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16 Glossary Of Terms
This is the fourth annual report on the rugby union anti-doping and illicit drugs programmes in England. As a sport we take our responsibilities in this area very seriously and the RFU continues to implement world-leading anti-doping, illicit drug and education programmes using the best available resources and focussing on emerging trends. Year 2013/2014 has seen an increase in anti-doping rule violations, proving that smart detection and collaboration are key to a successful programme together with increased testing.

Since taking over as chair of the anti-doping advisory group this year, I have been very impressed by how much emphasis our players, coaches and support staff place on keeping rugby union clean and free from both performance enhancing and illicit drugs. The commitment of our respective stakeholders is also to be commended. There is, of course, concern at the increase in anti-doping violations this season, with young players outside the elite pathway continuing to be seen as high risk. A wider education programme and increased testing will be used to tackle this growing issue.

It is, therefore, timely that a research project with Leeds Metropolitan University commenced this season to investigate attitudes towards the use of dietary supplements and banned substances amongst adolescent rugby players. The numbers participating in the study have been encouraging and we look forward to seeing the initial data. The study’s results will help shape the way the RFU educates young players about the dangers of supplementation use and performance enhancing drugs.

The new WADA Code, coming into effect in January 2015, will represent the next iteration of the worldwide fight against doping in sport, defining how anti-doping testing and education programmes should be delivered. The RFU welcomes the tougher sanctioning regime and we are in the process of educating players, coaches and support personnel of the changes contained within the new code.

Rob Andrew – Professional Rugby Director, Rugby Football Union and chair of the Anti-Doping Advisory Group

This season’s results again provide no indication of any systemic doping amongst the senior elite players in England, which is highly encouraging for the integrity of the professional game at the highest level.

The higher number of adverse findings in the wider game serves as a reminder that the education of players, at all levels of the sport, on the topic of anti-doping and illicit drugs is an on-going and crucial task.
The RPA, together with the RFU and Premiership Rugby, remains wholly committed to protecting the game of rugby and the health of its players as well as reporting on doping in an open fashion.

Richard Bryan – Rugby Director, Rugby Players’ Association and member of the Anti-Doping Advisory Group

Premiership Rugby welcomes the findings of this fourth annual Anti-Doping and Illicit Drugs Report. The game of rugby union in England continues to invest in this extremely important area and, while the battle against doping in all sport is ongoing, the game of rugby union has shown that, with engagement and collaboration from the national governing body, the professional clubs and the players, it is possible to combat the threat. It is our firm belief that continued investment is required, particularly with young impressionable players who strive to become professional rugby players and more education and further research, in addition to the testing programme, are essential components of this programme.

Phil Winstanley – Rugby Director, Premiership Rugby Limited and member of the Anti-Doping Advisory Group

The RFU is to be commended for its commitment to protecting rugby in England from doping and its open and transparent reporting mechanisms. UKAD has worked closely with the sport this year, reviewing our partnership strategy and agreed shared goals and priorities. A continual focus is on up and coming players as we recognise that ambitious young players can be vulnerable. Everyone in the sport of rugby and around them, schools, parents, clubs and medics, need to ensure players have the right support and the right skills to make good decisions.

Nicola Newman - Director of Communications & Education, UK Anti-Doping and UK Anti-Doping representative to the RFU Anti-Doping Advisory Group
Anti-Doping Programme

• The RFU education programme has been delivered to players from a wide range of ages and levels, including England squads, professional clubs, regional academies, further education providers and schools. RFU anti-doping staff also presented at seminars for player agents, teachers, parents, coaches, team managers and medical practitioners.

• A continuing priority within the education programme is advising of the potential risks around the use of supplements. Supplement use has become increasingly widespread in recent years and the RFU supplement position statement forms the cornerstone of this message.

• The RFU testing programme comprised 536 anti-doping tests with blood and urine sample analysis utilised. Testing has taken place both in and out-of-competition and included both targeted and random selections.

• The testing programme returned five positive results: one for Cocaine (Stimulants), one for Trenbolone (Anabolic Androgenic Steroids), one for Clomiphene (Hormones & Metabolic Modulators), one for 1-Norandrosterone and Oxandrolone (Anabolic Androgenic Steroids) and one for Stanozolol (Anabolic Androgenic Steroids).

• Six further anti-doping rule violations were discovered outside the testing programme.

Illicit Drugs Programme

• Illicit drug programme education sessions were delivered at all Aviva Premiership clubs during the course of the season by RFU and RPA staff.

