

The Lessons of Crisis:

Olympic Doping Regulation During the 1980s

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*Editors' Note: We'd like to take this opportunity to introduce Thomas Hunt, Ph.D. to the readers of **Iron Game History**. Dr. Hunt, who also has a law degree, is now an assistant editor on the **IGH** staff and will be working with us in the H. J. Lutcher Stark Center for Physical Culture and Sports as a curator. He is also teaching sport history for the Department of Kinesiology and Health Education here at The University of Texas. We are delighted to have Dr. Hunt on the staff of **IGH** and the Stark Center, and we are pleased to have this article, which is adapted from his doctoral dissertation.*

As demonstrated by the alarming number of drug scandals that seemingly appear in each fresh edition of our newspapers, performance-enhancing substances are increasingly noticeable features of contemporary sport and physical culture. Despite the sincere hopes of athletic officials, governmental leaders, and a large portion of the general public to deal with this situation, most current initiatives fail to adequately incorporate the lessons provided by previous attempts at the regulation of doping in sport. Because the Olympics are concurrently the world's most celebrated athletic spectacle and the one with the most extensive record of dealing with doping-related issues, this article traces the regulatory response of policymakers within the international Olympic movement to performance-enhancing drugs during the 1980s—arguably the most significant period in the history of the movement with regard to the construction of a global anti-doping structure.

While a large part of the 1980s was marked by

alternating improvements and relapses in regulatory development, the 1988 Seoul Olympics served as a turning point for doping control policy.¹ Canadian sprinter Ben Johnson's positive test for the anabolic steroid stanozolol in the wake of a world record-setting one-hundred meter sprint at those competitions focused public attention on the issue in a profound way. Government officials, taking note of this response, initiated investigations into the conduct of the movement, thereby pressuring Olympic officials to reform their policies.² Although it would take several years to be implemented, the agenda for a gradual expansion and consolidation of Olympic drug control policies was set as a result of these developments.³



Juan Antonio Samaranch of Spain served as president of the IOC from 1980 to 2001. He preferred to be called "Your Excellency."



In the aftermath of a silver medal performance in the 1976 Olympic marathon, U.S. runner Frank Shorter was asked whether he planned to compete in the upcoming 1980 Moscow Games. His response highlighted the degree to which performance-enhancing drugs had become necessary components to success in international sport. "Yeah," he affirmed, so long as "I find some good doctors."⁴ Policymakers in the Olympics were also attuned to this development. The chief American physician at the 1976 Games, John Anderson, for instance, predicted that "you'll see much more of a problem in doping control [in Moscow]." These remarks were informed by the IOC's dedication to developing expensive testing equipment while concurrently legalizing known stimulants such as the asthma medication terbutaline. The legalistic

nature of the IOC's approach moreover ignored the potential of education to redirect athletes' moral orientations toward the problem. Unless rectified, these deficiencies, Anderson argued, might cause a scandal in Moscow large enough to threaten the future of the movement. "I think in 1980," he stated, "it will become evident . . . that man has gone a bit too far in manipulating individuals, and it would seem to this observer that 1984 indeed will come [and go] without the Olympic Games."⁵

Despite such cynicisms, several sport administrators continued to claim that a slight retooling of the controls would curtail the use of ergogenic aids. Victor Rogozhin, chairman of the Moscow Games Organizing Committee's anti-doping panel, asserted prior to the event's opening that "we have conducted important research on improving methods of detecting steroid hormones and reducing the time necessary for the test. This will make it possible not only to increase the number of tests for this group of drugs, but also to carry them out according to the regulations established . . . by the Medical Commission of the [IOC]."⁶ Even USOC physician Daniel Hanley admitted that "the capacity of the labs in Moscow seems to be perfectly adequate, and the testing will be carefully overseen by the Medical Commission."⁷

Nevertheless, athletes and unscrupulous administrators on both sides of the Iron Curtain busied themselves with identifying loopholes in testing procedures. In order for their athletes to avoid detection, East German scientists implemented a protocol whereby administrations of detectable anabolic steroids were replaced with injections of Testosterone-Depot in the final weeks before contests. Significantly, these doses could not be differentiated through urinalysis from hormones normally found in the human body.⁸ Describing this "testosterone loophole," a USOC medical staff member remarked that "athletes seem to have the timing down to the minute as to how soon they have to 'get off' a drug to avoid detection." A large infrastructure was seen by him as a component of the "cat-and-mouse-game." "You'd also swear," the staff member continued, that "they had Ph.D. pharmacologists working for them to figure out how to beat tests almost faster than the anti-doping scientists can make them more sensitive."⁹

Fuel to these suspicions was provided by the defection of an East German sprinter, Renate Neufeld, who brought along the pills and powders that her coaches had required her to use; chemical analyses later deter-

mined they were anabolic steroids. "The trainer told me the pills would make me stronger and faster and that there were no side effects," she explained. Describing the extent of the state-sponsored program, Neufeld declared, "We all lived the same way, the general approach is the same."¹⁰ "You don't know what is being tried out," corroborated elite East German swimmer—and fellow defector—Renate Vogel, as to "what ingredients there are in the food, what is being injected. You cannot take a stand against it."¹¹

Despite their 1976 proposal to merely study the potential of performance-enhancing drugs in an expanded medical program, American officials took a more progressive stance in the run-up to the Moscow Games.¹² In November of 1978, a new USOC medical taskforce recommended the implementation of comprehensive drug tests at all national championships. Describing the proposal as "a positive step," USOC Executive Director Don Miller asserted that "we have to identify where drugs are being used to centralize our effort. The only way you can do this is through an effective drug testing program."¹³ Other Western nations also enacted more rigorous protocols. Still, the diffuse international sport system, in which individual organizations were free to enact their own preferences, reduced the likelihood that a global Olympic doping strategy could be created. IOC Medical Commission member Dr. Arnold Beckett thus complained that "one of the troubles is that there are no totally universal controls."¹⁴

The 1980 Winter Games in Lake Placid, New York, benefited, according to some officials, from a greatly enhanced drug-testing protocol. Dr. Robert Dugal, co-director of the competition's doping control effort asserted that "the system we're using is more sophisticated now. It can separate drugs more precisely and isolate the compounds." His colleague, Dr. Michel Bertrand, went further; "The equipment acts with the precision of radar," he claimed. "We are confident it will be a deterrent, because athletes who think they can risk trying us will be making a mistake."¹⁵ The head physician for the American team, Anthony Daley, likewise stated that "the old saying was the lab could tell you what kind of lettuce you ate for lunch two days before. Now, I think they could tell you how old the lettuce was. The tests are that sensitive."¹⁶

Other members of the Olympic medical establishment were less hopeful. Dr. Beckett of the IOC Medical Commission described the struggle between drug-dependent athletes and doping authorities as "a warfare"

in which actions were “ruthless.” Asked whether his commission was prevailing, he replied, “No. We can only prevent the more serious aspects of the problem. We win some; we lose some. The war goes on.” He perceived a particular danger from the involvement of unscrupulous physicians and sport administrators that either explicitly or implicitly supported the use of ergogenic aids; “Not all the blame should be put on the athletes,” Beckett explained. “It goes much further up. The people behind them should be kicked out.” As for the integrity of the Games, he asserted that “the competition should be between individual athletes, not doctors and pharmacologists. We don’t want sports people used as guinea pigs to boost the doctors behind them.”¹⁷ In the end, Beckett’s pessimism was proved valid, as the protocol employed at the 1980 Winter Olympic Games in Lake Placid produced not a single positive indication of drug use among the 790 doping tests administered.¹⁸

The dangerous combination of new doping techniques and political machinations at the Games alarmed several other IOC officials. Having been asked about her perceptions regarding the movement’s greatest challenges in the period between the Lake Placid Games and the Moscow Summer Olympics, IOC secretary Monique Berlioux answered that it was “the growing influence of politics in sport and the manipulation of athletes with drugs and the fabrication of an artificial human being.”¹⁹ Still, problems related to drug usage would not be clarified in Russia.

In terms of Olympic medical policy, Moscow was a peculiar choice for the Summer Games. Although less notorious than the East German doping regime, it was widely believed that the Soviets sponsored a similar program. Confirmation of systematic doping by the Soviet Union came in 2003 when Dr. Michael Kalinski, former chair of the sport biochemistry department at the State University of Physical Education and Sport in Kiev, Ukraine, released a 1972 document detailing a clandestine Soviet project that concerned the administration of anabolic steroids to elite athletes.²⁰ As the 1980 Games neared, however, Soviet sport officials assured the IOC leadership that their regulations would be strictly applied. Indeed, Soviet efforts impressed Medical Commission chairman Alexandre de Merode during an October 1979 tour of the laboratory facilities in Moscow, which he described as “well-equipped.”²¹ The accuracy of the chairman’s observations was later called into question, however. Dr. Robert Voy, who became chief medical officer of the USOC in 1984, for example, argued that “after seeing their testing facilities in

Moscow firsthand and after realizing the Soviets’ willingness to play these types of games, I simply cannot believe that [de Merode’s] claim.”²²

Whatever the status was regarding the level of equipment, something was deeply flawed in Moscow’s doping preparations. Observers of the competitions, for example, became suspicious of drug usage after seeing the well-developed physiques of the athletes.²³ However, of the 6,868 gas chromatography tests, 2,493 radioimmunoassays, 220 mass spectrometry analyses, and forty-three alcohol tests, no positive results were reported.²⁴ While the IOC leadership basked in the glow of what they called the “purest” Games in the history of the movement, one of their number was not quite ready to be persuaded.²⁵ Manfred Donike, a West German physician on the Medical Commission, privately ran a series of additional tests on some of the urine samples from Moscow. Having developed a new technique for identifying abnormal levels of testosterone, involving measuring its ratio to epitestosterone in urine (Positive tests were set at a 6:1 ratio of the former to the latter.), he determined that the rumors of extensive doping were founded in fact. While he neither repeated the many thousands of tests listed above, nor looked for anything other than the testosterone/epitestosterone ratio, a full twenty percent of the limited number of specimens he tested, including those from an alarming sixteen gold medalists, had ratios that would have resulted in disciplinary proceedings if the screens had been official.²⁶

