Drug misuse in sport: a historical perspective

David Gerrard

EDITIORIAL

ABSTRACT

This editorial draws comparisons between the recent revelations of drug misuse in Russian sport, and the State-sponsored programme of the former German Democratic Republic. While 50 years separates these two regimes, there are commonalities. The history of major incidents involving drug abuse by serious national players in sport suggests a 20-year cycle, with the GDR, China and now Russia employing similar strategies. These events underscore the value placed upon international sporting success by politicians.

Recent doping revelations, implicating Russian athletes, have focused unfortunate, yet familiar, links to elite, contemporary sport. In December 2014, a German television documentary suggested that State-sponsored doping practices were embedded in Russian sport, involving members of the wider 'athlete entourage'. Spurred by the clamour from an uneasy international sporting community, the World Anti-Doping Agency (WADA) appointed an independent Commission of Inquiry, and one year later the outcomes of their investigation are now in the public domain. The authors of this report have declared a "...deep-rooted culture of cheating..." centred primarily on track and field, but pointing the finger at the Moscow-accredited Laboratory. Prominent sports physicians, scientists, coaches, laboratory personnel and high-ranking officials have been identified in a clandestine collaboration reminiscent of the East German regime of the 1960s. Further, the Report describes State complicity in an orchestrated programme of sports drug misuse with clever cover-ups that hoodwinked the sporting public. These revelations now cast an ominous shadow over the unprecedented success of named Russian medalists at the 2012 London Olympics. Downstream consequences for Russian participation at next year’s Olympic Games in Rio de Janeiro are currently under scrutiny by the International Olympic Committee and the International Athletics Federation.

Pessimists would say that none of this comes as too much of a surprise. After all, history reflects examples of episodic, endemic drug misuse by major sporting nations in approximately 20-year cycles. In the decades between 1960–1980, the former German Democratic Republic (GDR) became responsible for a programme known officially as State-Plan 14.25, sanctioning the delivery of various performance-enhancing drugs to young elite athletes. This was linked to an innovative national scheme of talent spotting that employed special ‘sport schools’ (Kinder und Jugendsportschulen) from which East German stars of the future would emerge having undergone a battery of physiological testing. The consequent, unparalleled Olympic success of female East German athletes in swimming and athletics of the period was deemed a positive reflection of advanced talent-recognition, cutting-edge sport science, specialised coaching and specialist sports medicine. International observers of the time looked enviously at the GDR, but what was not known at the time was that the success of their athletes had been ‘underwritten’ by the use of performance-enhancing drugs.

As if we needed further reminding, sport was indeed a powerful political tool. Much earlier, the so-called Nazi Olympics of 1936 illustrated the potency of major international sport, well ahead of contemporary technology that provides instantaneous updates and dissemination of results. Concerned observers in 1936 were quick to record “... from the proliferation of Nazi emblems around the Olympic stadium, to
the mass Nazi salute from the huge crowds, to the esteemed place of Games Patronage bestowed upon Hitler himself, the Berlin Games remain tainted by a propaganda and political overtone that leaves little doubt as to the political purpose of this sporting occasion.  

The film of the Berlin Olympics produced by Leni Riefenstahl, regarded by many as the most outstanding cinematic record of any Games, demonstrates the dramatic influence of the Nazi Party, prolific in the presence of the ubiquitous swastika.  

And so, until the late 1980s, the GDR rose from comparative athletic obscurity to emerge as one of the most successful sporting nations in history. International prestige, closely aligned with sporting success, became a mechanism to promote socialist policy. GDR athletes of the period were likened to “…missionaries validating the superiority of socialism over capitalism …” However, the ergogenic influence of agents, including anabolic androgenic steroids, was not formally divulged until the reunification of Germany, when official reports of the East German Ministry for State Security (Stasi) were released to the public.  

Bioethical considerations for the long-term health consequences of drug administration to young women escaped the judgement of those driving this regime. Chronic anabolic androgenic steroid use, linked with increased risks of cardiovascular disease, liver problems, violent mood swings, virilisation in females and a clear link with certain forms of cancer were highlighted by subsequent prosecutors. It would seem that GDR physicians held little regard for these consequences. The world of clinical medicine and sport science still reels from the revelations. In this contemporary human experiment by the GDR, “…government policy, measured in gold medals, gave scant regard to human suffering and permanent disability.”  

In 1984, China—after an absence of 32 years—heralded its return to the international sporting fold with remarkable success at the Los Angeles Olympic Games. Chinese athletes won 15 gold medals across a number of sports, placing them fourth on the international medal table. The rapid rise of Chinese female athletes, particularly in swimming and athletics, drew closer inspection from the international federations governing swimming (FINA) and athletics (IAAF). A few years later, authorities uncovered widespread drug misuse implicating several coaches, many of whom had links to the former East German sports regime. Although not politically sanctioned, there were strong comparisons made of many techniques reminiscent of the former GDR.  

Comparisons between the actions of the Russian Ministry for Sport and the State-sanctioned policies of the former East Germany remain valid, despite the intervening 50 years. The relationship between physician and the athlete-patient is articulated by the International Olympic Committee and embodied in the Olympic Movement Medical Code. This includes an overarching statement of safety, ensuring that, “… sport is practised without danger to the health of athletes and with respect for fair play and sports ethics.” And further, the relationship between athlete and healthcare provider is “… subject to mutual respect”.  

Typical of the attitude adopted by most countries is the 2010 statement of the Medical Council of New Zealand. Entitled “Prescribing performance-enhancing medicines in sport”, this states:  

“Any doctor who knowingly prescribes, administers, traffics, supplies or otherwise assists in the use of prohibited substances, for the deliberate purpose of enhancing sports performance and helping a sports person to cheat, may be subject to disciplinary proceedings and may be liable to a charge of professional misconduct.”  

The autonomy of physicians to practise safely and in the best interests of their patients should never become influenced by external, non-clinical agents. At the highest level in New Zealand, those in positions of sports medical leadership remain unconstrained to provide athletes with appropriate, quality care. While politics and sport remain irrevocably linked, what appears to have occurred in the context of Russian sport can never be condoned. In contrast, the antics of our political leaders basking in the Rugby World Cup success of the All Blacks are trivial by comparison and raise nothing more than a wry, somewhat embarrassed grin.
EDITORIAL

Competing interests:
Dr. Gerrard reports he is currently the Chair of the World Anti-Doping Agency (WADA) Therapeutic Use Exemption Committee and a member of the WADA Health Medicine and Research Committee, both voluntary positions.

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