

Australian Athletics Supplement Policy

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Approved by	AA Board

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1. Executive Summary

- The Australian Athletics (AA) Supplement Policy provides a clear framework to ensure supplement use across high-performance athletics prioritises athlete health, performance, and sport integrity, while minimising the risk of inadvertent anti-doping violations.
- This policy applies to all NASS athletes, PTP athletes, Athletes selected onto Australian teams, AA staff, contractors, coaches and performance support personnel. While community athletes are not formally covered, the policy provides useful guidance for broader athletics participants.
- AA promotes a food first approach but understands supplements may form part of an athlete's health or performance journey.

- AA recommends supplements should only be used when supported by scientific evidence and is aligned with the AIS Supplement Framework, is World Anti-Doping Agency (WADA) compliant, and that supplement use must always remain voluntary.
- To reduce the risk of inadvertent doping, AA recommends TGA registered medicines (AUST – R) or third-party batch tested supplements (HASTA Certified/Informed Sport).
- Any proposed use of Group B or C supplements from the AIS Supplement Framework requires approval from an AA or National Institute Network Sports Dietitian, Doctor, or the AA Chief Medical Officer or National Nutrition Lead.
- Approved supplements must be recorded in the Athlete Management System (AMS).
- AA recognises that not all supplements are 100% safe or advantageous; and only permits supplements within Group A of the AIS Supplement Framework, unless special exemption for Group B or C supplements has been approved.
- AA does not endorse performance nutrition supplements use in Junior athlete's U/18.
- AA recognises that Protein fortified foods typically bought from food manufacturers provide no additional risk of WADA prohibited ingredients; but those of unknown origin from cafe's or manufactured within Pharmaceutical or supplement companies are higher risk and should be avoided.
- AA adheres to a strict no needle policy and any injection or infusion must only be completed by an AHPRA registered medical practitioner and compliant with WADA requirements.
- Mandatory annual anti-doping education through Sport Integrity Australia and AA is required by all Athletes, relevant staff and any other individual who this policy applies to.

2. Background

Sports supplements include medical and performance supplements as well as sports foods. Supplement usage is common amongst Australian athletes, with 87% of National Institute Network athletes surveyed, including Athletics reported supplement use (Waller, et al, 2019). Across this evolving and lucrative industry, claims of specific health and performance benefits are made for many products and scientific evidence regarding efficacy or athlete safety is often missing.

Supplements pose a risk of an anti-doping rule violation for athletes. [Research from Sport Integrity Australia \(SIA\)](#) found that in non-batch-tested supplements:

- 35% contained substances banned in sport by the WADA
- 57% of products with banned substances did not list these substances on their label or anywhere else
- 83% of banned substances detected were naturally occurring compounds (more information [here](#))

Marketing that refers to ingredients being ‘all natural’ or ‘herbal’ – does not mean it’s safer for athletes or free from banned substances.

Within Appendix 1, please find relevant policies, position statements and resources that readers are encouraged to refer to when interpreting the AA Supplement Policy.

3. Policy Purpose and Scope

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 AA.

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:

- there is no threat to human health and safety;
- the use of dietary and nutritional supplements in sport is evidence-based;
- individuals are at minimal risk of an inadvertent anti-doping rule violation; and
- the integrity of the sport is protected.

This policy primarily applies to:

- High performance categorised athletes (NASS, PTP and all selected onto AA teams).
- AA employed or contracted coaches, NASS personal coaches and Junior/Para/Senior team member personal coaches.
- AA employees, contractors, consultants and any individuals appointed to support AA teams.

While the policy doesn’t apply to community or recreational level athletes, the information and resources may still provide guidance in accordance with appropriate medical or nutrition recommendations.

4. Position Statements

AA believes that:

- a) 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 endorses a food first approach to nutrition planning in all circumstances.
- b) 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 nutritional deficiencies.