• The RFU continued to partner with Alere Toxicology (formerly Concateno Laboratories) for its illicit drug testing programme. A total of 481 tests were conducted, with four positive results returned and 84% of all available players tested at least once during the season.

• Within the illicit drug testing programme 64% of samples collected were of hair, which when analysed can detect illicit drug use for a period of between three and seven months.
Anti-Doping Advisory Group

- The Anti-Doping Advisory Group is responsible for advising on anti-doping policy for rugby union in England. Formed in season 2010/11 the group replaced a number of other committees with responsibility in this area, bringing together representatives from the professional league, the players’ association and the governing body. The group membership also provides expertise in sports science, sports medicine, law and anti-doping operations.

Membership:

Rob Andrew (Chair); Professional Rugby Director, Rugby Football Union
Phil Winstanley; Rugby Director, Premiership Rugby Limited
Andrew Rogers; Salary Cap & Regulations Manager, Premiership Rugby Limited
Richard Bryan; Rugby Director, Rugby Players’ Association
Nicola Newman; Director of Communications & Education, UK Anti-Doping
Angus Bujalski; Head of Legal, Rugby Football Union
Dr Simon Kemp; Chief Medical Officer, Rugby Football Union
Stephen Watkins; Anti-Doping & Illicit Drugs Programme Manager, Rugby Football Union
Richard Nunn; Anti-Doping & Illicit Drugs Programme Officer, Rugby Football Union

Rugby Football Union (RFU)

- The Rugby Football Union is the governing body of rugby union in England. The RFU works closely with its partners in the fight against doping and conducts a comprehensive anti-doping programme covering education, testing and results management. In addition to the anti-doping programme, the RFU was the first union in the world to introduce an illicit drug testing programme.

Premiership Rugby Limited (Premiership Rugby)

- Premiership Rugby is the organiser and promoter of the Aviva Premiership Rugby competition, the top division of rugby union in England. It also acts as the representative body for the league and its member clubs.

Rugby Players’ Association (RPA)

- The RPA is the representative body and collective voice of rugby players in England and looks after the interests of all professional players, from academy players to those playing the international game.

- The Association, originally the Professional Rugby Players’ Association, was renamed The Rugby Players’ Association (RPA) in October 2009, to reflect their expansion and increase in membership to include semi-professional and retired players as well as full time professionals.

International Rugby Board (IRB)

- The IRB board adopted the WADA Code in June 2004 and is committed to a zero tolerance policy towards the use of prohibited substances, methods and drug cheats in the game. The IRB undertakes extensive testing and educational programmes across the game supported by a regulatory system which is in compliance with the Code.

World Anti-Doping Agency (WADA)

- WADA’s mission is to promote, coordinate and monitor the fight against doping in sport in all its forms. WADA was established in 1999 as an international independent agency composed of and funded equally by sport and governments of the world. Its key activities include scientific research, education, development of anti-doping capacities, and monitoring of the code. WADA is a Swiss private law foundation; its seat is in Lausanne, Switzerland, and its headquarters in Montreal, Canada.

UK Anti-Doping (UKAD)

- UKAD is the national body responsible for the implementation and management of the UK’s National Anti-Doping Policy. It is responsible for ensuring sports bodies in the UK comply with the Code. UKAD works with athletes and sports to develop and deliver education and anti-doping information programmes. UKAD’s testing programme covers more than 40 sports.
The education strategy was drafted in consultation with UKAD and aims to deliver a comprehensive programme of education initiatives for rugby in England. Although set for a three year period, the education initiatives contained within the strategy are regularly reviewed to ensure that the changing needs of the game are met.

Working in partnership with the IRB and UKAD, a new strategy is being drafted and will be ready in time for the launch of the new WADA Code in 2015. Keep Rugby Clean and 100% ME brands continue to form a key component of the education programme.

100% ME Advisors

All Aviva Premiership clubs are required as part of the competitions own minimum requirements to have two members of staff trained as 100% ME Advisors. Every club was compliant for season 2013/2014 and many exceeded the minimum standard.

100% ME Advisors are trained to advise players and provide support within the clubs on anti-doping matters. They have access to e-learning education modules to develop and maintain anti-doping knowledge and receive regular email updates.

Squad Briefings

Presentations were delivered to all Aviva Premiership Rugby and Greene King IPA Championship clubs. It is vitally important that players are individually aware of their own responsibilities and are able to put measures in place to avoid unintentionally breaching the regulations.