Consequently, these were not the “purest” Games in history; they were one of the dirtiest. Athletes had not cleaned up—they had simply switched to testosterone and other drugs for which the IOC did not yet have tests. The hypocrisy of the competitions was perhaps best described in a 1989 study by the Australian government: “there is hardly a medal winner at the Moscow Games, certainly not a gold medal winner,” it reported, “who is not on one sort of drug or another: usually several kinds. The Moscow Games might as well have been called the Chemists’ Games.”²⁷ An IOC gadfly, Andrew Jennings, even cited an anonymous KGB colonel as stating that Soviet security officers, posing as IOC anti-doping authorities, had sabotaged the drug tests. Soviet athletes, the colonel professed, “were rescued with [these] tremendous efforts.” In addition to remembering rumors of some involvement by the KGB, a member of the Bulgarian weightlifting delegation asserted that while his team did not receive prior notice of the lack of testing, widespread assurances on the situation were given to other non-boycotting nations. In

other words, Soviet officials were willing to share knowledge regarding the absence of effective screens, but not to the degree that it would impair the ability of their own athletes to finish on top of the Olympic medal tables (The Bulgarian weightlifters were excellent.).²⁸ Whether these claims were true or false, the question, then, was not how the doping policies had succeeded, but why they had failed so miserably.

In the immediate aftermath of the Moscow Games, the IOC Medical Commission continued to push for more robust doping regulations. Chairman de Merode was particularly concerned that the commission's jurisdictional limitation to the Olympic competitions was restraining its success in the field. He therefore pointed out to other IOC members that "it had been hoped to set up some kind of control between the Olympic Games. . . . It was essential to continue the work of approving neutral laboratories for doping testing in order that these could be used to test between Games."²⁹ Dr. Eduardo Hay replied that the politics of the international sport system might make such reform difficult. Preaching caution, he stated that "the Medical Commission of the IOC only had [*sic*] jurisdiction within the Olympic Games at present. It would be necessary to modify its role and work with the [International Federations] and [National Olympic Committees] if this authority were to spread to regional Games or international competitions in general." Explaining the nuances of an additional proposal for further tests, he continued that "rule changes would create major technical problems," so it was "better to retain the present procedure."³⁰ For a time, the IOC supported Hay's position.

De Merode made some progress by May 1982, however, in advocating inter-Games testing. Through negotiations with the international federations, for example, he strengthened an agreement with the International Amateur Athletics Federation for procedures through which laboratories could be recognized, and also established a universal set of sanctions for those IAAF track-and-field athletes caught doping between Olympic competitions.³¹ In addition, the results of Donike's unofficial screens in Moscow convinced de Merode that testosterone must be added to the IOC's list of banned substances. In a 1982 interview, Donike explained that "the increase in testosterone [use] is a direct consequence of the doping control for anabolic steroids. In former times, athletes . . . have to stop the use of anabolic steroids at least three weeks before the event. So they have to substitute. And the agent of choice is testosterone—testosterone injections."³² Due to his efforts, the

IOC announced that it was banning the hormone along with high levels of caffeine.³³

Such medical advances also led to rumors of a major doping cover-up at the 1983 World Track-and-Field Championships in Helsinki, Finland. Given that a number of world records were broken at the event, insiders were convinced of a connection with doping practices. Because the IAAF—rather than the IOC—was in charge of the drug screens, the "insiders" believed that the diffuse regulatory system of international sport played a major role in the controversy. USOC physician Robert Voy specifically blamed Primo Nebiolo, then president of the IAAF, for suppressing the positive tests. "There is no doubt in my mind," he later wrote, "that, at least in 1983, Nebiolo would not have pressed for honest, accurate testing in Helsinki."³⁴ Within the IOC leadership, Canadian delegate Dick Pound likewise stated that "something was very, very wrong with the testing procedures [in Helsinki]." He continued that "my feeling was that . . . there either were positives that were not acted upon by the IAAF or that there were directions not to test for certain compounds or substances." Indeed, according to Pound, "all over the world, people shook their heads and said (the testing) is not credible. . . . [The IAAF] was in serious jeopardy of becoming a laughing-stock because of the results."³⁵

Although test failures were not announced in Helsinki, later testimony revealed that some athletes did, in fact, test positive for performance-enhancing drugs at the competition. As an indirect consequence of the episode, athletes began to understand the accuracy of the new gas chromatography and mass spectrometry screens.³⁶ A controversy ensued at the 1983 Pan-American Games held in Venezuela, when Jeff Michaels, the American weightlifter, tested positive, after which twelve members of the U.S. track-and-field squad left before their events to avoid the screens. While these individuals were vilified, others deliberately performed poorly in order to avoid both vilification and/or drug screens (Only medalists were subject to tests.).³⁷ Several of those who remained were caught and punished.³⁸ Still more damning was the USOC's involvement in warning athletes of the doping protocols. After learning of the new testing procedures upon her arrival in Caracas, the American team's chief of mission, Evie Dennis, asked U.S. officials to alert their athletes of the screens.³⁹

Before the events, a few USOC officials also advocated pre-competition tests to prevent unexpected results. Speaking in July 1983, USOC member Jack Kelly stated that "one of the things that concerns me a

great deal . . . is what would be tremendously embarrassing to the [USOC], and hurt us greatly in future fund-raising, and things of that nature, if several of our athletes were tested for steroids . . . and barred from the Olympic Games.” He continued, “I would hope that the Medical Committee would be doing some preliminary testing with the likely athletes . . . to make sure that, when they go to the Games, that [*sic*] they are going to pass whatever tests may be used.”⁴⁰ USOC President William Simon later admitted that a number of American athletes prior to the 1984 Games failed pre-competition steroid screens, but were allowed to compete because participation was voluntary.⁴¹

The USOC continued its policy of testing American athletes in the period before the opening of the Los Angeles Olympic Games in the summer of 1984.⁴² Although drug screens were considered “formal” at the 1984 American Olympic Trials in the sense that sanctions were required for positive results, Dr. Voy later learned that many athletes were allowed to compete despite affirmative indications of doping.⁴³ In a self-incriminating report that was withheld until after the conclusion of the 1984 Games, USOC President F. Don Miller admitted that eighty-six athletes, including ten at the Olympic trials, tested positive for banned substances before the competitions in Los Angeles. The timing of this disclosure was, of course, likely motivated by the wish to avert pre-Games criticism of the American team.⁴⁴

The other components of the Olympic governance system, including the IOC and the Los Angeles Organizing Committee, were motivated less by moralistic concerns than by economic issues.⁴⁵ Historically, the host of the Olympic Games did not make a profit, and the debt-laden 1976 Montreal Games particularly served as a warning for officials in California that what mattered most was the bottom line.⁴⁶ The U.S.-led boycott of the 1980 Games in Moscow only made the situation worse. Within the IOC, a more commercially astute leader than Lord Killanin was elected to the IOC presidency in 1980 in the person of Spaniard Juan Antonio Samaranch.⁴⁷ Despite Samaranch’s intimate knowledge of financial considerations, the choice was not ideal for those wishing for robust drug regulations. According to Pound, the new president “always thought the IOC Medical Commission was dangerous” in that its activities might threaten the public image of the movement.⁴⁸

In Peter Ueberroth, the Los Angeles Organizing Committee was led by an individual with a similar commitment to economic success. As the former owner of

North America’s second largest travel business, he spearheaded an effort that would eventually yield an unprecedented \$250 million in profits.⁴⁹ Achieving this, however, led Ueberroth to neglect—or even suppress—the results of expensive doping tests that, should a public scandal occur, threaten the monetary contributions to his committee; indeed, the USOC’s refusal to disclose positive tests by U.S. athletes prior to the Games was likely linked to Ueberroth’s fundraising campaign. Due to its concern over expenses, the Los Angeles Organizing Committee additionally announced in April 1983 that it would not test for caffeine or testosterone unless the IOC provided convincing proof that the screens were scientifically justifiable.⁵⁰ In June, Dr. Anthony Daly, Medical Director of Olympic Health Services in Los Angeles, outlined the reasons for this position in a letter to de Merode. “We are certain,” he wrote, “that the goals of the IOC Medical Commission are precisely the same as those of the LAOOC—namely, not to permit dope testing which has not been scientifically validated to be performed on athletes during the 1984 Olympic Games.”⁵¹

By November of 1983, Ueberroth had come to believe that the expensive doping regulations constituted a direct threat to the economic integrity of the competitions. He thus wrote to Samaranch that the “drugs and doctors are not only controlling the Games of the XXIIIrd Olympiad, they are beginning to gain control of the whole Olympic movement.” Ueberroth was especially worried regarding the harmful effects that might derive from public disclosures of positive test results. While admitting that “the use of drugs must be curtailed in every way,” he also asserted that such an orientation had a limit. Implying that economic necessities might trump rigorous adherence to doping regulations in some instances, Ueberroth stipulated that “equally important the dignity of the Olympic movement must be preserved,” a comment which, in retrospect, seems ironic.⁵² To undercut anticipated media stories that “all athletes were doped,” Ueberroth moreover asked the IOC leadership to emphasize the fact that not all competitors were “drug addicts.”⁵³ To Ueberroth, integrity was apparently more a product of financial success than effective doping policy.

