



<b>Policy</b>	Australian Athletics Supplements in Sport
<b>Effective Date</b>	April 24 2020
<b>Date Last Reviewed</b>	April 2023
<b>Scheduled Review Date</b>	1 January, 2025
<b>Supersedes</b>	All previous Policies and/or Statements
<b>Approved by</b>	AA Board

## Background

Sports supplements include medical and performance supplements as well as sports foods. Supplement usage is common amongst Australian athletes and 87% of supplement use was recently reported across a sample of athletes surveyed in the National Institute Network, including Athletics. Across this evolving and lucrative industry, although claims of specific health and performance benefits are made for many products, scientific evidence regarding efficacy or athlete safety is often missing.

There is a real risk of a positive doping outcome with the use of supplements. Recent reports have suggested 15-30% of supplements exclude listing active ingredients or contain unlisted substances. In market research conducted by LGC, 19% of tested products contained one or more prohibited substances. Additional studies have also shown that up to 25% of supplements purchased online or from overseas contain substances that may lead to an adverse finding.

In February 2013 the Australian Crime Commission (ACC) released its report into Organised Crime and Drugs in Sport. The report suggested that inappropriate practices in relation to supplementation pose a threat to the integrity of sport and potentially to the safety of individuals. The policy draws from;

- The Australasian College of Sports and Exercise Physicians' (ACSEP) *Position Statement regarding Supplement Use in Sport* - [acsp.org.au/sports-supplements/](https://acsp.org.au/sports-supplements/)
- The Australian Institute of Sport (AIS) Sports Science/Sports Medicine (SSSM) Best Practice Principles released in 2013 that support Federal Government investment in high performance sport.

The policy is underpinned by the AIS Sports Supplement Framework:

<https://www.ais.gov.au/nutrition/supplements>

### 1) Policy Purpose

- a) The purpose of this Policy is to provide guidelines and restrictions for the appropriate use of medical and performance supplements as well as sports foods for Athletics Australia and its community.
- b) By this Policy, in relation to any use of supplements within the sport of athletics under the jurisdiction and oversight of AA, AA aims to ensure that;
  - i) there is no threat to human health and safety;
  - ii) the use of dietary and nutritional supplements in sport is evidence-based;
  - iii) individuals are at very low risk of an inadvertent anti-doping rule violation; and iv) the integrity of the sport is protected.



## 2) Scope

This policy applies to

- a) All National Athlete Support Scheme (NASS) supported athletes
- b) Athlete members of AA junior high-performance programs
- c) Athletes selected to an AA supported team (including but not limited to Team NASS supported athletes, Olympic and Paralympic Games, Olympic Youth, World Athletics Championships, World Athletics Indoor Championships, World Athletics U/20 Championships, World Para Athletics Championships, Commonwealth Games, Commonwealth Youth Games, World Athletics Relay Championships, World Athletics Cross Country Championships, World Athletics Race Walking Championships and Oceania Championships teams)
- d) AA employed or contracted coaches, NASS personal coaches and Junior/Para/Senior team member personal coaches
- e) AA employees, contractors, and consultants

It covers the groups (A-D) outlined in [AIS Supplement Framework](#)

## 3) Position Statements

- a) AA endorses the:
  - i) Australasian College of Sports and Exercise Physicians' (ACSEP) [Position Statement regarding Supplement Use in Sport](#)
  - ii) AIS Sports Science/Sports Medicine (SSSM) Best Practice Principles
- b) AA believes that:
  - i) Sports Nutrition should be underpinned by a personalised and periodised eating plan that optimises short and long-term health and performance. In addition, athletes must ensure they adhere to appropriate training, strength and conditioning principles and adequate recovery strategies, including sleep. Accordingly, AA encourages a **food first** approach to a nutrition plan in all circumstances.
  - ii) Medical supplementation is only required when such a diet or clinical condition is unable to satisfy the metabolic requirements of a specific health and subsequent performance need. This can often best be determined through blood tests to identify such nutritional deficiencies. Emerging evidence suggests that the use of probiotics **may** assist with immune health and use of these should be discussed with a sports physician or accredited sports dietitian.



