

**SOCIETAL ALTERNATIVES TO PERFORMANCE-  
ENHANCING DRUG AND SUPPLEMENT USE IN  
SPORT**

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# **SOCIETAL ALTERNATIVES TO PERFORMANCE-ENHANCING DRUG AND SUPPLEMENT USE IN SPORT**

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In 2001, as former International Olympic Committee President Juan Antonio Samaranch [1] said when he relinquished his position, “In doping, the war is never won”. It appears Mr. Samaranch’s prediction was correct. In 2002 and 2003 alone the public was bombarded with a constant stream of doping scandals [2-8] that included among others:

- Australian swimmer Andrew Burns banned from the sport for three months after testing positive for ecstasy, a stimulant.
- Colombian soccer player Rene Higuita testing positive for cocaine.
- United States javelin thrower Emily Carlsten suspended after testing positive for amphetamine, a stimulant prohibited under international athletic rules.
- Three players in the Greek first division soccer league testing positive for nandrolone, an anabolic steroid.
- South Korea confirming speed skater Paek Eun-bi tested positive for the banned stimulant strychnine after winning silver and bronze at the Winter Asian Games.

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- Two South African sprinters testing positive for the banned substance, androstenedione, an anabolic steroid.

- The United States losing two gold medals at the recent Pan American Games held in the Dominican Republic when sprinter Mickey Grimes was found to have excessive levels of ephedrine, a banned stimulant.

In addition to drug use, the range of so-called supplements available to athletes has increased dramatically over the past few years with increased technology and with the loosening of regulations regarding their sale. Exacerbating the drug vs. supplement problem is the confusion surrounding what exactly is a prohibited substance. For example, most elite sport governing bodies have already declared androstenedione (Andro) a banned substance. The International Olympic Committee, the National Collegiate Athletic Association, and the National Football League have banned androstenedione use among players, and recently the National Basketball Association included androstenedione on a list of nine newly prohibited substances. However, the NBA Players Association has been fighting the androstenedione ban. The NBA Players Association only recently agreed to add marijuana to the NBA list of banned substances. Major League Baseball does not ban androstenedione. To add to this confusion, there is scant research to support the notion that androstenedione enhances performance, while there is a number of studies that support the performance effects of creatine – a supplement that is not on any banned substance list.

When discussing the problem of performance-enhancing drug and supplement use, it is important to remember sport is a microcosm of our society and the problems surrounding sport are by no means limited to drug and supplement use. During the 1980s, 57 of 106 universities in Division I-A were punished by the National Collegiate Athletic Association via sanctions, censure, or probation for rule violations [9]. The perpetrators of these offenses did not involve illicit drug use by athletes but rather the unethical behavior of coaches, athletic administrators, staff, and faculty, the very men and women who should be setting the example. More recently, U.S. collegiate athletes have been convicted of criminal offences related to sports gambling [10, 11]. In addition, an NCAA survey of 2000 Division I male football and basketball players found 72% had gambled in some form and 25% reported gambling on collegiate sports: 4% bet on games in which they played [11, 12]. Among members of the IOC, bribery, graft, and other corruption appear entrenched in the culture of the organization [13, 14]. A common factor among all these scandals is money. In the new Millennium there is no doubt sport has become a multinational industry of huge proportions. The IOC, NCAA, NFL, NBA, and MLB, among others, are all billion dollar businesses [15, 16].

A free society often relies on the news media to inform the populace regarding the incidence and magnitude of problems such as doping in sport. Even though the epidemic of drug use in sport has been common knowledge among insiders, many in the news media, especially in the United States, have not appeared to have engaged in a widespread concerted effort to chronicle the true magnitude of this issue. Unfortunately the media, in particular television news, are often influenced by conflicts of interest within their parent companies, between those reporting the news and those responsible for the broadcast of major sporting events.

Few would argue that an in-depth expose of drug use, in for example the NFL or the Olympics, would enhance the marketing of these highly lucrative sporting events.

