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### PART I: SECTION (I) — GENERAL

#### **Government Notifications**

CONVENTION AGAINST DOPING IN SPORTS ACT, No. 33 OF 2013

REGULATIONS made by the Minister of Sports under Section 34 read with Section 3 of the Convention against Doping in Sport Act, No. 33 of 2013.

HARIN FERNANDO, Minister of Telecommunication, Foreign Employment and Sports.

Colombo, 25th January, 2019.

#### Regulations

- 1. These regulations may be cited as the Anti-Doping (Prohibited List) Regulations No. 04 of 2018.
- 2. These regulations shall be deemed to have come into operation on 1st, January 2019.

#### THE WORLD ANTI-DOPING CODE

THE 2019 PROHIBITED LIST

INTERNATIONAL STANDARD

The Official text of the **Prohibited List** shall be maintained by WADA and shall be published in English and French. In the event of any conflict between the English and French versions, the English version shall prevail.

This List shall come into effect on 01st January, 2019.

The 2019 prohibited List 2018 September.



### THE WORLD ANTI-DOPING CODE INTERNATIONAL STANDARD

#### PROHIBITED LIST

#### JANUARY 2019

This List shall come into effect on 01st January 2019

IN ACCORDANCE WITH ARTICLE 4.2.2 OF THE WORLD ANTI-DOPING CODE, ALL PROHIBITED SUBSTANCES SHALL BE CONSIDERED AS "SPECIFIED SUBSTANCES" EXCEPT SUBSTANCES IN CLASSES S1, S2, S4.4, S4.5, S6.A, AND PROHIBITED METHODS M1, M2 AND M3

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

#### **S0-NON-APPROVED SUBSTANCES**

Any pharmacological substance which is not addressed by any of the subsequent sections of the List and with no current approval by any governmental regulatory health authority for human therapeutic use (e.g. drugs under pre-clinical or clinical development or discontinued, designer drugs, substances approved only for veterinary use) is prohibited at all times.

#### S1. ANABOLIC AGENTS

Anabolic agents are prohibited.

#### 1. ANABOLIC ANDROGENIC STEROIDS (AAS)

- a. Exogenous\* AAS, including:
- 1- Androstenediol (5α-androst-1-ene-3β,17β-diol); 1-Androstenedione (5α-androst-1-ene-3, 17-dione); 1-Androsterone (3α-hydroxy-5α-androst-1-ene-17-one); 1-Testosterone [17β-hydroxy-5α-androst-1-en-3-one]; Bolasterone; Calusterone; Clostebol; Danazol ([1,2]oxazolo[4',5':2,3]pregna-4-en-20-yn-17α-ol); Dehydrochlormethyltestosterone (4-chloro-17β-hydroxy-17α-methylandrosta-1,4-dien-3-one); Desoxymethyltestosterone (17α-methyl-5α-androst-2-en-17β-ol and 17α-methyl-5α-androst-3-en-17β-ol; Drostanolone; Ethylestrenol (19-norpregna-4-en-17α-ol); Fluoxymesterone; Formebolone; Furazabol (17α-methyl[1,2,5]oxadiazolo[3',4':2,3]-5α-androstan-17β-ol); Gestrinone; Mestanolone, Mesterolone, Metandienone; (17β-hydroxy-17α-methylandrosta-1,4-dien-3-one); Metholone; Methandriol; Methasterone (17β-hydroxy-2α,17α-dimethyl-5α-androstan-3-one); Methyldienolone (17β-hydroxy-17α-methylestra-4,9-dien-3-one); Methyl-1-testosterone (17β-hydroxy-17α,methyl-5α-androstal-1-en-3-one); Methylnortestosterone (17β-hydroxy-17α-methylestr-4-en-3 one); Methyltestosterone; Metribolone (methyltrienolone,17β-hydroxy-17α-methylestra-4,9,11-trien-3-one); Mibolerone; Norclostebol; Norethandrolone; Oxabolone; Oxamdrolone; Oxymesterone; Oxymetholone; Prostanozol (17β-[(tetrahydropyran-2-yl)oxy]-1'H-pyrazolo[3,4:2,3]-5α-androstane); Quinbolone; Stanozolol; Stenbolone; Tetrahydrogestrinone (17-hydroxy-18a-homo-19-nor-17α-pregna-4,9,11-trien-3-one); Trenbolone (17β-hydroxyestr-4,9,11-trien-3-one); and other substances with a similar chemical structure or similar biological effect (s).
  - b. Endogenous\*\* AAS when administered exogenously:
- **4-Androstenediol** (androst-4-ene-3 $\beta$ ,17 $\beta$ -diol); **4-Hydroxytestosterone** (4, 17 $\beta$ -hydroxyandrost-4-en-3-one) ;5-**Adrostenedione** (androst-5-ene-3,17-dione) ; 7 $\alpha$ -Hydroxy-DHEA; 7 $\beta$ -Hydroxy-DHEA;7-Keto-DHEA ;19-Norandrostenediol (estr-4-ene-3, 17-diol) ; 19-Norandrostenedione (estr-4-ene-3, 17-dione) ; **Androstanolone**, (5 $\alpha$  -dihydrotestosterone, 17 $\beta$ -hydroxy-5 $\alpha$ -androstan-3-one) ; **Androstenediol** (androst-5-ene-3 $\beta$ ,17 $\beta$ -diol); **Androstenedione**, (androst-4-ene-3,17-dione); Boldenone; Boldione (androsta-1, 4-diene-3, 17-dione); Epiandrosterone (3 $\beta$ -Hydroxy-5 $\alpha$ -androstan-17-one); Epi-dihydrostestoterone (17 $\beta$ -hydroxy-5 $\alpha$ -androstan-3-

