# UFC PROHIBITED LIST

Effective January 1, 2024

### PART 1.

Except as provided otherwise in PART 2 below, the *UFC Prohibited List* shall incorporate the most current *WADA* Technical Documents establishing decision limits or reporting levels. Additionally, unless otherwise modified by the *UFC Prohibited List* or the *UFC* Anti-Doping Policy ("UFC ADP"), the *Prohibited Substances*, the *Prohibited Methods*, the designations of Specified or *Non-Specified Substances* and the designations of *Specified* or *Non-Specified Methods* shall be as identified according to the *WADA* Prohibited List and Technical Documents. Where there is a conflict, the *UFC Prohibited List* shall apply.

Notwithstanding this prohibited list that UFC *Athletes* are subject to, UFC acknowledges that UFC *Athletes* may be subject to separate prohibited lists under the various *Athletic Commission* jurisdictions where UFC events are held. UFC *Athletes* are responsible for knowing and adhering to the *Athletic Commission* rules where they compete in addition to the rules of this policy.

### PART 2.

The *UFC Prohibited List* shall incorporate the following modifications to the relevant *WADA* Technical Documents/letters:

- **1. Decision Concentration Levels.** Adverse Analytical Findings (AAFs) reported at an estimated concentration below the following Decision Concentration Levels ("DCL"), as reported by a WADA-accredited Laboratory or UFC designated Laboratory, shall be managed by the *Independent Administrator* as Atypical Findings under Article 7.1.9 of the UFC ADP:
  - Clomiphene/clomifene: 0.10 ng/mL<sup>2</sup>
  - Dehydrochloromethyltestosterone (DHCMT) long-term metabolite (M3): 0.10 ng/mL
  - Selective Androgen Receptor Modulators (SARMs): 0.10 ng/mL<sup>3</sup>
  - GW-1516 [GW-501516]: 0.10 ng/mL<sup>4</sup>
  - Epitrenbolone (Trenbolone metabolite): 0.20 ng/mL

Atypical Findings reported in accordance with WADA Technical Documents and/or letters regarding diuretics and growth promoters that are not otherwise listed above, shall be managed by the *Independent Administrator* as Atypical Findings under Article 7.1.9 of the UFC ADP.

- **2. SARMs/GW-1516:** Adverse Analytical Findings of GW-1516 or SARMs reported at a concentration at or above the applicable Decision Concentration Level but under 1 ng/mL shall be managed by the *Independent Administrator* as Specified Substances.
- **3. Higenamine:** Higenamine shall be a Prohibited Substance under the *UFC* Anti-Doping Policy only *In-Competition* (and not *Out-of-Competition*). The reporting limit for Higenamine shall be the reporting limit established for Higenamine by the *WADA* Technical Document TDMRPL.
- **4. Intravenous (IV) infusions/injections:** Infusions or injections of 100 mL or less within a 12-hour period are permitted unless the infused/injected substance is a prohibited substance.
  - Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period (regardless of the substance) are prohibited both *In-Competition* and *Out-of-Competition* unless the intravenous



infusion and/or injection is legitimately received *In-Competition* or *Out-of-Competition* in the course of hospital treatments, surgical procedures, clinical diagnostic investigations, and/or those received *In-Competition* or *Out-of-Competition* that are determined to be medically-justified and within the standard of care by a licensed physician and administered by a licensed medical professional. Under such circumstances, no Anti-Doping Policy Violation has been committed.

IV infusions/injections shall be considered a *Specified Method*, provided, however, the maximum period of *Ineligibility* shall be six months, unless the *Independent Administrator* can establish with *Clear and Convincing* evidence that such Use and/or Attempted Use was in conjunction with the Use and/or Attempted Use of other *Prohibited Substances* or *Prohibited Methods*, was intended to manipulate the *Athlete's* biological markers to circumvent the rules of the *UFC* Anti-Doping Policy or interfere with *Sample* analysis, or was otherwise intended to tamper or interfere with Doping Control, including the interpretation of the results of the *Athlete's Sample* or *Athlete Biological Passport*, in which case the *Athlete* may be sanctioned for *Tampering* and/or *Attempted Tampering* and/or the Use and/or Attempted Use of a *Prohibited Method* in accordance with the *UFC* Anti-Doping Policy.