Before any effort can be made to address the issue of doping in sport, it is critical all of the stakeholders acknowledge a problem exists. In this regard we need to fully appreciate the high entertainment value placed on sport by society. Some go so far as to argue sport is the opiate of the masses – a contention made earlier by Karl Marx regarding religion. If sport has become the opiate of the masses, then we must be prepared for indifference on the part of the public regarding drug and supplement use in sport, at least at the elite level. Moreover, it could be argued that if substantial inroads are made regarding the epidemic of doping, fans may express anger towards those fighting drug use, rather than appreciation. Many people view competitive sport to escape from the problems of daily life and do not wish to be confronted with the moral and ethical aspects of doping. Besides, if anti-doping efforts are successful, the once bigger-than-life idols could begin to appear all too human in stature and the eclipsing of records at national, Olympic, and world levels could become so rare that the fervor of fans will wane and the sport business will suffer. In the U.S., even high school sport appears to be expanding as a source of entertainment for adults, as shown by the increasing level of television coverage of the *USA Today's* Top 25 high school football and basketball teams featuring players such as Lebron James, among others. Consequently, it can be argued that the growth of the high school sport entertainment business is contributing to the continued increase in performance-enhancing drug and supplement use, even among adolescents, that has been observed during the late 1990s and early 2000s.

Sport has also been used by governments as a tool to control the masses or as justification for their social, political, and economic systems. “Bread and circuses” (*panem et circenses*) were used in this fashion by the emperors of Rome [17]. Nazi Germany, the Soviet Union, East Germany, and Communist China all used sport for political advantage [18]. Consequently, such governments, arguably, would be less than enthusiastic participants in the fight against doping or, for that matter, even publicly acknowledging the existence of widespread doping. On the contrary, there is a reasonable amount of evidence that the governments of the Soviet Union, East Germany, and Communist China all played significant roles in the systematic doping of their athletes.

With many societal problems, identifying potential solutions is easy, but agreeing on a proper course of action and successfully completing it are difficult. The following are our alternatives for dealing with the use of performance-enhancing drugs as well as supplements: legalization, interdiction, education, and alteration of societal values and attitudes related to physical appearance and winning in sport.

## **LEGALIZATION: AN END TO HYPOCRISY?**

The legalization of illicit drugs has for some time been the subject of heated debate: comments range from "morally reprehensible" to "accepting reality." Legalization would reduce the law enforcement costs associated with illicit performance-enhancing drug use as well as the substantial cost of drug testing. Even some opponents of legalization must concede that such an action would lessen the level of hypocrisy currently enveloping sport. It can be argued that society and sport federations have turned a blind eye or have subtly encouraged drug use in sport as long as the athletes have not been caught or spoken publicly about their use of performance-enhancing drugs [19-25].

In the U.S., legalization of performance-enhancing drug use in sport would involve two levels of authority. At one level, federal and state laws related to the possession, distribution, and prescription of performance-enhancing drugs would have to be changed. For example, if in the future anabolic steroids become an accepted means of contraception or as treatment for "andropause" (so-called male menopause), it is difficult to understand how anabolic steroids could remain a Schedule III controlled substance in the U.S. At the second level, bans on anabolic steroids now in place in virtually every sport would have to be rescinded. Legalization would bring cries that the traditional ideals of sport and competition are being further eroded. On the other hand, given the continued litany of drug and other sport scandals that have taken place in full public view over the past five decades, it is hard to imagine in this jaundiced age that many people believe the so-called "traditional ideals" in elite sports even exist.

It has long been asserted that the legalization of performance-enhancing drugs would force athletes to further expose themselves to the potential for physical harm or else to compete at a disadvantage. Some have even questioned this basic premise that banning drugs in sport benefits the health of athletes and have argued:

...the ban has in fact increased health risks by denying users access to medical advice and caused users to turn to high risk black market sources [26].

Further, legalization would allow athletes to use pharmaceutical grade drugs while being monitored by a physician. It can also be argued that the "dangers" of performance-enhancing drug and supplement use are not, in itself, a realistic deterrent given the existing levels of tobacco, alcohol, marijuana, and other illicit drug use.

In 2003 it seems that legalization of performance-enhancing drug use in sport is still not acceptable. However, if the apparent impotence of drug testing, now in full view, persists for much longer, it is easy to imagine the IOC or other sport federations throwing up their hands in frustration and publicly allowing the athlete with the best chemist to prevail.

