

ETHICAL ASPECTS OF DOPING AND HEALTH PROTECTION

ASPETTI ETICI DEL DOPING E PROTEZIONE DELLA SALUTE

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Abstract

Sports activity has entered the age of science. It is no longer limited to applying and passing on the knowledge and methods that prove to be effective but seeks within itself the rules and tools for its own evolution. The purpose of sport are all crossed by the ethical problem. Therefore, sport helps the child to enter an environment different from the family and school environment, but equally important as it is relevant for his education as an individual and as a social subject. The sporting environment, therefore, represents a particular social system, where the child is part of the group through an experience that turns out to take on an educational value at any age. Today, one of the most significant pressure to sport is the use of performance enhancing drugs and methods. In Paralympics games doping methods is commonly called "boosting". Doping, always, erodes sport's core values, including fair play and sport-personship. In order to avert doping, education on ethical decision, multi-tiered educational programs can to protect sport for future generations. The ethical foundation for anti-doping is the protection of the athlete's health. It is reasoned that anti-doping control is necessary to prevent damage from doping. The essence of sports includes ethics, fair play and honesty. The purpose of this paper is to discuss the main elements of ethical arguments on Anti-Doping practices and policies as help to protecting the education and athlete's health

L'attività sportiva è entrata nell'epoca della scienza; non si limita più ad applicare e tramandare le conoscenze e i metodi che si sono rivelati efficaci, ma cerca dentro di sé le regole e gli strumenti per una propria evoluzione. Lo sport aiuta il fanciullo ad inserirsi in un ambiente diverso da quello familiare e scolastico, ma ugualmente importante in quanto rilevante per la sua formazione come individuo e come soggetto sociale. L'ambiente sportivo, quindi, rappresenta un sistema sociale particolare, dove il bambino si inserisce nel gruppo attraverso un'esperienza che risulta assumere un valore formativo a qualsiasi età. Una delle pressioni più significative per lo sport oggi è l'uso di droghe e metodi per migliorare le prestazioni. Nei giochi paralimpici il metodo dopante viene comunemente chiamato "boosting". Il doping, sempre, mina i valori fondamentali dello sport, incluso il fair play e lo sportsperson ship. Al fine di evitare il doping, l'educazione alle decisioni etiche, i programmi educativi multidisciplinari aiutano a proteggere lo sport per le generazioni future. Il fondamento etico dell'antidoping è la protezione della salute dell'atleta. I controlli antidoping sono necessari per prevenire i danni da doping. Lo scopo del documento è quello di evidenziare i principali elementi degli aspetti etici del doping e dell'anti-doping come aiuto per proteggere l'educazione e la salute dell'atleta.

Keywords

Sport; Education; Doping; Ethical Aspects; WADA.
Sport; Educazione; doping; aspetti etici; WADA

Introduction

Today, in competitive sport, the fight against doping and the promotion of fair play are common goals for the great majority of sports federations. These are behaviours that are learned from young people and that a “healthy” sports environment must teach (Mazzeo, 2019). Sport is a privileged place of discovery, socialization, knowledge and well-being. Problems linked above all to professional sport do not justify the abandonment of sports at all. Also in this area, the responsibilities of the coach in the prevention of violence and abuse are underlined (Altavilla et al., 2014). The coach must promote dialogue with young people and their families, as well as encourage dialogue and mutual respect; he must constantly inform the club’s leaders about his actions and he must be careful that his behaviour does not give rise to any suspicion of abuse of power and submission (Di Onofrio et al., 2019; Ligth et al., 2007). The “health” of the sporting world is expressed in all its fullness, that is, that every athlete can be offered the opportunity to be confronted with physically and morally healthy people, coaches, teachers and parents (Sibilio, 2005; Pam et al., 2013).

