxy-5α-androstan-17-one; 3β-hydroxy-5α-androstan-17-one; 19-norandrosterone; 19-noretiocholanolone.**

[*Comment to class S1.1b*:

Where an anabolic androgenic steroid is capable of being produced endogenously, a Sample will be deemed to contain such Prohibited Substance and an Adverse Analytical Finding will be reported where the concentration of such Prohibited Substance or its metabolites or markers and/or any other relevant ratio(s) in the Athlete's Sample so deviates from the range of values normally found in humans that it is unlikely to be consistent with normal endogenous production. A Sample shall not be deemed to contain a Prohibited Substance in any such case where an Athlete proves that the concentration of the Prohibited Substance or its metabolites or markers and/or the relevant ratio(s) in the Athlete's Sample is attributable to a physiological or pathological condition.

In all cases, and at any concentration, the Athlete's Sample will be deemed to contain a Prohibited Substance and the laboratory will report an Adverse Analytical Finding if, based on any reliable analytical method (e.g. IRMS), the laboratory can show that the Prohibited Substance is of exogenous origin. In such case, no further investigation is necessary.

When a value does not so deviate from the range of values normally found in humans and any reliable analytical method (e.g. IRMS) has not determined the exogenous origin of the substance, but if there are indications, such as a comparison to endogenous reference steroid profiles, of a possible Use of a Prohibited Substance, or when a laboratory has reported a T/E ratio greater than four (4) to one (1) and any reliable analytical method (e.g. IRMS) has not determined the exogenous origin of the substance, further investigation shall be conducted by the relevant Anti-Doping Organization by reviewing the results of any previous test(s) or by conducting subsequent test(s).

When such further investigation is required the result shall be reported by the laboratory as atypical and not as adverse. If a laboratory reports, using an additional reliable analytical method (e.g. IRMS), that the Prohibited Substance is of exogenous origin, no further investigation is necessary, and the Sample will be deemed to contain such Prohibited Substance. When an additional reliable analytical method (e.g. IRMS) has not been applied, and the minimum of three previous test results are not available, a longitudinal profile of the Athlete shall be established by performing three no-advance notice tests in a period of three months by the relevant Anti-Doping Organization. The result that triggered this longitudinal study shall be reported as atypical. If the longitudinal profile of the Athlete established by the subsequent tests is not physiologically normal, the result shall then be reported as an Adverse Analytical Finding.

In extremely rare individual cases, boldenone of endogenous origin can be consistently found at very low nanograms per milliliter (ng/mL) levels in urine. When such a very low concentration of boldenone is reported by a laboratory and the application of any reliable analytical method (e.g. IRMS) has not determined the exogenous origin of the substance, further investigation may be conducted by subsequent test(s).

For 19-norandrosterone, an Adverse Analytical Finding reported by a laboratory is considered to be scientific and valid proof of exogenous origin of the Prohibited Substance. In such case, no further investigation is necessary.

*Should an Athlete fail to cooperate in the investigations, the Athlete's Sample shall be deemed to contain a Prohibited Substance.***]**

2. Other Anabolic Agents, including but not limited to:

Clenbuterol, selective androgen receptor modulators (SARMs), tibolone, zeranol, zilpaterol.

For purposes of this section:
** "exogenous" refers to a substance which is not ordinarily capable of being produced by the body naturally.*
*** "endogenous" refers to a substance which is capable of being produced by the body naturally.*

S2. HORMONES AND RELATED SUBSTANCES

The following substances and their releasing factors, are prohibited:

1. **Erythropoiesis-Stimulating Agents (**e.g. **erythropoietin** (**EPO), darbepoietin (dEPO), hematide);**
2. **Growth Hormone (GH), Insulin-like Growth Factors (**e.g. **IGF-1), Mechano Growth Factors (MGFs);**
3. **Chorionic Gonadotrophin (CG) and Luteinizing Hormone (LH)**, prohibited in males only**;**
4. **Insulins;**
5. **Corticotrophins,**

and other substances with similar chemical structure or similar biological effect(s).

*[**Comment to class S2:***

Unless the Athlete can demonstrate that the concentration was due to a physiological or pathological condition, a Sample will be deemed to contain a Prohibited Substance (as listed above) where the concentration of the Prohibited Substance or its metabolites and/or relevant ratios or markers in the Athlete's Sample satisfies positivity criteria established by WADA or otherwise so exceeds the range of values normally found in humans that it is unlikely to be consistent with normal endogenous production.

