

FREQUENTLY ASKED QUESTIONS (FAQ)

2004 LIST OF PROHIBITED SUBSTANCES (Updated December 18, 2003)

Following a number of questions regularly received by WADA, we will publish answers to those FAQ on the 2004 Prohibited List in order to keep our stakeholders informed and harmonize the worldwide interpretation of this Standard.

- Are **imidazole preparations** permitted when used in topical preparations?
 - o Imidazole preparations for local application can be found in nasal sprays (oxymetazoline, xylometazoline, tramazoline...) or in topical preparations for mycosis (econazole, miconazole...).
 - o Imidazole preparations should be handled as mentioned in the explanatory note present in the 2003 list (Stimulants section). They are therefore authorized for topical use.

- Can **Adrenaline (Epinephrine)** be used for local application?
 - o Adrenaline can be used for local application. This substance can also be used in emergency settings (hemorrhage or anaphylactic shock). However, if a medical team has to administer adrenaline during a competition, the completion of a Therapeutic Exemption Use (TUE) will be required.

- Is **Bupropion** authorized?
 - o Bupropion is authorized.

- What is the status of **narcotics** that are not cited in the list?
 - o **Prohibited narcotics are restricted to the 10 narcotics mentioned on the 2004 list.** Since all these substances might be tested in the athlete's urine, intake of their precursors could lead to a positive result.

- What about **corticosteroids**?
 - o **Corticosteroids** used by **non-systemic** routes will necessitate an abbreviated TUE.
 - o **Corticosteroids** used by **systemic** routes will necessitate a regular TUE.

- When should the **abbreviated TUE** be used?
 - o An **abbreviated TUE** is systematically required if athletes are taking:
 - Non-systemic (local) corticosteroids
 - Inhaled beta-2 agonists (formoterol, salbutamol, salmeterol and terbutaline) prescribed for asthma or bronchoconstriction.