

Rider Banned Substances Guidelines

This document serves as a medication guideline to riders and their health care providers.

The use of alcohol is not covered by this document and the most up to date guidance is provided in the Rules of the NHA under 77.2.1 (shown below) and 78.2 and 78.3. These must be referred to on the website of the NHA.

The banned substances that are of concern to the rider differ from those in other sports where the emphasis is on performance enhancement. The screening of riders involves only urine samples and the main focus is on substances that may impair the judgment of the rider on the track and in this way compromise the safety of both riders and horses.

Banned substances fall into two broad categories namely recreational drugs and therapeutic substances. Recreational drugs are known to cause mood changes, dissociative behaviour and to have mind altering effects. Therapeutic substances form part of “over the counter” preparations and prescribed medication. Many of these substances have effects similar to that of alcohol such as loss of balance, unsteady gait, slurred speech and poor concentration and are thus detrimental to the judgment and performance of the rider. It is for this reason, in the interest of all the riders in the field, that these substances are monitored.

The monitoring of prohibited substances is standard practice in many first world countries. The list of substances and their concentrations screened for are similar to those that apply to aircraft pilots, operators of heavy equipment and drivers of public transport vehicles. There are formal published threshold concentrations for some of these substances and a positive is called when this threshold is exceeded.

For permitted compounds there are internationally accepted levels at which substances are considered to have no detrimental influence. This level is taken into consideration during screening and a positive is only called when the level is exceeded.

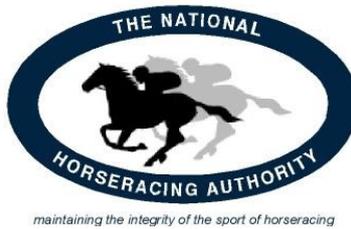
Substances of concern change over time as new preparations become available, the rules of The National Horseracing Authority will be amended accordingly



Rule 77.2 DEFINITIONS OF BANNED SUBSTANCES

A BANNED SUBSTANCE is any one or any combination of the following substances or any of the metabolites of such a substance or a combination of substances or any isomer of a substance or any isomer of a metabolite:

- 77.2.1 Alcohol – at or above a threshold of:- The concentration of alcohol in a blood specimen should not be more than 0.05 grams per 100 millilitres and the concentration of alcohol in a specimen of breath should not be more 0.024 milligrams per 100 millilitres;
- 77.2.2 Cannabinoids: a concentration in urine of 11-nor-delta 9 tetrahydrocannabinol-9-carboxylic acid (carboxy-THC) greater than 50 nanograms per millilitre;
- 77.2.3 Amphetamines excluding ephedrine, methylephedrine, pseudoephedrine and phenylpropanolamine;
- 77.2.4 Barbiturates;
- 77.2.5 Lysergic Acid Diethylamide (LSD);
- 77.2.6 Dissociative Anaesthetics including Phencyclidine (PCP);
- 77.2.7 Cocaine;
- 77.2.8 Opiates, Opioids and related substances including codeine save only that in the case of codeine, its presence in a specimen of urine at a concentration of less than 2000 nanograms per millilitre shall not constitute an offence;
- 77.2.9 Benzodiazepines;
- 77.2.10 Benzodiazepine-like substances;
- 77.2.11 Diuretics including Furosemide (Lasix);
- 77.2.12 Gamma hydroxybutyric acid (GHB).



Preparations which contain any Recreational Drugs are Banned

The above list includes many recreational drugs which are known to be potentially habit forming due to their addictive properties. The levels are controlled by international consensus and norms. These recreational drugs are discussed below.

- **Amphetamines**

Compounds screened for include **Amphetamine** (speed, uppers, hearts, bennies, black beauties, truck drivers etc.), **Methamphetamine** (meth, tik, ice, crystal, go fast, speed, chalk, glass etc.), **Methcathinone** (KAT), **MDA**, **MDMA** (Ecstasy, XTC, X, clarity, Adam, peace, hug, beans, love drug etc.) Some pharmaceutical products are related to amphetamines in structure but do not have the same mind altering potency. These form part of common medications due to their beneficial effects and are thus excluded from screening.

Substances which are currently excluded from screening include normal dosage of **Ephedrine** (cough syrups, decongestants and appetite suppressants), **Methylephedrine**, **Pseudoephedrine** (decongestant, stimulant) and **Phenylpropanolamine** (decongestant, appetite suppressant, anorectic).

