

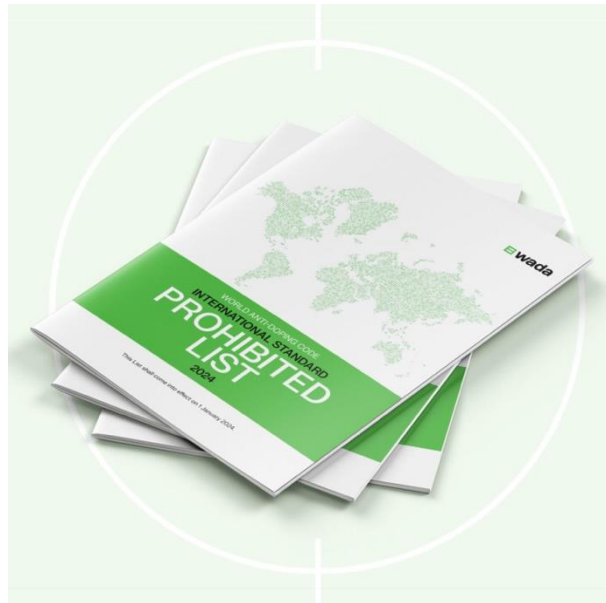


Substances and Methods on the Prohibited List

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Prohibited List



The Prohibited List (List) is the basic document that identifies the substances and methods that are prohibited in sport.

The first List of Substances and Methods Prohibited in Sport was published in 1963 under the leadership of the International Olympic Committee (IOC).

Since 2004, and under the mandate of the World Anti-Doping Code (WADA), the World Anti-Doping Agency (WADA) is responsible for the preparation and publication of the List annually.



Does the List change or be updated?

- Each year, a group of experts review the List and update it according to medical and scientific evidence.
- The revised draft of the List is then sent to interested parties for consultation.
- The Final List is published in October on the WADA website, so that everyone has time to understand the changes.
- The List comes into force on January 1 of the following year. It is very important that Athletes and their team are aware of any changes to the List.





How the list is made?

A substance or method will be eligible for inclusion in the List if it meets two of the following three criteria:

IMPROVE PERFORMANCE

ATTENTION AGAINST HEALTH

AGAINST THE SPIRIT OF SPORTS



PROHIBITED LIST:

SUBSTANCES & METHODS PROHIBITED AT ALL TIMES

S0 Non-approved substances	4
S1 Anabolic agents	5
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. male hypogonadism.	
S2 Peptide hormones, growth factors, related substances, and mimetics	7
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. anaemia, male hypogonadism, growth hormone deficiency.	
S3 Beta-2 agonists	9
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. asthma and other respiratory disorders.	
S4 Hormone and metabolic modulators	10
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. breast cancer, diabetes, infertility (female), polycystic ovarian syndrome.	
S5 Diuretics and masking agents	12
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. heart failure, hypertension.	
M1 – M2 – M3 Prohibited Methods	13

SUBSTANCES & METHODS PROHIBITED IN-COMPETITION

S6 Stimulants	14
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. anaphylaxis, attention deficit hyperactivity disorders (ADHD), cold and influenza symptoms.	
S7 Narcotics	16
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. pain, including from musculoskeletal injuries.	
S8 Cannabinoids	17
S9 Glucocorticoids	18
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. allergy, anaphylaxis, asthma, inflammatory bowel disease.	

SUBSTANCES PROHIBITED IN PARTICULAR SPORTS

P1 Beta-blockers	19
Some of these substance(s) may be found, without limitation, in medications used for the treatment of e.g. heart failure, hypertension.	

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MAIN MODIFICATIONS TO THE LIST



<https://www.wada-ama.org/en/resources/world-anti-doping-program/2024-prohibited-list>

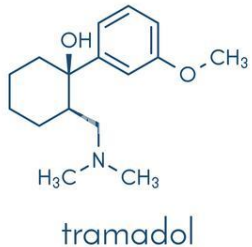


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TRAMADOL Prohibited in Competition



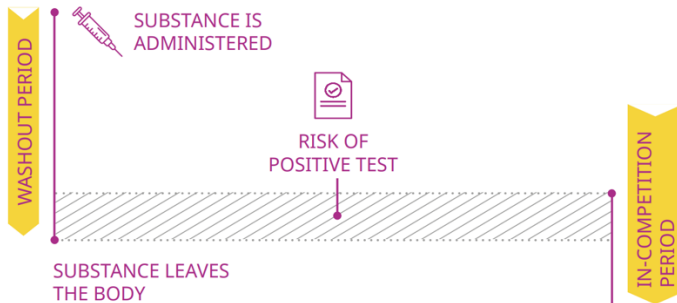
- Before January 1, 2024, tramadol was part of WADA's monitoring program, but was not banned.
- Data from the monitoring program showed that tramadol has been used significantly in certain sports, including cycling, rugby and football.



