Doping: Sports physicians and the drug abuse by athletes – an empirical analysis

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Introduction

Reports indicate that physicians are frequently asked for power enhancing substances by athletes: Whereas 8% of the Swiss physicians were called for peptide hormones, more than 22% stated a demand for testosterone substances by their athletes (Kamber, Marti 1997). These findings are in agreement with the use of prohibited substances mentioned by general practitioners from Great Britain (Greenway, Greenway 1997), France (Laure et al. 2003) and Germany (Peters et al. 2005). Furthermore, 55% of American general practitioners adduced to have been asked for steroids and have seen potential steroid-abusers in their surgery within a five year term (Salva, Bacon 1991). Therefore it becomes obvious that physicians play a key role in a successful battle against doping. Since there is still a lack of information concerning the side effects of doping, we decided to set out to analyse in an empirical study the extent of doping from the sports physician’s focus.

Methods

A total number of 2667 physicians (all qualified in sports medicine) were included into the survey and were divided into two subgroups: While the first group included all physicians in the state of Bavaria (in Germany) (n=2404) running their own surgery the second one sums up all German team physicians being members of to a sports association (n=263). An anonymous questionnaire was forwarded including 75 questions about doping related knowledge, flow of information as well as observed abuse by athletes. (The original questionnaire will be presented.)

Results

Rate of return of the questionnaire was 18% (n=472) in total, 16% (n=392) among the Bavarian physicians and of 30% (n=80) among the German team physicians. A general demand on doping by athletes was affirmed by 62% of all physicians (57% physicians vs. 81% team physicians). Bavarian physicians are more likely to be confronted with a request on information about medical side effects, ways of misuse and sources of prohibited substances (>51%).

Doping related contact of the team physicians seems to be more in a protective way: over 70% of the quotes belong to information in general, information concerning the prohibited list of substances and on ways to protect oneself from doping (see Fig. 1).

The athlete’s request of information about the usage of prohibited substances to enhance power was affirmed by 70% of all physicians. Prohibited methods were mentioned in 44% of the cases. The athlete’s strategy of the demand for prohibited substances can be characterized as a direct request at the physician in at least 77% of the cases.

Conclusion

In medical care the physician is frequently encountered with doping. On the one hand the physician is confronted with requests for prohibited substances, on the other hand with athletes in search of information about doping (especially the team physicians). The demands extend over all sport levels and could be verified with the presence of serious side effects caused by drug abuse. Consequently, the (sports) physicians have to be integrated much more into doping prevention by adequate educational training programmes.

References