RFU staff delivered anti-doping briefing sessions to all England age-group representative squads (U16 wider development squad, U18 Clubs & Schools, U17, U18 and U20 squads).

Each session is specifically designed to complement and build upon previous sessions delivered to the players as they progress through the England age-group squads.

A dedicated session was run for the England U20 squad for the IRB Junior World Championship 2014. During the tournament, the team took part in a Keep Rugby Clean day, promoting anti-doping in rugby.

In addition anti-doping education sessions were delivered to all RFU Regional Academy and AASE league squads ahead of the new academy testing programme.

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**At a Glance**

<table>
<thead>
<tr>
<th>Anti-Doping Programme</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>536 anti-doping tests</td>
<td>21% of samples collected were blood</td>
</tr>
<tr>
<td>75% of samples collected out of competition</td>
<td>5 positive tests</td>
</tr>
</tbody>
</table>

**EDUCATION**

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**Squad Briefings**

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Outreach Programme

The RFU continues to raise awareness of anti-doping with young players through its successful outreach campaigns which have been delivered in partnership with UKAD’s 100% ME brand. This season the RFU took the anti-doping message to the world’s largest schools rugby festival – The Rosslyn Park HSBC National Schools Sevens Tournament - which attracts 7,500 boys and girls aged 13 to 18. RFU and UKAD staff were in attendance throughout the week to offer anti-doping advice, education and resources to players, coaches, teachers and parents.

Player Support Personnel Conferences & Seminars

In addition to delivering education directly to players, anti-doping briefings have been delivered to various groups of player support personnel. These groups include team managers, coaches, medics, strength and conditioning experts, sports scientists, player agents, parents, teachers, club officials and academy managers.

Supplement Position Statement

The RFU Supplement Position Statement is designed to be a useful guide for all rugby players when considering the use of supplements. The statement takes a clear three-point approach and is supported by a range of supporting education resources on the RFU website.

Supplements are no substitute for a balanced, healthy diet and most players will gain little from their use if they have not already optimised their hydration, diet, training and recovery practices. Players contemplating using supplements should be aware of the risks and be able to make well informed decisions. This position statement aims to provide guidance for rugby players who may be considering or already using nutritional supplements.

Three points to consider before using supplements:

1) Rugby players of all ages and standards will benefit from good hydration, a balanced rugby-orientated diet, well organised training and a healthy lifestyle. Dietary supplements can play a part but are neither a short-cut, nor an alternative, to those 4 cornerstones of performance.

2) Rugby players should only seek and accept advice on the use of supplements from suitably qualified experts. There is good evidence to support the effectiveness of some supplements; equally, there are many for which there is no evidence that they actually work; and some contain prohibited substances that are banned under the World Anti-Doping Authority (WADA) Code.

3) There can be NO guarantee that a supplement is free from prohibited substances. Under the WADA Code, a player is solely responsible for any prohibited substance found to be present in his or her body. No intention or fault needs to be shown in order to establish an anti-doping rule violation. Consuming a contaminated supplement, or one containing a prohibited substance not mentioned on the label, is not a defence to testing positive to a prohibited substance. A first offence can result in a ban of up to two years. The RFU supports the “Informed Sport” programme, which offers the best way of reducing the risk of using a supplement containing a prohibited substance.
Englandrugby.com provides a platform for a range of anti-doping educational materials. The anti-doping pages are regularly updated to reflect changes in the anti-doping landscape and provide relevant content for users. The Education Resources section hosts a range of resources for people to download and use; including presentations, interactive quizzes, case studies and lesson plans.

RESEARCH

Leeds Metropolitan University and the Rugby Football Union are to partner on a research project to explore the use of performance and image enhancing substances in male adolescent rugby union players.

The RFU has commissioned researchers from the Institute for Sport, Physical Activity and Leisure (ISPAL) at Leeds Metropolitan University and Kingston University for this work.

Young players face pressures to achieve certain targets to obtain a career as an elite rugby player they also face pressures of simply being a young person looking to make their way in the world. Understanding those pressures is crucial to preventing and deterring doping in our young players. Little is known about the factors that influence players’ decision-making and willingness to use performance enhancing substances so this will be a key feature of the research.

