

IOC-ASOIF MEETING : UNITED TO BEAT DOPING



The IOC and ASOIF executive boards share the podium for their annual meeting.

Prior to their annual meeting with the IOC Executive Board on 27th April, the representatives of the twenty-five federations which make up the ASOIF, the Association of Summer Olympic Federations, met for its 8th general assembly during which they studied the documents relating to the fight against doping submitted to them by the IOC. At the meeting it was also decided, contrary to earlier plans, to postpone elections for the ASOIF Bureau until the autumn.

This meeting between the IOC Executive Board and the IF representatives will be remembered as a landmark in Olympic history. Indeed, the unanimous adoption by the ASOIF assembly of a draft agreement on the prevention of doping in sport should enable the Olympic family to speak with one voice where the fight against doping is concerned. During this meeting, Prince Alexandre de Merode, Chairman of the IOC Medical Commission, citing the main principles of IOC anti-doping policy, called for "total collaboration, without

exception" from the federations. We wish to ensure united action and unified controls for all Olympic sports. It is time that the sports movement recognized that it cannot just sit by and watch its own destruction through doping.

UNANIMOUS VOTE

This unanimous vote, after certain amendments, marks a decisive step in the intensification and institutionalization of the fight against doping, in that it establishes one
(Continued on page 197)





The representatives of the International Olympic Sports Federations during their meeting with the IOC Executive Board.

(Continued from page 795)

single set of regulations for all the federations against those who cheat. The list of banned substances and products takes into account the particularities of each sport. Between now and the start of 1990, this agreement should see the implementation of a complex operational system. First of all, an International Olympic Anti-Doping Committee will be created, with the task of establishing basic principles and ensuring co-ordination between the representatives of Federations, NOCs, athletes, the IOC Medical Commission and the medical commissions of the IFs and the NOCs. An executive working group appointed by the committee will draw up recommendations and proposals with the IFs and the accredited laboratories. Another commission will have the task of examining and submitting positive cases. The rights of the accused athlete will be respected, as he or she will

be able to appeal against the decision taken concerning his or her case. The system must be fair to everyone in respecting the sensibilities of all involved, but at the same time top level sport has to come to terms with the fact that it will not be allowed simply to do whatever it likes.

Under the terms of the agreement, the federations undertake to have their controls carried out by IOC-accredited laboratories. Such a procedure would be greatly simplified if a mobile laboratory could be rapidly made available. The cost of setting up of such a laboratory, for which the Olympic Movement would have sole responsibility, explained the IOC President, has been estimated at one million dollars, and the annual operating costs are put at 500 thousand dollars. It is understandable that the IOC is seeking to interest a sponsor in such a project.

1988 DOPING CONTROLS

The Prince de Merode also gave a report on the samples analysed by IOC-accredited laboratories in 1988. Out of 47,069 samples analysed, 1,153 were found to be positive, or 2.45% of the total. In 1987, there were 854 positive cases out of 37,882 samples analysed, or 2.25%, and in 1986 the figure was 623 cases out of 32,982, or 1.89%. It is naturally at major international meetings that the highest percentage of positive samples is recorded, with a figure of 2.84%. Before major championships the figure is 2.70%.

National competitions produce a figure of 2.53%, while samples from unannounced out-of-competition tests produce 2.18% positive cases.

The banned substances which are most frequently detected in samples are anabolic steroids (791 cases), particularly nandrolene (304), and then testosterone (155). Then come stimulants (420) like pseudoephedrine (140) and phenylpropanolamine (109); narcotics (58), notably codeine (35 cases); diuretics (57); probenecide, a masking agent (19) and beta blockers (8).

The COOB'92's presentation to the International Federations.



IOC-ASOIF AGREEMENT ON DOPING PREVENTION

Aware of the need to establish ever-closer co-operation, in order to ensure the success of the fight against doping, and in view of the principles stipulated in the International Olympic Charter against Doping in Sport, and bearing in mind the extensive Doping control programmes carried out at present by International Summer Olympic Federations,

The International Olympic Committee and the International Summer Sports Federations hereby agree :

1. To harmonize as rapidly as possible their anti-doping rules and procedures, both for controls during, and out of, competition (unannounced tests).
2. To adopt each year as a basic minimum the list of banned classes of doping substances and methods of doping as established by the IOC Medical Commission and to effect controls as relevant to each Sport.
3. To harmonize the sanctions for violations to the anti-doping regulations in accordance with the recommendations made by the IOC and to ensure their application at national level.
4. To recognize sanctions given by another International Federation.
5. To use the laboratories accredited by the International Olympic Committee, as well as the IOC's mobile testing laboratory for all major international competitions and for out-of-competition testing.
6. To co-operate fully with the National Olympic Committees, National Federations and Governmental organizations in order to fight against the trafficking of doping substances in Sport.