- 5. Substances of Abuse: The following *Prohibited Substances* shall be considered Substances of Abuse:
  - NARCOTICS: Buprenorphine; Dextromoramide; Diamorphine (heroine); Fentanyl and its derivatives; Hydromophone; Methadone; Morphine; Nicomorphine; Oxycodone; Oxymorphone; Pentazocine; Pethidine.
  - STIMULANTS: Cocaine, methylenedioxymethamphetamine (MDMA, "ecstasy"), dimethylamphetamine (DMA), benzylpiperazine (BZP), metamfetamine(d-), p-methylamphetamine, methylenedioxyamphetamine (MDA).

**6. Glucocorticoids:** As per S9, glucocorticoids by certain routes of administration are prohibited *In-Competition* except for those legitimately prescribed by a licensed physician, received for a medically-justified purpose within the standard of care, and administered by a licensed medical professional.



<sup>&</sup>lt;sup>1</sup> The WADA-Accredited Laboratory or UFC Designated Laboratory ("Laboratory") should use a method for semi-quantitative estimation of DCL concentrations. This shall be guided by the WADA TD MRPL and WADATD IDCR and when possible, should be reported to the same number of significant digits as the DCL. This semi-quantitative method performed by the Laboratory is sufficient for determining whether an estimated concentration equals, exceeds, or is below an applicable DCL. No quantitative concentration determination is necessary.

<sup>&</sup>lt;sup>2,3,4</sup> If metabolites of clomiphene/clomifene or of SARMs or of GW1516 are reported (regardless of the concentration) in the absence of any parent compound or with the parent compound below the Decision Concentration Level, the report shall be managed by the Independent Administrator as an Atypical Finding.

### PART 3.

Certified Supplements. Certified Supplements are any supplement certified by:

- (a) NSF Certified For Sport,
- (b) Kolner Liste,
- (c) Informed Sport Trusted by Sport,
- (d) Informed Choice,
- (e) HASTA (Human and Supplement Testing Australia)
- (f) Banned Substance Control Group (BSCG) or
- (g) any other supplement certification organization that has been endorsed and/or approved by a NADO (National Anti-Doping Organization) and mutually agreed to by *UFC* and the *Independent Administrator* and announced to the *Athletes*.



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For the purposes of the application of Article 10 of the *UFC* Anti-Doping Policy, the *UFC* Prohibited List identifies which Prohibited Substances are Specified or Non-Specified Substances and which Prohibited Methods are Specified or Non-Specified Methods.

All *Prohibited Substances* shall be considered as "Specified Substances" except substances in classes S1, S2, S4.3, S4.4, and *Prohibited Methods* M1, M2.1, and M3.

### **SO NON-APPROVED SUBSTANCES**

### PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

# All prohibited substances in this class are Specified Substances.

Any pharmacological substance which is not addressed by any of the subsequent sections of the List and with no current approval by any governmental regulatory health authority for human therapeutic use (e.g., drugs under pre-clinical or clinical development or discontinued, designer drugs, substances approved only for veterinary use) is prohibited at all times. This class covers many different substances, including but not limited to, BPC-157, Dinitrophenol (DNP), Adip tide, Rycals (ARM036), Sirtuins (SRT2104), and AdipoRon.

### **S1 ANABOLIC AGENTS**

### PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

## All prohibited substances in this class are Non-Specified Substances.

Anabolic agents are prohibited.

