



Anti Doping Danmark

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Board of Directors

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Organisation

Legal Framework

Anti Doping Danmark (ADD) has been established as a public independent institution with reference to the Danish Ministry of Culture. ADD's activities are described in the Danish 'Law on promoting integrity in sport' (Act No. 1168, 7 October 2015). According to § 3, ADD's activities include:

- 1. Doping control
- 2. Results management and prosecution in relation to the fight against doping
- 3. Information and education
- 4. Research and development in relation to the fight against doping
- 5. International cooperation in relation to the fight against doping and
- 6. Assistance to public authorities in activities related to ADD's area of response

ADD conducts doping control and investigates cases of suspected anti-doping rule violation in addition to carrying out educational and prevention-related tasks for both organised and recreational sport, including fitness centres. ADD's headquarters has also hosted the Secretariat of the national platform for the fight against match-fixing since 17 December 2018 in accordance with the Danish 'Law on promoting integrity in sport'.

ADD's revenue base is described in the Danish 'Law on the distribution of profits and proceeds from lotteries' (Act No. 1532, 19 December 2017). ADD also receives income from contracts and fees from cooperation agreements outlined in the Danish 'Law on promoting integrity in sport' (§ 11).

Board of Directors

In 2018, ADD's Board of Directors was comprised of:

- Chairperson Mette Hartley, Professor, Dr. jur., University of Copenhagen
- Poul Gade, Senior Associate, Bech-Bruun
- Berit Puggaard, Associate Director, TNS Gallup
- Kim Dalhoff, Professor, Chief Physician, Doctor of Medicine, Bispebjerg Hospital Department of Clinical Pharmacology
- Troels Borring, President of the Danish 'Efterskole' Association
- Marie Overbye, Lecturer, PhD, University of Stirling.

Secretariat

At the end of 2018, ADD's Secretariat consisted of 16 full-time staff including its CEO and an Industrial PhD student. ADD also employs 40 additional staff on an hourly basis, including lead doping control officers,



doping control officers and fitness consultants (equivalent to six full-time staff), to oversee the sample collection process in organised competitive sport and to carry out control and prevention work in fitness centres and gym facilities. However, two of the Secretariat's staff also work part-time on outreach and contribute to specific activities out in the field. Furthermore, four doctors are involved in the handling of Therapeutic Use Exemptions (TUE), as well as one doctor who provides medical advice in relation to ADD's advice hotline.



Doping Control

Doping control in organised competitive sport

ADD's doping control programme for organised competitive sport is based on several assessments and ongoing input. A systematic assessment is conducted on the basis of, among other factors, the sport, the sports discipline, the level and the season schedule. ADD works continually on developing and optimising doping control parameters and methods to ensure the best and most efficient doping control effort. In 2018 there was an increased focus on athletes' performances under the doping control programme. For example, ADD consulted selected Danish National Sports Federations, as performance is a part of their existing risk assessments. In addition, ADD has increased its intelligence efforts in recent years, which, among other things, means that intelligence is included in the broader doping control programme by, for example, targeting the controls.

Elite international athletes are also often included in their international federation's doping control programme. In order to ensure such an efficient and relevant control effort for the athletes, ADD cooperates with the international federations on tasks such as the coordination of the control and sharing of data. This applies not only to regular controls out of competition, but also in connection with international sporting events where ADD is appointed by the organisers to conduct the controls.

In 2018, ADD increased its doping control efforts, conducting 5% more tests than in 2017. ADD collected a total of 1,856 blood and urine samples out-of-competition in 2018.

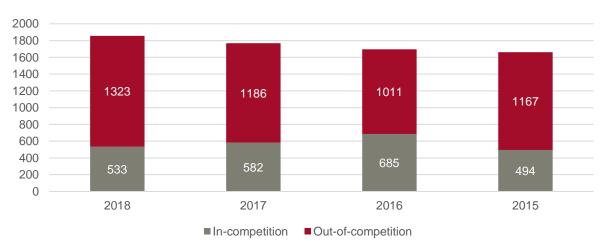


Figure 1: Number of samples collected in- and out-of-competition from 2015-2018

See Annex 1 for a comprehensive overview of samples collected from organised competitive sport, categorised by gender, sport, in- and out-of-competition tests, as well as the type of sample taken.