Research on the prevalence of performance and image enhancing substance use in sport is often limited and difficult to interpret in any meaningful way for a sport. Research is even less common in schools where most players are introduced to the game. Therefore exploration of these issues among the most talented and committed young players in schools rugby is seen as a priority. Recent cases in South Africa and here in England, where young rugby players have tested positive for banned substances, underscore the importance of this research. In light of these cases, the RFU is now making a serious and sustained commitment to understanding any substance use by male adolescent rugby players. Through this research, the RFU and ISPAL share the aim of developing state-of-the-art evidence-based prevention programmes.

MEDICAL AND THERAPEUTIC USE EXEMPTIONS

The 2014 Prohibited List included some relatively minor modifications from the 2013 list including the reclassification of MDMA and the introduction of Methadrone, and clarification of the prohibited status of Growth Hormone Releasing Peptides.

Update documents were sent to medical staff at all clubs within the RFU testing pool to ensure that players requiring TUEs have the correct documents in place.

TESTING PROGRAMME

The RFU, in collaboration with UKAD, IRB, 6 Nations and ERC runs a comprehensive testing programme incorporating both in-competition and out-of-competition testing.

Players can be tested at anytime, anywhere. Doping tests are routinely conducted after matches, at training and at players homes or other overnight accommodation; 75% of tests conducted this season took place out-of-competition.

Both urine and blood analysis is used as part of the testing programme and an increasing number of tests are of a targeted nature reflecting a move towards smarter, intelligence led testing strategies.
Junior Academy (U17/U18) Testing Programme

After a successful trial in Season 2012/13, a testing programme specifically targeted at academy level players was put in place in response to growing concern about young players’ susceptibility to doping practices.

The regional academies and affiliated education providers were fully supportive of the programme, and significant time was invested by all parties to ensure the programme was implemented successfully. Due to the unique and busy schedules of the players (including academic study and other commitments in addition to rugby training) it was vital that this cooperation was in place.

All squads attended a dedicated anti-doping education workshop and the necessary parental consent was obtained. Testing then took place at no advance notice during the season with over 100 samples collected.

Whereabouts

The RFU adopts and implements the IRB anti-doping regulation which is agreed by WADA to be Code compliant. The IRB anti-doping regulation utilises an International Testing Pool (ITP) and an International Registered Testing Pool (IRTP) for higher risk players.

The ITP comprises international level players from around the world. During periods of injury and during the off-season (or other times when players may be away from their clubs) they are required to provide a one hour slot each day where they must be available for testing.

The IRTP includes players who have either a combination of missed tests from the ITP or are otherwise considered to be of high risk. Players in this pool are required to provide a 1-hr slot every day of the year.

In addition to the IRB testing pools, UKAD requires the RFU to regulate for a National Registered Testing Pool (NRTP) which requires players to provide a 1-hr slot every day. At present a number of England international players are subject to the NRTP.
### RESULTS MANAGEMENT

#### Season 2013/14

<table>
<thead>
<tr>
<th></th>
<th>RFU</th>
<th>IRB</th>
<th>6 NATIONS</th>
<th>ERC</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of tests conducted using each sample collection method</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urine</td>
<td>331</td>
<td>67</td>
<td>14</td>
<td>12</td>
<td>424</td>
</tr>
<tr>
<td>Blood</td>
<td>107</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>112</td>
</tr>
<tr>
<td><strong>Number of tests conducted In-Competition &amp; Out-of-Competition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In competition</td>
<td>88</td>
<td>21</td>
<td>14</td>
<td>12</td>
<td>135</td>
</tr>
<tr>
<td>Out of competition</td>
<td>350</td>
<td>51</td>
<td>0</td>
<td>0</td>
<td>401</td>
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<tr>
<td><strong>Number of tests conducted at each level of rugby</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>International</td>
<td>12</td>
<td>72</td>
<td>14</td>
<td>0</td>
<td>98</td>
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<td>Aviva Premiership / Aviva Premiership clubs in European competition</td>
<td>155</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td>167</td>
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<tr>
<td>Aviva Premiership A-League</td>
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<td>0</td>
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<td>Greene King IPA Championship</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>102</td>
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<td>National League 1</td>
<td>46</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>46</td>
</tr>
<tr>
<td>Junior Academy (U17/U18)</td>
<td>100</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>100</td>
</tr>
<tr>
<td>Other</td>
<td>15</td>
<td>0</td>
<td>0</td>
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<td>15</td>
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<tr>
<td><strong>Total number of tests conducted</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Total tests conducted</td>
<td>438</td>
<td>72</td>
<td>14</td>
<td>12</td>
<td>536</td>
</tr>
</tbody>
</table>

