Can a Drug-Free Athlete Win in the Modern World?

The history of performance enhancing drugs is long, dating all the way back to the ancient Greeks in 776 B.C.E. The drug of choice was doop (,which is where the word doping came from), a vicious juice made of opium. Even the Romans doped. Around 100 C.E., chariot races fed their horse hydromel, an alcoholic mixture using honey, to make them run faster. Gladiators also ingested hallucinogens and stimulants to prevent fatigue and injury. In the late 1800s, athletes drank a mixture of wine and coca leaves to stave off fatigue and hunger. World wide recognition of drugs in sports resulted from an Olympic marathon runner named Thomas Hicks. He used a mixture of brandy and strychnine (a fatal stimulant in high doses) to boost his performance, which resulted in near death. Strychnine, heroin, cocaine, and caffeine were used by many athletes with each team or coach creating their own mixture. This practice became increasingly uncommon after heroin and cocaine became prescription drugs only in the 1920s. Doping in the sport of track and field was prohibited by the International Association of Athletics Federation. In the 1950s , athletes began to take Amphetamines used by soldiers in WWII. Doping received even more attention on August 26, 1960, during the Summer Olympics in Rome during the 100km race. Knut Jensen collapsed, fracturing his skull. Initially thought to be caused by heat stroke, his autopsy revealed traces of Amphetamines. In 1967, the International Olympic Committee established a medical commission to fight doping. This event marked a cascade of doping testing and regulation.

Anabolic steroids are synthetic substances related to the male sex hormones. One such example is testosterone. They promote the growth of skeletal. Steroidal supplements is a more general term that means injectable steroids.

Anabolic steroids" is the familiar name for synthetic substances related to the male sex hormones (e.g., testosterone). They promote the growth of skeletal muscle (anabolic effects) and the development of male sexual characteristics (androgenic effects) in both males and females. The term "anabolic steroids" will be used throughout this report because of its familiarity, although the proper term for these compounds is "anabolic-androgenic steroids."

Anabolic steroids were developed in the late 1930s primarily to treat hypogonadism, a condition in which the testes do not produce sufficient testosterone for normal growth, development, and sexual functioning. The primary medical uses of these compounds are to treat delayed puberty, some types of impotence, and wasting of the body caused by HIV infection or other diseases.