Specialised analyses of selected tests are an integrated aspect of ADD's doping control programme. Therefore, ADD carried out 716 sport specific analyses of samples in 2018. The purpose of conducting sport specific analyses is to ensure more intelligent testing, and that athletes from different sports are tested for the most relevant substances commonly detected in their sports discipline. These specialised analyses are also a WADA requirement, as outlined in the document Technical Document for Sport Specific Analysis (TDSSA).



250
250
251
200
150
100
50
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Figure 2: The ten most tested sports in organised competitive sport in 2018

With the exception of one sport, the ten most tested sports are the same as in 2017 and 2016. In 2018, canoe/kayak replaced weightlifting among the ten most tested sports. The number of tests conducted in canoe/kayak increased because more athletes from this sport are now in ADD's prioritised testing group, which means that these canoe/kayak athletes are competing at a level that makes it relevant to put more focus on them.

Requested samples

After 2017, in which a very high number of samples was requested, the amount requested in 2018 fell to a similar level as in previous years. In 2018, ADD collected 384 samples in correspondence with requests coming from other organisations. These samples consist primarily of tests ADD did on behalf of other national anti-doping organisations and sports federations. The most common samples requested are those taken out-of-competition or samples that are taken during events (in-competition).

See Annex 2 for a comprehensive overview of doping tests requested in 2018.

Therapeutic Use Exemptions (TUE)

ADD issued 71 Therapeutic Use Exemptions in 2018, a minor decrease from the 98 issued in 2017. The types of substances were also similar to those that were previously applied for as exemptions, of which the asthma medicine beta-2 agonist terbutaline is the most common, followed by medication to treat ADHD and diabetes.

ADD issues TUE only to athletes competing at an elite level nationally, whereas athletes who compete at an elite level internationally apply to their respective international federations for TUE. ADD does not have access to statistics on the number of TUE issued to Danish athletes through the international federations.

See Annex 3 for an overview of issued TUE.

NAPMU: Nordic Athlete Passport Monitoring Unit

The Athlete Biological Passport is an important tool in the effort to prevent and combat doping. All athletes who are tested are automatically issued a Steroidal Passport, and athletes who compete in endurance sports disciplines and are in the high-priority pool for blood testing are issued a Haematological Passport. The main principle behind the passport system is that the test results form a biological profile that can be used to



monitor potential biological variations in the athlete. Atypical variations are assessed by an independent group of experts who evaluate whether the fluctuations are natural or are a result of doping.

ADD is part of the Nordic Athlete Passport Monitoring Unit (NAPMU), a cooperation that monitors Athlete Biological Passports. Danish athletes with an Athlete Biological Passport are monitored by NAPMU staff, and ADD contributes to NAPMU with financial and managerial support.

Doping control in recreational sports clubs and fitness centres

ADD has carried out doping controls in recreational sports clubs and fitness centres in accordance with the anti-doping regulations for recreational sport and fitness and with reference to the National Olympic Committee and Sports Confederation of Denmark (DIF), DGI and the Danish Company Sports Federation. In 2018, ADD selected 20 club members for doping control whilst visiting recreational associations. All of those tested in club-based recreational sport and fitness were men.

Doping control in commercial fitness centres

Over the past year ADD has selected 248 people for doping control whilst visiting commercial gyms and fitness centres. Of those selected, 229 were men and 19 were women. ADD has also encountered 10 people at ADD-affiliated fitness centres who have violated their sanctions by training in a centre that has a cooperation agreement with ADD.

Women were among ADD's fitness consultants for the first time in 2018, as ADD has observed both an increased focus on muscular body image ideals among girls and women, and has received several alarming inquiries from the centres concerning girls and women. This initial experience indicates that ADD has used considerable resources on responding to specific reports made about women. Signs of doping among women are also less obvious than among men, as they typically use other, less potent substances. Therefore, the consultants need to gain experience in identifying women in centres who are most relevant to call in for doping control. Over the years, ADD's fitness consultants have honed their skills in spotting men who are taking banned substances, and hopefully the continued focus on women at risk of doping will make ADD's fitness consultants even more adept at identifying the characteristics of women who are doping.



Investigation and prosecution of doping cases and coordination efforts to combat match-fixing

Say something if you see something – collection of information

The greatest insight into the recreational sport and fitness scene comes from the environment itself – among the athletes, club members, managers, staff, and support staff, as well as those who move in those circles or are in touch with them.