When administered exogenously, including but not limited to:

- 1-Androstenediol (5∫-androst-1-ene-3ß, 17ß-diol)
- 1-Androstenedione (5∫-androst-1-ene-3,17-dione)
- 1-Androsterone (3∫-hydroxy-5∫-androst-1-ene-17-one)
- 1-Epiandrosterone (3ß-hydroxy-5∫-androst-1-ene-17-one)
- 1-Testosterone (17ß-hydroxy-5∫-androst-1-en-3-one)
- 4-Androstenediol (androst-4-ene-36,176-diol)
- 4-Hydroxytestosterone (4,17ß-dihydroxyandrost-4-en-3-one)
- 5-Androstenedione (androst-5-ene-3,17-dione)
- 7∫-hydroxy-DHEA
- 7ß-hydroxy-DHEA
- 7-Keto-DHEA
- 17∫-methylepithiostanol (epistane)
- 19-Norandrostenediol (estr-4-ene-3,17-diol)
- 19-Norandrostenedione (estr-4-ene-3,17-dione)
- Androst-4-ene-3,11,17- trione (11-ketoandrostenedione, adrenosterone)
- Androstenediol (androst-5-ene-3ß,17ß-diol)
- Androstenedione (androst-4-ene-3,17-dione)
- Bolasterone

- Boldenone
- Boldione (androsta-1,4-diene-3,17-dione)
- Calusterone
- Clostebol
- Danazol [[1,2]oxazolo[4',5':2,3]pregna-4-en-20yn-17∫-ol]
- Dehydrochlormethyltestosterone [4-chloro-17ß-hydroxy-17∫- methylandrosta-1,4-dien-3-one]
- Desoxymethyltestosterone [17∫-methyl-5∫-androst-2-en-17β- ol and 17∫-methyl-5∫-androst-3-en-17β-ol]
- Drostanolone
- Epiandrosterone (3ß-hydroxy-5∫-androstan-17-one)
- Epi-dihydrotestosterone
   [17ß-hydroxy-5∫-androstan-3-one]
- Epitestosterone
- Ethylestrenol (19-norpregna-4-en-17∫-ol)
- Fluoxymesterone
- Formebolone
- Furazabol (17∫-methyl [1,2,5] oxadiazolo[3',4':2,3]-5∫androstan-17β-ol]
- Gestrinone



# S1. ANABOLIC ANDROGENIC STEROIDS (AAS) continued

- Mestanolon
- Mesterolone
- Metandienone

[17ß-hydroxy-17∫-methylandrosta-1,4-dien-3- one]

- Metenolone
- Methandriol
- Methasterone

[17ß-hydroxy-2∫, 17∫-dimethyl-5 -androstan- 3-one]

Methyl-1-testosterone

[17B-hydroxy-17 $\int$ -methyl-5 $\int$ -androst-1- en-3-one]

- Methylclostebol
- Methyldienolone

[17ß-hydroxy-17∫-methylestra-4,9-dien-3- one]

- Methylnortestosterone
  - [17B-hydroxy-17f-methylestr-4-en-3-one]
- Methyltestosterone
- Metribolone

[methyltrienolone, 17ß-hydroxy-17∫- methyles-tra-4,9,11-trien-3-one]

- Mibolerone
- Nandrolone (19-nortestosterone)

- Norboletone
- Norclostebol (4-chloro-17ß-ol-estr-4-en-3-one)
- Norethandrolone
- Oxabolone
- Oxandrolone
- Oxymesterone
- Oxymetholone
- Prasterone (dehydroepiandrosterone, DHEA, 38-hydroxyandrost-5-en-17-one)
- Prostanozol

[17B-[[tetrahydropyran-2-yl] oxy]-1'H- pyra-zolo[3,4:2,3]-5∫-androstane]

- Quinbolone
- Stanozolol
- Stenbolone
- Testosterone
- Tetrahydrogestrinone (17-hydroxy-18a- homo-19-nor-17∫pregna-4,9,11-trien-3-one)
- Tibolone
- Trenbolone (176-hydroxyestr-4,9,11-trien-3-one)

and other substanes with a similar chemical structure or similar biological effect(s).

### 2. OTHER ANABOLIC AGENT

Including, but not limited to:

Clenbuterol, ractopamine, selective androgen receptor modulators [SARMs, e.g. andarine, LGD-4033 (ligandrol), enobosarm (ostarine), RAD140, S-23, and YK-11], osilodrostat, zeranol and zilpaterol.

# **S2** PEPTIDE HORMONES, GROWTH FACTORS, RELATED SUBSTANCES, AND MIMETICS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

### All prohibited substances in this class are Non-Specified Substances.

The following substances, and other substances with similar chemical structure or similar biological effect(s), are prohibited.

