

GAA ANTI-DOPING CODE

Preamble

The GAA is dedicated to the ideals that in its Games the spirit of fair play prevails, the health of players is paramount, and that doping can have no place in Gaelic Games. The GAA is committed to cooperate with the Irish Sports Council (ISC) to advance these ideals.

The GAA also recognises that in enforcing this Anti-Doping Code the constitutional and legal rights of the individual must always be respected.

The GAA realises that any finding of a breach of the Code has the potential to damage the good name of the person involved. Therefore, where a doping infraction is alleged, the case must be proved beyond reasonable doubt. All practicable steps must be taken to avoid the identification of any person under investigation for any alleged infraction of the Code.

Chapter I

Article 1 Definitions

'Participant' means any player, coach, trainer, official, advisor, medical or paramedical personnel working with or treating players participating in or preparing for any Senior Intercounty Championship and National League games.

'Prohibited Substance' and **'Prohibited Method'** have the meanings set forth in **Appendix A** to this Code.

'I.O.C Classification' means as set forth by the Olympic Movement Anti-Doping Code of the International Olympic Committee, as published from time to time.

'Positive Test Result' means the result of a test on a sample provided by a player pursuant to this Code, which reveals the presence of a substance or use of a method prohibited under this Code.

'GAA Administrative Officer' means the person appointed as such by the GAA to oversee the implementation of the Anti-Doping Programme, and shall include anyone duly authorized by him to act in his place at any particular venue.

'DCO' means the person appointed by ISC to act as Doping Control Officer.

Reference to:

- (a) the singular includes the plural, and the plural includes the singular; and,
- (b) one gender includes the other gender.

Article 2

This Code applies to all participants competing in or concerned with Senior Football and Hurling Intercounty Championship and National League Games.

Article 3

Notwithstanding the obligations of other participants to comply with the provisions of this Code, it is the personal responsibility of every player, subject to the provisions of this Code, to ensure that he does not use any prohibited substance or any prohibited method.

It shall be a defence for any player to show that a duly qualified medical practitioner had prescribed the substance in question to alleviate a particular ailment and not so as to enhance playing performance.

Chapter II

Article I

1. Doping is prohibited.
2. Recommending or proposing or authorising or condoning or facilitating the use of any prohibited substance or prohibited method is also prohibited.

Article 2

Doping is: the use of an expedient (substance or method) which is potentially harmful to a player's health and/or capable of enhancing his performance, or the presence in the player's body of a prohibited substance, or evidence of the use thereof, or evidence of the use of a prohibited method as described in the Olympic Movement Anti-Doping Code (refer **Appendix A**).

Chapter III

Article 1

The GAA, in cooperation with the ISC, will facilitate the carrying out of tests at any of its venues agreed with the ISC.

Article 2

The GAA Disciplinary Committee and Appeal Committee (set up under this Code) shall accept the result of any test carried out by a laboratory currently accredited and authorised by the ISC for testing. The onus of proof, on the balance of probabilities, is on the person who claims the GAA Disciplinary Committee or Appeal Committee, as the case may be, should not accept the result. Any certificate, notice or form of the laboratory carrying out the testing shall, until the contrary is proved, be sufficient evidence of the contents thereof. A certificate purporting to be signed by the Chief Executive Officer of the ISC that a particular laboratory is an accredited laboratory shall be accepted, until the contrary is shown, that it is so accredited.

TESTING FOR DOPING

Article 1

Sampling and testing of players must be conducted substantially in conformity with the procedures described in **Appendix B**.
Minor irregularities, which cannot reasonably be considered to have affected the results of otherwise valid tests, will not invalidate such results.

Article 2

Testing will consist of sample collection, separation of the sample into two parts and analysis thereof. If the test on the first part of the sample (the 'A' sample) does not indicate the presence of a prohibited substance or the use of a prohibited method, the second part of the sample (the 'B' sample) will be disposed of and no further action will be taken.
If analysis to the 'A' sample indicates the presence of a prohibited substance or the use of a prohibited method, the GAA will then inform the person who was tested of the test result and that it believes that an infraction may have been committed. The player will be asked for an explanation.

Article 3

The player may request that the 'B' sample be tested. If no request for a test on the 'B' sample is received by the GAA within 14 days of notification of the person, the person shall be deemed to have accepted the result of the 'A' sample analysis.

If an analysis of the 'B' sample is requested, the person who was tested and the representative of his choice are entitled to be present when the 'B' sample analysis is carried out. A representative of the GAA may also be present. The 'B' sample analysis result will be notified to the GAA, who will then inform the person who was tested.