ADD gathers information from and about these environments regarding both doping and match-fixing. This is done via two whistleblowing hotlines, Stop Doping and Stop Match-fixing, where anyone can easily, securely, and anonymously share their knowledge or suspicion of doping or match-fixing via an online form, an app or by telephone. In 2018, ADD received 136 reports from the two hotlines:

Table 1: Number of reports submitted to the Stop Doping and Stop Match-fixing hotlines in 2018

	Number of calls	Number of these calls that were dismissed due to spam, irrelevant information, etc.
Stop Doping	95	5
Stop Match-fixing	41	18
Total	136	23

Most reports are submitted via the online form on the website; few use the app or telephone hotline. More reports were received in 2018 than in previous years, including more of a useful nature. The figures from 2017 are shown below in comparison.

Table 2: Number of reports submitted to the Stop Doping and Stop Match-fixing hotlines in 2017

	Number of calls	Number of these calls that were dismissed due to spam, irrelevant information, etc.
Stop Doping	60	4
Stop Match-fixing	32	13
Total	92	17

Processing of intelligence

As shown in the table above, ADD received relevant reports on both doping and match-fixing through the two whistleblower hotlines in 2018. In accordance with these reports, ADD conducts preliminary investigations into violations of sport regulations or legislation. ADD also assists other public authorities and sports organisations with know-how, investigations, interviews and analyses. This assistance can come as a result of ADD receiving intelligence regarding criminal activity such as the production, sale and distribution of doping instruments, organised match-fixing, and so on. This information is validated and transferred to the appropriate authority, such as the Danish Customs Agency, the National Police of Denmark and/or other relevant police districts. For example, in 2018, on the basis of reliable whistleblower reports, ADD delivered information to various authorities that was used for further investigation. Similarly, ADD assisted DIF in investigating a case of suspected match-fixing of a Danish Superliga men's football match between SønderjyskE Fodbold and FC Midtjylland. Information received through the Stop Match-fixing hotline played a decisive role in this case.



Doping cases

In 2018, ADD reported and presented doping cases to the relevant judicial bodies in organised competitive sport, recreational sport clubs as well as the commercial fitness centres. In all of these cases, the juridical bodies' decisions followed the grounds of judgement ADD used as the basis for reporting the doping cases.

Organised competitive sport

Six cases from organised competitive sport were reported under the national anti-doping regulations in 2018, as shown in the table below.

Table 3: Organised competitive sport cases reported under the national anti-doping regulations

Case nr.	Sport	Test type	Gender	Violation	Case prosecuted
1	Triathlon	In-competition	М	Positive test - terbutaline (asthma medication)	Warning
2	Hockey	In-competition	М	Positive test - cocaine	2-year suspension
3	Triathlon	In-competition	F	Positive test - terbutaline (asthma medication)	Dismissed
4	Weightlifting	In-competition	M	Positive test - steroids with tamoxifen (hormone modulator) and methylphenidate (stimulant)	4-year suspension
5	Boxing	Out-of- competition	М	Positive test - terbutaline (asthma medication)	Warning
6	Weightlifting	Out-of- competition	М	Failure to participate in doping control	4-year suspension

Recreational sports clubs and fitness centres

Eight cases from recreational sports clubs and fitness centres were reported under the anti-doping regulations. These cases involved recreational sport and fitness clubs or associations affiliated with DIF, DGI and the Danish Company Sports Federation. Doping control initiatives carried out in recreational sports clubs and fitness centres have primarily focused on specific association-based fitness centres, but several visits have also been made to sports associations and clubs, where gym goers, club members and competitive athletes train side-by-side in disciplines such as powerlifting and boxing. A number of cases in 2018 came from these disciplines.

Table 4: Recreational sport and fitness cases reported under the national anti-doping regulations

	Total selected	Refused to submit sample	Positive	Total cases
Men	20	5	3	8
Women	0	0	0	0
Total	20	5	3	8

Commercial fitness centres

Table 5 shows the cases reported to commercial fitness centres in 2018.



Table 5: Commercial fitness centre cases

	Total selected	Refused to submit sample	Positive	Total cases
Men	229	60	45	105
Women	19	3	6	9
Total	248	63	51	114

There were ten further cases in which members of commercial fitness centres violated their sanctions. These people were issued a new sanction commencing from the date of the violation.



Prevention of substance abuse

Preventative efforts in organised competitive sport

Assisting athletes and their support staff in navigating the anti-doping system and ensuring they comply with anti-doping regulations demands a strong collaboration with the sports federations that are affiliated with DIF. This contact is needed to ensure that doping control efforts are optimised and targeted towards relevant athletes, that the athletes and their support staff know how to comply with the anti-doping regulations, and, ultimately, that the athletes develop the ability to handle the ethical and moral choices they are likely to be faced with over the course of their sporting careers.

