

#### The argument in favor of doping

#### September 17 2014

Ahead of Friday's court ruling on whether ASADA's investigation into the Essendon Football Club was lawful, world leader in practical and medical ethics Professor Julian Savulescu, looks at whether there is a role for performance-enhancing drugs in elites sports.

"The Australian Sports Anti-Doping Authority has built a "non-presence" drug case against 34 Essendon footballers, adopting a strategy similar to the one used to ban Lance Armstrong without a positive test." [The Age, June 14 2014]

# 1. What should we think about the drugs "scandal" at Essendon says about the so called "war on doping" in the AFL, and in sport in general?

This fiasco has been going for two years. It is a waste of public money. You would have thought they were an international ring of paedophiles given the amount of money, legal expertise and attention this issue has received. It is a national embarrassment.

At worst, Essendon players were taking Thymosin Beta 4. This is a naturally occurring substance in the human body thought to be involved in healing and repair. If the rules set down by WADA ban this, then the rules are absurd to classify something that assists recovery from injury as an illegal enhancement. Rugby and AFL are terribly damaging to players' bodies. They ought to be on everything that protects them from this lifelong damage, provided it is safe.



What should be banned, but isn't, is the use of analgesics, local anaesthetics and anti-inflammatory drugs during training and competition that perpetuate further damage. It is absurd.

Why are we wasting millions of dollars of taxpayers' money vilifying people from taking safe, natural substances to help them recover from injury?

The problem with WADA is that is based on a fanatical, quasi-religious crusade against any kind of substance used to enhance <u>performance</u>. That singular value is inconsistent with sport and life. It is also virtually impossible to enforce. We should rethink the values that inform our policy. People ought to be able to take substances that promote <u>health</u> and recovery.

## 2. What does the Essendon situation say about the fairness of the current anti-doping rules and the issue of player welfare?

It shows that the AFL, WADA, ASADA don't really care about player welfare. There is no evidence of anyone being harmed during this supplements scandal. Indeed, the alleged substance, thymosin beta 4, has only ever been used in clinical trials to assist regeneration and repair after damage. It would promote player health. Yet analgesics and local anaesthetics are allowed by WADA and ASADA, which increase damage. So they ban things beneficial for health and allow things which are damaging. It is not health they care about, but some "drugs". But these are naturally occurring substances that the body already produces to manage injury.

It is grossly unfair because the rules are either unclear or poorly based on any coherent ethic. Caffeine is performance enhancing - it is not natural



to the body and it is dangerous if taken in large amounts. Is Thymosin Beta 4 more dangerous than caffeine? On the evidence available, it is hard to see how it is.

Analgesics, anti-inflammatory drugs and <u>local anaesthetics</u> are ubiquitous in football and rugby, and are used during competition to enable athletes to continue to perform and perform better. This is dangerous: athletes go on to get worse injuries than they would have received by playing through the pain. They are also addictive. American football's National Football League is currently being sued by over 500 ex-players over the use of such painkillers, which has left many players addicted, and others suffering side effects from the drugs, or from playing through serious injuries.. But most importantly, for the spirit of sport, analgesics obviate the need for courage, determination and "toughness" that sport is meant to test. One player is quoted as saying:

"The stuff works. It works like crazy. It really does. There were whole seasons when I was in a walking boot and crutches. I would literally crutch into the facility and sprint out of the tunnel to go play."

Such painkillers, like Tramadol, ought to be banned, in my view, at least during competition.

## 3. Should we support a lifting of a ban in doping in professional sport?

Yes.

It is unenforceable. The only way to catch people using naturally occurring substances like Thymosin Beta 4 is through constant surveillance, forced testimony or they take excess amounts. The Lance Armstrong-style witch-hunt with forced testimony in exchange for more



#### lenient punishments.

You can't do blood or urine tests to accurately detect the use of substances which are a part of normal physiology because there is a normal human variation. I would be in favour of allowing people to take substances which leave normal physiology intact. You can concentrate then identifying abnormal physiology - which is easy to detect - or substances which aren't a part of natural physiology, which can be tested for, like caffeine (which incidentally used to be banned but is now allowed).

This is safe, enforceable and allows you to concentrate on stuff that dangerous or corrupts the spirit of a particular sport. But assisting recover is not against the spirit of sport - it si the point of medicine.

### 4. What would be the major benefits to legalising doping in a competition like the AFL?

Players could have longer careers; recover from injuries better. Physiological doping would be like proper diet and hydration. It would allow doctors to maximise physiology for performance and health.

## 5. The AFL is a signatory to the World Anti-Doping Agency code - should AFL administrators consider no longer being a signatory, and if so why?

The AFL should no longer be a signatory to the WADA code. It is out dated, unfit for purpose and unethical. They should allow physiological performance enhancement - adjustment of physiological parameters maintaining a normal physiological range. Supervise athletes health through qualified doctors and ban unsafe practices.



The only place TB4 would be banned is under the Code is under a general clause:

"as well as any other growth factor affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilisation, regenerative capacity or fibre type switching and other substances with similar chemical structure or similar biological effect(s") ...

Arguably, TB4 affects regenerative capacity. Can someone please explain to me why we should ban something that assists regeneration and repair? Surely we should be offering people growth factors that assist regeneration and repair. WADA is walking in the wrong direction, the opposite direction to where a rational policy would lead us.

## 6. If the doping ban was lifted in the AFL, should all drugs be legalised? What exceptions might there be?

Substances or practices that are unsafe, like gene doping or using unresearched novel agents.

Substances which corrupt the spirit of a particular sport should be banned. Sport should be about having to deal with pain and not increasing injury through the use of analgesics during competition. They should be banned, in the interests of player health and the spirit of sport. The worst kind of doping is mental doping - the use of substances to change fear, or pain, or determination. Fortunately, the things, like cocaine or amphetamine, are relatively easy to detect because they are not natural.

## 7. What about our children? Won't this send the wrong message to children taking part in sport?



Having given many talks on the legalization of doping, one objection comes up time and again. Allowing drugs in sport will send the wrong message to children and harm them. This objection, however, fails at many levels.

Firstly, there are many things which are legal for adults but not legal for children such as drinking alcohol and driving. This is an expression of the risks involved and the requirement for maturity and competence in handling those risks. The same applies to performance enhancing drugs.

Secondly, the message which would be sent is that it is permissible to take drugs which are safe enough to enhance performance, but not dangerous performance enhancers. This is the message that is sent by now allowing caffeine. What children currently see though is that athletes cheat and that you need to take drugs from the black market to compete. They see mixed messages from athletic practice and societal agencies like WADA. It is ok to take caffeine and analgesics, according to WADA and ASADA, but not TB4. It is ok to play rugby and risk breaking your neck, but not take steroids to recover from injury. Regulation should be about ensuring a health, safety and maximising performance. We should use science to achieve these goals, not reject it

Thirdly, there are only limited resources for the prosecution of a war on drugs. It is far better to use these to prevent the use of performance enhancers in children, than spread them thinly over the whole of sport. And for testing athletes for inappropriate use of painkillers, anti-inflammatory drugs, amphetamines and other dangerous drugs that would damage their health.

I don't want my kids taking things that are dangerous for their health. There are plenty of performance enhancing <u>substances</u> that are safe. I would want them to increase their performance, with say beetroot extract, which increases performance by about 20 per cent, if it is safe.



The main issue is safety, not performance enhancement.

#### Provided by Monash University

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