- Tramadol is used worldwide as a pain reliever and is often administered in formulations with other medications such as paracetamol or acetaminophen.
- Due to its opioid properties, it is a controlled substance in many countries. It has been shown that the use of Tramadol may cause a risk of physical dependence, dose dependence and addiction, including overdose, to tramadol.

TRAMADOL Prohibited in Competition

- Tramadol will be prohibited in competition from January 1, 2024 in the S7 category. Narcotics Athletes cannot use the medication in competition unless they have been granted a Therapeutic Use Authorization (TUE).
- Please note that tramadol administered shortly before the competition period may still cause an adverse analytical finding (AAR) (in competition).



Washing period

When treating athletes, medical professionals should be aware of washout periods for tramadol to reduce the risk of an RAA.

The washout period refers to the time elapsed from the last dose administered to the time of the start of the competition period (11:59 p.m. on the day before the competition).



TRAMADOL Prohibited in Competition

Use of Tramadol and TUE

If the athlete you are treating needs to take tramadol during the competition period to treat a diagnosed medical condition, the athlete must apply for a Therapeutic Use Authorization (TEA).

Doctors and athletes should contact their National Anti-Doping Organization (NADO), IF or Major Events Organization for more information on how and when to apply.

If the medication was used out of competition during the washout period, the athlete could still test positive during competition. In this case, the athlete can request a retroactive TUE.



Important: TUEs must meet the criteria established in the International Standard for TUEs in order to be granted. Athletes and their medical professionals should carefully consider whether a TUE is likely to be approved and ensure they have the necessary medical documentation to support their TUE request.

If the TUE is not approved, the athlete may face an anti-doping rule violation. See the ISTUE Guidelines or the TUE Physician Guidelines on Pain Management



TRAMADOL

Important change coming on 1 January 2024
Summary for Medical Professionals



ADEL

What is changing?

From 1 January 2024, **tramadol** will be added to the Prohibited List.
It will only be prohibited during the in-competition period.

Why is this important?



Before 1 January 2024, **tramadol** has been on the WADA monitoring program but not prohibited. Monitoring shows that **tramadol** has been used in certain sports including cycling, rugby and football.



Tramadol is used globally as a painkiller and as it has similar properties to other opiates, abuse can be a problem to the risk of dose dependent, physical dependence and addiction, including overdose, it is a controlled substance in many countries. To reduce these risks, **tramadol** is often given in formulations with other medications such as paracetamol or acetaminophen.

As a medical professional, you need to be aware that **tramadol** will be prohibited in-competition as of 1 January 2024. Consider this when treating athletes. Athletes may not use the medication in-competition unless they have been granted a Therapeutic Use Exemption (TUE). Note that **tramadol** given shortly prior to the in-competition period may still result in a (in-competition) positive test.

Tramadol usage and TUEs

If the athlete you are treating needs to take **tramadol** during the in-competition period to treat a diagnosed medical condition, the athlete must apply for a Therapeutic Use Exemption (TUE). Physicians and athletes should contact their National Anti-Doping Organization (NADO), IF or the Major Event Organization for more information on how and when to apply.

If the medication was used out-of-competition during the washout period, the athlete could still test positive during the competition. In this case, the athlete can apply for a retroactive TUE.

Remember, any medical treatment you are providing to athletes needs to respect the anti-doping rules at all times, including when to apply for a Therapeutic Use Exemption (TUE). Please see the [International Standard for TUEs](#), [ISTUE Guidelines](#) or [TUE Physician Guidelines on Pain Management](#) for more details if required.



Important: TUEs must meet the criteria set out in the International Standard for TUEs in order to be granted. Athletes and their medical professionals must consider carefully whether a TUE is likely to be approved and ensure they have the necessary medical documentation to support their TUE application. If the TUE is not approved the athlete may face an Anti-Doping Rule Violation.

Medical professionals need to ensure that medical records/files for the athlete they are treating are complete with all the evidence and information necessary to demonstrate the medical condition and need for the use of **tramadol** to support a TUE application. For a TUE to be granted, retroactively or prospectively, the criteria for a TUE needs to be met.

Donation of blood plasma through plasmapheresis will be allowed

- Plasma donation via plasmapheresis performed at a registered collection center is now permitted and does not require a TUE from January 1, 2024.
- Previously, plasmapheresis was prohibited under M1. Manipulation of blood and blood components.
- However, donation by athletes of plasma or plasma components through plasmapheresis by an officially registered blood donation center is no longer prohibited, allowing athletes to donate for humanitarian or other personal reasons.
- Athletes can donate whole blood or donate plasma through plasma exchange without the need for a TUE.
- It is good practice to keep records, including dates and locations, of your donations in case any medical records are requested.