Balancing these competing interests, the Los Angeles Organizing Committee acquiesced to testosterone and caffeine screens in late-November 1983 after IOC medical authorities asserted that “these controls were scientifically perfect and not assailable as incorrect.”⁵⁴ Despite the accuracy of the tests, a more omi-

nous situation arose when it became known that some athletes were using a lesser-known substance called Human Growth Hormone (hGH) at the 1983 World Track-and-Field Championships.⁵⁵ Both scientific and economic hurdles prevented its inclusion on the IOC's list of prohibited substances for the Los Angeles Games. The November 1983 Medical Commission report stated that "a method of detection [for hGH] has been almost perfected . . . but there are very serious doubts as to the real effectiveness of this very costly treatment." The document therefore declared that "it would be premature to draw definitive conclusions and in any case it is out of the question that it be controlled in Los Angeles."⁵⁶

Several Olympic leaders also worried that American officials in Los Angeles would treat athletes from the communist-bloc unfairly. Manfred Ewald, a member of the East German sport establishment, thus informed de Merode of the positive attributes of a suggestion by Marat Gramov, the chairman of the Soviet National Olympic Committee, "to carry out doping controls according to politically and geographically balanced view-points."⁵⁷ Conducting "doping controls in 2 laboratories each in socialist and non-socialist countries," as Gramov proposed, would help "bring about a rather correct and objective doping control."⁵⁸ A number of IOC members were, in addition, anxious that U.S. officials might interfere if and when American athletes were detected using performance-enhancing substances. At a July 1984 meeting, Italian delegate Franco Carraro accordingly asked de Merode to provide "assurance that the doping tests in Los Angeles would be held under strict conditions." Although de Merode recognized that "if an American athlete had a test that was positive, the IOC might be taken to Court," he told Carraro that ". . . this consideration should not prevent the IOC from doing its work."⁵⁹ In his pre-Games official report, de Merode downplayed the issue by emphasizing the positive steps that had been taken in Los Angeles. "The laboratory is perfectly equipped," de Merode declared. With respected physician Don Catlin as its director, he continued, "it [the medical facility] has acquired remarkable experience and is perfectly satisfactory." As for the tension between the IOC and the Los Angeles Organizing Committee regarding the testosterone and caffeine screens, de Merode stated that all difficulties had been resolved.⁶⁰ The drugs tests, including testosterone and caffeine screens, would therefore be "objective, firm and comprehensive, and any positive cases would be dealt with in accordance with IOC Rules [*sic*]."⁶¹

De Merode's initial hopes for a set of rigorously

enforced doping protocols in Los Angeles were largely unfulfilled, however. Although U.S. athletes won a spectacular eighty-three gold, sixty-one silver, and thirty bronze medals, not a single American was included on the list of those found to have been doping.⁶² Indeed, the fact that only twelve Olympians tested positive for performance-enhancing drugs showed that the IOC's doping control efforts had made little progress since the 1960s. Unfortunately, the absence of positive drug screens was perhaps due less to Olympic doping policies than with the destruction of test results before they could be disclosed to the public. Before the opening of the Games, the Los Angeles Organizing Committee had refused to provide IOC doping authorities with a safe. This resulted in the theft of a number of medical records at the competitions. With few exceptions, the consequent lack of evidence made sanctions impossible.⁶³

While a few observers suspected that de Merode played a role in the scheme, most who remembered Ueberroth's hostility towards rigorous tests placed the blame squarely on the shoulders of local authorities.⁶⁴ In a 1994 letter, de Merode claimed that the organizing committee's Dr. Tony Daly at first explained that the documents had been shipped to IOC headquarters in Switzerland, but then, after further questioning, admitted that the papers had in fact been destroyed.⁶⁵ Describing his frustration over the episode, IOC member Dick Pound later wrote that the elimination of documents "led to the perception that the IOC was soft on drugs and that it did not want to find positive cases at the Games, but it was the L.A. organizing committee that had removed the evidence before it could be acted on by the IOC."⁶⁶

Local officials, of course, denied any complicity. Dr. Craig Kammerer, the associate director of the laboratory that handled the tests, claimed that "we were totally puzzled initially and figured that something must be going on, politically or a cover up."⁶⁷ As a self-described "cynical idealist," Pound also did not absolve the IOC leadership from all responsibility.⁶⁸ According to Pound, IOC President Samaranch conspired with his IAAF counterpart, Primo Nebiolo, to delay the announcement of a positive test result to make sure that the competitions in Los Angeles ended without significant controversy.⁶⁹ Elaborating on their motivations, Medical Commission member Dr. Arnold Beckett likewise asserted that "it would have done quite a lot of damage if five or six . . . of the positives . . . had led to the medal winners. . . . Some of the federations and IOC are happy to show that they're doing something in getting some positives, but they don't want too many

because that would damage the image of the Games.” As a result, Beckett elaborated, “We [the IOC Medical Commission] took the responsibility of not revealing [the destruction of the documents] publicly.”⁷⁰ Image was thus of primary importance to the Samaranch presidency; unfortunately, it came at the expense of regulatory responsibility and integrity.⁷¹

Several new forms of doping in Los Angeles highlighted the dynamic nature of the drug problem. Anticipatory athletes switched to alternative performance-enhancing techniques by the time a new drug screen was developed. At the 1984 Games, five U.S. cyclists who had medaled at the competitions received blood transfusions prior to their races from prominent cardiologist Herman Falsetti.⁷² The idea of blood transfusion was to preserve an athlete’s red blood cells and then introduce them into his or her body immediately prior to a competition. Because these cells carry oxygen, the reintroduction (through what is technically known as autologous transfusion) of a half-liter of blood provides the body with a roughly equivalent amount of oxygen per minute.⁷³ Although the practice is one technique to undertake what is now popularly called “blood doping,” the procedure did not violate IOC regulations in place at the time. As Thomas Dickson, the team physician who witnessed the transfusions, put it, “They were certainly unethical, [but] whether they were illegal is something I still don’t know.”⁷⁴

Whatever the moral dimensions of the episode, the United States Cycling Federation (USCF), as the national governing body for the sport, split the difference between apathy and responsiveness. While an apology to the American public was issued and the officials involved in administering the transfusions were punished, federation president David Prouty announced that “no athletes will be held or considered responsible.” Describing the cyclists as unsuspecting victims, he went on to assert that “nothing should be considered to have tainted any medal” won by them.⁷⁵ Seeking a more active position, USOC Executive Director Don Miller wished to supplement the IOC’s antiquated rules with policies promulgated by his own organization. Speaking at a February 1985 USOC meeting, he argued that “it has not been declared illegal in the past by the IOC medical commission, simply because . . . there was no medical tests [*sic*] for blood doping, and that almost invalidates our whole system of laws.” Miller recommended, therefore, a “proposal to the [USOC] Executive Board that blood doping is, in fact, a form of doping, and is illegal.” After all, he concluded, “there are other methods of

proving that people have broken the law.”⁷⁶ Members of the American government also took notice. Citing public health concerns derived from the fact that several of the cyclists who received transfusions in Los Angeles became ill, National Institutes of Health official Dr. Harvey Klein urged Olympic administrators to prohibit blood doping at their competitions.⁷⁷

By this time, the IOC also realized that the doping crisis was quickly spinning out of control. Swedish delegate Matts Carlgren told his counterparts at a December 1984 IOC session that he “believed that the main problem concerning the future of the Olympic Games was not participation but doping.” Proposing more funds for research, he argued that “the IOC ought to lead in this domain and analyze the threats drugs impose on sport.”⁷⁸ Several months after Miller’s criticism of the IOC’s position towards performance-enhancing blood transfusions, de Merode announced that his commission had decided to ban the practice. “Although no feasible detection test is available at the present time,” he argued, “the Commission feels that it is a question of ethics.”⁷⁹ Describing the difficult negotiation process through which the policy was promulgated, he stated that “with this aim in mind, the Commission had met with representatives from the [International Association of Athletics Federations, the International Amateur Boxing Association, the international governing body of swimming and the International Weightlifting Federation].” Enforcement of the rule, according to de Merode, would be no less complicated: “Steps should be taken, in collaboration with the IFs,” he concluded, “for the standardization of methods and procedures of the laboratories.”⁸⁰

Unofficial tests in Los Angeles also indicated that a majority of the athletes competing in the pentathlon used beta-blockers during the event.⁸¹ Indeed, before the Games, the IOC Medical Commission had expressly permitted their dispensation for “therapeutic” purposes upon presentation of certificates issued by athletes’ personal physicians.⁸² By reducing blood pressure, heart rate, and blood vessel constriction, these drugs, normally used to treat hypertension and heart disease, steadied the hands of pentathletes during the shooting components of their competitions.⁸³ While nothing could be done about the situation in California, de Merode declared the following year that the administration of beta-blockers for the purpose of enhancing performance would be considered, like blood doping, an illegitimate practice.⁸⁴

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nous situation arose when it became known that some athletes were using a lesser-known substance called Human Growth Hormone (hGH) at the 1983 World Track-and-Field Championships.⁵⁵ Both scientific and economic hurdles prevented its inclusion on the IOC's list of prohibited substances for the Los Angeles Games. The November 1983 Medical Commission report stated that "a method of detection [for hGH] has been almost perfected . . . but there are very serious doubts as to the real effectiveness of this very costly treatment." The document therefore declared that "it would be premature to draw definitive conclusions and in any case it is out of the question that it be controlled in Los Angeles."⁵⁶

