

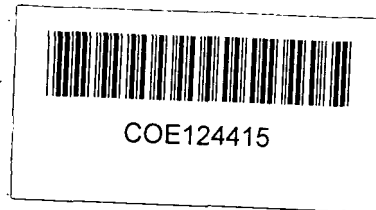
# COUNCIL OF EUROPE

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# CONSEIL DE L'EUROPE

Strasbourg 24 January 1978

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## COMMITTEE FOR THE DEVELOPMENT OF SPORT

(Strasbourg 23-25 May 1978)

### DOPING

Swiss Sports Association

(Extract from "Jeunesse et Sport" 1/1978)

#### Declaration of principle by the Association Suisse du Sport (ASS)

#### Medical-pharmacological manipulations of performance in top-competition sport

The Central Committee of the ASS, in agreement with its Medical Committee and the Société Suisse de Médecine du Sport, has undertaken as its main duty to promote the sports movement as a whole and its socio-hygienic preventive aim. These bodies are devoting their specific skills to achieving that purpose, and they are of the opinion that the same principles of medical ethics as those observed in other branches of medicine apply to sport.

Performance in sport can be improved physiologically through special training, a reasonable way of life, a healthy diet and suitable medical and psychological assistance. Besides these traditional methods, there is a tendency, especially in top-competition sport, to influence performance through the use

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of pharmaceutical substances. This has always been universally condemned and is, in part, forbidden. What is more, according to the latest scientific findings, it does not necessarily produce the effects it has so long been thought to produce. Substances that stimulate the psychomotor system, narcotics, analgesics and, recently, anabolic steroids have been placed on national and international lists of doping substances and their use has thereby been forbidden. This ban can be enforced by means of antidoping checks that use infallible analytical techniques. Experience has shown that abuse of the above-mentioned group of drugs can be successfully combatted by the organisation of regular checks of this kind.

Recently, alongside pharmacological products taken for the purpose of improving performance in sport, other tricks have become popular, and we are now realising that the problem cannot be solved only by prohibitions and checks, but that sports authorities and the medical profession must take a stand in this matter. The principles listed below should, in conjunction with the antidoping rules of the ASS, clarify the situation so that neither athletes, nor auxiliary staff, whether medical or non-medical, nor officials need have any doubts about the use of existing or future ways of manipulating performance illegally in top-competition sport.

#### Principles

1. The duty of the medical practitioner is to treat athletes conscientiously and give them advice concerning permitted and medically justifiable methods, such as diet rest, recuperation and psychology. He must use his medical knowledge in the service of athletes and sport, whilst giving the principle of the prevention and cure of injury and sickness primacy over all else, in particular over the desire for better performance and pressure to succeed.
2. The assumption that success in sport is achieved elsewhere by the use of any means available - including prohibited means - is no reason for our country to do the same. Switzerland, on the contrary, wishes to set an example of fair play and show that it has its own conception of sport. This can only enhance its prospects of success.
3. Methods which improve performance but in whose use the possibility of damage to health cannot be immediately dismissed may not be followed.

4. The administration of drugs to athletes for the purpose of influencing their performance through doping must be refused, as must medical methods whose effects, including possible secondary effects, have not been scientifically ascertained.

5. A medical practitioner may not be required either by the athlete, by his second or trainer or by the sports authorities to apply any methods which he cannot approve in all conscience. He must in no case yield to the demands of athletes, seconds, trainers or managers, and must categorically refuse to apply drugs currently listed as doping substances, to approve their application or to engage in other prohibited practices aimed at improving performance in sport.

6. It is true that the effect of a prohibition is questionable if no checks are made and if any appropriate penalties are not applied. Nevertheless, all action to improve performance in sport by means contrary to medical or sporting ethics, must be forbidden. The prohibition must be upheld even if the health risk is not proved or if analytical detection of such action is not yet feasible.

7. The medical practitioner and the athlete are both responsible for any medical treatment which the former applies to enable the latter to achieve his sporting objectives. No one may legally require an athlete to submit to any medical treatment without his consent. This does not apply to provisions in competition rules directed against the abuse of doping (urine tests, or even blood tests), to compulsory health checks or to inoculations.

8. Intensive information and education action is essential to prevent sport from being reduced to absurdity by the increasingly complicated control systems and the inevitable resultant bureaucracy.

9. An appeal is made to science to endeavour to contribute to the development and application of physiologically and ethically acceptable methods to improve performance in sport (prophylaxis, ways of life and diet, training principles, etc), and at the same to devise techniques for the detection of unauthorised methods which are physiologically and morally unacceptable.

10. The Swiss sports authorities undertake, for their part, to promote the international application of these principles in their discussions with the authorities of other countries.