## **INTERDICTION: A QUESTION OF COST- EFFECTIVENESS**

The U.S. federal government and all state governments currently have laws regarding the distribution, possession, or prescription of various performance-enhancing drugs such as anabolic steroids, growth hormone, and amphetamines [27]. For example, the Federal Food, Drug, and Cosmetic Act (FFDCA) was amended as part of the Anti-Drug Abuse Act of 1988 such that distribution of anabolic steroids or possession of steroids with intent to distribute without a valid prescription became a felony. This legislation not only increased the penalties for the illicit distribution of steroids but it also facilitated prosecution under the FFDCA. In 1990 the Anabolic Steroids Control Act was signed into law by President Bush and added anabolic steroids to Schedule III of the Controlled Substances Act. This law institutes a regulatory and criminal enforcement system whereby the U.S. Drug Enforcement Administration (DEA) controls the manufacture, importation, exportation, distribution, and dispensing of anabolic steroids. However, the act did not provide extra resources to the DEA to shoulder the added responsibility.

Furthermore, as the use of anabolic steroids is increasingly criminalized, drug use will likely be driven further underground and the source of the drugs will increasingly be clandestine and foreign laboratories, the products of which are of questionable quality. It also appears that in some areas criminalization has already altered the distribution network for anabolic steroids; athletes used to sell to other athletes, but sellers of street drugs are now becoming a major source [28].

Even though the legal apparatus to control steroid trafficking exists, enforcement agents already are struggling to handle the problems of importation, distribution, sales, and use of other illicit drugs such as cocaine and heroin [28]. Thus, the availability of performance-enhancing drugs in this country suggests there is reason to believe the U.S. may simply not have the law enforcement manpower to deal with apprehending and punishing sellers of performance-enhancing drugs. Based on what we know about the physical, psychological, and social effects of performance-enhancing drugs, it is neither realistic nor prudent that enforcement efforts for performance-enhancing drugs should take precedent over those for more harmful drugs. On the other hand, this line of reasoning should not be used as a rationale for a lack of effective action against performance-enhancing drugs. Nevertheless, the outlook that limited resources can be stretched to cover yet other drugs is not optimistic [28], especially given the increase in recreational drug use among adolescents [29] and in light of the demands placed on all levels of law enforcement regarding homeland security.

Nonetheless, after passage of the Anabolic Steroids Control Act, numerous anabolic steroid investigations were initiated by the U.S. Drug Enforcement Administration and many arrests were made and convictions obtained [30]. However, because of the way criminal penalties were developed for steroid infractions, an individual brought to court on charges of distribution or selling must be a national level dealer to receive more than a “slap on the wrist” and/or a short visit to a “country club” prison. For this reason, U.S. law enforcement agents often

do not bother pursuing small cases because the costs of prosecution vastly outweigh any penalties that will be assessed.

The range of supplements available to athletes has increased dramatically over the past few years with the loosening of regulations regarding their sale. The 1994 Dietary Supplement Health and Education Act (DSHEA) substantially reduced the control of the U.S. FDA over supplements and permitted the introduction of new supplements as long as they occurred naturally in food. In other words, if a substance occurs naturally – and as long as manufacturers do not claim it has medical benefits – the FDA cannot monitor it. As a result, the DSHEA allows the sale of some steroid hormones such as androstenedione (Andro) and dehydroepiandrosterone (DHEA) as over-the-counter dietary supplements. Consequently, for the consumer (athlete), the distinction between what is a drug and what is a supplement is further blurred.

Drug testing by sport federations is yet another form of interdiction. Such testing has been partially successful when directed at performance-enhancing drugs that, to be effective, must be in the body at the time of competition, such as stimulants and narcotics. Drug testing has been even less effective against performance-enhancing drugs that are used during training or used to enhance an athlete's capacity to train. For example, testing can be circumvented in several ways. Generally, to avoid a positive test, athletes can determine when to discontinue use prior to a scheduled test or, in the case of an unannounced test, they titrate their dose so as to remain below the maximum allowable level, as is the case with testosterone. Further confounding the issue is that while EPO testing is finally being instituted (athletes can still resort to autologous blood doping without fear of detection), there are currently no reliable tests for recombinant human growth hormone and other performance boosters such as insulin and insulin-like growth factor-1. Moreover, as the booming biotechnology and pharmaceutical industries discover new ways to fight disease, athletes and their scientific advisors are also discovering ingenious new ways to subvert those substances and methods to enhance performance and appearance. There are some unscrupulous scientists who attend academic meetings and perch like vultures waiting to figure out how substances can be tweaked for athletic use. Then, a few months later, we hear rumors about athletes who are experimenting with them or these new substances are being sold as nutritional supplements.