one); Epitestosterone ;Nandrolone (19-nortestosterone);**Prasterone** (dehydroepiandrosterone, DHEA,3β-hydroxyandrost-5-en-17-one); **Testosterone**; and their **metabolites** and **isomers**, when administered exogenously including but not limited to:

#### 2. OTHER ANABOLIC AGENTS

Including, but not limited to:

Clenbuterol, selective androgen receptor modulators (SARMs; e.g. andarine LGD-4033, enobosarm (ostarine) and RAD 140), Tibolone, Zeranol and Zilpaterol.

For purposes of this section:

- \* "exogenous" refers to a substance which is not ordinarily produced by the body naturally.
- \*\* "endogenous" refers to a substance which is ordinarily produced by the body naturally.

#### S2. PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES AND MIMETICS

The following substances, and other substances with similar chemical structure or similar biological effect(s), are prohibited:

- 1. Erythropoietin [EPO] and agents affecting erythropoiesis, including but not limited to:
  - 1.1. Erythropoietin Receptor Agonists, e. g. Darbepoietins (dEPO); Erythropoietins (EPO); EPO based constructs [e. g. EPO-Fc, methoxy polyethylene glycol -epoetin beta [CERA]] ;EPO mimetic agents and their constructs, [e.g. CNTO 530 and peginesatide];
  - 1.2 Hypoxia inducible factor (HIF) activating agents e.g. Argon ; Cobalt ; Daprodustat (GSK 1278863) Molidustat (BAY 85-3934) ; Roxadustat [FG-4592]; Vadadustat (AKB-6548) ; Xenon
  - **1.3** GATA inhibitors, e. g. K-11706
  - **1.4** TGF beta [TGF -β] inhibitors, e.g.; Luspatercept; Sotatercept
  - **1.5** Innate repair receptor agonists, *e. g.* Asialo EPO; Carbamylated EPO [CEPO].
- 2. Peptide Hormones and their releasing factors.
  - 2.1 Chorionic Gonadotrophin [CG[ and Luteinizing Hormone (LH) and their releasing factors in males, e.g. Buserelin, deslorelin, gonadorelin, goserelin, leuprorelin, nafarelin and triptorelin;
  - 2.2 Corticotrophins and their releasing factors, e. g. Corticorelin;
  - 2.3 Growth Hormone [GH[ its fragments and releasing factors, including but not limited to :

Growth Hormone fragments, e. g. AOD - 9604 and hGH 176-191; Growth Hormone Releasing Hormone [GHRH] and its analogues, e. g. CJC - 1293, CJC - 1295, sermorelin and tesamorelin;

**Growth Hormone Secretagogues** [GHS[, e. g. lenomorelin (ghrelin) and its mimetics, e. g. anamorelin, ipamorelin, macimorelin and tabimorelin;

GH - Releasing Peptides (GHRPs), e.g. alexamorelin, GHRP - 1, GHRP - 2 [pralmoralin], GHRP - 3, GHRP - 4, GHRP - 5, GHRP - 6 and examorelin [hexarelin].