Dispute on sports medicine and ethics (enclosing conflict of interest, autonomy, athletes’ privacy, genetic testing, consent, return-to-play decisions, and doping) are well developed in existing sport and sport ethics literature (e.g., Corlett, Brown, and Kirkland 2012; Gruneberg, 2012; Holm, 2007). In 2007, a special issue of the journal *Sport, Ethics and Philosophy* was dedicated to the ethics of sports medicine and later published as anthology text in 2009 by Routledge. Torbjörn Tännsjö, a Swedish professor of philosophy and public intellectual (2009), argues that, unlike general medical practices, sports medicine has been driven from its very beginning by the ambition of helping humans of a certain kind - more precisely, professional elite athletes - to surpass limits of what hitherto has been considered as possible for the species to achieve in a sports arena (Tamburrini and Tännsjö, 2009; Petersen, 2007).

Performance enhancing drug use in sport occurs not only in professional sport but also in amateur athletes in Olympic and Paralympics games (Mazzeo et al, 2015). Moreover, the World Anti Doping Agency (WADA), which expressly prohibited the participation in competitive sports by the athlete in case of taking banned substances to treat disease in the event that the above assumption implies an excessive improvement of performance. It reads, in fact, art. 2 of Guidelines - Therapeutic Use Exemptions (TUE) “*An Athlete may be granted a TUE if (and only if) he/she can show that each of the following conditions is met:[...] b) The Therapeutic Use of the Prohibited Substance or Prohibited Method is highly unlikely to produce any additional enhancement of performance beyond what might be anticipated by a return to the Athlete’s normal state of health following the treatment of the acute or chronic medical condition (ISTUE Article 4.1(b)). Although there may be some enhancement of individual performance as a result of the efficacy of the treatment, nevertheless, such enhancement must not exceed the level of performance of the Athlete prior to the onset of his/her medical condition.*” (www.wada.org)

Furthermore, the doping in sport is a well-known phenomenon that has been studied mainly from a biomedical standpoint, even though it has important psychosocial implications that have been recently highlighted (Morente-Sánchez and Zabala, 2013). Regardless the multi-faced aspects of the problem, a firm point is that doping is against law. The purposes of the World Anti-Doping Program and the Code are to protect the athlete’s fundamental right to participate in doping-free sport and thus promoting health, fairness and equality for athletes world wide.

1. Bioethics and health prevention

It is generally believed, especially among athletes and practicing sports people, which the use of performance-enhancing drugs, besides improving performance, leads to the obtainment of easy results accompanied by glory and money gain (Mazzeo et al., 2018). However, in doing so, they turn away from the sport meaning from an ethical point of view, using methodologies unfair

other than harmful for health. It is particularly important to make it clear to adolescents, that each sportive goal should be achieved through a healthy workout, strong passion and motivation, within limits of human genetic and physiology. No attainment must be achieved without effort and hard working. There are deep ethical and healthy reasons to avoid the use of performance-enhancing drugs: not only using illicit drugs during the competition seriously threatens the health of individuals, but also it puts other athletes in a disadvantage fraudulently (Baron et al., 2007).

The “Treaty of Lisbon” and the specific “Resolution 2087/11” of the European Parliament on “European Dimension in Sport”, address the issue of the fight against doping. The use of performance-enhancing drugs besides being a demotivating factor for athletes, seriously affects the image of agonistic sports. Therefore, it is necessary to inform and educate sport-practicing people about this issue, starting from the beginning of sportive activity, not only punishing the use of illegal substances, but also preventing this practice (Fernandez et al., 2009).

Health care is the purpose of medicine, its realization is the result of our commitment, together with the help of social and educational structures. In a vision of health as a dynamic concept concerning bioethics and physical effort, each person has to take care of it, and avoid the use of illegal dangerous substances. It is legitimate to increase one’s skills through the use of drugs or methods? Is it ethically correct for a healthy person to use it? How will new technologies enhance our capabilities?

2. Bioethics and Disability: “Boosting and Technodoping”

All athletes participating in the Paralympic Games are bound by the Prohibited List of Substances and Methods as published by the World Anti-Doping Agency. Enhancements such as doping are against the law in sport. There is not as much of contentious question in elite sport than doping to enhance performance (Morente-Sánchez & Zabala, 2013).

Activities concerning the fight against doping, with regard to the Paralympic Games, have been initiated in 1984, when first doping controls were conducted. There is, however, a doping method unique to sport for athletes with disability, which is defined “boosting”. Boosting is the intentional induction of autonomic dysreflexia (AD) to enhance performance. The result is a dramatic increase in blood pressure just prior to a competition (Figure 1). Certain disabled athletes induce mild dysreflexia to enhance their achievements in sports (Blauwet et al., 2013; Mazzeo et al., 2015).