INELIGIBILITY PENDING DETERMINATION OF DISCIPLINARY PROCESS

A player shall be ineligible to play in any GAA competition from the date of the notification to him of a positive test result of the 'A' sample until there is a finding in his favour:

- (i) as a result of the analysis of the 'B' sample;
- (ii) by the Disciplinary Committee, or;
- (iii) by the Appeal Committee.

Chapter IV

Article 1

Disciplinary Committee

A panel of individuals shall be maintained who, from time to time, may be invited to form a Disciplinary Committee, which will hear cases where the ISC has provided evidence that a doping infraction has taken place. The Committee, three in number, shall comprise persons who are expert in medical, legal, and pharmacological matters relevant to Anti-Doping issues.

Article 2

Disciplinary Process

The Disciplinary Committee hearing shall normally be convened within fourteen days of notification to the player of a positive test result, unless the player indicates that he wants the 'B' sample tested. If the test result of the 'B' sample confirms the original positive test result, the Disciplinary hearing will be conducted as soon as possible thereafter. In order to allow time for the Player to prepare his case, the hearing may be adjourned to seek further information at the discretion of the Disciplinary Committee.

The Disciplinary Committee will have the power to receive written submissions as well as any other relevant information from the Player, (and/or Player's representatives), and the GAA Administrative Officer.

Following the hearing, the Disciplinary Committee will notify the Committee's decision in writing to the Player and the GAA Administrative Officer. The Disciplinary Committee shall provide written reasons for reaching its decision.

SANCTIONS

Article 1

Any person found to have committed a breach of the Code will be:

- (1) suspended from all functions, privileges and competitions under the GAA's control;
- (2) suspended from holding office with any Unit of the GAA for the period determined by the Disciplinary Committee.

Article 2

The penalty for a breach of the Code is:

- (1) where the breach of the Code involves:
 - (a) prohibited anabolic agents;
 - (b) peptide and glycoprotein hormones and analogues;
 - (c) a prohibited method; or
 - (d) a refusal to provide a sample;

then:

- (i) a maximum of 48 weeks suspension for the first such breach of the Code; and
- (ii) a maximum of 96 weeks suspension for a second such breach of the Code.

In the case of any other breach of the Code the penalty is:

- (i) a caution; or,
- (ii) a maximum of 48 weeks suspension for the first such breach; and,
- (iii) a maximum of 96 weeks suspension for a second such breach.

Article 3

In any hearing concerning:

- (1) a Positive Test Result for a substance prohibited under this Code; or,
 - (2) the use of a method prohibited under this Code through the administration of substances,
- the Disciplinary Committee shall have regard for reasonable therapeutic activities undertaken at the prescription and direction of a duly qualified medical practitioner.

Article 4

Appeal Committee

An independent Appeal Committee, comprising three in number, will hear any appeal against the Disciplinary Committee's decision. The membership will be drawn from the panel of individuals who are expert in the medical, legal, and pharmacological issues involved and were not concerned with

the Disciplinary Committee proceedings. A party wishing to dispute the findings of the Disciplinary

Committee shall by written notice state the grounds of appeal to the Appeal Committee. The appeal shall be by way of re-hearing of all relevant evidence and material.

Following the hearing, the Appeal Committee will notify the Committee's decision in writing to the Player and the GAA Administrative Officer. The Appeal Committee shall provide written reasons for reaching its decision.

The Appeal Committee may reverse any finding and reduce the penalty imposed by the Disciplinary Committee, but may not increase it.

Hearings of the Disciplinary Committee and Appeal Committee shall be conducted in accordance with natural and constitutional justice.

Chapter V

Article 1

1. These rules shall come into force on and may be amended by resolution of the Annual GAA Congress or Special Congress.
2. These rules are governed by the laws of Ireland.

Appendix 4A

OLYMPIC MOVEMENT ANTI-DOPING CODE PROHIBITED CLASSES OF SUBSTANCES AND PROHIBITED METHODS

1st April 2000

I. PROHIBITED CLASSES OF SUBSTANCES

A. Stimulants

Prohibited substances in class (A) include the following examples:

amineptine, amiphenazole, amphetamines, bromantan, caffeine*, carphedon, cocaine, ephedrines, fencamfamin, formetero***, mesocarb, pentetrazol, pipradrol, salbutamol***, salmeterol***, terbutaline***, . . . and related substances.**

* For caffeine the definition of a positive is a concentration in urine greater than 12 micrograms per milliliter.