### 1. ERYTHROPOIETINS (EPO) AND AGENTS AFFECTING ERYTHROPOIESIS

Including, but not limited to:



- 1.1 Erythropoietin receptor agonists, e.g. darbepoetins (dEPO); erythropoietins (EPO); EPO-based constructs (e.g. EPO-Fc, methoxy polyethylene glycol-epoetin beta (CERA)]; EPO-mimetic agents and their constructs (e.g. CNTO-530, peginesatide).
- **1.2** Hypoxia-inducible factor (HIF) activating agents, e.g. cobalt; daprodustat (GSK1278863); IOX2; molidustat (BAY 85-3934); roxadustat (FG-4592); vadadustat (AKB-6548); xenon.
- **1.3** GATA inhibitors, e.g. K-11706.
- 1.4 Transforming growth factor beta (TGF-B) signalling inhibitors, e.g. luspatercept; sotatercept.
- 1.5 Innate repair receptor agonists, e.g. asialo EPO; carbamylated EPO (CEPO).

### 2. PEPTIDE HORMONES AND THEIR RELEASING FACTORS

- **2.1** Chorionic gonadotrophin (CG) and luteinizing hormone (LH) and their releasing factors in males, e.g. buserelin, deslorelin, gonadorelin, goserelin, leuprorelin, nafarelin and triptorelin.
- **2.2** Corticotrophins and their releasing factors, e.g. corticorelin.
- **2.3** Growth hormone (GH), its analogues and fragments and releasing factors, including, but not limited to: growth hormone analogues, e.g., lonapegsomatropin, somapacitan and somatrogon; growth hormone fragments, e.g., AOD-9604 and hGH 176-191.
- 2.4 Growth hormone releasing factors, including, but not limited to: growth hormone-releasing hormone (GNRH) and its analogues, e.g., CJC-1293, CJC-1295, sermorelin and tesamorelin; growth hormone secretagogues (GHS) and its mimetics, e.g., lenomorelin (ghrelin), anamorelin, ibutamoren, ipamorelin, macimorelin and tabimorelin; GH-releasing peptides (GHRPs), e.g., alexamorelin, GHRP-1, GHRP-2 (pralmorelin), GHRP-3, GHRP-4, GHRP-5, GHRP-6, and examorelin (hexarelin).

### 3. GROWTH FACTORS AND GROWTH FACTOR MODULATORS

Including, but not limited to:

- Fibroblast growth factors (FGFs)
- Hepatocyte growth factor (HGF)
- Insulin-like growth factor 1 (IGF-1) and its analogues
- Mechano growth factors (MGFs)
- Platelet-derived growth factor (PDGF)
- Thymosin-B4 and its derivatives e.g. TB-500
- Vascular endothelial growth factor (VEGF)

and other growth factors or growth factor modulators affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity or fibre type switching.



### **S3** BETA-2 AGONISTS

### PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

### All prohibited substances in this class are Specified Substances.

All selective and non-selective beta-2 agonists, including all optical isomers, are prohibited.

A non-exhaustive list of examples includes, but is not limited to:

- Aformoterol
- Fenoterol
- Formoterol
- Higenamine (Prohibited In-Competition only)
- Indacaterol
- Levosalbutamol
- Olodaterol
- Procaterol

- Reproterol
- Salbutamol
- Salmeterol
- Terbutaline
- Tretoquinol (trimetoquinol)
- Tulobuterol
- Vilanterol

### **EXCEPTIONS:**

- Inhaled salbutamol (albuterol): maximum 1600 micrograms over 24 hours in divided doses not to exceed 600 micrograms over 8 hours starting from any dose.
- Inhaled formoterol: maximum delivered dose of 54 micrograms over 24 hours.
- Inhaled salmeterol: maximum 200 micrograms over 24 hours.
- Inhaled vilanterol: maximum 25 micrograms over 24 hours.

A Therapeutic Use Exemption (TUE) should be sought for doses in excess of these limits or when using with a diuretic.