In 2018, ADD continued to hold individual meetings with sports federations whose athletes are in the high-priority testing pool. Similarly, as it has also done in previous years, ADD invited all of the individual sports federations, as well as Team Denmark and DIF, to gather at an information seminar at ADD's offices. This year, ADD tested a new open house concept, where the participants could consult different experts covering various aspects of ADD's work to find out specific information they wanted to know, get answers to their questions, or simply to have a conversation on a particular topic. The feedback received from these meetings has been positive.

ADD's cooperation with the School Olympics (Skole OL) on producing Fair Play teaching materials came to fruition in 2018. The materials were made available to teachers via the Skole OL website, after which a 'Fair Play Promise' competition was launched. School classes were invited to submit their interpretations of Fair Play Promises, with the winner from each year group being awarded a place in the final of the School Olympics. The Fair Play Promises were read out by representatives from the classes at the finals, where 10,000 children took part.

In recent years ADD has worked on guidelines for policy development and action plans for fair play in the national sports federations. The 'United on fair play' guide was produced as part of a pilot project in 2016, and was made available to all sports federations in 2017. This material was still available to access in 2018, but, drawing on experience from recent years, ADD has customised it to make it more compatible with the actual resources the individual sports federations allocate to this work. This has resulted in more customised and independent processes with the sports federations. In some cases, this also applies to the meetings and discussions between ADD and the individual federations on developing policies and action plans for fair play.

Preventative efforts in fitness centres

A vision of clean and healthy training environments is at the core of ADD's preventative efforts in the many ADD-affiliated fitness centres located across the country. The 'fitness concept', which has been the impetus of ADD's efforts since 2013, is now a consolidated part of the fitness sector, and our cooperation with these centres over the years has become invaluable. ADD's fitness consultants are beginning to have a visible presence in the centres, are in regular dialogue with the staff and members, and carry out controls with a view to removing potentially unhealthy and inappropriate role models. Most importantly, the centres themselves have expressed a desire to be clean training environments, and they see and utilise ADD as a relevant partner in achieving this. This is evident, for instance, in the regular reports and feedback ADD receives from the centres, which allow targeted preventative measures to be taken to combat doping.

Visits to Denmark's fitness centres are the focal point of the fitness concept. The visits increase ADD's visibility in these environments, and they are also a clear opportunity to meet both the staff and members of the centre in their everyday setting. In 2018, ADD made a total of 1,238 visits to fitness centres around the country. This figure dropped from 2017 after the departure of a member of staff after a period of illness and another going on maternity leave. After an intensive outreach effort in commercial fitness centres without a cooperation agreement with ADD in 2017, ADD chose in 2018, with less staff time at its disposal, to prioritise visiting centres that do have an agreement. Therefore, the number of visits to these centres is slightly greater than in 2017, even though the total number of visits fell in 2018.



 2018
 880
 223
 135

 2017
 842
 241
 426

 2016
 926
 308

Figure 3: Number of visits to Danish fitness centres

400

200

■ Visits without doping control ■ Visits with doping control ■ Visits to centres without ADD cooporation

800

1.000

1.200

1.400

1.600

Table 6: Number of visits to Danish fitness centres with an ADD cooperation agreement

600

	Prevention and consultation visits	Prevention and consultation visits including doping control*	Total
Association-based recreational fitness centres connected to DIF, DGI and Danish Company Sports Federation	153	13	166
Commercial fitness centres with a cooperation agreement	727	210	937
Total	880	223	1.103

^{*} The number of people selected for doping control in Danish gyms and fitness centres (268, comprising 248 from commercial fitness centres plus 20 from recreational clubs or associations, as shown in tables 4 and 5) is greater than the total number of doping control visits (223, as shown in the table above) because on some occasions more than one person was selected for doping control.

In 2018, ADD has seen a larger proportion of visits to fitness centres during which doping control has not been carried out. Meanwhile, ADD also received more inquiries from centres that had noticed an unhealthy training culture emerging among their members. These insights enable ADD to focus on visiting the centres when they need assistance. They also give ADD the impression that there is an increasing awareness within the fitness sector about offering healthy training environments where doping is not accepted.

In 2018, ADD once again reduced its fee for commercial fitness centres to have a cooperation agreement with ADD. The price dropped 37% from an annual fee of DKK 6,000 to DKK 3,800. ADD's operation grant covered the price reduction.