It is important to note that testing for performance-enhancing drugs such as anabolic steroids is expensive (over \$100/test), and although organizations like the IOC, NFL, or NCAA may be able to institute such procedures, the cost is prohibitive for the vast majority of secondary schools. Consequently, only a handful of U.S. secondary school systems test for performance-enhancing drugs such as anabolic steroids.

In spite of this, we note that the recent establishment of the World Anti-Doping Agency (WADA) and its counterpart in the United States, the U.S. Anti-Doping Agency (USADA), offers for the first time a better-coordinated and consistent effort to combat doping in sport. To date, however, WADA and USADA have been, at best, only marginally effective in overcoming the technical innovations of users and in reducing the prevalence of doping in sport.

In summary, although interdiction through law enforcement and drug testing has intuitive appeal, its impact on the use of performance-enhancing drugs is open to debate. Since the flurry of legislative activity at the state and national levels regarding the control of the manufacture, distribution, prescription, and possession of steroids in the late 1980s and the early 1990s, use among U.S. adolescents has increased significantly. As to the future of testing, it is difficult to be optimistic: over the past 30 years, drug users have consistently outplayed the drug testers. In addition, one can only speculate as to the future challenges posed by impending advances in genetic engineering. Will we be able to genetically enhance muscle mass, aerobic capacity, vision, and neurological response [31]? In fact, selected genetic engineering has already been achieved in animals. Researchers have shown in mice that a gene injected directly into a target muscle can increase muscle performance by 27%. More recently, researchers have identified a protein transcription factor, peroxisome proliferator-activated receptor-gamma coactivator-1, that, when expressed at physiologic levels in mice, converts fast-twitch, strength muscles into high-endurance, slow-twitch muscles. Some have speculated that drugs that influence these factors may be used to increase muscle activity, although much work still remains to elucidate the mechanism.

## **EDUCATION: IS ANYBODY LISTENING?**

Since the 1980s, the U.S. Public Health Service, the U.S. Department of Education, as well as many state education departments, state and local medical societies, private foundations, and sports federations have been involved in prevention efforts related to performance-enhancing drugs, especially steroid abuse. For the most part, these efforts have centered on the development and distribution of educational materials and prevention programs such as posters, videos, pamphlets, workshops, and web sites. For example, the Iowa High School Athletic Association developed an educational booklet that provides information on the effects of steroid use, but also includes strength-enhancing alternatives to steroids and prevention ideas [32]. The U.S. Department of Education and other sources developed a variety of informational posters targeted at high school students to provide facts about steroids, their adverse effects, alternatives to their use, and their illegal status [33]. Video distributors now have a wide range of videotape programs available on steroid use prevention as well as body building techniques [34]. Educational consulting firms provide anti-steroid training, program, and curriculum development to junior and senior high schools across the United States [35, 36]. The Office of National Drug Control Policy provides a web site (<http://www.whitehousedrugpolicy.gov/prevent/sports/index.html>) and information resources such as newsletters on drugs and sports for coaches, athletes, and parents. Similarly, the Energy/Australia Live Clean Play Clean Drug Education Program aims to educate Australia's young aspiring athletes on the moral, ethical, social, and physical reasons for not taking performance-enhancing drugs. In addition to a web site (<http://www.olympics.com.au/default.asp?pg=livecleanplayclean&spg=home>), the

program offers a video of Australia's leading athletes publicly declaring their opposition to illegal sports drugs and the athletes who use them.

U.S. health educators have made some inroads in changing several high-risk behaviors, such as high-fat diets, sedentary lifestyles, drunk driving, and smoking. However, educators are well armed with vast quantities of scientific data regarding the deleterious nature of these activities. Furthermore, these are behaviors upon which society has increasingly frowned. In sports, on the other hand, athletes who use performance-enhancing drugs and especially supplements have enjoyed significant improvements in physical performance and appearance. Society is much less likely to shun these people. The adulation of fans, the media, and peers is a strong secondary reinforcement, as are financial, material, and sexual rewards.