**NOTE:** The presence in urine of salbutamol in excess of 1000 ng/mL or formoterol in excess of 40 ng/mL is not consistent with therapeutic use of the substance and will be considered as an Adverse Analytical Finding (AAF) unless the Athlete proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of a therapeutic dose (by inhalation) up to the maximum dose indicated above.

### **S4** HORMONE AND METABOLIC MODULATORS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

**Prohibited substances in classes S4.1 and S4.2 are** *Specified Substances.* Those in classes S4.3 and S4.4 are Non-Specified Substances.

The following hormone and metabolic modulators are prohibited.



### 1. AROMATASE INHIBITORS

Including, but not limited to:

- 2-Androstenol (5)-androst-2-en-17-ol)
- 2-Androstenone (5∫-androst-2-en-17-one)
- 3-Androstenol (5∫-androst-3-en-17-ol)
- 3-Androstenone (5∫-androst-3-en-17-one)
- 4-Androstene-3,6,17 trione (6-oxo)
- Aminoglutethimide
- Anastrozole

- Androsta-1,4,6-triene-3,17-dione (androstatrienedione)
- Androsta-3,5-diene-7,17-dione (arimistane)
- Exemestane
- Formestane
- Letrozole
- Testolactone

# 2. ANTI-ESTROGENIC SUBSTANCES [ANTI-ESTROGENS AND SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)]

Including, but not limited to:

- Bazedoxifene
- Clomiphene/Clomifene
- Cyclofenil
- Fulvestrant

- Ospemifene
- Raloxifene
- Tamoxifen
- Toremifene

### 3. AGENTS PREVENTING ACTIVIN RECEPTOR IIB ACTIVATION

Including, but not limited to:

- Activin A-neutralizing antibodies
- Activin receptor IIB competitors such as:
  - Decoy activin receptors (e.g. ACE-031)
- Anti-activin receptor IIB antibodies (e.g. bimagrumab)
- Myostatin inhibitors such as:
  - Agents reducing or ablating myostatin expression
  - Myostatin-binding proteins
     (e.g. follistatin, myostatin propeptide)
  - Myostatin or precursor-neutralizing antibodies (e.g. apitegromab, domagrozumab, landogrozumab, stamulumab)

### 4. METABOLIC MODULATORS

- **4.1** Activators of the AMP-activated protein kinase (AMPK), e.g. AICAR, SR9009; and peroxisome proliferator-activated receptor delta (PPARδ) agonists, e.g., 2-[2-methyl-4-[(4-methyl-2-[4-(trifluoromethyl) phenyl]thiazol-5-yl]methylthio]phenoxy] acetic acid (GW1516, GW501516)
- **4.2** Insulins and insulin-mimetics
- 4.3 Meldonium
- 4.4 Trimetazidine



### **S5** DIURETICS AND MASKING AGENTS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

### All prohibited methods in this class are Specified Substances.

The following diuretics and masking agents are prohibited, as are other substances with a similar chemical structure or similar biological effect(s).

Including, but not limited to:

- Desmopressin; probenecid; plasma expanders, e.g. intravenous administration of albumin, dextran, hydroxyethyl starch and mannitol.
- Acetazolamide; amiloride; bumetanide; canrenone; chlortalidone; etacrynic acid; furosemide; indapamide; metolazone; spironolactone; thiazides (e.g. bendroflumethiazide, chlorothiazide and hydrochlorothiazide); torasemide; triamterene and vaptans (e.g. tolvaptan).

and other substances with a similar chemical structure or similar biological effect(s).

#### **EXCEPTIONS:**

- Drospirenone; pamabrom; and topical ophthalmic administration of carbonic anhydrase inhibitors (e.g. dorzolamide, brinzolamide);
- Local administration of felypressin in dental anaesthesia.

**NOTE:** The detection in an Athlete's Sample at all times or In-Competition, as applicable, of any quantity of the following substanc- es subject to threshold limits: formoterol, salbutamol, cathine, ephedrine, methylephedrine and pseudoephedrine, in conjunction with a diuretic or masking agent (except topical ophthalmic administration of a carbonic anhydrase inhibitor or local administration of felypressin in dental anesthesia), will be considered as an Adverse Analytical Finding (AAF) unless the Athlete has an approved Therapeutic Use Exemption (TUE) for both that substance as well as the diuretic or masking agent.