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enforced doping protocols in Los Angeles were largely unfulfilled, however. Although U.S. athletes won a spectacular eighty-three gold, sixty-one silver, and thirty bronze medals, not a single American was included on the list of those found to have been doping.⁶² Indeed, the fact that only twelve Olympians tested positive for performance-enhancing drugs showed that the IOC's doping control efforts had made little progress since the 1960s. Unfortunately, the absence of positive drug screens was perhaps due less to Olympic doping policies than with the destruction of test results before they could be disclosed to the public. Before the opening of the Games, the Los Angeles Organizing Committee had refused to provide IOC doping authorities with a safe. This resulted in the theft of a number of medical records at the competitions. With few exceptions, the consequent lack of evidence made sanctions impossible.⁶³

While a few observers suspected that de Merode played a role in the scheme, most who remembered Ueberroth's hostility towards rigorous tests placed the blame squarely on the shoulders of local authorities.⁶⁴ In a 1994 letter, de Merode claimed that the organizing committee's Dr. Tony Daly at first explained that the documents had been shipped to IOC headquarters in Switzerland, but then, after further questioning, admitted that the papers had in fact been destroyed.⁶⁵ Describing his frustration over the episode, IOC member Dick Pound later wrote that the elimination of documents "led to the perception that the IOC was soft on drugs and that it did not want to find positive cases at the Games, but it was the L.A. organizing committee that had removed the evidence before it could be acted on by the IOC."⁶⁶

Local officials, of course, denied any complicity. Dr. Craig Kammerer, the associate director of the laboratory that handled the tests, claimed that "we were totally puzzled initially and figured that something must be going on, politically or a cover up."⁶⁷ As a self-described "cynical idealist," Pound also did not absolve the IOC leadership from all responsibility.⁶⁸ According to Pound, IOC President Samaranch conspired with his IAAF counterpart, Primo Nebiolo, to delay the announcement of a positive test result to make sure that the competitions in Los Angeles ended without significant controversy.⁶⁹ Elaborating on their motivations, Medical Commission member Dr. Arnold Beckett likewise asserted that "it would have done quite a lot of damage if five or six . . . of the positives . . . had led to the medal winners. . . . Some of the federations and IOC are happy to show that they're doing something in getting some positives, but they don't want too many

because that would damage the image of the Games.” As a result, Beckett elaborated, “We [the IOC Medical Commission] took the responsibility of not revealing [the destruction of the documents] publicly.”⁷⁰ Image was thus of primary importance to the Samaranch presidency; unfortunately, it came at the expense of regulatory responsibility and integrity.⁷¹

Several new forms of doping in Los Angeles highlighted the dynamic nature of the drug problem. Anticipatory athletes switched to alternative performance-enhancing techniques by the time a new drug screen was developed. At the 1984 Games, five U.S. cyclists who had medaled at the competitions received blood transfusions prior to their races from prominent cardiologist Herman Falsetti.⁷² The idea of blood transfusion was to preserve an athlete’s red blood cells and then introduce them into his or her body immediately prior to a competition. Because these cells carry oxygen, the reintroduction (through what is technically known as autologous transfusion) of a half-liter of blood provides the body with a roughly equivalent amount of oxygen per minute.⁷³ Although the practice is one technique to undertake what is now popularly called “blood doping,” the procedure did not violate IOC regulations in place at the time. As Thomas Dickson, the team physician who witnessed the transfusions, put it, “They were certainly unethical, [but] whether they were illegal is something I still don’t know.”⁷⁴

Whatever the moral dimensions of the episode, the United States Cycling Federation (USCF), as the national governing body for the sport, split the difference between apathy and responsiveness. While an apology to the American public was issued and the officials involved in administering the transfusions were punished, federation president David Prouty announced that “no athletes will be held or considered responsible.” Describing the cyclists as unsuspecting victims, he went on to assert that “nothing should be considered to have tainted any medal” won by them.⁷⁵ Seeking a more active position, USOC Executive Director Don Miller wished to supplement the IOC’s antiquated rules with policies promulgated by his own organization. Speaking at a February 1985 USOC meeting, he argued that “it has not been declared illegal in the past by the IOC medical commission, simply because . . . there was no medical tests [*sic*] for blood doping, and that almost invalidates our whole system of laws.” Miller recommended, therefore, a “proposal to the [USOC] Executive Board that blood doping is, in fact, a form of doping, and is illegal.” After all, he concluded, “there are other methods of

proving that people have broken the law.”⁷⁶ Members of the American government also took notice. Citing public health concerns derived from the fact that several of the cyclists who received transfusions in Los Angeles became ill, National Institutes of Health official Dr. Harvey Klein urged Olympic administrators to prohibit blood doping at their competitions.⁷⁷

By this time, the IOC also realized that the doping crisis was quickly spinning out of control. Swedish delegate Matts Carlgren told his counterparts at a December 1984 IOC session that he “believed that the main problem concerning the future of the Olympic Games was not participation but doping.” Proposing more funds for research, he argued that “the IOC ought to lead in this domain and analyze the threats drugs impose on sport.”⁷⁸ Several months after Miller’s criticism of the IOC’s position towards performance-enhancing blood transfusions, de Merode announced that his commission had decided to ban the practice. “Although no feasible detection test is available at the present time,” he argued, “the Commission feels that it is a question of ethics.”⁷⁹ Describing the difficult negotiation process through which the policy was promulgated, he stated that “with this aim in mind, the Commission had met with representatives from the [International Association of Athletics Federations, the International Amateur Boxing Association, the international governing body of swimming and the International Weightlifting Federation].” Enforcement of the rule, according to de Merode, would be no less complicated: “Steps should be taken, in collaboration with the IFs,” he concluded, “for the standardization of methods and procedures of the laboratories.”⁸⁰

Unofficial tests in Los Angeles also indicated that a majority of the athletes competing in the pentathlon used beta-blockers during the event.⁸¹ Indeed, before the Games, the IOC Medical Commission had expressly permitted their dispensation for “therapeutic” purposes upon presentation of certificates issued by athletes’ personal physicians.⁸² By reducing blood pressure, heart rate, and blood vessel constriction, these drugs, normally used to treat hypertension and heart disease, steadied the hands of pentathletes during the shooting components of their competitions.⁸³ While nothing could be done about the situation in California, de Merode declared the following year that the administration of beta-blockers for the purpose of enhancing performance would be considered, like blood doping, an illegitimate practice.⁸⁴

As demonstrated by its aggressive reactions to

the blood doping scandal in Los Angeles, the 1984 Games served as a focusing event for the USOC. In March 1985, the organization announced a comprehensive plan calling for rigorous drug screens at all major events in the period before the 1988 Olympics opened in Seoul. In terms of punitive measures, the proposal included an escalating set of punishments; first offenses would result in one-year suspensions while a four-year suspension, which would preclude participation in Seoul, would follow a second finding of guilt. "Wherever the athletes compete," said USOC Director of Sports Medicine Kenneth Clark, "they'll be tapped on the shoulder and told it's time for the urine sample." While the USOC leadership was eager to accept the plan, the support of the national federations that governed individual sports was less certain. To his credit, USOC President David Prouty announced that the suggestion was "terrific" and that "philosophically, it meshes perfectly with what we want to accomplish."⁸⁵ By June 1985, however, the plan, which would go into effect at that month's National Sports Festival in Baton Rouge, Louisiana, had been changed to meet the approval of the national federations.⁸⁶ Although the USOC committed \$800,000 to a comprehensive testing regime, the enforcement mechanisms were significantly weakened. Rather than an escalating set of punishments controlled by the USOC, athletes would be sanctioned only at the behest of the national governing bodies of their respective sports.⁸⁷

These modest steps, though, did little to improve the situation in the four years before the next Olympic Games. Nationalist forces again played a part in weakening doping regulations in international sport at the 1986 Goodwill Games in Moscow. The U.S. team traveling to Russia was told that all competitors would be subjected to rigorous drug inspections after their events. As a result, the Americans reportedly ceased their anabolic steroid cycles well before the competitions. "What they found in Moscow, however," according to Dr. Voy, "was something quite unexpected. There wasn't any drug testing." Apparently, the U.S. squad was deliberately "burned" in order to foster the notion that the communist-bloc, despite its absence in Los Angeles, still reined supreme in elite international athletics.⁸⁸ While such machinations may have had perceived short-term political benefits, many Soviet athletes, like those in East Germany, were afflicted with subsequent medical problems. Prior to the 1984 Games, an unofficial study cited the wide-spread administration of performance-enhancing drugs to Soviet athletes as the primary reason for

their enormously high mortality rate, which had accelerated since the mid-1970s.⁸⁹ The actions by Soviet administrators at the 1986 Goodwill Games demonstrated that the report had little effect in moderating their policies.

