
3 QUESTIONS

THIS EDITION OF THE IPOD ANSWERS THREE QUESTIONS THAT WERE SENT TO US SEEKING CLARIFICATIONS ON SPECIFIC ANTI-DOPING TOPICS.

TO THOSE WHO HAVE SENT US THESE QUESTIONS, WE THANK YOU AND WE HOPE TO HAVE ASSISTED IN PROVIDING THE ANSWERS YOU WERE REQUESTING.

WE ENCOURAGE ALL OF YOU TO CONTINUE SENDING US ANY QUESTIONS RELATED TO ANTI-DOPING TO BARBARA@ISSF-SPORTS.ORG SO THAT WE MAY ANSWER THEM IN FUTURE EDITIONS OF THE IPOD.

WHAT IS THE ATHLETE BLOOD PASSPORT?

What you are referring to is the Athlete Biological Passport. It is a new way of detecting the use of performance enhancing substances.

The fundamental principle of the Athlete Biological Passport is based on the monitoring of an athlete's biological variables (found in his or her blood samples) over time to facilitate indirect detection of doping, on a longitudinal basis, rather than on the traditional direct detection of doping like individual urine samples.

The Athlete Biological Passport is a collection of carefully selected individual information which is meant to assist Anti-Doping Organizations in differentiating between deviations of markers that may be naturally occurring from those deviations likely caused by doping.

The objective of the Athlete Biological Passport is to monitor and identify possible doping in order to intelligently target an athlete for traditional doping controls and, where appropriate, to establish an antidoping rule violation.

The concept of an Athlete Passport has been discussed by WADA since 2002. It gained further momentum as a result of questions raised by WADA during the 2006 Olympic Winter Games surrounding "no start" suspensions of athletes by their federations following health checks that reported high hemoglobin levels. Some concerns were expressed at the time regarding the results and their potential relation to doping.

The rationale was that if the urine and blood tests, which are essentially toxicology tests, are to be maintained and improved through increasingly sophisticated analytical methods, these will inevitably have to be rapidly combined with effective tools such as biological monitoring. In view of the challenges posed by current and

future biotechnological methods, an increasingly global and biological approach, similar to that used in forensic science, was deemed necessary in order to respond with the expected efficiency. So, cognizant of the varying approaches to monitoring blood profiles among different sports, soon after the 2006 Winter Games, WADA convened a meeting to foster an exchange of information and to develop a consensus on the topic. The participants (representatives of International Sports Federations including FIS, IBU, ISU, UCI, and IAAF) agreed that the analysis of blood variables should be considered as part of the anti-doping process itself as it can help to identify abnormal profiles, and that WADA should take the lead in convening further meetings of relevant experts in the field of hematology.

The group, through a series of meetings, came to the consensus that the longitudinal analysis of athlete blood variables should be registered in a database, and should be used in target testing and sanctioning when abnormal values are observed. The creation of this "individual database" is how the Athlete Biological "Passport" came to exist.

To put it simply, an athlete's "Passport" is a database consisting of many blood test results taken over time from the same athlete. A comparison and analysis of all these results allow an anti-doping organization, firstly, to determine if an athlete may be or have been using prohibited substances and/or prohibited methods and, secondly, to assert an anti-doping rule violation based on these comparative results.

As you are aware, the fight against doping relies on several strategies. These include



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The Athlete Biological Passport is now one of these strategies and has been adopted and is being implemented by many International Federations.

It is important to note that although WADA may eventually want every International Federation to adopt the Athlete Biological Passport, the ISSF does not plan on implementing the Passport in the near future. Based on a physiological risk assessment of doping in our sport, blood doping is not a critical concern at this time.

#2

I AM 15. SHOULD I BE TREATED DIFFERENTLY WHEN I HAVE TO PROVIDE A URINE SAMPLE?

There are in fact some special provisions that apply to minors in the International Standard for Testing. This is to ensure that the needs of athletes who are minors are met, in relation to the provision of a sample, without compromising the integrity of the sample collection session.

However, for the most part, it is important to note that all athletes, including minors, agree to be bound by the rules of their national and international federations as a condition of membership. This means that all minors MUST agree to submit to doping control when they are requested to do so and cannot circumvent the rules by alleging that they are minors. Refusing to submit to sample collection always results in an anti-doping rule violation.

Generally, every anti-doping organization (ADO) and certified doping control officer (DCO) should possess all and any information necessary to conduct a sample collection session with an athlete who is a minor. This includes confirming wherever necessary that parental consent clauses are in place when arranging testing at an event.

For the most part, when minors are involved, the standard notification process and the sample collection procedure as a whole remain unchanged. There are however some modifications that may be made to the usual doping control procedures when minors are requested to provide a urine sample:

• In planning or arranging for the actual sample collection, the ADO and DCO conducting the test must consider whether there will be any sample collection for athletes who are minors that may require modifications to the standard procedures for notification or sample collection. And, where these are necessary, the DCO has the authority to make modifications as the situation requires when possible and as long as such modifications will not compromise the identity, security or integrity of the Sample.