Over the course of 2018, 400 centres had a cooperation agreement with ADD. There is a constant fluctuation in the number of centres with a cooperation agreement, so there were 383 at the end of 2018, in contrast to 342 at the end of 2017. The 12% increase in the number of centres with a cooperation agreement was the result of two fitness chains choosing to enter into an agreement with ADD in 2018. Since 2016, the number of ADD-affiliated centres has risen by 24%.



Doping and substance abuse from a public health perspective

In parallel to its direct actions in fitness centres, ADD also placed emphasis on some of the broader effects of doping in 2018. The organisation worked to raise awareness of the settings and frameworks in which young people, in particular, can be influenced by preventative strategies.

ADD set up two forums that involved meeting people who are using banned substances, or young people who are at risk of doping. ADD's medical expert forum gathers doctors from different specialist fields who encounter current or former users of anabolic androgenic steroids, in particular, through their work across various branches of the health system. The purpose of the forum is to establish networks and share knowledge within this medical field. ADD's working group for professionals who work with at-risk youth cooperates with ADD to find out how prevalent the use of doping is among vulnerable young people, and if so, whether there is a need for prevention strategies directed at this target group.

In general, ADD strived in 2018 to establish and maintain networks of organisations who work with adolescent health and body image or with groups of young people who are at risk of developing body image disorders, or have in the worst case already started taking harmful doping substances. As part of these efforts, ADD organised meetings with organisations such as the Danish Association against Eating Disorders and Self-harm (Landsforeningen mod spiseforstyrrelse og selvskade), GirlTalk and the Heathy City (Sund By) Network's 'The good life for youth' programme, as well as participating in a follow-up group for the National Council for Children's study 'The good life in leisure time according to young people'.

The fact that body image is a hot topic of discussion among young people was emphasised when the Danish Ministry of Health's youth panel presented nine recommendations to the Ministry towards the end of 2018, of which three concerned the body. The youth panel called for restrictions on portraying fictitious body ideals, to make the natural body more visible, and that new initiatives should support a more diverse body image. ADD has established a collaboration with the Danish Association against Eating Disorders and Self-harm (LMS) to offer concrete suggestions for initiatives that can meet the youth panel's recommendations. The ambition is to expand this collaboration to include other organisations working with youth and body image.

By cooperating with public bodies, organisations and authorities in recent years, ADD has observed a lack of knowledge on doping in recreational sport and exercise and the mechanisms that are at work in connection with how the body is exposed in public. To address this gap, ADD contributed to a number of publications that can help to inform and create greater knowledge about recreational doping and body exposure. This includes educational materials aimed at primary school children in grades 7-9, which were developed and published by ADD and the Danish municipalities through the 'Anti-doping municipalities in Denmark' project. This project also published the 'Handbook on doping in recreational sport and exercise', which ADD developed in collaboration with Aalborg Municipality. The objective was to create a reference guide for practitioners who may come into contact with users or potential users of prohibited substances. The 'Anti-doping municipalities in Denmark' project was evaluated in 2018 when ADD held its closing conference. The evaluation and the outputs mentioned above are available on ADD's website.

In 2018, Odense University Hospital announced it would open a Body Identity Clinic (BIC) that would work with target groups including current and former users of anabolic steroids. ADD has been in close contact with the clinic since it opened and has contributed with its knowledge and experience from the fitness sector.



Promote research and development in the field of anti-doping

Supported research projects

ADD allocated a total of DKK 1,554,000 to seven external research projects in 2018. The seven external projects ADD supported were:

- 1. Do existing anti-doping learning strategies alter doping perception and body images among young people? (University of Copenhagen, DKK 199,000)
- 2. Impact of glucocorticoids on the Athletes Biological Passport (University of Copenhagen, DKK 175,000)
- 3. Defining a urine threshold and decision limit for vilanterol in doping control analysis (Bispebjerg Hospital, DKK 100,000)
- 4. Youth and fitness doping: qualitative exploration of the social context of fitness doping (University of Southern Denmark, DKK 400,000)
- 5. The threshold value for salbutamol (University of Copenhagen, DKK 130,000)
- 6. Mass spectrometry of serum IGF-1, IGF-2 and IGFBP-3 to detect misuse of growth hormone in sport (Rigshospitalet, DKK 150,000)
- 7. Preventing Doping in Sport: Perspectives of Elite Athletes and Coaches (Stirling University, DKK 400,000)

Registry study: Survey of health data from current and former users of prohibited substances

The first results from the project 'Health and social consequences of androgenic anabolic steroids', to which ADD, with support from the Danish Ministry of Culture, granted funding in 2017, were presented in autumn 2018. Comparing health data from people who tested positive for anabolic steroids and a control group of similar people from the general public, the survey revealed that the steroid users had a significantly worse health profile, which was evident across a number of selected parameters. For example, the steroid users had twice as many referrals to the hospital as the group from the general public, three times the mortality rate, and a long list of serious illnesses and ailments in which they stood out as being overrepresented. Steroid users are particularly overrepresented in the treatment of cardio-vascular disease, infertility and gynecomastia, which are symptoms related to the side effects of the drug.