*If a laboratory reports, using a reliable analytical method, that the Prohibited Substance is of exogenous origin, the Sample will be deemed to contain a Prohibited Substance and shall be reported as an Adverse Analytical Finding.**]***

S3. BETA-2 AGONISTS

All beta-2 agonists including their D- and L-isomers are prohibited.

Therefore, formoterol, salbutamol, salmeterol and terbutaline when administered by inhalation also require a Therapeutic Use Exemption in accordance with the relevant section of the International Standard for Therapeutic Use Exemptions.

Despite the granting of a Therapeutic Use Exemption, the presence of salbutamol in urine in excess of 1000 ng/mL will be considered an *Adverse Analytical Finding* unless the *Athlet*e proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of a therapeutic dose of inhaled salbutamol.

S4. HORMONE ANTAGONISTS AND MODULATORS

The following classes are prohibited:

1. **Aromatase inhibitors** including, but not limited to: **anastrozole, letrozole, aminoglutethimide, exemestane, formestane, testolactone.**

2. **Selective estrogen receptor modulators (SERMs)** including, but not limited to: **raloxifene, tamoxifen, toremifene.**

3. **Other anti-estrogenic substances** including, but not limited to: **clomiphene, cyclofenil, fulvestrant.**

4. **Agents modifying myostatin function(s)** including but not limited to: **myostatin inhibitors.**

S5. DIURETICS AND OTHER MASKING AGENTS

Masking agents are prohibited. They include:

Diuretics, probenecid, plasma expanders (e.g. intravenous administration of **albumin, dextran, hydroxyethyl starch** and **mannitol)** and other substances with similar biological effect(s).

Diuretics include:

Acetazolamide, amiloride, bumetanide, canrenone, chlorthalidone, etacrynic acid, furosemide, indapamide, metolazone, spironolactone, thiazides (e.g. **bendroflumethiazide, chlorothiazide, hydrochlorothiazide), triamterene**, and other substances with a similar chemical structure or similar biological effect(s) (except drosperinone and topical dorzolamide and brinzolamide, which are not prohibited).

[Comment to class S5:

*A Therapeutic Use Exemption is not valid if an Athlete's urine contains a diuretic in association with threshold or sub-threshold levels of an exogenous Prohibited Substance(s).**]***

PROHIBITED METHODS

M1. ENHANCEMENT OF OXYGEN TRANSFER

The following are prohibited:

1. Blood doping, including the use of autologous, homologous or heterologous blood or red blood cell products of any origin.

2. Artificially enhancing the uptake, transport or delivery of oxygen, including but not limited to perfluorochemicals, efaproxiral (RSR13) and modified haemoglobin products (e.g. haemoglobin-based blood substitutes, microencapsulated haemoglobin products).

M2. CHEMICAL AND PHYSICAL MANIPULATION

1. *Tampering*, or attempting to tamper, in order to alter the integrity and validity of *Samples* collected during *Doping Controls* is prohibited. These include but are not limited to catheterisation, urine substitution and/or alteration.

2. Intravenous infusions are prohibited except in the management of surgical procedures, medical emergencies or clinical investigations.

M3. GENE DOPING

The transfer of cells or genetic elements or the use of cells, genetic elements or pharmacological agents to modulating expression of endogenous genes having the capacity to enhance athletic performance, is prohibited.

Peroxisome Proliferator Activated Receptor δ (PPARδ) agonists (e.g. GW 1516) and PPARδ-AMP-activated protein kinase (AMPK) axis agonists (e.g. AICAR) are prohibited.

SUBSTANCES AND METHODS PROHIBITED IN-COMPETITION

In addition to the categories S1 to S5 and M1 to M3 defined above, the following categories are prohibited in competition:

PROHIBITED SUBSTANCES

S6. STIMULANTS

All stimulants (including both their (D- and L-) optical isomers where relevant) are prohibited, except imidazole derivatives for topical use and those stimulants included in the 2009 Monitoring Program*.