Many of the national governing bodies and international federations that governed individual sports were equally reluctant to toughen their enforcement of doping regulations. In 1987, both the IAAF and its American counterpart at the national level, The Athletics Congress (TAC), managed to circumvent positive test results. At that year's National Outdoor Championships in San Jose, California, TAC officials avoided a finding of guilt for American discus champion John Powell by citing minor procedural errors in labeling his "A" and "B" specimens by Dr. Harmon Brown, head of the organization's medical committee.⁹⁰ Later that year, the IAAF weakened their testing system at the World Track-and-Field Championships in Rome by replacing IOC doping authorities Dr. Manfred Donike and Dr. Arnold Beckett with several less qualified and aggressive individuals.⁹¹ Demonstrating how far unscrupulous members of the elite sports establishment would go to avoid detection, Charlie Francis, then coach of Canadian sprinter Ben Johnson, told a colleague at the event that his protégé had gonorrhea to rationalize the presence of the steroid masking agent probenecid (which could be justifiably used as an adjunct in treating the disease) in his system.⁹²

Still, Samaranch was confident enough to claim in January 1987, "You may rest assured that we shall be very firm where doping is concerned. . . . It is a form of cheating which we cannot tolerate."⁹³ At the 1988 Winter Olympics in Calgary, he continued this theme. "Above all," he exclaimed, "such behavior makes a mockery of the very essence of sport, the soul of what we, like our predecessors, consider sacrosanct ideals." Samaranch thus resolved, "Doping is alien to our philosophy, to our rules of conduct. We shall never tolerate it."⁹⁴ Of course, the IOC's actions in the run-up to the 1988 Games often did not live up to Samaranch's lofty words. In an episode eerily similar to the theft of medical records at the Los Angeles Games, de Merode later admitted that he destroyed a list of names of fifty-five athletes who had been detected doping in the six months prior to the opening of the 1988 Games in Seoul.⁹⁵

Despite President Samaranch's assurances Francis's explanation in Rome following Johnson's positive test for probenecid foreshadowed deeper troubles for the Canadian sprinter at the Seoul Games. On September

24, 1988, Johnson defeated American track star Carl Lewis in the one-hundred meter sprint, lowering his previous world record to 9.79 seconds. Two days later, Francis, "about 42 hours after my life's greatest moment," was awakened by a knock on his door from Dave Lyon, manager of Canada's track-and-field squad. "We've got to get over to the Medical Commission," Lyon said. "Ben's tested positive." If the race had been the climactic event of Francis's and Johnson's careers, it was even more important for the future of Olympic doping policy. This was something that Francis himself realized: "The track federations had staged drug tests for 20 years," he later wrote, "and in all that time no major star had failed one—not officially, at any rate."⁹⁶ Upon being told that there was "terrible" news, Dick Pound asked IOC President Samaranch, "Has someone died?" Samaranch replied, "Is worse [*sic*]. . . Ben Johnson. . . He has tested positive."⁹⁷ Although the sprinter initially claimed that someone might have spiked his urine after the race, the IOC found Johnson guilty.

Observers of the event immediately realized the effect of Johnson's positive screen for the future of international sport. In the aftermath of the race, American sprinter Edwin Moses predicted that "this will change the history of the Olympics. . . . This will change a lot of people's lives."⁹⁸ Johnson's financial losses were personally catastrophic. In the immediate aftermath of his record-setting performance, the sprinter's manager, Larry Heidebrecht, said, "The total endorsement power that he has following the world record and gold medal would certainly put him into seven figures. . . . How many millions, I wouldn't want to speculate."⁹⁹ The economic windfall came to a sudden end, however, after the test results were made public. The Italian sportswear company Diadora, mirroring the actions of several other enterprises, immediately canceled its five-year, \$2.4 million contract with the runner, and the Japan-based Kyodo Oil Company terminated a marketing campaign featuring Johnson.¹⁰⁰ Estimating the financial loss for the sprinter, Heidebrecht later stated that the scandal cost Johnson a staggering \$25 million in endorsement deals.¹⁰¹ Johnson, as put by Canadian IOC member James Worrall, had thus "just been killed as an athlete, and probably his complete life has been ruined."¹⁰²

Though Johnson's was the most explosive, there were, of course, several other drug scandals in Seoul. A 1989 issue of the Soviet's official publication *Zmena* stated that a \$2.5 million laboratory aboard a vessel sailing off the Korean coast provided pre-competition screens to Soviet Olympians to make sure they were not

caught through official tests. Also, due to fears that instances of doping would be revealed, several athletes, according to the report, were not allowed to compete.¹⁰³ Without similar facilities, Bulgaria and Hungary both pulled their weightlifting teams from the Games after several of their athletes tested positive for performance-enhancing substances.¹⁰⁴ Not willing to allow a communist-bloc advantage, American sport officials were equally concerned with preventing drug scandals. At that time, U.S. rules had a loophole through which athletes were provided a one-time "inadvertent use" defense in the case of a positive test at a national competition; at the 1988 U.S. Olympic trials, eight track-and-field athletes found to be using the prohibited substance ephedrine escaped punishment through the clause. After a member of a prominent American team competing in Seoul was found with an abnormally high testosterone level, which should have resulted in the disqualification of the entire squad, U.S. officials convinced the IOC that the athlete's normal production of the hormone was elevated.¹⁰⁵

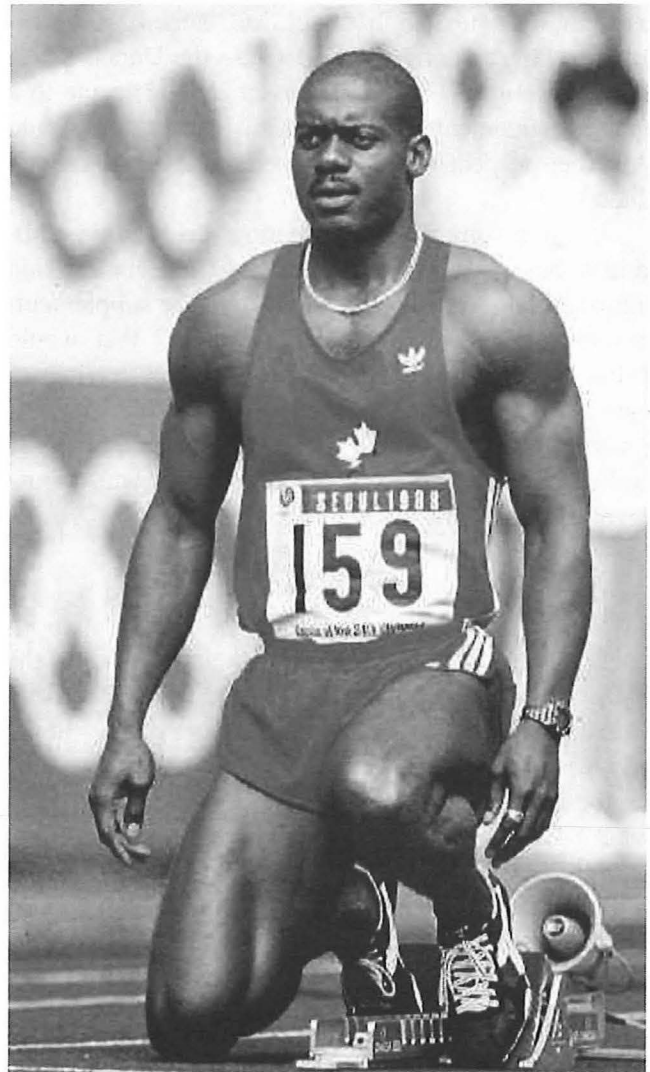
Despite the previous failures to eliminate drugs at their competitions, IOC officials optimistically portrayed these incidents as successes for their doping policies.¹⁰⁶ Taking a positive view that Johnson's test would catalyze future efforts with regard to the issue, Dick Pound proclaimed that "this is a disaster for Ben, a disaster for the Games, and a disaster for track and field. But let's turn this around to make the slate clean and show the world that we do mean business. We are prepared to act." More sensitive to the public perception of the Olympics, President Samaranch was cheerful in an interview: "We are showing that the system works," he proclaimed. "We are showing that my words are not only words, they are facts. We are winning the battle against doping."¹⁰⁷ Experts in the field, however, demonstrated that the president was mistaken. After the Games, USOC chief medical officer Dr. Robert Voy estimated that over fifty percent of those competing in Seoul used some form of performance-enhancing substance.¹⁰⁸

In addition to embarrassing Olympic administrators, the events in Seoul infuriated government officials in the home countries of banned athletes. The Canadian national government appointed Charles W. Dubin, Associate Chief Justice of the Supreme Court of Ontario, as chair of a special commission charged with investigating drugs in athletics.¹⁰⁹ After nearly ten months of public hearings, which resulted in 14,817 pages of testimony from 119 witnesses, Dubin issued his report. Arguing that Olympic doping policies were over-

ly-narrow, he wrote that while “the athletes who cheat must, of course, bear their full share of responsibility. . . . the responsibility cannot be solely theirs.”¹¹⁰ “Until now,” Dubin continued, “the focus has been only on the athletes. It is obvious that a broader net of responsibility will need to be cast. Coaches, physicians, therapists, and others involved in the care and training of athletes cannot escape responsibility for the sorry state of sport today.”¹¹¹ Several IOC officials expressed similar beliefs. Canadian IOC member James Worrall declared, for instance, that “obviously, people behind . . . [Johnson] are responsible. . . . Ben is a lad who will follow instructions. If he is told that something is good, he will believe it.”¹¹²

Exacerbating the situation were the organizational conflicts within the Olympic governance structure that prevented the promulgation and enforcement of a universal set of doping regulations. Describing the diffuse nature of this system, Dubin explained that the “failure of many sport-governing bodies to treat the drug problem more seriously and to take more effective means to detect and deter the use of such drugs has . . . contributed in large measure to the extensive use of drugs by athletes.”¹¹³ Pound similarly believed that Johnson was simply “a pawn in this, the host organization for the substance.” The sprinter’s use of steroids, Worrall concluded, “points up the tragedy of the whole system endemic in international sport.”¹¹⁴ The problems with the Olympics that Johnson’s test exemplified therefore required a wider range of enforcement mechanisms than had been previously provided.