The results of the study were amplified across multiple media channels, and for ADD the research presented a new perspective on the effects – especially the negative effects – that anabolic steroids can have on the many individuals who use them, and not least for the health system.

Increasing time and cost efficiency in doping analyses

In 2017, ADD began working on its first Industrial PhD project in collaboration with Aker University Hospital in Oslo and the University of Copenhagen's Institute of Sports and Nutrition with support from the Innovation Fund Denmark. The PhD is due for completion in 2019.

In 2018, the project proceeded to analyse samples from a testosterone experiment conducted in 2017 and a subsequent experiment that aimed to test whether insulin could be traced using the Dried Blood Spot method.



Advising authorities and international cooperation

Advising authorities

ADD advises a number of authorities in various ways. In 2018, this included a close collaboration with the Danish pharmaceutical association Danmarks Apotekerforening on developing a survey aimed at Danish pharmacies. The survey revealed that more than 90% of the pharmacies that took part in the questionnaire believe that some of the syringes they sell are used to inject substances such as steroids, and that many of the pharmacies asked for more information on the subject. This made it clear that pharmacies are a relevant platform for ADD's work, and that it is important to be aware of this setting in relation to recreational doping and in reaching relevant target groups. As a result of the study, ADD and Danmarks Apotekerforening have produced fact sheets on anabolic steroids and liquid paraffin respectively. The fact sheets include contact information for ADD and Herlev Hospital's medical experts so the pharmacies can refer to them for advice on these substances.

Some gym users inject liquid paraffin into their bodies to appear larger and stronger, but in doing so they risk developing severe adverse health conditions, due to the increase in calcium levels in the blood, which may include kidney failure. In 2018, an increasing awareness emerged of this public health threat, which is otherwise very familiar to ADD. This awareness was revealed through the significant number of inquiries Herlev Hospital's medical experts received from people who had injected themselves with liquid paraffin. Even though liquid paraffin use is not classified as doping, ADD has access to specific knowledge about the type of people who are injecting themselves with or consider using liquid paraffin, because many of these people are also using or have used muscle-building substances and work out in the gyms or fitness centres that ADD monitors. Therefore, ADD has chosen to be a part of these awareness-raising efforts, as with greater knowledge on the subject, the organisations can contribute to vital health prevention efforts both by informing their members about the risks and by utilising their presence in the fitness centres to encourage people who have injected themselves with liquid paraffin to consult their doctor. The cooperation has also facilitated an exchange of specialist expertise between ADD and Herlev Hospital.

International cooperation

Doping is a cross-border problem. No matter how effective Denmark's anti-doping initiatives are, Danish athletes are still likely to compete against athletes who are primarily under the auspices of their respective countries and their respective international federations. If ADD is to succeed in enabling fair competition for Danish athletes, it must branch out and engage in international cooperation to combat doping at both the European and global levels.

WADA

In both 2017 and 2018 there has been a significant international focus on reforming the anti-doping system. ADD has strived to contribute to this work through a number of initiatives that can strengthen anti-doping efforts internationally. In addition, ADD has both independently and in collaboration with the Danish Ministry of Culture and DIF contributed to proposals to revise the World Anti-Doping Code and its corresponding international standards. The accepted proposals will be adopted at the World Conference on Doping in Sport in November 2019 and come into effect on 1 January 2021. The focus of ADD's proposal has been to ensure ADD's ongoing work with both organised competitive sport and recreational sport and fitness, as well as protecting athletes' legal rights and the interests of the anti-doping organisations.

Nordic cooperation

ADD continued its close cooperation with the Faroese Sports Federation by providing specialist training for doping control officers and awareness-raising initiatives aimed at organised competitive sport. ADD's work to assist the Faroe Islands in establishing an independent doping control programme came to an end in 2018, and three doping control officers and one lead doping control officer are now qualified to manage anti-doping



initiatives on the Faroe Islands. ADD continues to visit the Faroe Islands at least once a year and supports their anti-doping efforts by providing help and being available for consultation on challenging issues.