### PROHIBITED METHODS

PROHIBITED AT ALL TIMES (IN- AND OUT-OF-COMPETITION)

All prohibited methods in this class are *Non-Specified* except methods in M2.2. which are *Specified Methods*.

### M1. MANIPULATION OF BLOOD AND BLOOD COMPONENTS

The following are prohibited:

- The Administration or reintroduction of any quantity of autologous, allogenic (homologous) or heterologous blood, or red blood cell products of any origin into the circulatory system, except the recipient's own blood withdrawn and reintroduced during plasmapheresis associated with plasma donation for humanitarian purposes.
- 2. Artificially enhancing the uptake, transport or delivery of oxygen. Including, but not limited to: Perfluorochemicals; efaproxiral (RSR13); voxelotor and modified haemoglobin products, e.g. haemoglobin-based blood substitutes and microencapsulated haemoglobin products, excluding supplemental oxygen by inhalation.
- 3. Any form of intravascular manipulation of the blood or blood components by physical or chemical means.



### **M2. CHEMICAL AND PHYSICAL MANIPULATION**

The following are prohibited:

- Tampering, or Attempting to Tamper, to alter the integrity and validity of Samples collected during Doping Control. Including, but not limited to:
  Sample substitution and/or adulteration, e.g. addition of proteases to Sample.
- 2. Intravenous infusions and/or injections of more than a total of 100 mL per 12-hour period except for those legitimately received in the course of hospital treatments, surgical procedures, clinical diagnostic investigations, and/or those that are determined to be medically justified and within the standard of care by a licensed physician and administered by a licensed medical professional.

### **M3. GENE AND CELL DOPING**

The following, with the potential to enhance sport performance, are prohibited:

- The use of nucleic acids or nucleic acid analogues that may alter genome sequences and/or alter gene expression by any mechanism. This includes but is not limited to gene editing, gene silencing and gene transfer technologies.
- 2. The use of normal or genetically modified cells.



PROHIBITED LIST

### **S6** STIMULANTS

### PROHIBITED IN-COMPETITION

### All prohibited substances in this class are Specified Substances. Substances of Abuse in this section:

cocaine, methylenedioxymethamphetamine (MDMA, "ecstasy"), dimethylamphetamine (DMA), benzylpiperazine (BZP), Metamfetamine/d-/, p-methylamfetamine, methylenedioxyamphetamine (MDA).

All stimulants, including all optical isomers, e.g., d- and l- where relevant, are prohibited. Stimulants include:

- 2-phenylpropan-1-amine(ßmethylphenylethylamin, BMPEA)
- 3-Methylhexan-2-amine (1,2-dimethylpentylamine)
- · 4-fluoromethylphenidate
- 4-Methylhexan-2-amine (methylhexaneamine,

1,3-dimethylamylamine, 1,3-DMAA)

- 4-Methylpentan-2-amine (1,3-dimethylbutylamine)
- 5-Methylhexan-2-amine
   [1,4-dimethylpentylamine,
   1,4-dimethylamylamine,
   1,4-DMAA
- Adrafinil (e.g. Hydrafinil (fluorenol))
- Amfepramone
- Amfetamine
- Amfetaminil
- Amiphenazole
- Benfluorex
- Benzfetamine
- Benzylpiperazine
- Bromantan
- Cathine\*\*
- Cathinone and its analogues, e.g. mephedrone, methedrone, and

∫-pyrrolidinovalerophenone

- Clobenzorex
- Cocaine
- Cropropamide
- Crotetamide
- Dimetamfetamine (dimethylamphetamine)

- Ephedrine\*\*\*
- Epinephrine\*\*\*\* (adrenaline)
- Etamivan
- Ethylphenidate
- Etilamfetamine
- Etilefrine
- Famprofazone
- Fenbutrazate
- Fencamfamin
- Fencamine
- Fenetylline
- Fenfluramine
- Fenproporex
- Fonturacetam [4-phenylpiracetam [carphedon]]
- Furfenorex
- Heptaminol
- Hydroxyamfetamine (parahydroxyamphetamine)
- Isometheptene
- Levmetamfetamine
- Lisdexamfetamine
- Meclofenoxate
- Mefenorex
- Mephentermine
- Mesocarb
- Metamfetamine[d-]
- Methylenedioxyamphetamine
- Methylenedioxymethamphetamine
- Methylephedrine\*\*\*