Another fly in the education ointment is the possibility that performance-enhancing drugs including anabolic steroids taken intermittently in low to moderate doses may have only a negligible impact on health, at least in the short term. In 1989, several experts at the National Steroid Consensus Meeting concluded that according to the existing evidence, these drugs represent more of an ethical dilemma than a public health problem [37]. Although there is still little available evidence regarding the long-term health effects of performance-enhancing drugs such as anabolic steroids, many current or potential performance-enhancing drug and supplement users unfortunately mistake absence of evidence for evidence of absence. Even more frustrating is the fact that in two national studies, a significant minority of the anabolic steroid users surveyed expressed no intention to stop using anabolic steroids if deleterious health effects were unequivocally established [38, 39]. Also, according to national results on adolescent drug use from the 2001 Monitoring the Future Study [40], following a peak in perceived risk of steroids in 1993, a six percentage-point drop occurred between 1998 and 1999 and another four percentage-point drop in 2000. This sharp a change is quite unusual and highly significant, suggesting some particular event (or events) in 1998 changed beliefs about the dangers of steroids. Coincidentally, a sharp upturn in use of steroids also occurred that year. Clearly, the paucity of scientific information has impeded the formulation of effective health education strategies. Far more than that, the unsubstantiated claims of dire health effects made by some in sports medicine and sensationalized by the news media have further eroded communication between athletes and doctors. However, even if long-term deleterious effects were well documented for performance-enhancing drugs and supplements, our experience with teenagers and smoking suggests that substantial abuse would probably persist [41, 42].

All of these problems and limitations in developing and disseminating effective prevention and intervention strategies could, in great part, explain the significant increase in performance-enhancing drug and supplement use among adolescents.

Changing a behavior that has resulted in major benefits to the user, such as improved appearance and athletic performance, presents a monumental challenge. Traditional cognitive and affective education approaches to tobacco, alcohol, and other drug abuse prevention have not been effective [43]. In fact, there is evidence that providing a prevention program that uses "scare tactics" to dissuade

adolescents from becoming involved with performance-enhancing drugs such as anabolic steroids may actually lead to increased usage, possibly because additional information stimulated curiosity [44]. This observation helped lead to prevention programs (Athletes Training and Learning to Avoid Steroids – ATLAS and Athletes Targeting Healthy Exercise and Nutrition Alternatives – ATHENA) focused, in part, on positive educational initiatives related to nutrition and strength training. The programs also focused on increasing adolescents' awareness of the types of social pressures they are likely to encounter to use anabolic steroids and attempts to "inoculate" them against these pressures. Adolescents are taught specific skills for effectively resisting both peer and media pressures to use anabolic steroids. Periodic monitoring and reporting of actual anabolic steroid use among adolescents was conducted in an effort to dispel misinformation concerning the widespread use of anabolic steroids among peers. Using peers as program leaders is an additional component. These programs have been successful in significantly affecting attitudes and behaviors related to steroid use and remained effective over several years [45].

There are two important and, as yet, unanswered questions regarding the ATLAS and ATHENA programs. First, are school boards, in an age of constrained resources, willing to commit time and money to these relatively demanding programs? Efficacy aside, it would be far easier and cheaper to continue to only give "lip service" to this problem and restrict efforts to an occasional talk by the coach and the use of readily available educational videos and posters.

The second question is even more threatening to school officials. In an era when some believe that the "win at all costs" philosophy is gaining the upper hand, will some schools hesitate to unilaterally "disarm"? That is, will some schools hesitate to institute a program that could significantly reduce performance-enhancing drug use at the cost of conferring an advantage to an opponent who chooses to maintain a "see no evil" stance on the use of performance-enhancing drugs? This question is given some legitimacy by pervasive anecdotal accounts of high school coaches encouraging the use of, and in some instances selling, so-called supplements such as creatine, DHEA, and Andro to their athletes.

In summary, although educating athletes about the health risks and ethical issues associated with performance-enhancing drug and supplement use continues to hold some promise, this strategy certainly cannot be viewed as a panacea.

## **OUR VALUES MUST CHANGE**

Compared with legalization, interdiction, and education, our social environment appears to receive far less attention. Yet in many ways the social environment exerts a more fundamental influence on drug and supplement use in sport than do the more superficial strategies described earlier.

A number of performance-enhancing drugs, including anabolic steroids, are not euphorogenic or mood altering immediately following administration. Instead, the appetite for these drugs is created predominantly by our societal fixation on winning and physical appearance. An infant does not innately believe that a

muscular physique is desirable – our society teaches this. Likewise, children play games for fun, but society preaches the importance of winning – seemingly, at an increasingly younger age.