3. Growth Factors and Growth Factor Modulators, including but not limited to;

Fibroblast Growth Factors (FGFs); Hepatocyte Growth Factor (HGF); Insulin-like Growth Factor - 1 (IGF-1) and its analogues; Mechano Growth Factors (MGFs); Platelet-Derived Growth Factor (PDGF); Thymosin -  $\beta$ 4 and its derivatives e. g. TB - 500; Vascular-Endothelial Growth Factor (VEGF) and other growth factors or growth modulators affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity, or fibre type switching.

#### S3. BETA - 2 AGONISTS

All selective and non-selective beta-2 agonists, including all optical isomers, are prohibited.

Including, but not limited to:

Fenoterol ; Formoterol ; Higenamine ; Indacaterol ; Olodaterol ; Procaterol ; Reproterol ; Salbutamol ; Salmeterol ; Terbutaline ; Tretoquinol (trimetoquinol) Vilanterol ;

#### Except:

- \* Inhaled **salbutamol**: maximum 1600 micrograms over 24 hours in divided doses not to exceed 800 micrograms over 12 hours starting from any dose;
- \* Inhaled **formoterol**: maximum delivered dose of 54 micrograms over 24 hours;
- \* Inhaled **salmeterol**: maximum 200 micrograms over 24 hours.

The presence in urine of salbutamol in excess of 1000 ng/mL or formoterol in excess of 40ng/mL is not consistent with therapeutic use of the substance and will be considered as an *Adverse Analytical Finding (AAF)* unless the *Athlete* proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of a therapeutic dose (by inhalation) up to the maximum indicated above.

#### S4. HORMONE AND METABOLIC MODULATORS

The following **hormone** and **metabolic modulators** are prohibited:

- 1. Aromatase inhibitors including, but not limited to: 2-Androstenol (5α-androst 2-en-17-ol); 2-Androstenone (5α-androst 2-en-17-one); 3-Androstenol (5α-androst 3-en-17-ol); 3-Androstenone (5α-androst 3-en-17-one); 4-Androstene-3, 6, 17 trione (6-oxo); Aminoglutethimide; Anastrozole; Androsta 1,4,6,-triene-3,17-dione (androstatrienedione); Androsta-3,5-diene-7, 17-dione (arimistane); Exemestane; Formestane; Letrozole; Testolactone.
- 2. Selective estrogen receptor modulators (SERMs) including, but not limited to : Raloxifene; Tamoxifen; Toremifene.
- 3. Other anti-estrogenic substances including, but not limited to: Clomifene; Cyclofenil and Fulvestrant.
- 4. Agents preventing activin receptor IIB activation including, but not limited, to: Activin A - neutralizing antibodies; Activin receptor IIB competitors such as; Decoy activin receptors (e. g. ACE - 031); Anti-activin receptor IIB antibodies (e. g. bimagrumab); Myostatin inhibitors such as: Agents reducing or ablating myostatin expression; Myostatin - binding proteins (e. g. follistatin, myostatin propetide); Mayostatin - neutralizing antibodies (e. g. domagrozumab, landogrozumab, stamulumab)

#### 5. Metabolic modulators:

5.1 Activators of the AMP-activated protein kinase (AMPK) e.g. AICAR SR9009; and Peroxisome Proliferator Activated Receptor  $\delta$  (PPAR $\delta$ ) agonists, e.g. 2-[2-methyl-4-[[4-methyl-2-[4-[trifluoromethyl] phenyl] thiazol-5-yl] methylthio] phenoxyl] acetic acid [GW1516, GW501516];

- 5.2 **Insulins** and Insulin Mimetics;
- 5.3 Meldonium;
- 5.4 Trimetazidine.

#### S5. DIURETICS AND MASKING AGENTS

The following diuretics, and masking agents are prohibited, as are other substances with a similar chemical structure or similar biological effect (s)

Including, but not limited to:

- \* Desmopressin; probenecid; plasma expanders, e.g. intravenous administration of albumin, dextran, hydroxyethyl starch and mannitol.
- \* Acetazolamide; amiloride; bumetanide; canrenone; chlortalidone; etacrynic acid; furosemide; indapamide; metolazone; spironolactone; thiazides, e.g. bendroflumethiazide, chlorothiazide and hydrochlorothiazide; triamterene and vaptans, e.g. tolvaptan.