Moreover, AD is defined an abnormal response to painful stimuli. AD, mediate by the Autonomic Nervous System and occurs most often in Spinal Cord-Injured (SCI) individuals with spinal lesions above the T6 spinal cord level (Bhambhani, 2012; Bhambhani et al., 2010). Boosting is the intentional induction of AD to improve performance prior to a competition. Boosting lead to a mass reflex sympathetic release, resulting in leave go of noradrenalin and vasoconstriction distal to the lesion level.

The fight of boosting is emerged in a clear manner in the 1996 at the Paralympic Games in Atlanta. Since that time, the Committee raised the question of how he could intervene. The problems were mainly ethical. In fact, athletes not taking performance-enhancing drugs, did not commit any offence. The goal was primarily to protect the health of athletes (Legg, & Mason, 1998).

The practice of voluntary induction of AD is taken into account by the International Paralympic Committee (IPC). In particular the art. 1 -Section 3 - Chapter 4 of the Handbook defines the AD and Boosting as follows:

“Persons with cervical or high thoracic spinal injuries can suffer from an abnormal sympathetic reflex called Autonomic Dysreflexia. This reflex is caused by painful stimuli to the lower part of the body, particularly distension or irritation of the urinary bladder. The symptoms of dysreflexia are a rapid rise in blood pressure, headache, sweating, skin blotchiness and gooseflesh. In serious cases, confusion, cerebral haemorrhage and even death can occur. This reflex may happen spontaneously or may be deliberately caused (“Boosting”). As this is

a health hazard, the IPC forbids athletes to compete in a hazardous dysreflexic state”. The IPC expressly prohibiting the use of that type of practice as it is extremely dangerous to the health (Bhambhani, 20012). IPC prohibits athletes from competing in a dangerous dysreflexic state “just because the primary goal is to protect the athletes health. According to the Handbook it is considered to be present the syndrome when the systolic blood pressure is 180mmHg or higher. The athlete with the above symptoms, it must be subjected to a new control 10 minutes after initial recognition. In the case in which the pressure remains unchanged, the athlete will not be allowed to participate in the competition.

Instead, the use of the prosthesis, for example in case of limb amputations, which is called by mass media “technodoping”, added an ethical question. The question is such implants can give an unfair advantage ti the athlete during the competition (Wei et al., 2019; Grüneberg, P. 2012).

A lot of research leads to a clear result: an athlete wearing the “prosthetic Cheetah” could run at the same speed as able-bodied athletes, but use less energy. Tests also revealed that it works with prosthetic blades led to less vertical movement combined with 30% less mechanical work for lifting the body. The International Association of Athletics Federations (IAAF), has decided to ban the use of any tool - among the facilities - that can give an advantage to the athlete. The problem, then, is whether this prohibition protects able-bodied athletes in the face of the advantages that facilities can give disabled people or if in reality, they are faced with a real case of inequality towards people with disabilities (Marchevsky et al., 2019).

In 2008, the theme “Elite Paralympic Sports facing new challenges” was discussed by industry experts in Beijing. It had become clear that the decision to exclude the athletes mentioned above by the organs capable of competing, is not limited to the sport itself, but is ethically and morally relevant in terms of equal opportunities. Prof. Dr. Gudrun Doll-Tepper, president of the International Sports Science Council, said that these people are unique and therefore not comparable to those without disabilities.

Finally, it has not been analyzed whether the advantage of an athlete with prosthesis is equal or not to the other services provided to other athletes.