### Last five years

<table>
<thead>
<tr>
<th>Season</th>
<th>Urine</th>
<th>Blood</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013/14</td>
<td>424</td>
<td>112</td>
<td>536</td>
</tr>
<tr>
<td>2012/13</td>
<td>507</td>
<td>110</td>
<td>617</td>
</tr>
<tr>
<td>2011/12</td>
<td>507</td>
<td>72</td>
<td>587</td>
</tr>
<tr>
<td>2010/11</td>
<td>595</td>
<td>110</td>
<td>705</td>
</tr>
<tr>
<td>2009/10</td>
<td>583</td>
<td>30</td>
<td>613</td>
</tr>
</tbody>
</table>
# ANTI-DOPING RULE VIOLATIONS

## Last five years

<table>
<thead>
<tr>
<th>Season</th>
<th>Name; Club</th>
<th>Level of Rugby</th>
<th>Violation</th>
<th>Substance(s)</th>
<th>Sanction</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013/14</td>
<td>Richard Briggs; Henley</td>
<td>Level 3</td>
<td>Presence of a prohibited substance</td>
<td>Oxandrolone &amp; 19-Norandrosterone</td>
<td>2 years</td>
</tr>
<tr>
<td>2013/14</td>
<td>William Robinson; Rotherham</td>
<td>Level 2</td>
<td>Presence of a prohibited substance</td>
<td>Clomiphene</td>
<td>2 years</td>
</tr>
<tr>
<td>2013/14</td>
<td>Harrison Pickett; Hartpury College</td>
<td>University</td>
<td>Presence of a prohibited substance</td>
<td>Stanozolol</td>
<td>2 years</td>
</tr>
<tr>
<td>2013/14</td>
<td>Ralph Cooke; Blackheath</td>
<td>Level 3</td>
<td>Presence of a prohibited substance</td>
<td>Trenbolone</td>
<td>2 years</td>
</tr>
<tr>
<td>2013/14</td>
<td>Clive Peters; Surrey Rugby</td>
<td>County</td>
<td>Possession &amp; Trafficking of a prohibited substance</td>
<td>Various</td>
<td>8 years</td>
</tr>
<tr>
<td>2013/14</td>
<td>Harry Allen; Harlequins</td>
<td>Level 1</td>
<td>Presence of a prohibited substance</td>
<td>Cocaine</td>
<td>1 year</td>
</tr>
<tr>
<td>2012/13</td>
<td>Michael Ryan; Coventry</td>
<td>Level 3</td>
<td>Presence of a prohibited substance</td>
<td>Clenbuterol &amp; 19-Norandrosterone</td>
<td>2 years</td>
</tr>
<tr>
<td>2012/13</td>
<td>John Freeman; Matson</td>
<td>Level 7</td>
<td>Presence of a prohibited substance</td>
<td>Cocaine</td>
<td>2 years</td>
</tr>
<tr>
<td>2012/13</td>
<td>Aaron Mason; Filton SGS College</td>
<td>Under 18 (age grade player)</td>
<td>Presence of a prohibited substance</td>
<td>Dianabol</td>
<td>2 years</td>
</tr>
<tr>
<td>2012/13</td>
<td>Jack Warrington; Sedgley Park</td>
<td>Level 3</td>
<td>Presence of a prohibited substance</td>
<td>Methylhexaneamine (MHA)</td>
<td>2 years</td>
</tr>
<tr>
<td>2012/13</td>
<td>James Comben; Henley</td>
<td>Level 4</td>
<td>Presence of a prohibited substance</td>
<td>Methylhexaneamine (MHA)</td>
<td>6 months</td>
</tr>
<tr>
<td>2011/12</td>
<td>Andy Vance; Royal Navy / Gosport &amp; Fareham</td>
<td>Level 7</td>
<td>Presence of a prohibited substance</td>
<td>Methylhexaneamine (MHA)</td>
<td>6 months</td>
</tr>
<tr>
<td>2011/12</td>
<td>Jonny Spelman; Harlequins</td>
<td>Under 18 (age grade player)</td>
<td>Possession &amp; Trafficking of a prohibited substance</td>
<td>GPRH-6, Masteron, Testosterone</td>
<td>21 months</td>
</tr>
<tr>
<td>2011/12</td>
<td>Bradley Parker; Hove</td>
<td>Level 6</td>
<td>Possession &amp; Trafficking of a prohibited substance</td>
<td>Dianabol</td>
<td>15 months</td>
</tr>
<tr>
<td>2010/11</td>
<td>Nico Steenkamp; Rotherham</td>
<td>Level 2</td>
<td>Use or attempted use of a prohibited substance</td>
<td>Methylhexaneamine (MHA)</td>
<td>3 months</td>
</tr>
<tr>
<td>2010/11</td>
<td>Karena Wihongi; Sale Sharks</td>
<td>Level 1</td>
<td>Presence of a prohibited substance</td>
<td>Methylhexaneamine (MHA)</td>
<td>4 months</td>
</tr>
<tr>
<td>2009/10</td>
<td>Richard Carroll; Redruth</td>
<td>Level 3</td>
<td>Presence of a prohibited substance</td>
<td>Amphetamine</td>
<td>2 years</td>
</tr>
</tbody>
</table>