- Athletes who are minors may always be accompanied by a representative throughout the entire sample collection session. But, the representative shall not witness the passing of a urine Sample unless requested to do so by the minor. The reasoning behind that is to ensure that the DCO is observing the sample provision correctly.
- The DCO and /or ADO shall consider the appropriate course of action when no adult is present at the testing of an athlete who is a minor and shall ac commodate the athlete in allowing him to locate a representative in order to proceed with testing.
- Based on the circumstances, if the minor declines the presence of a personally chosen a representative, the DCO or Chaperone, as applicable, shall consider whether a third party ought to be present during notification of and/or collection of the Sample from the athlete. But, again, it is the DCO who shall determine who, in addition to the sample collection personnel, may be present during the sample collection session, namely the minor's representative and/or chaperone, to observe the sample collection session (including observing the DCO when the minor is passing the urine sample, but again, this representative should not directly observe the passing of the urine sample unless requested to do so by the Minor.)
- Should a minor decline to have a representative present during the sample collection session, this should be clearly documented by the DCO. This does not invalidate the test, but it must be recorded.
- And finally based on this same principle of accommodation, should a minor fall within a registered testing pool, the

preferred venue for all out-of-competition testing is a location where the presence of an adult is most likely, e.g. training venue.

To put it simply, although it is not mandatory, all athletes who are minors are entitled to have a chaperone and/or representative present with them during the course of doping control. And, as is the case with any other athlete, minors cannot be absolved from providing the sample when requested and properly notified to do so.

#3

THERE IS A LOT OF TALK IN THE NEWS ABOUT THE TOUR DE FRANCE WINNER AND HIS DOPING CASE. CAN YOU EXPLAIN WHAT THIS IS ABOUT?

Three time Tour de France Champion and Team Saxo Bank-SunGard rider Alberto Contador was suspended in September 2010 after testing positive for the performance-enhancing drug and banned substance clenbuterol during last year's Tour de France, which he went on to win.

The Spanish cyclist tested positive for just 50 picogrammes of clenbuterol, a very small amount, which Contador blamed on contaminated beef. The 28-year-old Spaniard was initially given a one-year-ban by the Spanish Cycling Federation (RFEC) in January. However, he appealed against the ban, and he was acquitted by the RFEC after the Spanish cycling federation reversed its proposal to ban him for one year, ruling he was not at fault for his positive test at the Tour de France.

The ruling came three weeks after the Spanish federation recommended a reduced one-year suspension rather than the standard mandatory two-year penalty for a first anti-doping rule violation. Contador's team then pushed for him to be cleared and claimed he should not be punished. Accordingly, they appealed the first instance decision.

At the national-level appeal, Contador presented further evidence based along UCI and WADA anti-doping rules that allow the "elimination" of a sanction if the athlete can demonstrate "no fault or negligence" on their part. The basis of Contador's defense was that he claimed to have unintentionally ingested the banned substance by



eating meat contaminated with Clenbuterol on a rest day during the Tour de France and that as a result he had no fault in the resulting adverse analytical finding.

Although this defense can truly only be scientifically proven to happen in a very small percentage of circumstances, this case highlights a growing concern that clenbuterol could be consumed unwittingly by eating meat from animals who were fed the drug.

So, Clenbuterol, which helps burn fat and build muscle, remains on WADA's zero-tolerance list.

Consequently, although Contador was cleared of any wrongdoing by his national Spanish Cycling Federation, there is still a long way to go in the doping case. The International Cycling Union (UCI) and the World Anti-Doping Agency can and likely will appeal the Spanish decision to the International Court of Arbitration for Sport (CAS). The UCI has one month to appeal the federation's decision, while WADA has another 21 days after that. The UCI

has said that it was waiting to receive the full dossier and would issue a decision on whether it would appeal within its 30 days.

WADA awaits the decision of the UCI after which it will make its own decision on whether or not to appeal.

WADA and UCI may also decide to appeal jointly. Because of WADA's maintained zero-tolerance approach to the use of Clenbuterol, one can assume that an appeal is pending. If this is the case, the whole sporting world will be impatiently awaiting the final decision from CAS once it has deliberated on all the issues.

THANK YOU FOR READING THE IPOD: THE INFORMA-TION PORTAL ON DOPING

If you have any specific question or a suggestion for the next edition of the IPOD please contact Barbara at

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ISSF STANDS OUT AGAINST DOPING

The World Anti-Doping Association

– WADA – the agency that promote,
coordinate and monitors the fight against
doping in sport in all its forms, congratulated the ISSF for the results achieved
with its anti-doping program.



play true

WADA was established in 1999 as an international independent agency composed and funded equally by the sport movement and governments of the world. Its key activities include scientific research, education, development of anti-doping capacities, and monitoring of the World Anti Doping Code (Code) – the document harmonizing anti-doping policies in all sports and all countries.

Next November, WADA will submit to its Executive Committee an official report on the compliance of anti-doping organizations (such as the ISSF and others) with the World Anti-Doping Code, the international reference for anti-doping matters.

In the lead-up to this official report, WADA informed the International Shooting Sport Federation that they consider the ISSF anti-doping program to be currently in line with the Code, congratulating the ISSF for its commitment in fighting doping in the sport.

The ISSF never spared energies in fighting doping within its competitions and in the shooting sport world, with a program led by the President of the ISSF Medical Committee, Dr. James Lally. A dedicated section of the ISSF website, at www.issf-sports.org, is a reference point within the shooting sport, providing all the information related to the anti-doping matter.