** For cathine, the definition of a positive is a concentration in urine greater than 5 micrograms per milliliter. For ephedrine and methylephedrine, the definition of a positive is a concentration in urine greater than 10 micrograms per millilitre. For phenylpropanolamine and pseudoephedrine,

the definition of a positive is a concentration in urine greater than 25 micrograms per millilitre.

*** Permitted by inhaler only to prevent and/or treat asthma and exercise-induced asthma.

Written notification of asthma and/or exercise-induced asthma by a respiratory or team physician is necessary to the relevant medical authority prior to competition. At the Olympic Games, athletes who request permission to inhale a permitted beta agonist will be assessed by an independent medical panel.

NOTE: All imidazole preparations are acceptable for topical use. Vasoconstrictors may be administered with local anaesthetic agents. Topical preparations (e.g. nasal, ophthalmological, rectal) of adrenaline and phenylephrine are permitted.

B. Narcotics

Prohibited substances in class (B) include the following examples:

buprenorphine, dextromoramide, diamorphine (heroin), methadone, morphine, pentazocine, pethidine, ... and related substances.

NOTE: codeine, dextromethorphan, dextropropoxyphene, dihydrocodeine, diphenoxylate, ethylmorphine, pholcodine, propoxyphene and tramadol are permitted.

C. Anabolic agents

Prohibited substances in class (C) include the following examples:

1. Anabolic androgenic steroids

a.

clostebol, fluoxymesterone, metandienone, metenolone, nandrolone, 19-norandrostenediol, 19-norandrostenedione, oxandrolone, stanozolol, ... and related substances.

b.

androstenediol, androstenedione, dehydroepiandrosterone (DHEA), dihydrotestosterone, testosterone*, ... and related substances.

Evidence obtained from metabolic profiles and/or isotopic ratio measurements may be used to draw definitive conclusions.

* The presence of a testosterone (T) to epitestosterone (E) ratio greater than six (6) to one (1) in the urine of a competitor constitutes an offence unless there is evidence that this ratio is due to a physiological or pathological condition, e.g. low epitestosterone excretion, androgen producing tumour, enzyme deficiencies.

In the case of T/E greater than 6, it is mandatory that the relevant medical authority conducts an investigation before the sample is declared positive. A full report will be written and will include a review of previous tests, subsequent tests and any results of endocrine investigations. In the event that previous tests are not available, the athlete should be tested unannounced at least once per month for three months. The results of these investigations should be included in the report.

Failure to co-operate in the investigations will result in declaring the sample positive.

2. Beta-2 agonists

bambuterol, clenbuterol, fenoterol, formoterol*, reprotoerol, salbutamol*, salmeterol*, terbutaline*, ... and related substances.

*Authorized by inhalation as described in Article (I.A.).

For salbutamol the definition of a positive under the anabolic agent category is a concentration in urine greater than 1000 nanograms per millilitre.

D. Diuretics

Prohibited substances in class (D) include the following examples:

acetazolamide, bumetanide, chlortalidone, etacrynic acid, furosemide, hydrochlorothiazide, mannitol*, mersalyl, spironolactone, triamterene, ... and related substances.

* Prohibited by intravenous injection.

E. Peptide hormones, mimetics and analogues

Prohibited substances in class (E) include the following examples and their analogues and mimetics:

1. **Chorionic Gonadotrophin** (hCG) prohibited in males only;
2. **Pituitary and synthetic gonadotrophins** (LH) prohibited in males only;
3. **Corticotrophins** (ACTH, tetracosactide);
4. **Growth hormone** (hGH);
5. **Insulin-like Growth Factor** (IGF-1); and all the respective releasing factors and their analogues;
6. **Erythropoietin** (EPO);
7. **Insulin**; permitted only to treat athletes with certified insulin-dependent diabetes. Written certification of insulin-dependent diabetes must be obtained from an endocrinologist or team physician.

The presence of an abnormal concentration of an endogenous hormone in class (E) or its diagnostic marker(s) in the urine of a competitor constitutes an offence unless it has been proven to be due to a physiological or pathological condition.

II. PROHIBITED METHODS

The following procedures are prohibited:

1. Blood doping means the administration of blood, red blood cells and/or related blood products to an athlete, which may be preceded by withdrawal of blood from the athlete, who continues to train in such a blood-depleted state;
2. Administering artificial oxygen carriers or plasma expanders;
3. Pharmacological, chemical, and physical manipulation.