## 4) AA - General and special consideration screening blood test recommendations

<b>Event(s)</b>	Track events > 400m (or if clinically indicated in other groups), jumps, endurance events.
<b>Tests</b>	Full blood count, iron studies
<b>Tests</b>	Vit B12 / Vit D only if clinically indicated
<b>Females</b>	Biannually > Quarterly (as relevant)
<b>Males</b>	Annually > Biannually (as relevant)
<b>Special consideration athletes</b>	Athletes with special dietary considerations (vegan, vegetarian) or clinical indicators (e.g., IBD, coeliac or suspected low energy availability) and endurance athletes training in Altitude locations.
<b>Tests</b>	Iron studies: Serum ferritin, haemoglobin concentration, transferrin saturation Desirable: Serum soluble transferrin receptor, C-reactive protein
<b>Females</b>	Quarterly
<b>Males</b>	Quarterly

- i) Any use of sports foods and supplements should be based on the principles of:
  - (1) Athlete health and safety
  - (2) Evidence-based science – as supported by the [Australian Institute of Sport Supplement Framework](#)
  - (3) [Anti-Doping compliance](#)
- ii) Performance supplements should be used in High Performance athletes only on an individual basis and are rarely required for recreational and developing athletes. World Championship level, Paralympic and Olympic success has been achieved by many Australian athletes without reliance on the use of performance supplements.
- iii) The claims made about the vast majority of such supplements are not evidence-based. In the case of the small number of performance supplements which do have scientific credibility, the situations of their use should be few and targeted.

## 5) Supplement Use

- a) The use of all supplements should only take place on the advice of an Accredited Sport and Exercise Medicine (SEM) Physician/Registrar, Sports Doctor, an Accredited Sports Dietitian or another accredited and appropriately trained medical practitioner who has a scope of practice in prescription of medical supplements.
- b) AA has endorsed a health practitioner network of “preferred” SEM Physicians/Registrars, Sports Doctors and Sports Dietitians. The list can be found on the [AA website](#) - athletes are encouraged to seek advice regarding their nutrition plan including all supplement and sports foods education from these practitioners.



- c) AA and its preferred practitioners will be guided by the [AIS Sports Supplement Framework](#) which classifies supplements into four groups according to the evidence base for their use as outlined in Appendix B.
- d) Permitted sports supplements;
  - (1) Group A
  - (2) Group B or C - with special exemption under a research protocol or specific case management
- e) In alignment with the AIS Sports Supplement framework, AA does not advocate for the use of Group B and C supplements due to current level of scientific evidence not supporting their efficacy.
- f) D or any other untested or experimental substances that contravene the World Anti-Doping Code, or substances which are not approved for human use, must NOT be used as part of a supplementation program.

## 6) Supplement Registration and Declaration Process

- a) For athletes supported by AA through NASS, ALL AMS supplement registrations including declarations will need to be completed through medical screening and by the athlete when;
  - i) selected onto NASS, through their NIN sports medicine screening processes
  - ii) selected for an AA representative team
  - iii) screened by their NIN Physician / Registrar / Doctor
  - iv) screened by their NIN Sports Dietitian
  - iv) a new supplement has been started/ceased

It is the responsibility of the athlete to manage and keep their AMS supplement register and declaration current.

### Group B AND C supplements

- b) For athletes supported by AA through NASS or any AA selected team, use of any [Group B or C supplements](#) must be approved in advance of commencing the supplement through the:
  - i) NIN Dietitian or Sports PhysicianAND/OR
  - ii) AA Chief Medical Officer and the National High Performance Nutrition Lead
- c) A review of the Chief Medical Officer's decision may be sought from the AA Sports Supplement Panel, which will be formed as required from amongst suitably qualified persons).
- d) AA does not encourage the use of supplements for athletes under the age of 18 years unless under advised from appropriately Accredited and qualified sports medical professionals. This includes Group A performance supplements. Situations in which individuals under the age of 18 would be required to use supplements are rare. Parents, coaches, and other responsible adults should seek guidance from the preferred network of appropriately accredited and qualified sports medicine and dietetic professionals, before allowing junior athletes to take such supplements.
- e) Participation in a sports supplementation program should **always** be voluntary.



