

HAY FEVER POLICY (Glucocorticoid Injections)

Therapeutic Use Exemption (TUE) Committee Policy on Glucocorticoid Injections for Hay Fever

Depo-Medrone (Methylprednisolone) and Kenalog* (Triamcinolone) administered by intra-muscular injection as treatment for hay fever are prohibited in sport and therefore their use requires the athlete and their physician to strictly adhere to the TUE Policy. The TUE Policy is available at www.sportireland.ie/Anti-Doping/Athlete-Zone/Therapeutic-Use-Exemptions-/

- Athletes included in their International Federation Registered Testing Pool and/or athletes competing at International Competition will require a Therapeutic Use Exemption in advance of receiving an intra-muscular glucocorticoid. These athletes should contact their sport's Anti-Doping Officer for assistance in identifying International Competitions and establishing the requirements for a TUE Application.
- Athletes included in the Sport Ireland Registered Testing Pool that are not competing at an International Competition should apply to Sport Ireland for a Pre-test Therapeutic Use Exemption, using the information in the Medical File section below to aid them, prior to receiving an intra-muscular glucocorticoid.
- Athletes eligible for a post-test TUE application (see www.sportireland.ie/Anti-Doping/Athlete-Zone/Therapeutic-Use-Exemptions-/Sport%20Ireland%20TUE%20Policy%20.pdf) should ensure that they are capable of providing a medical file to the standard outlined below, **prior** to the administration of any intra-muscular glucocorticoid injection by a physician. Athletes may be required to submit this medical file to support a TUE application at a later date.

*Note: While Kenalog Injection has been discontinued from the Irish market some unlicensed product may be available.

Medical File

Intra-muscular glucocorticoid TUE applications **MUST** be accompanied by a medical file reflecting current best medical practice to include:

1. A complete medical history i.e. when the hay fever began; the associated symptoms, their severity and effect on sporting performance; and symptoms suffered in previous hay fever episodes.

2. Clinical evidence of attempting to use alternative permitted oral, nasal and/or ophthalmic medications and justification as to why alternative permitted medications are not sufficient.
3. Copies of all relevant examinations, laboratory results/reports and clinical notes (for example, if a clinic visit is referenced in a letter or summary, a copy of the clinical notes taken during the visit must be submitted); provide details of any known allergens or allergic history including results of any previous immunological testing.
4. Exact name, speciality, address (including telephone, e-mail, fax) of examining physician.

Permitted Medications

Athletes and their physicians are reminded that there are several permitted medications, both over-the-counter and prescribed, that can be used for the treatment of hay fever (as checked on the Drugs in Sport Database on www.eirpharm.com, 21st March 2017) such as:

Over-the-counter medications (examples)

- Oral Antihistamines: e.g. Loratidine (brands - Clarityn, Lorat etc.), Cetirizine (brands - Cetriz, Cetrine Allergy), Chlorphenamine (brand – Piriton; note - can cause drowsiness)
- Decongestant Nasal Drops/Sprays: e.g. Otrivine Adult nasal drops, Otrivine Adult nasal spray
- Glucocorticoid Nasal Sprays: e.g. Beconase Hayfever, Flixonase Allergy
- Eye Drops: e.g. Otrivine-Antistatin eye drops, Opticrom Allergy eye drops

Prescribed medications (examples)

- Oral Antihistamines: e.g. Neoclarityn, Telfast
- Oral Allergen Extracts: e.g. Grazax, Oralair
- Glucocorticoid Nasal Sprays: e.g. Avamys nasal spray, Rhinolast nasal spray, Nasonex nasal spray

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