III. CLASSES OF PROHIBITED SUBSTANCES IN CERTAIN CIRCUMSTANCES

A. Alcohol

Where the rules of a responsible authority so provide, tests will be conducted for ethanol.

B. Cannabinoids

Where the rules of a responsible authority so provide, tests will be conducted for cannabinoids (e.g. Marijuana, Hashish). At the Olympic Games, tests will be conducted for cannabinoids. A concentration in urine of 11-nor-delta 9-tetrahydrocannabinol-9-carboxylic acid (carboxy-THC) greater than 15 nanograms per milliliter constitutes doping.

C. Local anaesthetics

Injectable local anaesthetics are permitted under the following conditions: a. bupivacaine, lidocaine, mepivacaine, procaine, and related substances, can be used but not cocaine.

Vasoconstrictor agents may be used in conjunction with local anaesthetics;

b. only local or intra-articular injections may be administered;

c. only when medically justified.

Where the rules of a responsible authority so provide, notification of administration may be necessary.

D. Glucocorticosteroids

The systemic use of glucocorticosteroids is prohibited when administered orally, rectally, or by intravenous or intramuscular injection. When medically necessary, local and intra-articular injections of glucocorticosteroids are permitted. Where the rules of a responsible medical authority so provide, notification of administration may be necessary.

E. Beta-blockers

Prohibited substances in class (E) include the following examples:

acebutolol, alprenolol, atenolol, labetalol, metoprolol, nadolol, oxprenolol, propranolol, sotalol, and related substances.

Where the rules of a responsible authority so provide, tests will be conducted for beta-blockers.

SUMMARY OF URINARY CONCENTRATIONS ABOVE WHICH IOC ACCREDITED LABORATORIES MUST REPORT FINDINGS FOR SPECIFIC SUBSTANCES

caffeine > 12 micrograms/millilitre

carboxy-THC > 15 nanograms/millilitre

cathine > 5 micrograms / millilitre

ephedrine > 10 micrograms / millilitre

epitestosterone > 200 nanograms / millilitre

methylephedrine > 10 micrograms / millilitre

morphine > 1 microgram / millilitre

19-norandrosterone > 2 nanograms /millilitre in males

19-norandrosterone > 5 nanograms/millilitre in females

phenylpropanolamine > 25 micrograms / millilitre

pseudoephedrine > 25 micrograms / millilitre

salbutamol (as stimulant) > 100 nanograms/millilitre

(as anabolic agent) >1000 nanograms/millilitre

T/E ratio > 6

IV. OUT-OF-COMPETITION TESTING

Unless specifically requested by the responsible authority, out-of competition testing is directed solely at prohibited substances in class I.C. (Anabolic Agents), I.D. (Diuretics), I.E. (Peptide Hormones, Mimetics and Analogues), and II (Prohibited Methods).

LIST OF EXAMPLES OF PROHIBITED SUBSTANCES

CAUTION: This is not an exhaustive list of prohibited substances. Many substances that do not appear on this list are considered prohibited under the term 'and related substances'. Athletes must ensure that any medicine, supplement, over-the counter preparation or any other substance they use does not contain any Prohibited Substance.

STIMULANTS:

amineptine, amfepramone, amiphenazole, amphetamine, bambuterol, bromantan, bupropion, caffeine, carphedon, cathine, cocaine, cropropamide, crotethamide, ephedrine, etamivan, etilamphetamine, etilefrine, fencamfamin, fenetylline, fenfluramine, formoterol, heptaminol, mefenorex, mephentermine, mesocarb, methamphetamine, methoxyphenamine, methylenedioxyamphetamine, methylephedrine, methylphenidate, nikethamide, norfenfluramine, parahydroxyamphetamine, pemoline, pentetrazol, phendimetrazine, phentermine, phenylephrine, phenylpropanolamine, pholedrine, pipradrol, prolintane, propylhexedrine, pseudoephedrine, reproterol, salbutamol, salmeterol, selegiline, strychnine, terbutaline,

NARCOTICS:

buprenorphine, dextromoramide, diamorphine (heroin), hydrocodone, methadone, morphine, pentazocine, pethidine,

ANABOLIC AGENTS:

androstenediol, androstenedione, bambuterol, boldenone, clenbuterol, clostebol, danazol, dehydrochlormethyltestosterone, dehydroepiandrosterone (DHEA), dihydrotestosterone, drostanolone, fenoterol, fluoxymesterone, formebolone, formoterol, gestrinone, mesterolone, metandienone, metenolone, methandriol, methyltestosterone, mibolerone, nandrolone, 19-norandrostenediol, 19-norandrostenedione, norethandrolone, oxandrolone, oxymesterone, oxymetholone, reproterol, salbutamol, salmeterol, stanozolol, terbutaline, testosterone, trenbolone,