While setting the agenda in terms of this policy development was relatively simple, actually accomplishing a coordinated approach to doping was far more complicated. The first step in this process occurred before the Seoul Games when de Merode chaired the first World Conference on Doping in Sport in late-June 1988. Attended by delegates from twenty-six countries, the meeting put forth the idea of an anti-doping charter to be signed by both private sports authorities and national governments.¹¹⁵ De Merode continued to push for this approach. According to a report of that meeting, he explained that a new working group composed of an international list of sports authorities would be “responsible for working out this strategy so that it is adhered to by all sporting nationals at a governmental level, and by all international authorities.”¹¹⁶ This was a point hammered home by Samaranch in a November 1988 speech. “In order to overcome the scourge of doping,” he asserted, “all our forces must be united and a concerted effort



Even before the world learned he had tested positive at the 1988 Seoul Olympics, Johnson’s large, defined muscles caused many to wonder if he might be using illegal ergogenic aids.

made by sports and civil authorities working together in perfect harmony.”¹¹⁷

Realizing that their scientists could not keep pace with the western pharmaceutical industry in terms of the development of new performance-enhancing substances, Soviet authorities took a surprising position of leadership in pushing for the implementation of de Merode’s universal system of control. At a UNESCO meeting held in November 1988, sports leaders from one-hundred countries signed a statement of support for the IOC’s proposed Anti-Doping Charter. Although there was no enforcement device under the statement, IOC official Alain Coupat claimed that “this is a big day for the I.O.C. . . . It means UNESCO recognizes that the fight against doping must be constructed on a global

basis, not by state, and that the I.O.C. is the best organization to direct the fight."¹¹⁸ Because the United States did not belong to UNESCO, Soviet officials came to a separate agreement with American leaders that would allow their respective doping experts to test each other's athletes.¹¹⁹

At a summer 1989 meeting, de Merode additionally began to advocate a new doping commission within the IOC. The commission would be supplemented with an IOC-run "mobile laboratory" that would enable a program of out-of-competition testing to begin.¹²⁰ Although de Merode preferred that the IOC remain in command of the body, his concept eventually resulted in the founding of an independent anti-doping organization in November 1999.



Observers of international sport during the 1980s thus witnessed a series of crises that collectively led to a paradigm shift in Olympic doping policy. In the early years of the decade, most policymakers believed that the issue was of secondary importance to the 1980 and 1984 boycotts. This conception led to a belief that the problem could be best addressed by either obscuring its true extent or by actively suppressing instances of doping. The effect of these strategies was exacerbated by a loose system of Olympic governance.¹²¹ The respective cover-ups at the 1983 World Track-and-Field Championships and Pan-American Games by the IAAF and the USOC demonstrated how this framework weakened drug initiatives. Although it was more progressive than national committees and international federations, the IOC also engaged in questionable behavior; uncertainties remain, for instance, as to Samaranch and de Merode's complicity in destroying test results at the 1984 Los Angeles Games.

In the end, these activities set the stage for the single most important event in the history of Olympic doping policy: the disqualification of Ben Johnson at the 1988 Games in Seoul. The concentrating effect of the episode was best put by Dick Pound, who wrote in 1989 that "there have been positive tests and disqualifications on other occasions, but never one which has attracted such scrutiny and created such concern."¹²² At last convinced as to the necessity of state intervention, the deeply embarrassed Canadian government called attention to the inadequacies of the existing system. The Soviet government, perhaps realizing that its teams

would be more successful in circumventing the new protocols than those of Western nations, also insisted on comprehensive reform. Although a universal doping authority would not come into existence for another decade, the consequent pressure on Olympic officials created a political climate conducive to its creation.

NOTES:

(IOCL refers to the Olympic Library in Lausanne, Switzerland)

1. While the 1980 Games demonstrated the continuing weakness of Olympic doping policy and the 1984 Los Angeles Games witnessed a doping "cover-up," testosterone was finally added to the IOC's list of banned substances in 1982. See Jan Todd and Terry Todd, "Significant Events in the History of Drug Testing and the Olympic Movement: 1960-1999," in *Doping in Elite Sport: The Politics of Drugs in the Olympic Movement*, ed. Wayne Wilson and Edward Derse (Champaign, IL: Human Kinetics, 2001), 78; Philip Hage, "Caffeine, Testosterone Banned for Olympians," *Physician and Sportsmedicine* 10, no. 7 (July, 1982): 15-17. The implications of the Johnson scandal for doping policy in international athletics is discussed in Judith Blackwell, "Discourses on Drug Use: The Social Construction of a Steroid Scandal," *Journal of Drug Issues* 21, no. 1 (Winter, 1991): 147-164. See also Bruce Kidd, Robert Edelman, and Susan Brownell, "Comparative Analysis of Doping Scandals: Canada, Russia, and China," in *Doping in Elite Sport: The Politics of Drugs in the Olympic Movement*, ed. Wayne Wilson and Edward Derse (Champaign, IL: Human Kinetics, 2001), 155-161.
2. For one policymaker's elucidation of how the test affected Olympic doping policy, see Richard W. Pound, *Inside the Olympics: A Behind-the-Scenes Look at the Politics, the Scandals, and the Glory of the Games* (Etobicoke, Ont. [Canada]: J. Wiley & Sons Canada, 2004), 53.
3. The interaction of private sports organizations and national governments on doping issues during the 1980s is briefly discussed in Barrie Houlihan, *Dying to Win: Doping in Sport and the Development of Anti-Doping Policy*, 2nd ed. (Strasbourg, Germany: Council of Europe Publishing, 2002), 160.
4. Shorter quoted in "Effect of Drugs to Aid Athletes Studied by U.S.," *New York Times*, 22 August 1976.
5. Anderson quoted in Neil Amdur, "Wider Olympic Drug Abuse is Seen," *New York Times*, 30 January 1977.
6. Rogozhin quoted in Barry Lorge, "IOC Gears Up to Detect Drugs, Ingenious Cheating in Moscow," *Washington Post*, 1 June 1979.
7. Hanley quoted in *Ibid.*
8. See Steven Ungerleider, *Faust's Gold: Inside the East German Doping Machine* (New York: Thomas Dunne Books/St. Martin's Press, 2001), 37-38. For a contemporaneous journalistic depiction, see Pete Axthelm and Frederick Kempe, "The East German Machine," *Newsweek* (14 July 1980), 50.
9. Quoted in Lorge, "IOC Gears Up to Detect Drugs, Ingenious Cheating in Moscow."
10. Neufeld quoted in John Vinocur, "East German Tale of Tyranny," *New York Times*, 11 January 1979. Several other defectors from the GDR provided similar information. These included shot-putter Ilona Slupianek and Dr. Alois Marder, a former East German sports physician. See Michael Getler, "E. Germans, Drugs: Hard Facts Missing," *Washington Post*, 27 May 1979.
11. Vogel quoted in "Sporting Scene," *National Review* 31, no. 41 (12 October 1979): 1280. This article also cites a claim by Vogel that she

had experienced medical difficulties due to the fact that she had been subjected to compulsory doping since age fourteen.

12. The 1976 program is outlined in "Effect of Drugs to Aid Athletes Studied by U.S."

13. Neil Amdur, "Mounting Drug Use Afflicts World Sports," *New York Times*, 20 November 1978.

14. Ken Denlinger, "Warfare on Drugs Increases," *Washington Post*, 12 February 1980.

15. Dugal and Bertrand quoted in Steve Cady, "Drug Testers Stiffen Olympic Procedures," *New York Times*, 7 December 1979.

16. Daley quoted in Denlinger, "Warfare on Drugs Increases."

17. Beckett quoted in Ibid.

18. There were 440 tests for stimulants and 350 tests for anabolic steroids. See "Olympic Athletes Cleared," *Washington Post*, 25 February 1980.

19. Berlioux quoted in Bill Starr, "Steroid Madness: Drugs and the Olympics," August 1980, p. 65, magazine clipping in International Olympic Committee Medical Commission Records, Folder: Los Angeles '84 Medical Matters, 1978-1983, IOCL.

20. Andrew Nynka, "Ukrainian Scientist Details Secret Soviet Research Project on Steroids," *Ukrainian Weekly*, 9 November 2003. The article was accessed on 22 December 2006 at: <http://www.ukrweekly.com/Archive/2003/450319.shtml>.

21. Medical Commission Report, Minutes of the 82nd General Session of the International Olympic Committee, 10-13 February 1980, Lake Placid, p. 24, IOCL.

22. See Robert O. Voy and Kirk D. Deeter, *Drugs, Sport, and Politics: The Inside Story about Drug Use in Sport and its Political Cover-up, with a Prescription for Reform* (Champaign, Ill.: Leisure Press, 1991), 112.

23. IOC Medical Commission member Dr. Arnold Beckett, observing the events in Moscow, said, "You see some of the shapes . . . and suspicions are probably justified." Beckett quoted in "I.O.C. Issues Doping Report," *New York Times*, 4 August 1980. A Russian sports journalist later laughingly told British journalist Andrew Jennings about the media's knowledge of the drug tests in Moscow: "'Doping control in Moscow? . . . There was no doping control!'" See Andrew Jennings, *The New Lords of the Rings* (London: Simon & Schuster, 1996), 236.

24. The number of drug tests in Moscow are provided in the Organising Committee for the 1980 Olympic Games in Moscow, "Doping Control at the Games of the XXIInd Olympiad," February 1981, p. 28, International Olympic Committee Medical Commission Records, Folder: Affaires Medicales aux Jeux Olympiques de Moscou 1980: controles du dopage et de feminale 1980, 1980-1987, IOCL.

25. De Merode quote from Ibid.

26. Donike interview by Terry Todd, 6 February 1982, referenced in Todd and Todd, "Significant Events in the History of Drug Testing and the Olympic Movement," 77. See also Terry Todd, "A History of the Use of Anabolic Steroids in Sport," in *Sport and Exercise Science: Essays in the History of Sports Medicine*, ed. Jack W. Berryman and Roberta J. Park (Urbana; Chicago: University of Illinois Press, 1992), 333.