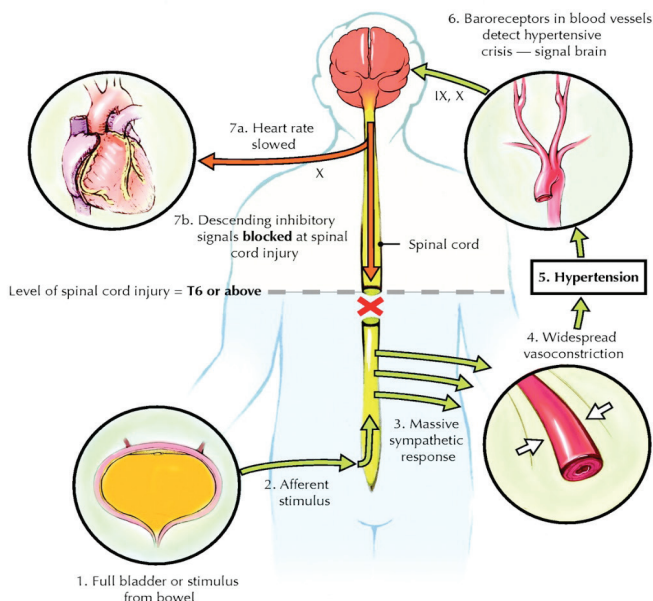


Figure 1. Body reaction in case of activation caused by autonomous dysreflexia. The afferent stimulus, in this case a distended bladder, triggers a peripheral sympathetic response, which results in vasoconstriction and hypertension. (Source: Blackmer, 2003)

3. Sport, Educational and Training

Sport today pervades many aspects of people's daily lives and consequently has had to be recognized the educational importance that sports practice has assumed over time, thus becoming a component of fundamental importance and no longer placed on the margins of multiple contexts of social interaction. The educational importance that Sport has assumed over time in all the contexts of daily life and especially with regard to the younger ones is clear (Raiola and Tafuri, 2015; Farinelli, 2005).).

Among the countless values of sport, one of the most important is certainly discipline understood as all those best conditions necessary to face both the training and the competitions of a specific sport (Di Palma et al., 2016).

The practice of sportive discipline favours the birth of values such as self-discipline, self-esteem and aimed work the achievement of the predetermined goal, so in a delicate period such as the one faced by young teenagers, the identification of their abilities and limits takes place more easily thanks to sports practice, that helps to overcome the difficulties that can be compared to other events that can occur in different contexts of daily life, thus promoting the acquisition of one's own autonomy (Palmieri, 2012).

Also, you don't have to forgetting inherent values of sport such as respect for others, fair play, solidarity, tolerance, acceptance and respect for diversity: sporting commitment is a mix of long life made of play, joy and curiosity towards the world.

Sport is educational because of its growing relevance as a tool for education and training (Farinelli, G., 2005; Isidori, E., 2012). In Europe, the social and educational perspective of sport did not acquire importance in official documents until the end of the 1990s, while the need for a Community law regulating sports law was much more evident due to the importance of the sector economically, with over 15 million people employed and a 5.8% contribution to total EU employment. The official entry of sport among the European priorities dates back to 2007, when the EU operating treaty states that "the Union contributes to the promotion of European sport profiles, taking into account its specific features, its structures based on volunteering and of its social and educational function". Sport supposes strategic importance in the formation of the person and his values, since the first contact with him takes place in childhood or adolescence. Sport has rules and it is essential that they are ethical and learned in the best way and in this sense, Sports Education becomes a tool of Civic Education (Costantini, 2008; Zhong-gan, Y. U., 2005).

Conclusions

By evaluating the various methods for detecting the prevalence of the phenomenon of doping, there are two methodologies from which the data on the diffusion of the phenomenon come to a greater extent, namely the doping controls based on chemical analyzes carried out by the laboratories in charge to this task, and estimates from surveys that use questionnaires. In both cases, different limits were found for the exact estimate of prevalence. Examining the data from laboratory analyzes, in fact, a first order of problems emerges: doping tests are not able to detect all the substances that the athlete has used, since often the pharmacokinetics of doping substances is structured in such that their revelation time is extremely low, making the tests performed subsequently in competition practically null. The problem could be curbed by increasing surprise checks

Finally, a third debate that has found and still finds wide prominence in the scientific literature concerns the ethical aspects related to the use of neuro-enhancement (NES). Some scholars and academics argue that especially in the context of exams and tests for access to courses, the behavior of use of substances for neuro-enhancement purposes should be considered "cheating", or a cheat, since such behaviour it alters performance, as it does in the case of doping.

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