**Note:** Six cases from season 2013/14 are ongoing and cannot be commented on publicly at the time of publication.
**NEXT SEASON**

The RFU will continue to deliver a stringent regime at the elite level of the game, while allowing greater flexibility to target other areas as deemed appropriate.

It is important to recognise that all rugby players in England are subject to the anti-doping rules and may be tested at any time. This approach will continue for next season, with additional focus placed upon the National League structure where a number of violations have occurred in recent years.

The decision taken last year to target the anti-doping message specifically to younger players through education and testing will continue forward to next season. This approach and has been further justified by the cases that have been reported this season.

The WADA Code revision will come into force from 1st January 2015 bringing stronger sanctions and less scope for mitigation in cases involving contaminated supplements or otherwise tainted supplements. A great deal of work is required to ensure that layers and support personnel are fully aware of this change and the implications.

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**Illicit Drugs Programme**

At a Glance

<table>
<thead>
<tr>
<th>84% of premiership players tested at least once</th>
<th>4 first violations of the policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>64% of samples analysed were hair samples</td>
<td>2 formal admissions of use recorded under the policy</td>
</tr>
<tr>
<td>3-7 month detection period for analysis of a hair sample</td>
<td>£1,000 fine for first offence under the policy for academy player</td>
</tr>
<tr>
<td>£5,000 fine for first offence under the policy for a senior player</td>
<td>4 major illicit drug groups tested (Cocaine, Cannabis, Ecstasy and Amphetamines)</td>
</tr>
</tbody>
</table>

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**FOREWORD**

Press reports of illicit drug use by a wide range of groups in society are a common occurrence and regularly place illicit drug use in the media spotlight. With this, the fourth report on the RFU Illicit Drugs Programme, the RFU and its partners can feel assured of the important impact this important programme is having. The programme delivers education, testing, assessment and treatment (if needed) and deterrent elements. In Alere Toxciology the RFU has a world leading testing agency and this, coupled with the range of specialist assessment and treatment services offered by the Capio Nightingale Hospital, ensures that the programme is run to the highest medical and operational standards. Player feedback from both the testing and treatment service has been excellent. The programme looks to balance player health and welfare issues with the need to protect the reputation of rugby. The RFU’s aim is to set the standard for best practices in illicit drug testing in a rugby environment.

While this season’s four positive test results and two admissions of use are disappointing, the results are consistent with last year’s results and need to be viewed in the context of wider society where “Cocaine is the most commonly used illicit stimulant drug in Europe, although most users are found in a restricted number of countries. It is estimated that about 2.2 million young adults aged 15 to 34 (1.7 % of this age group) used cocaine in the last year.”

The results from the 2013/2014 season again highlight the risks posed to players during the off-season often as a consequence of alcohol use. No player assessed under the policy to date has indicated habitual use of illicit drugs or needed ongoing treatment. The players clearly understand their responsibilities as professionals and to the game and I hope that violations will remain uncommon, the health of players will continue to be protected and the game’s reputation strengthened.

**Dr Simon Kemp**  
Illicit Drugs Programme Medical Director
Concerns about the health and welfare of players and the image and reputation of rugby in England led the RFU to develop an illicit drugs policy and testing programme in partnership with Premiership Rugby and the RPA. Season 2013/2014 was the fourth full season in which the illicit drugs programme was operational.

The programme is run in a way that complements the anti-doping programme, consisting entirely of out-of-competition tests for the four most commonly found illicit drugs: cannabis, cocaine, ecstasy and amphetamines.