- Methylnaphthidate
  - ((±)-methyl-2-(naphthalen-2-yl)-2- (piperidin-2-yl) acetate)
- p-methylamfetamine
- Modafinil (e.g. Hydrafinil (fluorenol))
- Nikethamide
- Norfenefrine
- Norfenfluramine
- Octodrine (1,5-dimethylhexylamine)
- Octopamine
- Oxilofrine (methylsynephrine)
- Pemoline
- Pentetrazol
- Phendimetrazine
- · Phenethylamine and its derivatives
- Phenmetrazine
- Phenpromethamine
- Phentermine
- Prenylamine
- Prolintane
- Propylhexedrine
- Pseudoephedrine\*\*\*\*\*
- Selegiline
- Sibutramine
- Solriamfetol
- Strychnine
- Tenamfetamine (methylenedioxyamphetamine)
- Tuaminoheptane

and other substances with a similar chemical structure or similar biological effect(s).

### **EXCEPTIONS:**

- Clonidine;
- Imidazoline derivatives for dermatological, nasal or ophthalmic use (e.g. brimonidine, clonazoline, fenoxazoline, indanazoline, naphazoline, oxymetazoline, tetryzoline, tramazoline, xylometazoline) and those stimulants included in the 2024 Monitoring Program\*.
  - \* Bupropion, caffeine, nicotine, phenylephrine, phenylpropanolamine, pipradrol, synephrine: These substances are included in the 2024 Monitoring Program and are not considered Prohibited



Substances.

- \*\* Cathine (d-norpseudoephedrine) and its I-isomer: Prohibited when its concentration in urine is greater than 5 micrograms per millilitre.
- \*\*\* Ephedrine and methylephedrine: Prohibited when the concentration of either in urine is greater than 10 micrograms per millilitre.
- \*\*\*\* Epinephrine (adrenaline): Not prohibited in local administration, e.g. nasal, ophthalmologic, or co-administration with local anaesthetic agents.
- \*\*\*\*\* Pseudoephedrine: Prohibited when its concentration in urine is greater than 150 micrograms per millilitre.

### **S7** NARCOTICS

### PROHIBITED IN-COMPETITION

### All substances in this class are Specified Substances and are considered Substances of Abuse.

The following narcotics, including all optical isomers, e.g. d- and l- where relevant, are prohibited.

- Buprenorphine
- Dextromoramide
- Diamorphine (heroin)
- Fentanyl and its derivatives
- Hydromorphone

- Methadone
- Morphine
- Nicomorphine
- Oxycodone
- Oxymorphone

- Pentazocine
- Pethidine
- Tramadol

### **S8** INTENTIONALLY BLANK

### **S9** GLUCOCORTICOIDS

PROHIBITED IN-COMPETITION

### All prohibited substances in this class are Specified Substances.

All glucocorticoids are prohibited In-Competition when administered by any injectable (including intravenous, intramuscular, and intra-articular), oral (including oromucosal (e.g., buccal, gingival, sublingual)), or rectal route except for those legitimately prescribed by a licensed physician, received for a medically-justified purpose within the standard of care, and administered by a licensed medical professional.

Examples of glucocorticoids include, but are not limited to:

- Beclometasone
- Betamethasone
- Budesonide
- Ciclesonide
- Cortisone
- Deflazacort

- Dexamethasone
- Flucortolone
- Flunisolide
- Fluticasone
- Hydrocortisone
- Methylprednisolone

- Mometasone
- Prednisolone
- Prednisone
- Triamcinolone acetonide

Other routes of administration (including inhaled and topical: dental-intracanal, dermal, intranasal, op thalmological, otic, and perianal) are not prohibited when used within the manufacturer's licensed dose and therapeutic indications.