Stimulants include:

a. Non Specified Stimulants:

Adrafinil; amfepramone; amiphenazole; amphetamine; amphetaminil; benzphetamine; benzylpiperazine; bromantan; clobenzorex; cocaine; cropropamide; crotetamide; dimethylamphetamine; etilamphetamine; famprofazone; fencamine; fenetylline; fenfluramine; fenproporex; furfenorex; mefenorex; mephentermine; mesocarb; methamphetamine(D-); methylenedioxyamphetamine; methylenedioxymethamphetamine; p-methylamphetamine; modafinil; norfenfluramine; phendimetrazine; phenmetrazine; phentermine; 4-phenylpiracetam (carphedon); prolintane.
A stimulant not expressly listed in this section is a Specified Substance.

b. Specified Stimulants (examples):

Adrenaline** **; cathine***** **; ephedrine****** **; etamivan; etilefrine; fenbutrazate; fencamfamin; heptaminol; isometheptene; levmetamphetamine; meclofenoxate; methylephedrine******* **; methylphenidate; nikethamide; norfenefrine; octopamine; oxilofrine; parahydroxyamphetamine; pemoline; pentetrazol; phenpromethamine; propylhexedrine; selegiline; sibutramine; strychnine; tuaminoheptane** and other substances with a similar chemical structure or similar biological effect(s).

* The following substances included in the 2009 Monitoring Program (bupropion, caffeine, phenylephrine, phenylpropanolamine, pipradol, pseudoephedrine, synephrine) are not considered as *Prohibited Substances*.
** **Adrenaline** associated with local anaesthetic agents or by local administration (e.g. nasal, ophthalmologic) is not prohibited.
*** **Cathine** is prohibited when its concentration in urine is greater than 5 micrograms per milliliter.
**** Each of **ephedrine** and **methylephedrine** is prohibited when its concentration in urine is greater than 10 micrograms per milliliter.

S7. NARCOTICS

The following narcotics are prohibited:

Buprenorphine, dextromoramide, diamorphine (heroin), fentanyl and its derivatives, hydromorphone, methadone, morphine, oxycodone, oxymorphone, pentazocine, pethidine.

S8. CANNABINOIDS

Cannabinoids (e.g. hashish, marijuana) are prohibited.

S9. GLUCOCORTICOSTEROIDS

All glucocorticosteroids are prohibited when administered by oral, intravenous, intramuscular or rectal routes.

In accordance with the International Standard for Therapeutic Use Exemptions, a declaration of use must be completed by the *Athlete* for glucocorticosteroids administered by intraarticular, periarticular, peritendinous, epidural, intradermal and inhalation routes, except as noted below.

Topical preparations when used for auricular, buccal, dermatological (including iontophoresis/phonophoresis), gingival, nasal, ophthalmic and perianal disorders are not prohibited and neither require a Therapeutic Use Exemption nor a declaration of use.

SUBSTANCES PROHIBITED IN PARTICULAR SPORTS

P1. ALCOHOL

Alcohol (ethanol) is prohibited *In-Competition* only, in the following sports. Detection will be conducted by analysis of breath and/or blood. The doping violation threshold (haematological values) for each Federation is 0.10 g/L.

- Aeronautic (FAI)
- Archery (FITA, IPC)
- Automobile (FIA)
- Boules (IPC bowls)
- Karate (WKF)
- Modern Pentathlon (UIPM) for disciplines involving shooting
- Motorcycling (FIM)
- Ninepin and Tenpin Bowling (FIQ)
- Powerboating (UIM)

P2. BETA-BLOCKERS

Unless otherwise specified, beta-blockers are prohibited *In-Competition* only, in the following sports.

- Aeronautic (FAI)
- Archery (FITA, IPC) (also prohibited *Out-of-Competition*)
- Automobile (FIA)
- Billiards and Snooker (WCBS)
- Bobsleigh (FIBT)
- Boules (CMSB, IPC bowls)
- Bridge (FMB)
- Curling (WCF)
- Golf (IGF)
- Gymnastics (FIG)
- Motorcycling (FIM)
- Modern Pentathlon (UIPM) for disciplines involving shooting
- Ninepin and Tenpin Bowling (FIQ)
- Powerboating (UIM)
- Sailing (ISAF) for match race helms only
- Shooting (ISSF, IPC) (also prohibited *Out-of-Competition*)
- Skiing/Snowboarding (FIS) in ski jumping, freestyle aerials/halfpipe and snowboard halfpipe/big air
- Wrestling (FILA)

Beta-blockers include, but are not limited to, the following:

Acebutolol, alprenolol, atenolol, betaxolol, bisoprolol, bunolol, carteolol, carvedilol, celiprolol, esmolol, labetalol, levobunolol, metipranolol, metoprolol, nadolol, oxprenolol, pindolol, propranolol, sotalol, timolol.