The two equally important principal objectives of the RFU Illicit Drugs Policy are:

- To protect the health and welfare of players
- To protect and promote the image and reputation of rugby as a game free of illicit drugs.

In striving to achieve these objectives, it is recognised and accepted that an integrated approach to education, deterrence and rehabilitation is the most appropriate method of deterring the use of illicit drugs and protecting the health and welfare of players. The implementation and administration of this policy by the RFU will be consistent with the achievement of these objectives.

**EDUCATION**

Education sessions were run by the RFU in conjunction with the RPA at all Aviva Premiership Rugby clubs with the aim of refreshing the players’ awareness of the programme, and to provide an introduction to any new players entering the league from the academy system, lower level clubs or from abroad.
TESTING PROGRAMME

Both urine and hair tests were conducted at all clubs throughout the season, with additional focus placed on identified periods of higher risk. Selection was made from the senior playing squads and full-time academy players of each club. Selection may be conducted at random or targeted at individuals or groups of players.

In all, 84% of available Aviva Premiership Rugby players were tested at least once, with some players tested on more than one occasion.

In consultation with Alere Toxicology (the RFU’s testing agency and sample analysis partner) the sample collection process has been designed to be as similar as possible to the sample collection procedure used for the anti-doping testing programme.

Hair testing continues to be extensively utilised as part of the testing programme, now forming the majority of sample collections. The analysis of a hair sample can detect illicit drug use over an extended period of time – in some cases up to five months.

A Percentage based on the total Aviva Premiership player pool, excluding those players on season-long loans to non-Premiership clubs. In some cases where such players had returned to their parent clubs during the season they were tested.

Alere Toxicology (formerly Concateno) are proud to uphold a long-standing relationship with the RFU, in delivering the collection and testing of player urine and hair samples as part of the RFU Illicit Drugs Programme.

Alere Toxicology is one of the largest providers of drug and alcohol testing in Europe, with decades of expertise. Our world class UKAS accredited laboratories provide legally defensible analytical services to the workplace, healthcare, criminal justice and sporting industries.

The Global collection network is regularly trained and audited, collecting over 160,000 samples in 2013 across 92 countries. We bring this expertise along with considerable experience when visiting RFU sites to collect urine and hair samples. Samples arrive at the laboratory completely anonymously with all player identifier details and sample paperwork sent directly back to RFU staff.

Alere Toxicology provides chaperones when attending sites in a similar manner to WADA procedures, in order to protect players and collectors alike and create the most robust collection process possible. A full chain of custody is maintained from the point of collection through to sample analysis, results reporting and sample storage.

More at: www.alere.com/content/dam/alere/docs/investor/Alere-Corporate-Fact-Sheet-FINAL.pdf

Specialist Assessment and Treatment

Compulsory specialist assessment, with follow up treatment if advised, is a key component of the Illicit Drugs Programme. Players who need specialist assessment under the Illicit Drugs Programme (following a positive test result or admission of use) are referred to the Capio Nightingale Hospital in London for expert assessment from a consultant psychiatrist and, if necessary, follow-up treatment. During the season 2013/2014 no player referred for assessment needed ongoing treatment for anything other than alcohol related one-off use of illicit drugs.

Alere Toxicology

- Two world-class laboratories
- Over 10 million tests per year
- Over 5,000 customers in 75 countries
- Over 450 Collecting Officers globally
- 300,000 urine samples and 13,000 hair samples collected in 2013
RESULTS MANAGEMENT

Season 2013/14

This season’s results suggest that although illicit drug use is present, it is not prevalent in the Aviva Premiership Rugby player pool. A total of 481 tests were undertaken, with 2 admissions of use and 4 positive test results recorded.

<table>
<thead>
<tr>
<th>Number of tests conducted using each sample collection method</th>
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<tbody>
<tr>
<td>Hair</td>
</tr>
<tr>
<td>Urine</td>
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</table>

<table>
<thead>
<tr>
<th>Total number of tests conducted</th>
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<tbody>
<tr>
<td>Total tests conducted</td>
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Multi-Season Analysis

<table>
<thead>
<tr>
<th>Season</th>
<th>Urine</th>
<th>Hair</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013/14</td>
<td>172</td>
<td>309</td>
<td>481</td>
</tr>
<tr>
<td>2012/13</td>
<td>60</td>
<td>285</td>
<td>345</td>
</tr>
<tr>
<td>2011/12</td>
<td>289</td>
<td>295</td>
<td>584</td>
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<tr>
<td>2010/11</td>
<td>748</td>
<td>60</td>
<td>808</td>
</tr>
<tr>
<td>2009/10</td>
<td>35</td>
<td>0</td>
<td>35</td>
</tr>
</tbody>
</table>

VIOLATIONS

The number of violations/admissions of use during Season 2013/14 has been broadly consistent with last season’s programme. Four violations have occurred and two admissions of use lodged. Under the policy strict confidentiality is maintained for all admissions of use and violations where it is a first offence. The RFU shall therefore not be reporting the detail of any individual cases.