- c) Any use of sports foods and supplements should be based on the following principles:
 - i) Athlete health and safety.
 - ii) Evidence-based science – as supported by the [Australian Institute of Sport Supplement Framework](#) and [World Anti-Doping Agency](#).
- d) The proposed benefits about many supplements are often not evidence based or evidence is inconclusive.
- e) A batch tested supplement (e.g. [HASTA](#) certified or [Informed Sport](#)) does not always equate to a health or performance benefit and the purpose of taking supplements should be evidenced based and informed.
- f) The use of all supplements should only take place on the advice of an Accredited Sport and Exercise Medicine (SEM) Physician or Registrar, GP or an Accredited Sports Dietitian. For athletes who don't have access to NIN based practitioners, AA has an endorsed health practitioner network of preferred SEM Physicians/Registrars and Accredited Sports Dietitians. The list can be found under [Performance Support](#) on the AA website - athletes are encouraged to seek advice around their nutrition planning including all supplement and sports foods education from these practitioners.

5. Supplement Use

Extreme caution should be exercised regarding supplement use. AA or appropriately accredited and qualified sports medicine or dietetic professionals cannot guarantee the purity of any supplement preparation; therefore AA does not currently endorse the use of any brand of medical or performance supplement.

Only certain supplements as outlined in the [AIS Sports Supplement Framework](#) are permitted:

- Group A; or
- Group B or C - with special exemption under a research protocol or specific case or clinical management e.g. nutritional deficiency due to the current level of scientific evidence and efficacy.

AIS Supplements categorised in Group 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.

It must always be voluntary for an athlete to take a supplement.

6. Group B and C supplements – special exemption

AA-supported athletes through NASS, PTP or any AA selected team, who may be considering using a Group B or C supplement, must seek approval by speaking to the below practitioners first:

- NIN/NSO Sports Dietitian and or Doctor or

- The AA Chief Medical Officer (CMO) or National Nutrition Lead

If the supplement is approved, athletes must log this within their AMS Supplement Register, which will send an email alert the AA CMO and National Nutrition Lead.

If there is any uncertainty about the use or approval of a Group B or C supplement, it is strongly recommended that you notify this in writing to the AA CMO or National Nutrition Lead.

7. Batch Tested and TGA Regulated Supplements

Supplement brands which have undertaken third party batch testing (e.g. HASTA certified or Informed Sport) or medications which have been registered through the TGA (e.g. AUST R), appear to be the lowest level of risk and therefore AA recommends batch tested (e.g. HASTA certified or Informed Sport) and AUST – R medications.

Regulation	Evidence	Current examples ¹
TGA Registered medicines (AUST – R)	• Lowest risk due to their high level of regulation • Fully assessed by the Therapeutic Goods Administration (TGA) for safety, quality and efficacy before they are sold.	Sodibic tablets (Sodium bicarbonate) Ferro – grad C (iron)
Third – party batch tested companies such as HASTA certified or Informed Sport	• Are the next lowest risk group as this testing is targeted at WADA prohibited substances. • While safety cannot be 100% guaranteed, batch tested supplements lower doping risk; but not all companies batch tested every product within a range (e.g. Informed Choice as well as supplements such as Ostelin Calcium, D3 and K2) • Some supplements and medicines can be batch tested but this doesn't guarantee they are impactful (e.g. AIS categorised supplements from Group B or C or AUST – L).	Musashi Creatine SiS Beta Recovery Pillar Ultra Immune C

TGA Listed medicines (AUST-L)	• Are less regulated than Registered medicines. • Are not specifically tested for WADA Prohibited Substances. • Have a higher risk of doping violations, than both AUST - R and batch-tested products. • Some AUST – L products can be batch tested but this doesn't guarantee they are impactful.	Magnesium
Unlisted (not meeting any of above criteria)	• Pose the highest risk of containing a banned substance and causing an anti-doping rule violation.	