27. Government of Australia, "Drugs in Sport," *Interim Report of the Senate Standing Committee on the Environment, Recreation and the Arts* (Canberra: Australian Government Publishing Service, 1989), p. 10, quoted in Houlihan, *Dying to Win*, 47.

28. In addition to those of Soviet athletes, the colonel also claimed that positives tests were suppressed for several Swedish and East German Olympians. See Jennings, *The New Lords of the Rings*, 235-236. According to a fellow English journalist, three Soviet security

agents were appointed to the Soviet Olympic Committee prior to the 1980 Games by KGB director Yuri Andropov. The KGB agents were Anatoly Gresko (who in 1971 had been thrown out of England for espionage), Semyon Nitkin (the controller for the notorious British double-agent Kim Philby), and V.I. Popov. See "Sporting Scene," 1280. The member of the Bulgarian weightlifting delegation wished to remain anonymous regarding these statements, which were expressed in a private communication to Terry Todd on 24 April 2008.

29. Minutes of the 84th IOC General Session, Baden-Baden, Germany, September 29-October 2, 1981, p. 28-29, IOCL.

30. Ibid., 29.

31. Prince Alexandre de Merode, "Report from the IOC Medical Commission," Annex 13 of Minutes of the 85th IOC General Session, Rome, May 27-29, 1982, p. 56-57, IOCL.

32. Todd, "A History of the Use of Anabolic Steroids in Sport," 332.

33. See Hage, "Caffeine, Testosterone Banned for Olympians," 15, 17.

34. Voy and Deeter, *Drugs, Sport, and Politics*, 104.

35. Pound quoted in Randy Harvey, "IOC Official Questions Drug Testing in Track," *Los Angeles Times*, 9 May 1989. See also Voy and Deeter, *Drugs, Sport, and Politics*, 104.

36. See Voy and Deeter, *Drugs, Sport, and Politics*, 102-105.

37. Voy and Deeter, *Drugs, Sport, and Politics*, 102-103.

38. These included one cyclist, one sprinter, one fencer, one shot-putter, and eleven weightlifters. Their most prominent member was U.S. weightlifter Jeff Michaels. See Todd and Todd, "Significant Events in the History of Drug Testing and the Olympic Movement," 79.

39. See Frank Litsky, "Some U.S. Athletes Leave Games at Caracas Amid Stiff Drug Tests," *New York Times*, 24 August 1983.

40. Kelly comments in Proceedings of the Meetings of the Administrative Committee and Executive Board of the United States Olympic Committee, 15-16 July 1983, New York, p. 190, USOCLA.

41. See "Some on U.S. Squad at Caracas Failed Drug Tests Before Games," *New York Times*, 27 August 1983.

42. See "The Daily Dope Dialogue," *Track and Field News* (February, 1985), 52; Todd and Todd, "Significant Events in the History of Drug Testing and the Olympic Movement," 83-84.

43. Voy and Deeter, *Drugs, Sport, and Politics*, 89-90.

44. See "86 Athletes Tested Positive," *New York Times*, 11 January 1985. See also Todd, "A History of the Use of Anabolic Steroids in Sport," 334; "U.S. Olympic Group to Weight Drug Test Plan; 86 American Athletes Failed 1984 Screening," *Chronicle of Higher Education* (23 January 1985). Prior to the 1984 Games, the public was told that all members of the U.S. track-and-field team had passed their drug tests at the Olympic trials. See "U.S. Track Olympians Pass Drug Tests," *New York Times*, 18 July 1984.

45. An award-winning study of the IOC's ascent as an economic power is provided in Robert Knight Barney, Stephen R. Wenn, and Scott G. Martyn, *Selling the Five Rings: The International Olympic Committee and the Rise of Olympic Commercialism*, Revised ed. (Salt Lake City: University of Utah Press, 2004).

46. For the economic failures in Montreal, see Nick Auf der Maur, *The Billion-Dollar Game: Jean Drapeau and the 1976 Olympics* (Toronto: J. Lorimer, 1976); Jack Barry Ludwig, *Five Ring Circus: The Montreal Olympics* (Toronto: Doubleday, 1976).

47. The best biography of Samaranch is David Miller, *Olympic Revolution: The Biography of Juan Antonio Samaranch*, Revised ed. (London: Pavilion, 1996). See also Juan Antonio Samaranch and Robert Parienté, *The Samaranch Years: 1980-1994, Towards Olympic Unity*,

Entrevues (Lausanne: International Olympic Committee, 1995).

48. Pound, *Inside the Olympics*, 67.

49. For Ueberroth's leadership in Los Angeles, see Kenneth Reich, *Making It Happen: Peter Ueberroth and the 1984 Olympics* (Santa Barbara, Calif.: Capra Press, 1986).

50. See "Drug Testing at Issue," *New York Times*, 29 April 1983. An anonymous member of the Los Angeles Organizing Committee admitted that the cost of the tests had a relationship to his organization's reluctance to use them in Elliott Almond, Julie Cart, and Randy Harvey, "[Analysis] The Olympic Dope Sheet is Redefined," *Los Angeles Times*, 13 November 1983. A clipping of this article was found in International Olympic Committee Medical Commission Records, Folder: IOC, *Commission médicale: Dopage – correspondance et articles de presse*, 1965-1977, IOCL.

51. Daly to de Merode, 8 June 1983, International Olympic Committee Medical Commission Records, Folder: IOC, Méd. Comm., Los Angeles '84 medical matters, 1985-1986-1994, IOCL.

52. Ueberroth to Samaranch, 14 November 1983, International Olympic Committee Medical Commission Records, Folder: Médicale: Dopage – correspondance et articles de presse, 1965-1977, IOCL.

53. Ueberroth quoted in Jennings, *The New Lords of the Rings*, 238.

54. Drs. Hans Howald and Donike provided this scientific testimony according to "Report on the seminar of the Medical Commission of the IOC," September 25-October 2, 1983, International Olympic Committee Medical Commission Records, Folder: IOC, SD1: Comm. Méd.: Rapp. Sessions, CE 1968-1984, IOCL. The final decision to test for caffeine and testosterone in Los Angeles is provided in "Report of the IOC Medical Commission," 24-25 November 1983, International Olympic Committee Medical Commission Records, Folder: IOC, SD1: Comm. Méd.: Rapp. Sessions, CE 1968-1984, IOCL. See also Annex 22, "Report of the Medical Commission Presented by Prince Alexandre De Merode, Chairman," in Minutes of the 87th IOC General Session, Sarajevo, 5-6 February 5-6, p. 90-91, IOCL.

55. See Almond, Cart, and Harvey, "[Analysis] The Olympic Dope Sheet is Redefined." For an early analysis of the future effect of HGH on sport, see Terry Todd, "Sports RX: The Use of Human Growth Hormone Poses a Grave Dilemma for Sport," *Sports Illustrated* (15 October 1984), 8.

56. "Report of the IOC Medical Commission," 24-25 November 1983, International Olympic Committee Medical Commission Records, Folder: IOC, SD1: Comm. Méd.: Rapp. Sessions, CE 1968-1984, IOCL.

57. At a broader level, Soviet officials listed the likelihood of unfair treatment in Los Angeles as one of the reasons for the Soviet boycott of the 1984 summer Olympics. See "Statement of the Soviet National Olympic Committee," 8 May 1984, reprinted in Edward H. Judge and John W. Langdon, eds., *The Cold War: A History through Documents* (Upper Saddle River, NJ: Prentice Hall, 1999), 220-221.

58. Ewald to de Merode, 9 November 1983, International Olympic Committee Medical Commission Records, Folder: Los Angeles '84 medical matters, 1978-1983, IOCL.

59. Carraro and de Merode statements from Minutes of the 88th IOC General Session, Los Angeles, 25-26 July 1984, p. 23, IOCL.

60. "Report of the Medical Commission Presented by Alexandre De Merode, Chairman," Annex 19 of Minutes of the 88th IOC General Session, Los Angeles, 25-26 July 1984, p. 74, IOCL.

61. De Merode comment from Minutes of the 88th IOC General Session, Los Angeles, 25-26 July 1984, p. 23, IOCL.

62. The medal totals for the Los Angeles Games is provided on the International Olympic Committee internet website: www.olympic.org (accessed 28 January 2007).

63. See Pound, *Inside the Olympics*, 67-68.

64. John Hoberman depicts IOC President Samaranch and de Merode, whom he describes as a "sometimes cynical and occasionally clumsy pragmatist," as the central figures of the cover-up. John Hoberman, "How Drug Testing Fails: The Politics of Doping Control," in *Significant Events in the History of Drug Testing and the Olympic Movement: 1960-1999*, ed. Wayne Wilson and Edward Derse (Champaign, IL: Human Kinetics, 2001), 244.

65. The best account of the destruction of the doping documents in Los Angeles is provided in Jim Ferstle, "Evolution and Politics of Drug Testing," in *Anabolic Steroids in Sport and Exercise*, ed. Charles E. Yesalis, 2nd edition (Champaign, IL: Human Kinetics, 2000), 386-387.

66. Pound, *Inside the Olympics*, 68.

67. Kammerer quoted in Hoberman, "How Drug Testing Fails," 244.

68. Pound's description of himself quoted from Frank Deford, Kostya Kennedy, and Richard Deitsch, "Just Say No," *Sports Illustrated* (16 December 2002), 48.

69. Pound, *Inside the Olympics*, 67.

70. Beckett quoted in Hoberman, "How Drug Testing Fails," 244.

71. This stance extended, of course, to future scholarship on the issue. Dr. Catlin wished to co-publish his recollections of the episode (with Craig Kammerer, the assistant director of the laboratory at the Games) in a medical journal. He was prohibited from doing this by de Merode. Catlin asserted, "I would not still be a member of the IOC medical commission if I had published a report without the co-operation of the prince." Catlin quoted in Jennings, *The New Lords of the Rings*, 242. This work includes a useful discussion of the cover-up (p. 237-243).