Education will be delivered in partnership with the RPA during pre-season to players at all Aviva Premiership Rugby clubs.

The testing strategy for 2014/15 will reflect observations, intelligence and the results from the last four full seasons of the programme. The RFU will continue to utilise hair testing as a powerful tool to gain extended glimpses into drug use patterns within the player pool and to focus testing on times/areas of potential higher risk.

Assessment, counselling and rehabilitation programmes will continue to be available to any player who is eligible under the policy.

NEXT SEASON

The initial objectives of the illicit drugs policy remain: to protect the health and welfare of players and to protect and promote the image of the game.

To this end, the RFU will continue to run the Illicit Drugs Programme in line with an integrated three-fold strategy; one of education, deterrence and rehabilitation.
**ADAMS**

The Anti-Doping Administration and Management System, which is a web-based database management tool for data entry, storage, sharing, and reporting designed to assist stakeholders and WADA in their anti-doping operations in conjunction with data protection legislation.

**Adverse Analytical Finding (AAF)**

A report from a laboratory or other WADA approved entity that identifies in a Sample the presence of a Prohibited Substance or its Metabolites or Markers or evidence of the Use of a Prohibited Method.

**Code**

The World Anti-Doping Code 2009; it is the foundation of anti-doping rules and regulations.

**Doping Control**

All steps and processes from test distribution planning through to ultimate disposition of any appeal including all steps and processes in between such as provision of whereabouts information, Sample collection and handling, laboratory analysis, therapeutic use exemptions, results management and hearings.

In Competition A Sample collection which takes place after a Player’s participation or scheduled participation in a Match.

**International Standard**

A standard adopted by WADA in support of the Code. International Standards shall include any Technical Documents issued pursuant to the International Standards. Standards documents include those covering Testing, Laboratories, Prohibited List, Therapeutic Use Exemptions and Protection of Privacy & Personal Information.

**Metabolite**

Any substance produced by a biotransformation process.

**Minor**

A Player that has not reached the age of majority as established by the applicable laws in his country of residence.

**National Anti-Doping Organisation (NADO)**

The entity(ies), designated by each country as possessing the primary authority and responsibility to adopt and implement anti-doping rules.

**Out of Competition**

Any Sample collection which is not In Competition.

**Prohibited List**

The list identifying the Prohibited Substances and Prohibited Methods issued annually by WADA.

**Prohibited Substance**

Any substance so described on the Prohibited List.

**Registered Testing Pool (RTP)**

The pool of Players, established by the Board and at national level by the Unions (and/or their NADO, who are subject to both In Competition and Out of Competition Testing.

**TUE**

An exemption approved by a Therapeutic Use Exemption Committee based on a documented medical file to enable a Player to use an otherwise prohibited substance for medical reasons.

**Specific to the RFU Illicit Drugs Programme**

**Adverse Analytical Finding (AAF)**

A report from the Testing Agent’s laboratory which identifies in a Sample the presence of an Illicit Drug or its Metabolites or Markers or evidence of the Use of a Prohibited Method,
Illicit Drug

Any substance listed in the version of Schedule 1 of the RFU Illicit Drugs Policy which is current at the time of the Sample collection;

Programme Manager

The person appointed by the RFU to manage and administer the Programme in accordance with the RFU Illicit Drugs Policy;

Programme Medical Director

The Medical Practitioner (or his appointed deputy) who will provide day to day medical advice to the Programme;

Sample

Any biological material, including urine, blood, hair (from any part of the body) and oral fluid, collected for the purposes of testing for Illicit Drugs;

Sample Collection Officer (SCO)

The authorised person appointed and responsible for conducting and overseeing the Sample collection procedures. The SCO shall be independent and properly trained in Sample collection procedures.
Contact

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TEAMWORK RESPECT ENJOYMENT DISCIPLINE SPORTSMANSHIP