

# THERAPEUTIC USE EXEMPTIONS

## 1. What is a TUE?

A TUE provides a Player with authorisation to use a Prohibited Substance or Method to treat a legitimate medical condition / illness whilst continuing to play Rugby. Players with a documented medical condition requiring the use of a Prohibited Substance or Method are required to obtain a Therapeutic Use Exemption (TUE). Without a TUE, Players risk committing an Anti-Doping Rule Violation which is an offence that may result in a sanction regardless of the medical circumstances.

## 2. When should a Player apply for a TUE?

a. When a Player is advised by their medical doctor/specialist that they require a Prohibited Substance to treat their medical condition/illness and has supporting medical evidence to prove this.

b. When a Player is administered a Prohibited Substance in a medical emergency. In this case the Player is required to apply retroactively for a TUE.

c. In addition to the circumstances outlined in (a) and (b) above a Player should only submit a TUE to either the IRB or their National Anti-Doping Organisation (NADO) when they meet the required criteria. See Section 4.

## 3. What are the changes under the 2010 WADA International Standard for TUEs?

### a. Beta-2-Agonists to Treat Asthma and Exercised Induced Asthma

i. Inhaled salbutamol and salmeterol no longer require the submission of a TUE however do require a declaration of Use. See Section 6.

ii. Note that the presence of salbutamol in urine in excess of 1000 ng/mL will be presumed to be not intended for therapeutic use and considered an Adverse Analytical Finding.

iii. The status of inhaled terbutaline and formoterol remains unchanged and both still require a TUE to be submitted prior to use.

iv. Players who currently use formoterol and/or terbutaline to treat their asthma should on the expiry of their current TUE for either of these substances seek medical advice as to whether their asthma can be treated to the required medical level

through the use of inhaled salbutamol or salmeterol. The same applies to Players seeking a TUE for an inhaled beta-2-agonist for the first time.

### b. Removal of Retroactive TUEs following a reported AAF for beta-2-agonists

Retroactive TUEs will only be granted in emergency situations or in exceptional circumstances where there was insufficient time or opportunity for a Player to submit, or the TUE Committee to consider an application prior to Doping Control.

### c. Previously approved Abbreviated TUEs

All previously approved Abbreviated TUEs that have not already expired or been cancelled will expire on 31 December, 2009. Players who currently have an expiry date for their Abbreviated TUE post 31 December 2009 should therefore reapply for a new TUE should their condition and the required medical treatment still be applicable under the 2010 rules.



#### 4. Who has to submit a TUE and where do they submit it?

Players included in the IRB Registered Testing Pool or Testing Pool, or Players who participate in an International Match or Tournament directly organised by the IRB (See Section 10) must obtain a TUE in advance of the administration of the Prohibited Substance or Method from the IRB TUEC. A Player may also provide a copy of any existing and valid TUE for review pursuant to IRB Regulation 21.5.10 - Mutual Recognition. See Section 7.

Applications should be submitted at least 30 days prior to a Player's participation in an International Match or Tournament organised by the IRB with the exception of medical emergencies which can be submitted within this period or retroactively.

The IRB TUE Application Form can be downloaded from the IRB's Anti-Doping website at [www.irb.com/keeprugbyclean](http://www.irb.com/keeprugbyclean) and can be submitted by email to [tue@irb.com](mailto:tue@irb.com) or by fax to +353 1 240 9289.

All other players should consult the rules of their NADO with regard to the submission of TUEs within their own country.

#### 5. What are the criteria for granting a TUE?

A TUE will be granted only in strict accordance with the following criteria:

1. The player would experience significant health problems without taking the prohibited substance or method;
2. The therapeutic use of the substance would produce no additional enhancement of performance other than that which might be anticipated by a return to a state of normal health following the treatment of a legitimate medical condition; and
3. There is no reasonable therapeutic alternative to the use of the otherwise prohibited substance or method.

#### 6. Declaration of Use

The WADA Prohibited List identifies substances and methods that are not prohibited but for which a Player is required to file a declaration of Use on the Doping Control Form or through ADAMS where feasible.

These are strictly limited to:

1. Glucocorticosteroids used by non systemic routes, namely intra-articular, peri-articular, peri-tendinous, epidural, and intra-dermal injections, and inhalation.
2. Salbutamol and salmeterol by inhalation.
3. Platelet-Derived Preparations (e.g. Platelet Rich Plasma, "blood spinning") by routes other than intramuscular.

Notes:

1. *Glucocorticosteroids administered by oral, intravenous, intramuscular or rectal routes require a TUE.*
2. *Topical preparations (e.g. eye drops, nasal sprays, creams or ointments) containing glucocorticosteroids do not require a TUE or a declaration of Use.*
3. *Failure to declare Use on a Doping Control Form or through ADAMS where feasible shall not be an anti-doping rule violation.*
4. *ADAMS is a web-based database management tool for data entry, storage, sharing, and reporting, designed to assist stakeholders and WADA in their anti-doping operations in conjunction with data protection legislation.*



## 7. What is Mutual Recognition of TUEs?

The IRB will recognise TUEs granted by other Anti-Doping Organisations under the mutual recognition provision of the WADA Code upon submission of a current and valid copy of the TUE application and certificate of approval subject to the approval of the IRB TUEC. The IRB TUEC has the right to review and appeal all TUE approvals submitted to the Board where approval has been granted by another Anti-Doping Organisation.

## 8. How do I know if my application has been approved?

The IRB TUEC or other TUEC will issue a Certificate of Approval to the Player via their Member Union which will be for the specified medication, the defined route of administration, dose and an expiry date.

Players must comply with all the treatment conditions outlined in their TUE Application and should reapply well in advance of their current TUE expiring.

## 9. What if my TUE is denied?

If a Player who is part of the IRB's Registered Testing Pool or Testing Pool or who is due to participate in a Match or Tournament outlined below has a TUE application denied then they may appeal the decision of the IRB TUEC to WADA.

Any decision by WADA reversing the granting or denial of a TUE may be appealed exclusively to the Court of Arbitration for Sport (CAS) by the Player or the IRB.

Decisions by the IRB TUEC which are not reversed by WADA may be appealed by the Player to CAS.

## 10. List of IRB Organised Matches and Tournaments that require a TUE to be sent to the IRB TUE Committee

- All Rugby World Cup Qualification Matches and Rugby World Cup Finals
- IRB Junior World Championships
- IRB Junior World Rugby Trophy
- IRB Sevens World Series
- IRB Nations Cup
- IRB Pacific Rugby Cup
- IRB Pacific Nations Cup
- Americas Rugby Championships

For all other Rugby Matches or Tournaments, Players should submit their TUE to their NADO. If a Member Union does not have a NADO then the TUE may be submitted to the IRB TUEC.

## 11. Where can I find more information?

A full copy of IRB Regulation 21 can be found in the Regulations section of the IRB Anti-Doping website at [www.irb.com/keeprugbyclean](http://www.irb.com/keeprugbyclean). The specific provisions relating to TUEs are located within section 21.5 along with Schedule 3a and 3b.

This is an educational guide. In the event of any inconsistency IRB Regulation 21 shall take precedence.

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