DIURETICS

acetazolamide,
bendroflumethiazide, bumetanide,
canrenone, chlortalidone,
ethacrynic acid,
furosemide,
hydrochlorothiazide,
indapamide,
mannitol (by intravenous injection), mersalyl,
spironolactone,
triamterene,

MASKING AGENTS

bromantan, diuretics (see above), epitestosterone, probenecid,

PEPTIDE HORMONES, MIMETICS AND ANALOGUES

ACTH, erythropoietin (EPO), hCG*, hGH, insulin, LH*, clomiphene*, cyclofenil*, tamoxifen*, aromatase inhibitors.

* prohibited in males only

BETA BLOCKERS

acebutolol, alprenolol, atenolol,
betaxolol, bisoprolol, bunolol,
carteolol, celiprolol,
esmolol,
labetalol, levobunolol,
metipranolol, metoprolol,
nadolol,
oxprenolol,
pindolol, propranolol,
sotalol,
timolol.

Appendix 4B

SAMPLE COLLECTION PROCEDURE

1. Notification of Selection for Testing

At any particular venue specified by the ISC, players will be notified in writing that they have been selected for testing by means of an official Sample Collection Form.

2. Reporting for Testing

The player must report to the Doping Control Station as quickly as possible. However, where a player is required

- (i) to receive medical attention;
- (ii) to attend a presentation ceremony;
- (iii) to fulfil media engagements; or,
- (iv) to perform a warm down;

he shall be allowed a reasonable time for any such eventuality, provided that he presents himself at the Doping Control Station not later than ninety minutes from the conclusion of the game. A player who fails to arrive at the Sampling Room within the specified period, or refuses to provide a sample shall be deemed to be in breach of the Anti-Doping Code.

A representative may accompany the player at the testing session.

Sealed drinks will be available at the Doping Control Station.

3. Selecting a Collection Vessel

When the player is ready to provide a sample, the player will be asked to select a sealed sample collection vessel and go to the toilet area with the Doping Control Officer (DCO).

4. Providing a Sample

The player must ensure that the collection vessel remains in the sight of the DCO while the sample is being provided. In order for the DCO to have an unobstructed view, the player will be required to be undressed from mid-waist to mid-thigh. When the required amount of urine has been provided (min. 75ml) the player must return to the Doping Control Station administration room with the DCO. Only the player should handle the sample.

5. Selecting a Sampling Kit

The player will be asked to select a sampling kit, and ensure that the seal is intact.

6. Dividing the Sample

Using the sampling kit, the player will divide his sample between the 'A' & 'B' sample bottles, putting a minimum of 30ml into the 'B' bottle and the remainder in the 'A' bottle. A few drops of urine should be left in the collection vessel, to allow the DCO to assess the suitability of the sample for testing.

7. Sealing the Sample

The player will be invited to seal the two bottles, and ensure there is no leakage.

8. Testing the Suitability of the Sample

The PH and the Specific Gravity of the sample will be tested by the DCO. The reading is recorded on the Sample Collection Form. If the readings are below those recommended the player will be asked to provide another sample.

9. Recording the Information

The DCO records the 'A' & 'B' sample numbers on the Sample Collection Form. The player should check that this is correct and declare any medication they have taken during the past seven days. The player may also record any comments that he may have on the testing session.

10. Certifying the Information

The DCO will then ask the player and the player's representative (if any) to check the information on the form and sign it, if the player is satisfied that it is accurate. The DCO will also check and sign the form. The player will be given a copy of the form, and the player will then be free to leave the Doping Control Station.

11. Selection of Players for Testing

11.1 The random draw for the selection of players to be tested shall be made no later than the start of the second half of the game.

11.2 The DCO shall provide a set of balls numbered one to the number corresponding to the total number of players and stand-by players participating. The balls shall be contained as to ensure that the numbers thereon are not visible to the person making the draw.

11.3 The first two numbered balls drawn shall determine the players from each team to be tested. The third numbered ball drawn will determine the stand-by player to be tested in the event of one of the selected players being injured.

11.4 An official of the GAA shall supervise the draw for the selection of players for testing. Whenever possible, an independent third party, for example, a match official, shall make the random selection, and one representative from any team involved may attend.