1. Current examples accurate as of May 2026.

8. Supplement Registration and Declaration Process

It is the responsibility of the athlete to manage and keep their AMS supplement register and declaration current which helps to demonstrate intentional and safe supplement practice. Athletes will also be asked about supplement use as part of their medical screening when:

- selected onto NASS, through their State Institute or Academy of Sport, sports medicine screening processes
- selected for an AA representative team
- screened by their State Institute or Academy Doctor or Dietitian
- a new supplement has been started or ceased

9. Junior Athletes (Under 18 years)

The use of supplements for athletes under the age of 18 years must only occur under the supervision of a **Dietitian or Medical Practitioner**. This includes Group A performance supplements.

Specific situations in which individuals under the age of 18 would be required to use performance supplements (as listed and defined by the AIS Supplement Policy) are rare.

Performance supplements should **not** be used by someone **under 16 years of age**.

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.

10. Protein Fortified Foods (PFFs)

Protein fortified foods present with different levels of risk. Please refer to the [SIA infographic](#) for further examples of low and high-risk protein fortified foods.

- **Low risk foods** – typically include those manufactured in a food company. For example, Up and Go Energize or Carman's High Protein Muesli Bar, box of high protein weetbix.
- **High risk foods** – may be produced in a pharmaceutical or supplement company without regulation or batch testing. For example, high protein smoothies or energy balls bought from a cafe or non – batch tested protein bars/balls.

If any uncertainty exists within Australia or Internationally, athletes are encouraged to check with the NIN/NSO Sports Dietitian.

11. No Needle Policy

Australian Athletics adheres to a **strict no needle policy**. Readers should refer to the [Australian Athletics Improper Use of Drugs and Medicine Policy](#) for more information.

- To avoid any doubt, any injection or infusion must only be completed by an **AHPRA registered Medical Practitioner** qualified to do so, and compliant with WADA requirements including **WADA rule M2.2**: "Intravenous infusions and/or injections of more than 100mls per 12-hour period except for those legitimately received in the course of hospital treatments, surgical procedures or clinical diagnostic investigations."
- Any questions can be directed to the **AA CMO**.

12. Education

AA supports the [Sport Integrity Australia \(SIA\) Anti-Doping Program](#). All Australian Athletics participants, including AA or contracted staff, athletes and coaches, must complete the relevant SIA e-learning modules as set out in the AA/SIA Education plan, available on the AA website.

Individuals can access SIA e - learning education modules via:

- <https://elearning.sportintegrity.gov.au/>
- Further information about education can be found under [Sports Integrity](#) on the AA website.

13. Responsibilities

The AA Sports Supplement Panel includes the CMO, National Nutrition Lead, Performance Support Manager, General Manager – High Performance, General Manager – Integrity, and Integrity Education Officer who are responsible for:

- a) Developing the policy
- b) Implementing the policy
- c) Reviewing the policy
- d) Enforcing the policy

Failure to comply with this policy may result in:

- a) Suspension or removal from involvement in the team, program or activity
- b) Further sanctions or penalties as provided for in individual contracts or agreements
- c) Further sanctions or penalties as provided for with AA's constitutional documents and AA National Integrity Framework policies and Code of Conduct.

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.

14. Questions

Should any NASS or PTP athlete or coach wish to implement or have any questions regarding a supplement program they should:

- Discuss this with the AA CMO or their NIN/NSO Doctor or Sports Dietitian.
- Individual cases may then be referred to the AA Sports Supplement Panel for further discussion and consideration.

Appendix A: Interpretation of the Australian Athletics Supplement Policy should be reviewed in conjunction with:

- [Australian Athletics Improper Use of Drugs and Medicine Policy](#)
- Australasian College of Sport and Exercise Physicians' (ACSEP) [Position Statement regarding Supplement Use in Sport](#)
- Australian Institute of Sport (AIS) [Sports Science/Sports Medicine \(SSSM\) Best Practice Principles](#).
- AIS [Sports Supplement Framework](#)

Appendix B: Additional Resources

- AIS [Performance Nutrition HQ Modules](#)
- AIS [Supplement additional resources](#)
- SIA webinar [Supplements in Sport for Parents](#)
- [SIA Supplements in Sport](#) resources