In addition, the Faroe Islands, inspired by ADD's work with recreational doping, has expressed an interest in establishing anti-doping initiatives in the fitness sector. In 2018, ADD assisted the Faroe Islands in the process of establishing a new initiative that will be launched in 2019.

Other international cooperation agreements

ADD is a member of the Institute of National Anti-Doping Organisations (iNADO), which is the umbrella organisation for the national anti-doping agencies. ADD's CEO has been an iNADO Board Member since 2017, which has given ADD a more central position in this strategic international work.

Quality and good governance

Good governance in sport has attracted growing attention in recent years. Good governance and management are fundamental to running sports organisations, including anti-doping organisations, properly. The strongest point of departure in contributing to international discussions on good governance is that ADD focuses on criteria of good governance in its daily work. This is why ADD joined a consortium led by Play the Game to apply for an Erasmus+ project that identifies relevant good governance criteria for national anti-doping organisations (NADOs) and proposes concrete recommendations for NADOs to work with them. The project, which was accepted and will run from 2019-2020, includes ADD as a partner and aims to strengthen ADD and other NADOs' abilities to develop and optimise the organisations' governance and management principles.



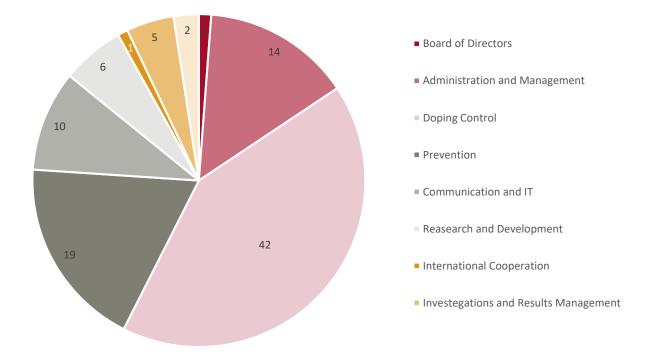
Finance

ADD's total income in 2018 was DKK 29.8 million, which includes an operating grant of DKK 25 million from the Danish Ministry of Culture. The remaining income consists of project support from the Danish Ministry of Culture and the Danish Ministry of Health, doping control contracts made with event and tournament organisers, and cooperation agreements with gyms and fitness centres.

ADD's total expenditures amounted to DKK 29.3 (25.3) million and can be broken down into the following expense categories:

Board of Directors	DKK 0.4 (0.3) million	(note 7)
Administration and Management	DKK 4.2 (3.4) million	(note 8)
Doping Control	DKK 12.2 (11.8) million	(note 9)
Prevention	DKK 5.4 (4.3) million	(note 10)
Communication and IT	DKK 2.9 (2.3) million	(note 11)
Research and Development	DKK 1.8 (1.0) million	(note 12)
International Cooperation	DKK 0.3 (0.2) million	(note 13)
Investigations and Results Management	DKK 1.4 (1.0) million	(note 14)
The national platform against match-fixing	DKK 0.7 (0.8) million	(note 15)

Figure 4: Distribution of ADD's expenses in %





Annex 1: Doping control in elite and competitive sports

				Wo	men					
	In	competit	tion	In compatition	Out	of Compe	etition	Out of commetition		0
Sport	Blood	Blood module	Urine	In competition total	Blood	Blood module	Urine	Out of competition total	Total	Grand total
American football										56
Athletics			22	22	5	11	12	28	50	131
Badminton			7	7			1	1	8	45
Basketball			8	8			1	1	9	38
Boxing			4	4			2	2	6	45
Table tennis			1	1					1	4
Wrestling										31
Cheerleading										4
Curling							3	3	3	5
Cycling		2		2	7	15	17	39	41	253
Football			2	2	1		16	17	19	130
Fencing							1	1	1	9
Golf			3	3					3	7
Hockey										7
Handball			26	26			5	5	31	91
Ice hockey										89
Judo							3	3	3	12
Ju-jitsu			2	2					2	4
Canoe/kayak			6	6	7	28	28	63	69	91
Karate			2	2			4	4	6	14
Kickboxing			3	3			2	2	5	22
Motocross										3
Orienteering		1	2	3	1	10	13	24	27	52
Parasport										6
Rowing			2	2	6	17	21	44	46	115
Rugby										45
Sailing					1		1	2	2	2
Shooting			3	3					3	9
Softball										3
Dance sport			3	3			2	2	5	9
Powerlifting	1		2	3	8		21	29	32	110
Aquatics			8	8	8	18	21	47	55	98
Taekwondo			2	2			1	1	3	8
Tennis			2	2	2	2	1	5	7	10
Triathlon	1	1	14	16	12	29	37	78	94	215
Weightlifting	-		8	8	3		8	11	19	83
Grand total	2	4	132	138	61	130	221	412	550	1,856