#### Except:

- Drospirenone; pamabrom; and ophthalmic use of carbonic anhydrase inhibitors (e.g. dorzolamide, brinzolamide);
- Local administration of felypressin in dental anesthesia.

The detection in an Athlete's Sample at all times or In -Competition, as applicable, of any quantity of the following substances subject to threshold limits: formoterol, salbutamol, cathine, ephedrine, methylephedrine and pseudoephedrine, in conjunction with a diuretic or masking agent, will be considered as an Adverse Analytical Finding (AAF) unless the Athlete has an approved Therapeutic Use Exemption (TUE) for that substance in addition to the one granted for the diuretic or masking agent.

#### PROHIBITED METHODS

#### M1. MANIPULATION OF BLOOD AND BLOOD COMPONENTS

The following are prohibited:

- 1. The Administration or reintroduction of any quantity of autologous, allogenic (homologous) or heterologous blood, or red blood cell products of any origin into the circulatory system.
- 2. Artificially enhancing the uptake, transport or delivery of oxygen.

  Including, but not limited to:
  - Perfluorochemicals; efaproxiral (RSR 13) and modified haemoglobin products, *e.g.* haemoglobin-based blood substitutes and microencapsulated haemoglobin products, excluding supplemental oxygen by inhalation.
- 3. Any form of intravascular manipulation of the blood or blood components by physical or chemical means.

#### M2. CHEMICAL AND PHYSICAL MANIPULATION

The following are prohibited:

- 1. Tampering, or Attempting to Tamper, to alter the integrity and validity of Samples collected during Doping Control. Including, but not limited to:
  - Urine substitution and/or adulteration, e.g. proteases.
- 2. Intravenous infusions and /or injections of more than a total of 100mL per 12 hour period except for those legitimately received in the course of hospital treatments, surgical procedures or clinical investigations.

#### M3. GENE DOPING AND ALL DOPING

The following with the potential to enhance sport performance, are prohibited:

- 1. The transfer of ploymers of nucleic acids or nucleic acid analogues;
- 2. The use of gene editing agents designed to alter genome sequences and/or the transcripional or epigenetic regulation of gene expression.
- 3. The use of normal or genetically modified cells.

#### SUBSTANCES AND METHODS

#### PROHIBITED IN- COMPETITION

IN ADDITION TO THE CLASSES S0 TO S5 AND M1 TO M3 DEFINED ABOVE, THE FOLLOWING CLASSES ARE PROHIBITED IN - COMPETITION:

#### PROHIBITED SUBSTANCES

#### S6. STIMULANTS

All stimulants, including all optical isomers, e.g. d- and l- where relevant, are prohibited.

Stimulants include:

#### (a) Non- Specified Stimulants:

Adrafinil; Amfepramone; Amfetamine; Amfetaminil; Amiphenazole; Benfluorex; Benzylpiperazine; Bromantan; Clobenzorex; Cocaine; Cropropamide; Crotetamide; Fencamine; Fenetylline; Fenfluramine; Fenproporex; Fonturacetam [4- phenylpiracetam (carphedon)]; Furfenorex; Lisdexamfetamine; Mefenorex; Mephentermine; Mesocarb; Metamfetamine (d-); p- methylamphetamine; Modafinil; Norfenfluramine; Phendimetrazine; Phentermine; Prenylamine and Prolintane.

A stimulant not expressly listed in this section is a Specified Substance.

#### b. Specified Stimulants.

Including, but not limited to:

3-Methylhexan-2-amine (1, 2-dimethylpentylamine); 4-Methylhexan-2-amine (methylhexaneamine); 4-Methylpentan-2-amine (1, 3-dimethylbutylamine); 5-Methylhexan-2-amine (1,4-dimethylpentylamine); Benzfetamine; Cathine\*\*; Cathinone and its analogues, *e.g.* mephedrone, methedrone, and α -pyrrolidinovalerophenone; Dimetamfetamine (dimethylamphetamine); Ephedrine \*\*\*; Epinephrine\*\*\*\* (adrenaline); Etamivan; Etilamfetamine; Etilefrine; Famprofazone; Fenbutrazate; Fencamfamin; Heptaminol; Hydroxyamfetamine (parahydroxyamphetamine); Isometheptene; Levmetamfetamine; Meclofenoxate; Methylenedioxymethamphetamine; Methylephedrine\*\*\*; Methylphenidate; Nikethamide, Norfenefrine; Octopamine; Oxilofrine (methylsynephrine); Pemoline; Pentetrazol; Phenethylamine and

its derivatives; Phenmetrazine; Phenpromethamine; Propylhexedrine; Pseudoephedrine\*\*\*\*; Selegiline; Sibutramine; Strychnine; Tenamfetamine (methylenedioxyamphetamine), Tuaminoheptane; and other substances with a similar chemical structure or similar biological effect(s).

#### Except:

- \* Clonidine
- \* Imidazole derivatives for topical/ophthalmic use and those stimulants included in the 2019 monitoring Program\*.
- \* Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradrol, and synephrine; These substances are included in the 2019 monitoring Program, and are not considered *Prohibited Substances*.
- \*\* Cathine: Prohibited when its concentration in urine is greater than 5 micrograms per milliliter.
- \*\*\* Ephedrine and methylephedrine: Prohibited when the concentration of either in urine is greater than 10 micrograms per milliliter.
- \*\*\*\* Epinephrine (adrenaline): Not prohibited in local administration, *e.g.* nasal, ophthalmologic, or co-administration with local anaesthetic agents.
- \*\*\*\*\* Pseudoephedrine: Prohibited when its concentration in urine is greater than 150 micrograms per milliliter.

#### S7. NARCOTICS

The following narcotics are Prohibited:

Buprenorphine; Dextromoramide; Diamorphine (heroin); Fentanyl and its derivatives; Hydromorphone; Methadone; Morphine; Nicomorphine; Oxycodone; Oxymorphone; Pentazocine; Pethidine.

#### S8. CANNABINOIDS

The following cannabinoids are Prohibited:

\* Natural cannabinoids, e.g. cannabis, hashish and marijuana, synthetic cannabinoids e.g. Δ9 - tetrahydrocannabinol (THC) and other caanabimimetics

#### Except

\* Cannabidiol

#### S9. GLUCOCORTICOIDS

All glucocorticoids are prohibited when administered by oral, intravenous, intramuscular or rectal routes. including not not limited to :

Betamethasone; Budesonide; Cortisone; Deflazacort; Dexamethasone; Fluticasone; Hydrocortisone; Methylprednisolone; Prednisolone; Prednisolone; Triamcinolone

#### P1. BETA - BLOCKERS

**Beta-blockers** are prohibited In-Competition only, in the following sports, and also prohibited Out-of-Competition where indicated

Archery (WA)\*
Automobile (FIA)
Billiards (all disciplines) (WCBS)
Darts (WDF)
Golf (IGF)

Shooting (ISSF, IPC)\*

Skiing/Snowboarding (FIS) in ski Jumping, freestyle aerials/halfpipe and snowboard halfpipe/big air. Underwater sports (CMAS) in constant-weight apnoea with or without fins, dynamic apnoea with and without fins, free immersion apnoea, Jump Blue apnoea, spearfishing, static apnoea, target shooting and variable weight apnoea.

\* Also prohibited Out-of-Competition

Including, but not limited to:

Acebutolol; Alprenolol; Atenolol; Betaxolol; Bisoprolol; Bunolol; Carteolol; Carvedilol; Celiprolol; Esmolol; Labetalol; Levobunolol; Metipranolol; Metoprolol; Nadolol; Oxprenolol; Pindolol; Propranolol; Sotalol Timolol.

#### THE 2019 MONITORING PROGRAMME

The following substances are placed on the 2019 Monitoring Program:

- 1. **Stimulants**: In-competition only: Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradol and synephrine
- 2. Narcotics: In-competition only: Codeine, hydrocodone and tramadol.
- 3. Glucocorticoids: In-competition (by routes of administration other than oral, intravenous, intramuscular or rectal) and Out-of-competition (all routes of administration).
- 4. 2-ethylsulfanyl-1H-benzimidazole (bemitil): In-and Out-of Competition
- 5. Beta-2-agonists: In- and Out-of-Competition: any combination of beta-2-agonists.

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