

# SUMMARY OF MAJOR MODIFICATIONS AND EXPLANATORY NOTES

## ***2021 Prohibited List***

### ***Redesign of the List***

- The *2021 Prohibited List* is redesigned to improve navigation and usability.

### ***Specified Methods***

- M2.2 is now a *Specified Method* in accordance with Article 4.2.2 of the 2021 World Anti-Doping Code (the *Code*).

### ***Substances of Abuse***

- Article 4.2.3 of the *Code* defines *Substances of Abuse* as those “*Prohibited Substances* which are specifically identified as *Substances of Abuse* on the *Prohibited List* because they are frequently abused in society outside of the context of sport.”
- Cocaine, diamorphine (heroin), methylenedioxymethamphetamine (MDMA/“ecstasy”) and tetrahydrocannabinol (THC) are designated as *Substances of Abuse*.
- Other substances are currently under review and may be designated as *Substances of Abuse* in the future.

# SUBSTANCES AND METHODS PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

## PROHIBITED SUBSTANCES

### S2. Peptide Hormones, Growth Factors, Related Substances and Mimetics

- Transforming growth factor-beta (TGF- $\beta$ ) signalling inhibitors are now included with their full rather than abbreviated name.
- IOX2 is added as an example of a hypoxia-inducible factor (HIF) activating agent.

### S3. Beta-2 Agonists

- Inhaled vilanterol is now permitted up to the manufacturer's maximum recommended dose. The dose is expressed as the metered dose of 25 micrograms which is equivalent to a delivered dose of 22 micrograms.
- It is clarified that arformoterol and levosalbutamol are prohibited by adding them as examples.

### S4. Hormone and Metabolic Modulators

- Sub-classes 4.2 and 4.3 were amalgamated to become anti-estrogenic substances (including selective estrogen receptor modulators (SERMs)). This clarification in terminology reflects that, for anti-doping purposes, all these substances act by a common mechanism of binding to estrogen receptors and blocking estrogen action. This clarification did not add or remove any substances from this category.

### S5. Diuretics and Masking Agents

- The wording regarding the exception to allow the ophthalmic use of carbonic anhydrase inhibitors is clarified as "topical ophthalmic administration".

## PROHIBITED METHODS

### M2. Chemical and Physical Manipulation

- As explained above, M2.2 is changed from a non-*Specified* to a *Specified Method*.

# SUBSTANCES AND METHODS PROHIBITED IN-COMPETITION

## PROHIBITED SUBSTANCES

### S6. Stimulants

- Examples of imidazole derivatives for topical use are added to the exceptions. These are brimonidine, clonazoline, fenoxazoline, indanazoline, naphazoline, oxymetazoline and xylometazoline.

### S9. Glucocorticoids

- Additional examples of glucocorticoids are added to the *List*. The names of some existing examples are clarified to better reflect the active drug compound.
- As proposed in the draft 2021 *Prohibited List* circulated for consultation to stakeholders in May 2020, WADA's Executive Committee approved, at its 14-15 September 2020 meeting, prohibiting all injectable routes of administration of glucocorticoids during the *In-Competition* period. Examples of injectable routes of administration include: intravenous, intramuscular, periarticular, intra-articular, peritendinous, intratendinous, epidural, intrathecal, intrabursal, intralesional (e.g. intrakeloid), intradermal, and subcutaneous. However, in order to thoroughly and widely communicate the rule changes and to allow sufficient time for information and education, the Executive Committee decided to introduce the prohibition of all injectable glucocorticoid routes and the implementation of the new rules on 1 January 2022. This one-year period will allow, for example, *Athletes* and medical personnel to get a better understanding of the practical implementation of the washout periods, Laboratories to update their procedures to incorporate the revised and substance-specific new reporting values, and sports authorities to develop educational tools for *Athletes*, medical and support personnel, addressing the safe use of glucocorticoids for clinical purposes in anti-doping.

### P1. Beta-blockers

- Nebivolol was added as an example.

# MONITORING PROGRAM

## **Beta-2 Agonists: *In and Out-of-Competition:***

- Any combination of beta-2 agonists was removed as the required prevalence data were obtained.
- Findings for salmeterol and vilanterol below the *Minimum Reporting Level* are included in the Monitoring Program to better monitor their therapeutic use vs risk of abuse.

\* For further information on previous modifications and clarifications, please consult the *Prohibited List Q & A* at [www.wada-ama.org/en/questions-answers/prohibited-list-qa](http://www.wada-ama.org/en/questions-answers/prohibited-list-qa).