- **Lysergic Acid Diethylamide (LSD)**

LSD (acid, blotter, dots, cubes, microdot, yellow sunshine, blue heaven) is most often taken as tablets. This is a psychedelic drug, reported to alter reasoning and thinking processes.

- **Gamma hydroxybutyric acid (GHB)**

Gamma hydroxybutyric acid (home boy, grievous bodily harm, soap, G, liquid ecstasy, scoop, goop, liquid X) is a central nervous system depressant. It is normally sold and abused as a clear, odourless, nearly tasteless liquid. It is a well-known recreational drug with effects similar to alcohol and ecstasy. At high doses it may induce dizziness, drowsiness, agitation, visual disturbances and amnesia.



- **Dissociative Anesthetics**

These are pharmaceutical substances used to induce anesthesia but are also used as recreational drugs. They are known to cause dissociative behavior, hallucinations and euphoric effects which could lead to convulsions. Locally available pharmaceutical substances include **Ketamine** (jet, Vitamin K, Special K etc), **Tiletamine** and **Phencycline** (PCP, angel dust, ozone, boat, love boat, hog, peace pill, wack, rocket fuel etc.). Phencyclidine can be smoked, snorted or simply ingested. It is classed as a dissociative drug with anesthetic, hallucinogenic and euphoric effects which could lead to convulsions. Behavioral effects, when under the influence of these substances, are not unlike those of alcohol.

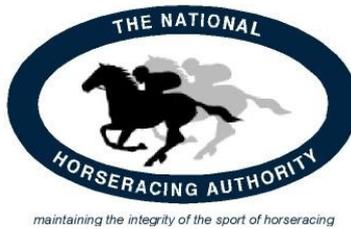
- **Cocaine** (crack, coca tea, coke, snow, flake, blow, C, candy, charlie etc.) Cocaine is a stimulant of the central nervous system and highly addictive. It can be smoked, inhaled (snorted) or injected. It can cause feelings of well-being and euphoria. Anxiety, paranoia, restlessness, tremors and convulsions are also commonly observed.

Cocaine is metabolized to Benzoyllecgonine. Benzoyllecgonine is prosecuted similarly to cocaine as it is a highly specific metabolic indicator of cocaine use.

- **Opiates, Opioids and related substances**

Opiates are substances, related in structure and effects to **Morphine** and **Codeine** and are found in opium, a product of the opium poppy. Opioids and related substances are compounds that have opium or morphine-like action and effects. Opiate, Opioids and related substances induce a rush of intense euphoria accompanied with relaxation, drowsiness, sleepiness and relief from fear and anxiety. These impair mental and physical performance. Recreational drugs within the Opiate class include Morphine, **Opium** (big O, black stuff, block, gum, hop) and **Heroin** (smack, H, ska, junk, white horse, horse, brown sugar etc.) that are also the most addictive. Also banned are substances derived from Morphine with the same side effects including the potent analgesics **Hydromorphone**, **Oxycodone** (with the recreational abused street names oxy, cotton, 40, 80) and **Hydrocodone**.

Opiates are very effective for the treatment of severe pain and therefore form part of many pharmaceutical preparations.



Some of these highly controlled and scheduled substances are only really used and available in hospitals such as Pethidine (Meperidine) and Fentanyl. **Others** form part of readily available prescription medications and are currently allowed at normal therapeutic dosage including Dextromethorphan, Dihydrocodeine, Ethylmorphine, Pholcodine and Propoxyphene.

Codeine is similarly found in many readily available medicinal preparations for the treatment of mild to moderate pain. Codeine is however metabolized to Morphine, a potent analgesic which is also well known to impair mental and physical performance.

Within the current rules for riders Codeine is prohibited in urine at a concentration greater than 2000 nanograms per millilitre.

Codeine is not considered a significant recreational drug but the addictive properties are well-known. The following statement is a guideline to ensure that, since Codeine metabolizes to Morphine, the resulting concentrations of Codeine and Morphine from a Codeine dose, do not exceed the permitted levels.

“Do not use Codeine containing preparations one full day before the day of the race. This withdrawal time considers a normal and single dose of such a preparation. Where this dosage is exceeded the withdrawal period must be increased.”

When this guideline is followed the Codeine concentration will not exceed the 2000 ng/ml threshold which is in place.

Refer to the list on page 8 to 9 for Codeine containing medications and alternatives.

