

**REPORT ON THE ACTIVITIES OF THE
MEDICAL & ANTI-DOPING COMMITTEE
IN THE PERIOD 2007 -2008**



**Report from Don McKenzie
Medical & Anti-Doping Committee Chairman
For the XXXII. ICF Congress in Rome 2008**

Members:

Dr. B. Berglund (SWE), Dr. L. Broad (AUS), Dr. N. Pierce (UK), Dr. J. Ramos (POR), Dr. J. Verstuyft (BEL), Dr. D. McKenzie (CAN) Chair

1.0 Meetings of the ICF Medical and Anti-Doping Committee

The ICF Medical and Anti-Doping Committee met formally on two occasions: April 2007 and June 2008. Members have also met at Medical meetings and throughout the competitive season at different regattas.

2.0 Relationship with the IOC Medical Committee

2.1 Meeting of the International Federations Medical Committee Chairs

This annual meeting brings the Chairs of the IF Medical Committees together with the IOC Medical Committee. The ICF has been represented at these meetings in 2007 and 2008. Important agenda items include: research activities of the International Federations, sport and health programs of the IOC and IF, preparations for the Olympic Games and doping control issues.

2.2 IOC Medical Committee Representative

The ICF has been represented on the IOC Medical and Scientific Independent Panel to evaluate the use of beta agonists (asthma medications) at the Salt Lake, Athens, Torino, and the Beijing Olympic Games.

2.3 IOC- ICF Publication

The ICF Medical and Anti-Doping Committee has been communicating with the IOC Medical Commission Sub-Committee on Publications in the Sport Sciences. The IOC publishes two series: the Encyclopaedia of Sports Medicine, on major topics in sports medicine and sport sciences, and the Handbooks of Sports Medicine and Science. We have had discussions regarding a Handbook on Canoeing, which represents a significant undertaking but also a valuable addition to the Sports Medicine and Science literature. The members of the Committee have prepared a Table of Contents that is being reviewed by this IOC Sub-Committee.

3.0 Doping Control

3.1 ICF Website

Attention should be drawn to the material now available on the ICF Website under 'Medical and Anti-Doping'. Information on all of our Doping Control Programs can be found on the website with valuable links to WADA, CAS and the IOC. Sanctions are reported on the website with the name of the athlete, NF, infraction and period of ineligibility.

3.2 The new WADA Code

The ICF Doping Control Program continues to grow and will undergo another major change with the adoption and implementation of the new WADA Code which takes effect January 1, 2009. All International Federations must be code-compliant by this date. This will require a detailed revision of the Doping Control Rules of the ICF, which will be placed on the ICF Website once it has been approved by the Executive Committee. The new Code introduces a number of significant changes to the doping control program that will be relevant to all Federations and these should be reviewed.

3.1 In and Out-of–Competition testing

Additional in-competition tests were completed in Flatwater and Slalom in 2007. A total of 135 tests were done in this year. The data for 2008 is not complete but at the Olympic Games there were 132 tests on canoe athletes with 20 blood tests and 28 tests for EPO.

The Association of National Anti-Doping Organizations (ANADO) has been retained to conduct our out-of competition program and maintain our ‘whereabouts’ records. In 2007 there were 256 Out-of-Competition tests conducted on canoeing athletes by ANADO who perform testing for both the ICF and WADA. We have an excellent relationship with ANADO and the partnership with WADA helps to prevent duplication of testing. One hundred percent of the ICF Out-of-Competition testing program is targeted.

3.2 Registered Testing Pool (RTP)

The ICF RTP currently has 181 athletes who provide detailed whereabouts information on a quarterly basis. More athletes are using ADAMS, the WADA computerized Anti-Doping administration and management system. ANADO maintains and updates the whereabouts records and shares this information with WADA.

3.3 Therapeutic Use Exemptions (TUE)

In 2007 there were 119 TUE Certificates issued by the ICF TUE Committee. As of Sept 30, there have been 107 requests in 2008.

3.4 General Comments

The number of positive cases is lower than the last report to the Congress but the use of anabolic and masking agents continues to be a concern. It remains evident that Canoe/kayak athletes will use drugs, illegal supplements and other means to enhance performance.

Doping Control is an expensive and labor-intensive program and demands considerable energy from the staff of the ICF and the Medical and Anti-Doping Committee members. The integration of the ICF and WADA testing program has

created some efficiencies, however, the ICF does not receive information on a regular basis from the National Federations or the NADOs on the testing of Canoeing athletes. This is the last piece of the puzzle and these programs need to be included in the ICF-ANADO coordinated plans.

4.0 Research

The ICF is one of the few International Federations without a supported research program. Simple descriptive studies pertaining to injuries in the sport, injury prevention, the use of supplements etc. are well within the capabilities of the clinicians and scientists that form the Medical and Anti-doping Committee and should be supported. The IOC Medical Committee views research as an important aspect of the Medical contribution to sport and health and the lack of a research program is a significant shortcoming.

5.0 Future Direction and Recommendations

Continue to work with ANADO, WADA and National Federations to develop an integrated doping control program.

Doping Control discussions should be part of any educational seminar or symposia that targets coaches, athletes and/or medical personnel. The ICF Education program on Doping needs to receive a higher priority.

Allocate resources to initiate a modest research program for the ICF that will improve the sport and be visible to other International Federations, IOC and WADA.