				N	len					
	In competition Out of competition		tition	ition Out of		Cuand				
Sport	Blood	Blood module	Urine	In competition total	Blood	Blood module	Urine	competition total	Total	Grand total
American football			21	21	5		30	35	56	56
Athletics			33	33	8	21	19	48	81	131
Badminton	1	1	6	8	3	12	14	29	37	45
Basketball			2	2	3		24	27	29	38
Boxing			14	14	2		23	25	39	45
Table tennis			3	3					3	4
Wrestling			10	10	3	5	13	21	31	31
Cheerleading							4	4	4	4
Curling							2	2	2	5
Cycling		5	43	48	23	60	81	164	212	253
Football			39	39	2		70	72	111	130
Fencing			1	1			7	7	8	9
Golf	1		3	4					4	7
Hockey			7	7					7	7
Handball			35	35	9		16	25	60	91
Ice hockey			29	29	7		53	60	89	89
Judo					1		8	9	9	12
Ju-jitsu			2	2					2	4
Canoe/kayak			6	6	2	4	10	16	22	91
Karate			2	2	1		5	6	8	14
Kickboxing			10	10			7	7	17	22
Motocross			3	3					3	3
Orienteering			6	6		8	11	19	25	52
Parasport					1	2	3	6	6	6
Rowing			10	10	8	18	33	59	69	115
Rugby			13	13	1		31	32	45	45
Sailing										2
Shooting			6	6					6	9
Softball							3	3	3	3
Dance sport			1	1	1		2	3	4	9
Powerlifting			17	17	13		48	61	78	110
Aquatics			5	5	5	13	20	38	43	98
Taekwondo			4	4			1	1	5	8
Tennis			2	2			1	1	3	10
Triathlon		1	34	35	5	22	59	86	121	215
Weightlifting			19	19	11		34	45	64	83
Grand total	2	7	386	395	114	165	632	911	1,306	1,856



Annex 2: Booked doping control

Type of organisation	Booked by	In/out-of-competition	Total blood	Total urine
International federations and national anti- doping organisations	Antidoping Norge	Out-of-competition	3	2
	Badminton World Federation	Out-of-competition	23	34
	European Handball Federation	Out-of-competition	0	8
	International Association of Athletics Federations	Out-of-competition	6	4
	Svensk Antidoping	Out-of-competition	1	1
	US Anti-Doping Agency	Out-of-competition	0	3
National and international event organisers	Badminton Danmark	In-competition	0	14
	Badminton World Federation	In-competition	0	4
	Canadian Centre for Ethics in Sport	In-competition	0	18
	Parasport Danmark	In-competition	0	12
	European Handball Federation	In-competition	0	16
	European Triathlon Union	In-competition	0	6
	International Handball Federation	In-competition	4	12
	International Ice Hockey Federation	In-competition	12	68
	International Triathlon Union/Dansk Triatlon Forbund	In-competition	3	21
	International Association of Athletics Federations/Dansk Atletik Forbund	In-competition	0	18
	Post Danmark Rundt	In-competition	0	17
	Sandstød Salg & Event	In-competition	0	4
	Sparta Event	In-competition	0	11
	World Triathlon Corporation	In-competition	0	24
Other	Dansk Atletik Forbund	In-competition	0	2
	Dansk Trav Og Galop Union	In-competition	0	16
	Danmarks Cykle Union	In-competition	0	2
	Dansk Professionel Bokseforbund	In-competition	0	4



	Lillerød Vægtløfter Klub	Out-of-competition	0	11
Total			52	332
Grand total: 384				



Annex 3: Therapeutic Use Exemptions (TUE)

Number of Therapeutic Use Exemptions (TUE) issued by Anti Doping Denmark

Prohibited substance	Disease	Number of TUEs
Terbutaline	Asthma	30
Methylphenidate	ADHD	11
Prednisolone or other oral preparations	Inflammation	13
Insulin	Diabetes	3
Other	-	14
Total		71

^{*}International elite athletes apply for TUE at the international federation.