- **Cannabinoids** - a concentration of 11-nor-delta-9-tetrahydrocannabinol-9-carboxylic acid (Carboxy-THC) in urine may not exceed 50 nanograms per millilitre. Cannabis (also known as marijuana, dagga, boom, hemp, hash, dope, grass, joint, pot, ganga, weed, herb etc.) describes preparations of the *Cannabis* plant.



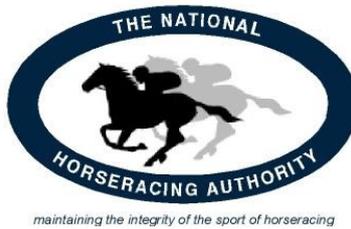
The plant contains many cannabinoid substances which have psychoactive, hallucinogenic and relaxation effects. These can lead to irrational behavior, disorientation and paranoia.

When cannabis is used Carboxy-THC is one of the most significant and widely recognized indicators of cannabis use in urine. As indicated above there is a specific threshold level for Carboxy-THC within the rules. Carboxy-THC is stored in the body fat of regular users and can take six to ten weeks to be completely cleared from the body. During this time it may be detected in a urine sample resulting in a positive finding.

- **Synthetic cannabinoids and new drugs**

It is important to be aware that new recreational drugs are emerging worldwide. These include synthetic cannabinoids which, as the drug class name suggests, have the same effects as cannabis, but include a much larger range of substances. Be especially aware that these products may expose the user to prohibited substances. These are sold as packets of what appear to be herbs and are indicated as “herbal products” or “exotic incense blends” or even “bath salts”. Examples of such packets are shown below.





Preparations which contain Therapeutic Drugs that are Banned

Therapeutic substances that have mind altering effects are frequently central nervous system depressants and require a doctor's prescription. They are most often prescribed for anxiety and sleep disorders and act as potent sedatives reducing alertness and resulting in drowsiness and sleepiness. These may also cause mind altering effects and euphoria which lead to dissociative behaviour. Many have addictive properties and all can be abused at high concentrations and have been reported to provide the sensation of "being separate from your body and the environment".

- **Barbiturates**

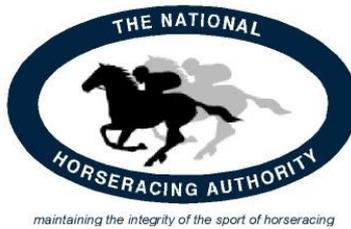
Barbiturates are central nervous system depressants that produce a spectrum of effects from mild sedation to hypnotic effects and total anesthesia. They are frequently used for the treatment of anxiety, insomnia and seizures. **Phenobarbitone** is locally available and others examples include **Amobarbital** and **Secobarbital**.

- **Benzodiazepines**

These compounds have the benzodiazepine structure and are classified as depressants with hypnotic effects. The therapeutic uses include the induction of sedation and sleep, relieving anxiety and muscle spasm and to prevent seizures. Even at low doses the effect of sedation (sleepiness) is significant. Locally available benzodiazepines include **Diazepam, Bromazepam, Oxazepam, Midazolam, Loprazolam, Flunitrazepam, Triazolam, Brotizolam, Lormetazepam, Flunitrazepam, Nitrazepam, Clobazam, Alprazolam, Lorazepam, Prazepam and Temazepam**. The street names for abused **Flunitrazepam** include roofinol, roofies, Roche, R2, rope and rophies.

- **Benzodiazepine-like substances**

These substances do not have the benzodiazepine structure but exert the same effect as the Benzodiazepines. Examples include **Zopiclone** and **Zolpidem**, both well-known sleeping tablets prescribed for insomnia treatment.



- **Diuretics including Furosemide**

Diuretics cause increased water loss through urination and may lead to dehydration. Dehydration of the rider is dangerous on the track (resulting in confusion and poor judgment) and is detrimental to the health of the rider (kidney damage can occur).

Well known diuretic substances include Furosemide, Amiloride, Spironolactone, Indapamide and Hydrochlorothiazide.

Be aware that many anti-hypertension (high blood pressure) medications contain diuretics such as Hydrochlorothiazide and Indapamide. Examples of such anti-hypertension medications include Bisozyd, Servatrub, Acesyl Co, Adco-Quinaretic, Adco-Zetomax Co, Airprel Plus, Ciplasyl Plus 4, Co-Renitec, Coversyl Plus, Enap-Co, Hexal-Lisinopril Co, Inhibace Plus, Kwinco, Lisinopril Co Unicorn, Lisozide, Lisoretic, Pharmapress Co, Perindopril Co Unicorn, Pearinda Plus 4, Preterax, Prexum Plus, Spec Perindopril Plus, Tritace Plus, Vectoryl Plus, Zestoretic, Zapato-Co, Atacand Plus, Co Exforge, Co-Diovan, Co-Irbewin, Co-Micardis, Co-Pritor, Co-Tareg, Co-Zomevek, Coaprovel, Cozaar Comp, Dynaval Co, Hytenza, Losaar Plus, Losartan Co Unicorn, Lozaan, Mylacand, Netrasol Co, Zartan.

