

OTFA DRUG USE AND DOPING CONTROL POLICY

OTFA POSITION STATEMENT

The Ontario Track & Field Association (OTFA) is unequivocally opposed to the use by athletes of any banned substances or methods in contravention of the rules of the Provincial, National (Athletics Canada) and/or International Sport Federations (IAAF), the International Olympic Committee, and other recognized Sport Organizations (OFSAA and CIAU).

The OTFA is unequivocally opposed to any encouragement of the use of such substances and/or methods by individuals in positions of leadership in the sport (i.e. Coaches, officials, athletic staff, medical practitioners, sport scientists, administrators etc.) or by athletes themselves. The providing of, or administration of banned substances and/or methods to athletes is also forbidden.

DEFINITION OF DOPING:

“Doping is the deliberate or inadvertent use by an individual of a substance in order to enhance athletic performance.”

I. OTFA DRUG/DOPING EDUCATION POLICY:

- I. 1 To make aware and educate athletes, coaches and sports officials of the hazards and consequences of the use of IOC banned substances (performance-enhancing drugs) or methods.
- I. 2 To raise the awareness level among OTFA athletes, coaches, and sports officials the physical, and psychological danger and the moral and ethical issues related to drug use in sport.
- I. 3 To promote the concept of Track and Field as a drug free sport.
- I. 4 To promote the idea of fair play and adherence to the rules in competitive sport.

II OTFA DRUG EDUCATION POLICY:

- I. 1 General

The OTFA Drug Education Policy will constantly be updated as and when required and it will integrate with future program initiatives by Government and Sports Governing Bodies at the National and Provincial level in the years to come.

II. 2 Doping Control Agreement

The following individuals as members of the OTFA will be required to sign on a yearly basis appropriate OTFA Doping Control Agreement forms:

By signing these forms, the individuals involved are in fact indicating their understanding of the OTFA Doping Control Policy and their commitment to abide by the rules of the Sport (OTFA, Athletics Canada, IAAF, Government of Canada and the COA).

- a) OTFA full-time staff
- b) OTFA part-time staff
- c) OTFA Registered Coaches
- d) OTFA Registered Officials
- e) OTFA Registered Club Officers, Officials and Administrators
- f) OTFA – Registered athletes on the Ontario Athlete Assistance Program
- g) OTFA – Athletes receiving OTFA funding

II. 3 Failure to sign agreement form

Failure to complete and sign the Doping Control Agreement will result in that person (athlete, coach, sports official) being ineligible to compete or participate in OTFA sponsored/sanctioned programmes.

III. OTFA DOPING/DRUG EDUCATION RESOURCES

Clubs and Groups as members of the OTFA will be encouraged to utilize the following resources related to drug education and awareness. Any club requiring more details can write directly to: Canadian Centre for Ethics in Sport, 202-2197 Riverside Drive, Ottawa, Ont. K1H 7X3 info@cces.ca Tel # 613-521-3340 Toll Free 1-800-672-7775

III. 1 **Written Material**

- a) Drug Use and Doping Control in Sport (pamphlet) – Canadian Centre for Ethics in Sport.
- b) Banned, Restricted and Permissible Use of Drugs in Amateur Sport (pamphlet). Canadian Centre for Ethics in Sport.
- c) Doping Control Procedures for the Athlete (Pamphlet) Government of Canada, Fitness and Amateur Sport – Canadian Centre for Ethics in Sport.
- d) OTFA Statement in Inadvertent Doping (see attached).
- e) Anti-Doping in Sport – OTFA (Summary of Doping categories as per IOC Medical Commission)

III. 2 Audio Visual

Audio visual material available from the Canadian Centre for Ethics in Sport may be used by OTFA Clubs, Groups or individuals.

ANTI DOPING IN SPORT BANNED AND RESTRICTED DOPING CLASSES

This is a summary of the doping categories which have been identified by the I.O.C. Medical Commission. Complete documentation is available in the booklet “Banned, Restricted and Permissible Use of Drugs in Amateur Sport”. This booklet can be obtained from:

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202-2197 Riverside Drive, Ottawa, Ont. K1H 7X3
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Take the following as a guide only:

A. Banned Substances

1. Stimulants

Stimulants comprise various types of drugs which increase alertness, reduce fatigue and may increase competitiveness and hostility. The use of stimulants can also produce loss of judgment, which may lead to accidents in some sports.