72. See Robert McG. Thomas, Jr., "U.S.O.C. Checking Use of Transfusions," *New York Times*, 10 January 1985.

73. This description of "blood doping" can be found in Houlihan, *Dying to Win*, 87-88.

74. Thomas, "U.S.O.C. Checking Use of Transfusions." For a contemporaneous legal analysis concerning the possible prohibition of blood doping, see G. Legwold, "Blood Doping and the Letter of the Law," *Physician and Sportsmedicine* 13 (March, 1985): 37-38.

75. "Cycle Group Bans Use of Blood Doping," *New York Times*, 19 January 1985. This article also describes the sanctions handed out to the officials involved in the scandal: Eddy Borysewicz, a team coach, and Ed Burke, director of the federation's Elite Athlete Program, were both suspended without pay for 30 days and received letters of reprimand. Former USCF President Mike Fraysse was also demoted from First Vice-President to Third Vice-President of the organization.

76. Miller comments in Proceedings of the Meetings of the United States Olympic Committee, Minutes of the Administrative Committee Meeting, 4 May 1985, Chicago, p. 140, USOCLA.

77. H[arvey] G. Klein, "Blood Transfusions and Athletics: Games People Play," *New England Journal of Medicine* 312, no. 13 (March, 1985): 854-856. See also Richard D. Lyons, "Expert Urges Ban on Blood Doping," *New York Times*, 28 March 1985. In January 1985, the Food and Drug Administration also requested that the Justice Department begin an investigation of the illegal "black market" distribution of anabolic steroids. See Todd, "A History of the Use of Anabolic Steroids in Sport," 338.

78. Carlgren's argument over the importance of doping to the direction of the Olympic movement is provided in Minutes of the 89th IOC General Session, 1-2 December 1984, Lausanne, Switzerland, p. 13, IOCL.

79. "Report of the IOC Medical Commission to the 90th Session of the IOC," appended as Annex 11 to Minutes of the 90th IOC General Session, 4-6 June 1985, Berlin, p. 85, IOCL. In addition, on page 22 of the minutes of this meeting, Dr. Eduardo Hay supported de

Merode's position despite the fact "it was not possible for the time being to provide that blood doping had been practiced" in Los Angeles.

80. De Merode statements, Minutes of the 90th IOC General Session, 4-6 June 1985, Berlin, p. 21, IOCL.

81. See "Drugs Used," *New York Times*, 6 August 1984.

82. See de Merode circular to International Sports Federations, National Olympic Committees, and IOC Accredited Dope Control Laboratories, 31 May 1985, attached to Annex 11, Minutes of the 90th IOC General Session, 4-6 June 1985, Berlin, p. 21, IOCL.

83. A description of beta-blockers is provided in Houlihan, *Dying to Win*, 91-92.

84. Minutes of the 90th IOC General Session, 4-6 June 1985, Berlin, p. 21, IOCL. See also de Merode circular to International Sports Federations, National Olympic Committees, and IOC Accredited Dope Control Laboratories, 31 May 1985, cited above.

85. Clark and Prouty quoted in Michael Goodwin, "U.S.O.C. to Seek More Tests for Drugs," *New York Times*, 24 March 1985.

86. Even then, only twenty of the thirty-eight national governing bodies supported the plan. See "U.S.O.C. to Begin Tests," *New York Times*, 25 June 1985.

87. See *Ibid.*

88. See Voy and Deeter, *Drugs, Sport, and Politics*, 111-112.

89. Vera Rich, "[Drugs in Athletics] Mortality of Soviet Athletes," *Nature* 311 (4 October 1984): 402-403. See also John Hoberman, *Mortal Engines: The Science of Performance and the Dehumanization of Sport* (New York: Free Press, 1992), 3; "Early Deaths of Soviet Athletes Due to Steroids? Magazine Cites 59 Cases in Which Banned Drugs Proved Fatal at Young Age," *Los Angeles Times*, 6 September 1984.

90. See Voy and Deeter, *Drugs, Sport, and Politics*, 106-108.

91. The replacements were Dr. Birginia Mikhaylova and Dr. Arne Ljungquist. See *Ibid.*, 108.

92. See Vyv Simson and Andrew Jennings, *Dishonored Games: Corruption, Money and Greed at the Olympics* (New York: S.P.I. Books, 1992), 169.

93. Samaranch quoted in "Executive Board Meeting of December," *[IOC] Olympic Review* (January, 1988), 21.

94. "Speech by H.E. Juan Antonio Samaranch, president of the IOC (93rd Session)," *[IOC] Olympic Review* (March, 1988), 82, 83.

95. See Michael Janofsky, "I.O.C. Criticizes Federation Steroids Rule," *New York Times*, 8 September 1989.

96. Francis and Lynon quoted in Charlie Francis and Jeff [with] Coplon, *Speed Trap: Inside the Biggest Scandal in Olympic History* (New York: St. Martin's Press, 1990), 1.

97. Pound, *Inside the Olympics*, 49. Pound's recollections of the 1988 Games are also recounted in Richard W. Pound, *Five Rings Over Korea: The Secret Negotiations behind the 1988 Olympic Games in Seoul* (Boston: Little, Brown, 1994). In it, Pound makes little reference to drugs, though.

98. Moses quoted in "Johnson Home in Disgrace; Canada Bans Him for Life Can't Run for Country or Get Funds," *Los Angeles Times*, 27 September 1988.

99. Heidebrecht quoted in "The Seoul Games/ Day 12 Notes Johnson Advertisements Canceled," *Los Angeles Times*, 28 September 1988.

100. See *Ibid.*

101. See Francis and [with] Coplon, *Speed Trap*, 7.

102. Worrall quoted in Michael Janofsky, "Johnson Loses Gold to Lewis after Drug Test," *New York Times*, 27 September 1988.

103. The ship was the *Michail Shalokhov*. See Voy and Deeter, *Drugs, Sport, and Politics*, 89.

104. "Team Lifted after 2d Drug Test is Failed," *New York Times*, 24 September 1988; "Weight Lifter Used Drug," *New York Times*, 29 September 1988.

105. Voy and Deeter, *Drugs, Sport, and Politics*, 109-110, 112.

106. President Samaranch asserted at a summer 1989 IOC General Session, for example, that "in Seoul, the Medical Commission had proved how seriously it took its work; the Olympic Movement was thus showing an example to [other] sports organizations." Minutes of the 95th IOC General Session, August 30 - September 1, 1989, Puerto Rico, p. 12, copy on file at the Todd-McLean Physical Culture Collection, University of Texas at Austin.

107. Pound and Samaranch quoted in Janofsky, "Johnson Loses Gold to Lewis after Drug Test." See also Todd and Todd, "Significant Events in the History of Drug Testing and the Olympic Movement," 90.

108. Michael Janofsky and Peter Alfano, "Drug Use by Athletes Runs Free Despite Tests," *New York Times*, 17 November 1988.

109. "[Sports People] Canadian Inquiry," *New York Times*, 6 October 1988.

110. Charles Dubin, *Commission of Inquiry into the Use of Drugs and Banned Practices Intended to Increase Athletic Performance* (Ottawa: Canadian Government Publishing Centre, 1990), xx.

111. *Ibid.*, 518.

112. Janofsky, "Johnson Loses Gold to Lewis after Drug Test."

113. Dubin, *Commission of Inquiry*, 519.

114. Pound and Worrall quoted in Janofsky, "Johnson Loses Gold to Lewis after Drug Test."

115. "Towards an Anti-Doping Charter," *[IOC] Olympic Review* (August, 1988), 350. A draft of the charter is provided in "International Olympic Charter Against Doping in Sport," *[IOC] Olympic Review* (November, 1988), 628-631.

116. "Report from the Commissions," *[IOC] Olympic Review* (November, 1988), 618.

117. "Speech by H.E. Juan Antonio Samaranch, President of the International Olympic Committee, Moscow, 21st November 1988," *[IOC] Olympic Review* (December, 1988), 670.

118. Coupat quoted in Michael Janofsky, "Drug Plan Gains Approval," *New York Times*, 25 November 1988.

119. See *Ibid.* The details of the agreement are provided in Maria Tai Wolff, "Playing by the Rules?: A Legal Analysis of the United States Olympic Committee-Soviet Olympic Committee Doping Control Agreement," *Stanford Journal of International Law* 25, no. 2 (Spring, 1989): 611-646. The official minutes of the IOC Session only briefly mention the new doping subcommittee. See Minutes of the 95th IOC Session, August 30 - September 1, 1989, Puerto Rico, p. 11, copy on file at the Todd-McLean Physical Culture Collection, University of Texas at Austin. This cooperative arrangement was later expanded to include Great Britain, Australia, West Germany, Sweden, South Korea, Italy, Norway, Bulgaria, and Czechoslovakia. See "11 Nations in Drug Test Accord," *New York Times*, 14 December 1989.

120. "Commission Reports," *[IOC] Olympic Review* (September-October, 1989), 443.

121. After the 1988 Seoul Olympics, de Merode described the Medical Commission's tenuous links with the international federations. He said that "the Medical Commission did have contacts with the IFs, but that these were *not always simple*." Emphasis added. Minutes of the 95th IOC General Session, August 30 - September 1, 1989, Puerto Rico, p. 12, copy on file at the Todd-McLean Physical Culture Collection, University of Texas at Austin.

122. Richard W. Pound, "Reflections on Cheating in Sport," *[IOC] Olympic Review* (August, 1989), 390.