- f) Athletics Australia adheres to a strict **no needle policy**. There is **no** role for injections as part of a supplementation program.
  - i) In all circumstances only a qualified medical practitioner is permitted to perform ANY injections for the treatment of illness or injury.
  - ii) There must be documented evidence of a nutritional deficiency that cannot be treated with oral supplementation. In these circumstances, only intravenous iron supplementation will be permitted.
  - iii) Supplementation is to be delivered under the care of the appropriately qualified medical practitioner (preferably a haematologist) who is cognisant of WADA rule M2. *“Intravenous infusions and/or injections of more than 100mls per 12hour period except for those legitimately received in the course of hospital treatments, surgical procedures or clinical diagnostic investigations.”*
  - iv) For athletes supported by AA through NASS, junior high-performance programs or any AA selected team, the treating medical practitioner must liaise with the AA Chief Medical Officer regarding any such IV supplementation program.
- g) Quality control in the manufacture and labelling of supplements, even in Australia, is extremely variable. Supplements are increasingly made of numerous ingredients, some of which may be contaminants that could result in an athlete incurring an inadvertent anti-doping violation.

Extreme caution is recommended regarding supplement use. AA or appropriately qualified sports medicine or dietetic professionals cannot guarantee the purity of any supplement preparation, so therefore does not currently endorse the use of any particular brand of medical or performance supplement.

AA recommends the use of 3rd party batch tested supplements (i.e., [HASTA](#) or [Informed Sport](#)) from Group A of the Performance supplements list, with the exception of those regulated through the [TGA](#), or with special exemption under a research protocol or case managed for Group B and C sport supplements.

- h) Athletes are ultimately responsible for any substances ingested or injected - in terms of complying with the [World Anti-Doping Code](#) and the principle of strict liability.

## 7) Education

- a) Athletes, coaches and contracted or State Institute or Academy of Sport performance service providers supported by NASS (or working with NASS athletes), in Junior programs (or working with junior programs) are required to complete the SIA e-learning modules, which provide anti-doping and supplement education.
- b) Individuals with education obligations, and the details of these requirements are outlined below;



	SIA e – Learning modules (s)			
	<a href="#">Level 1</a>	<a href="#">Level 2</a>	<a href="#">Coach Course</a>	<a href="#">Medical Support Course</a>
NASS, National Senior, Para team members	✓	✓ annually or prior to team departure		
National Target Talent Program, Youth, Junior team members	✓	✓ annually or prior to team departure		
AA employed or contracted coaches, NASS personal coaches and Junior/Para/Senior team member personal coaches	✓	✓ annually or prior to team departure	✓ coaches	
AA corporate staff, contractors, consultants and Board members	✓			
AA Member Association staff, contractors and consultants	✓			
Team official appointed by AA to any national team	✓	✓ annually or prior to team departure	✓ coaching officials	✓ medical officials
Any other staff member, consultant, contractor or person in any way appointed or otherwise engaged with AA HP program	✓	✓ annually or prior to team departure	✓ coaching personnel	✓ medical personnel

## Responsibilities:

The Chief Medical Officer, High Performance Nutrition Lead, High Performance Services Manager, High Performance Director, Integrity Officer, and Integrity Unit Education Officer are responsible for developing, maintaining, monitoring and implementing the policy.

Failure to comply with this policy will result in suspension from involvement in the team, program or activity and may if not addressed immediately involve removal therefrom. Further sanctions or penalties may be provided for individual contracts or agreements or within AA's constitutional documents.

## Questions:

Should any NASS athlete or coach wish to implement or have any questions regarding a supplement program they should discuss this first with the AA Chief Medical Officer or their NIN Doctor. This may then be referred off to the AA Sports Supplementation Panel for further discussion and consideration.

## AIS Supplement Framework:

Please click link below for further supplement information and resources.

<https://www.ais.gov.au/nutrition/supplements>