In lower doses, stimulants such as ephedrine, pseudoephedrinedrine, phenylpropanolamine and norpseudeophedrine, are often present in cold and hay fever preparations which are prescribed by physicians or purchased as over-the-counter medications.

Attention:

No medication for colds, flu or hay fever should be taken without checking with a doctor or pharmacist to ensure that the product does not contain a banned stimulant or any related compound.

2. Narcotics Analgesics

The drugs belonging to this category act as analgesics for the management of moderate to severe pain.

It is felt that the effective treatment of slight to moderate pain can be accomplished through the use of medications other than narcotics.

Attention:

Aspirin and its newer derivatives are not banned. However, caution should be exercised because some aspirin preparations contain banned substances such as codeine. The same precautions hold for cough and cold preparations which may contain drugs of the banned classes.

3. Anabolic Steroids

This class of drugs includes any chemicals which are related in structure and activity to the male hormone testosterone. These compounds have been misused in sport to increase muscle bulk, strength and power.

4. Beta-blockers

These are unlikely to be used in endurance events which necessitate prolonged periods of high cardiac output. The larger stores of metabolic substrates in beta-blockers would severely decrease performance capacity. Due to the continued misuse of beta-blockers in sports where physical activity is of little or no importance, the International Olympic Committee's Medical Commission has banned these substances and reserves the right to test the sports where it seems appropriate (e.g. shooting, archery).

5. Diuretics

Diuretics are sometimes misused by athletes for two reasons:

- 1) to reduce weight quickly in sports where different weight classes are involved.
- 2) to reduce the concentration of drugs in the urine by producing a more rapid excretion of urine to minimize detection of drug misuse.

Attention:

For sports involving various weight classes, the Doping Control Committee reserves the right to obtain samples from a competitor at the time of the weigh-ins.

B. Classes of Drugs Subject to Certain Restrictions

1) Injectable Local Anesthetics

Restrictions have been placed on the use of injectable local anesthetics to protect the health of the athlete. The I.O.C. Medical Commission recognizes that it is often difficult to distinguish what is considered "therapeutic use" and what is considered "doping".

If an injectable local anesthetic is going to be used then the athlete's doctor must make a declaration to the Medical Commission explaining this action.

2) Corticosteroids

Stronger restrictions have been required due to the increasing non-therapeutic use of corticosteroids. The use of corticosteroids therefore is now banned except for topical use (ear, eye and skin), inhalation therapy (asthma, allergic rhinitis) and local or intra-articular injections.

Therefore, the use of corticosteroids, orally, intramuscularly or by intravenous method is NOT PERMITTED.

- Also, any team doctor wishing to administer corticosteroids intra-articularly or locally to a competitor must give written notification to the IOC or competition medical commission in advance.

3) Asthma and Respiratory Ailment Drugs

The choice of medication in the treatment of asthma and respiratory ailments has posed many problems. Some years ago, ephedrine and related substances were administered quite frequently. However, these substances are prohibited because they are classed in the category of sympathomimetic amines or stimulants and have been the subject of abuse.

The use of corticosteroids by inhalation is permitted for asthma therapy.

4) Caffeine

A urine specimen will be considered positive if the concentration of caffeine exceeds 12 micrograms/ml.

The normal ingestion of coffee, tea, or many caffeine-based drinks (such as colas) will not cause this limit to be exceeded or even remotely approached. However, the ingestion of caffeine tablets, or the use of caffeine suppositories or injections may result in a positive doping test.

5) Alcohol

Alcohol is not prohibited.

However, blood or breath alcohol levels may be determined at the request of an international federation, as has already been the case in Fencing and in shooting events in Modern Pentathlon. If you compete in these events, abstain from alcoholic beverages at least twelve hours before the event.

At the request of the International Federations concerned (FIE and UIPMB), an alcohol test will be carried out during their competitions.

C. Banned Methods and Manipulations

1) Blood Doping

Blood doping is the administration of blood or related red blood products to an athlete other than for legitimate medical treatment. This procedure may be preceded by withdrawal of blood from the athlete who continues to train in this blood-depleted state.

2) Pharmacological, Chemical and Physical Manipulations

Any substances or methods, which alter the integrity and validity of the urine samples in doping control, are banned. An example of these banned methods is catheterization or urine substitution.

Note: The above is not necessarily complete. It is up to each individual to be aware of all potential hazards.

When in doubt contact the Canadian Centre for Ethics in Sport, 202-2197 Riverside, Drive, Ottawa, Ont. K1H 7X3, info@cces.ca
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