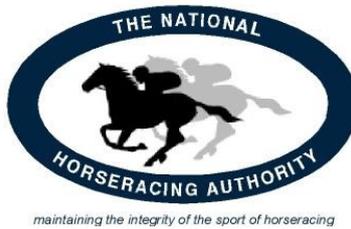
- **Codeine**

Codeine is an analgesic and is used in many medicinal preparations for the treatment of mild to moderate pain. This includes headache tablets (often in combination with Paracetamol) and analgesics, expectorant and decongestant preparations that may be in the form of capsules, tablets or syrups.

Codeine is prohibited at a concentration in urine greater than 2000 nanograms per millilitre.

Codeine is metabolized to Morphine, therefore to ensure that the use of such preparations does not result in a Codeine and Morphine level exceeding the permitted concentrations thereof, there is the following Guideline:

“Do not use Codeine containing preparations one full day before the day of



the race. This withdrawal time considers a normal and single dose of such a preparation. Where this dosage is exceeded the withdrawal period must be increased.”

When this guideline is followed the Codeine concentration will not exceed the above threshold.

Guidance on preparations use

Examples of locally registered preparations ***containing Codeine*** are listed below.

It is best if these preparations are not used at all and alternative medications are selected

Actifed Dry Cough Regular	Flutex Cough Linctus Gen-Payne	Propain Pynmed
Acurate	Go-Pain	Pynstop
Adco Salterpyn	Ibucod	Sinumax Co
Adco-Dol	Ibupain	Sinustop with Codeine
Adco-Sinal	Ilvico	Sinutab Tablets with Codeine
Adco-Tussend	Infapain	Spectrapain
Antipyn	Lenadol	Spectrapain Forte
Ban Pain	Lenapain	Stilpane
Benylin	Lenazine	Stopayne
Betapyn	Lennon Codeine Phosphate	Suncodin
Broncleer	Lentogesic	Synaleve
Brunacod	Linctifed Wet Cough Regular	Syndol
Co-codamol	Metaxol	Tensodol
Codomil	Mybucod	Tensolve
Codoxol	Mybulen	Tensopyn
Cofendyl	Myprodol	Tenston
Coughcod Senior	Napacod	Tenston SA
Dentopain Forte	Nurofen Plus	Trifen
Dequa-coff	Painagon	Tussilinct Linctus
Docsed	Painamol Plus	Tussitot
Empacod	Parafizz Co	
Expectalin	Phensedyl	
Flusin Junior		

Alternative pain medications which do not contain codeine or other banned substances

Riders who are currently using preparations containing codeine for sporadic, acute, chronic pain or fever should be aware that there are many alternative, potent medications to treat such pain.



Many of these medications are available from the pharmacist as over-the-counter Schedule 3 (S3) analgesic and anti-inflammatory preparations. These and other more potent pain medications can also be prescribed by a medical practitioner upon request.

Pharmacists and medical practitioners have the required knowledge to assist with the best selection of drugs to use for a particular condition (while considering and providing warning of possible side effects).

Examples of drugs which are NOT banned:

Celecoxib	Lornoxicam
Etoricoxib	Mefenamic acid
Ibuprofen	Meloxicam
Indomethacin	Naproxen
Ketorolac	Paracetamol
Ketoprofen	Piroxicam

Muscle relaxants for muscle spasm which do NOT contain a banned substance

Muscle relaxant preparations can be obtained from a medical practitioner by prescription and sometimes over the counter at pharmacies. Examples of such pharmaceuticals are listed below:

Methocarbamol
Baclofen
Cyclobenzaprine

PLEASE NOTE:

Riders seeking relief from acute, chronic or inflammatory pain must consult medication package inserts carefully as many preparations are combined with Codeine or other banned substances and this is not declared on the front of the box.

Check the ingredients on the label even if the product has been used before. The manufacturers may have changed the ingredients. Products with similar names may contain different ingredients meant for different purposes, check the medication insert.

Should use be made of any medication not listed in this document, ascertain prior to use whether the product contains any banned substances.