New washout period for rectal glucocorticoids

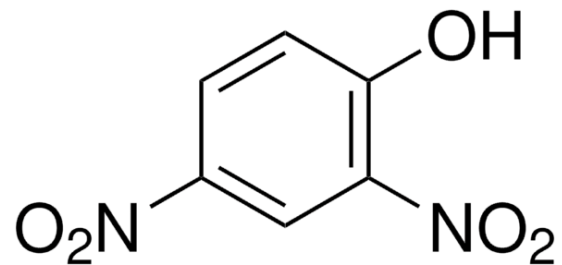
- Athletes who need to use glucocorticoids rectally outside of competition can now follow guidelines published by WADA to know when to stop using them before a competition, or to estimate the time period in which a TUE may be necessary.

Route	Glucocorticoid	Washout period*
Oral**	All glucocorticoids;	3 days
	Except: triamcinolone; triamcinolone acetonide	10 days
Intramuscular	Betamethasone; dexamethasone; methylprednisolone	5 days
	Prednisolone; prednisone	10 days
	Triamcinolone acetonide	60 days
Local injections (including periarticular, intra-articular, peritendinous and intratendinous)	All glucocorticoids;	3 days
	Except: prednisolone; prednisone; triamcinolone acetonide; triamcinolone hexacetonide	10 days
Rectal	All glucocorticoids;	3 days
	Except: triamcinolone diacetate; triamcinolone acetonide	10 days



S0. Unapproved substances

This category is for substances that are not approved for therapeutic use and do not fit into any other classification. In 2024, WADA added some examples, including 2,4-dinitrophenol (DNP), an extremely dangerous compound often marketed for weight loss, and the troponin activators Reldesemtiv and Tirasemtiv, (Currently under investigation to improve muscle function in the treatment of spinal muscular atrophy and amyotrophic lateral sclerosis).



S1. Anabolic Agents

In this category, some examples were added including trestolone and dimethandrolone. This update to the List does not change the status of these compounds, it simply adds more examples.



S2. Peptide hormones

The WADA has restated this section to clarify that testosterone-stimulating peptides (formerly gonadotropin-releasing hormone (GnRH) agonist analogs) are prohibited in men, including busserelin, deslorelin, goserelin, histrelin, leuprorelin, nafarelin, and triptorelin. Histrelin and kisspeptin were also added as examples to the Prohibited List.

Tetracosactide (ACTH 1-24) was added as an example, since it is the first amino acid portion of the natural corticotropin (ACTH) and has all the biological activity of the natural hormone. Capromorelin and ibutamoren (MK-677) were added as examples of growth hormone secretagogues (GHS), which are mimetics of the natural hormone ghrelin, which stimulate the production of growth hormone and, in turn, growth factor. insulin-like growth 1 (IGF). -1).





S4. Hormonal and metabolic modulators

This section was updated to include Rev-Erb- α agonists and added SR9011 as an example. Another important example added to this section is MOTSC-c, more formally known as “mitochondrial 12S rRNA-c open reading frame.” MOTSC-c is marketed in wellness and anti-aging clinics and on social media as a weight loss peptide, even though it is an experimental peptide not approved for therapeutic use in humans.

S5. Diuretics and masking agents

Conivaptan and mozavaptan were added as additional examples of vaptan drugs.

S6. Stimulants Beta-methylphenethylamine (BMPEA)

was added as an example. This stimulant is not a medication, but can be found illegally in dietary supplements.



MONITORING PROGRAM

The substances in the Monitoring Program are not prohibited. WADA laboratories analyze substances in the program to evaluate patterns of use, but athletes will not incur an anti-doping violation for using substances in the Monitoring Program.

By 2024, tapentadol and dihydrocodeine were added to monitor use patterns in competition, and semaglutide (GLP-1 analogue) was added to examine the prevalence of their use in sport.



What medical professionals should do

- Act in accordance with the Anti-Doping Rules by keeping your anti-doping knowledge up to date and asking when you are unsure so that athletes are not put at risk. Review the List before prescribing or administering any substance.
- Please refer to the information on washout periods to understand the risks of a RAA.
- Prepare a complete medical record, with sufficient diagnostic evidence in case a TUE is necessary.
- Talk to your athletes to make sure they know and understand the changes to the List.
- Check the IF rules to find out when the competition period begins and check the TUE application process.
- Learn more about the Prohibited List and TUEs in ADEL.





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We invite you to learn more about the anti-doping world by accessing the ADEL educational platform and the rest of the material from our Anti-Doping Organization.



www.orad-pan.org/educacion