Ours is a culture that thrives on competition – both in business and in sport. However, we long ago realized that competition of all types must exist within some boundaries. A primary goal of competition is to win or be the very best in any endeavor. Philosophically, many in our society appear to have taken a "bottom-line" attitude and consider winning the *only* truly worthwhile goal of competition. If we accept this philosophy, then it becomes easy to justify, or be led to the belief, that one should win at any cost. At that point doping becomes a very rational behavior, with the end (winning) justifying the means (use of performance-enhancing drugs and supplements).

This "win at any cost/winner take all" philosophy is not new. The winners in the ancient Greek Olympics were handsomely rewarded, and episodes of athletes cheating to obtain these financial rewards are well documented [46-48]. Smith [49] argued persuasively that the level of cheating in college athletics at the turn of the last century exceeded what we see today. Even the legendary college football coach Knute Rockne was quoted as saying, "Show me a good and gracious loser and I'll show you a failure." Pro football coach Vince Lombardi went a step further with his philosophy that, "winning isn't everything – it's the only thing." Indeed episodes of cheating, including drug use, have been commonplace at the collegiate, professional, and Olympic levels over the past 50 years [14, 20, 24, 50-54]. Moreover, because of reports in the news media as well as written and verbal testimonials by athletes, adolescents are aware of the part that performance-enhancing drugs and supplements play in the success of many so-called role-model athletes [19, 51, 55].

Our fixation on appearance, especially the muscularity of males, is also long lived. An entire generation of young men in the 1930s and 40s aspired to the physique of Charles Atlas, followed by yet another generation who marveled at the muscles of Mr. Universe, Steve Reeves, who played Hercules in several movies in the 1950s. Today's children look with envy at the physiques of Vin Diesel, Jean Claude Van Damme, Wesley Snipes, Linda Hamilton, Demi Moore, and other actors *and actresses* whose movie roles call for a muscular athletic build. In addition, a number of professional wrestlers such as Hulk Hogan, "Stone Cold" Steve Austin, "The Rock", and Goldberg are admired in part for their bigger than life muscularity, while some elite athletes like professional baseball player Barry Bonds and Sammy Sosa are envied because of the spectacular athletic feats of which they are capable. Anabolic steroid use among professional wrestlers, including Hulk Hogan, was given national attention during a steroid trafficking trial in 1991 [56]. President George H. Bush's appointment of Arnold Schwarzenegger, an individual who attained his prominence as a bodybuilder and movie star at least in part as a result of steroid use, as chair of the President's Council on Physical Fitness and Sports from 1990-1992 was yet another inappropriate message we sent our children. Interestingly, Schwarzenegger was then replaced by Florence Griffin Joyner ("Flo Jo") who co-chaired the Council from 1993-1998, and competed, retired, and died under suspicion of performance-enhancing drug use. Lee Haney,

bodybuilder and eight time Mr. Olympia winner, followed Joyner and chaired the Council from 1999 through 2002. Such messages of material reward and fame as a result of drug-assisted muscularity and winning grossly overshadow posters on gym walls and videos that implore "Just Say No to Drugs."

Some might argue that our attitudes and values related to sports and appearance are too deeply entrenched to change. That may be so, in particular when it comes to elite sport - there is simply too much money involved. However, if we cannot control our competitive and narcissistic natures, we then must resign ourselves to anabolic steroid use, even among our children.

Society's current strategy for dealing with the use of performance-enhancing drugs in sport is multifaceted and primarily involves interdiction and education. However, years after our society was made aware that our children were using steroids, our efforts to deal with this problem have not been very successful. Since 1989 a number of national conferences on anabolic steroid use have been held, sponsored by either the U.S. federal government or sports and educational organizations. The purpose of these meetings was to gather and/or disseminate information or to achieve a consensus for action. At this point all these activities appear to have been a sincere effort to deal with the problem, but this strategy of attacking the symptoms while ignoring the social influence of drug and supplement use in sport is obviously ineffective. If we maintain our current course in the face of increased high levels of performance-enhancing drugs and supplements, then we as sports medicine professionals, parents, teachers, and coaches are guilty of duplicity – acting for the sake of acting. We plan and attend workshops, distribute educational materials, lobby for the passage of laws, and seek the assistance of law enforcement. All these activities merely soothe our consciences in the face of our inability – or unwillingness – to deal with our addiction to sport and our fixations on winning and appearance.

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