

## International Network of Humanistic Doping Research

# **Editorial**

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### **UCI's No Needle Policy**

There is apparently no end to the goodwill of the International Cycling Union (UCI) when it comes to opposing doping in sport. Most recently the organization has approved an amendment to its regulations that bans any use of syringes in cycling. The UCI President Pat McQuaid maintained that the initiative is an attempt to banish the sport's culture of the syringe: "We remember the syringes found in hotel rooms, and you know how much that contributes to tarnish the image of the sport," McQuaid told the French newspaper L'Equipe. This statement does little to hide that the UCI's overarching concern is the reputation of the sport. This is hardly surprising.

Cycling does not generate much income by ticket sales. Thus it is more dependent on sponsor and television interest than other sports, and to protect the image of cycling is fundamentally to protect the business value of the sport. In light of this the "no needle policy" appears logical because the syringe is the most powerful symbol of doping. Thus saying no to needles is a very strong anti-doping message.

The Garmin-Cervelo team had already adopted the "no needle policy" before it was proposed by the UCI. Garmin Cervelo's team physician Prentice Steffen expounds the teams intention: "If we can bring up a generation of young riders who wouldn't know how to inject themselves or would be horrified by the idea, that should be our goal." I find it is easy to sympathize with this ambition. The thought of penetrating the skin to inject whatever substance gives me the creeps, and I guess I am not the only one who feels that it should be possible to participate in professional sport without the need of injections.

<sup>1</sup>http://www.cyclingnews.com/news/uci-no-needle-policy-a-possibility-ahead-of-giro-ditalia-says-steffen

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So it appears unproblematic – perhaps even in line with 'the spirit of sport' – when teams decide to include in their house rules the banishment of syringes. Likewise it seems reasonable that the UCI tries to persuade teams to adopt an anti-needle policy. Having said that, the UCI's decision to introduce a rule "in order to prohibit and sanction the use of injections of medicines (or other substances) without a clear medical indication" is nonetheless controversial.

There is a weighty difference between promoting an attitude and enforcing a rule. The former may be rooted in personal convictions and values whereas the latter is associated with sanctions and hence need proper justification. The UCI appears to have realized that "protection of the image of the sport" is too vague to justify the amendment and presents an alternative explanation in the announcement of the rule:

"The UCI Regulations now prohibit injections of medicines or other substances, without a medical indication, that have the objective of artificially improving performance or recovery (vitamins, sugars, enzymes, amino acids, antioxidants, etc.). This measure is above all designed to protect the riders' health and contribute to eradicating doping by restricting a practice that is all too often abused."

The rationale is flawed insofar as riders' inject the legal substances vitamins, sugars, enzymes, amino acids, antioxidants, etc. in order to recuperate and thus protect their health. The UCI has nothing to support the implicit claim that vitamin injections should pose a threat to the riders' health. Moreover, since doping is already banned it seems superfluous to ban possession of a tool that can be used for both health protection and doping purposes. If EPO ampoules and syringes are found in a rider's possession it is clear that he has violated the common anti-doping rules and should be penalized accordingly. If instead syringes and ampoules containing vitamin are found the only justification for sanctioning the rider is that it is banned. It goes without saying that this is not a justification of the prohibition as such.

In the interview quoted above Prentice Steffen unintentionally exposes the dubious foundation for the prohibition:

"Enforcement is always the trick but my understanding is that this won't be a WADA policy but a UCI policy, so a technical regulation that's in the rule book. So it would be an infraction on the same ground as head butting in a sprint.<sup>4</sup>"

The comparison shed light on the problem. The rule against head butting is enforced to prevent riders violating one another. Contrary to this it is impossible to argue that riders' who want to protect their personal health by injecting vitamins are harming other riders. Especially not when the substance in the syringe is accepted if taken in the form of a tablet. The inconsistency in

<sup>&</sup>lt;sup>2</sup>http://www.uci.ch/Modules/ENews/ENewsDetails.asp?id=NzMzMw&Menuld=MTYxNw&LangId=1&BackLink=%2FTemplates%2FUCI%2FUCI5%2Flayout%2Easp%3FMenuID%3DMTYxNw%26LangId%3D1

<sup>&</sup>lt;sup>3</sup> ibid.

<sup>&</sup>lt;sup>4</sup> Cyclingnews. op.cit.



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the prohibition of the use of syringes becomes even more explicit when the UCI specify that the purpose of the prohibition is, among other things, to encourage natural physical recovery by rejecting the principle of the automatic recourse to injections. If the purpose indeed was to "encourage natural physical recovery" the UCI should at the same time ban vitamin pills, energy drinks, and chocolate bars, which are all unnatural means that help athletes recover.

Finally there is the problem of enforcement. It is clear that athletes will no longer carry needles since this is now forbidden. But the rider who wants to dope will then be as cautious with the transportation of the needles as he has learned to be with the transportation of EPO. So as a measure in the fight against doping it is unlikely that the no needle policy will make any difference. Those who will be affected are the riders who want to protect their health and race clean. They will in all likelihood abstain from health protecting injections and accept the increased risk for infections and other ills which is a well-known consequence of overexertion.

The introduction of the UCI's "No Needle Policy" shows that the UCI cares more about cycling as a business than they care about the rider's health.

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