Performance-Enhancing Drugs in Sports

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English 102-007

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27 Apr. 2005
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Thesis Statement: Performance-enhancing drugs harm the health of athletes, damage the integrity of sport, and cause cheating; therefore, they should be prohibited from all sports.

I. Performance-enhancing drugs

   A. Definition

   B. Seven classes based on effects
      1. Mass and strength build-up
      2. Oxygen increase in tissues
      3. Suppression of pain
      4. Stimulation of the body
      5. Relaxation of the body
      6. Weight control
      7. Concealment of other drugs

II. Extent of drug use

   A. Exact amount unknown

   B. Significant amount throughout history

III. Harm to health of athletes

   A. Side-effects of anabolic steroids and human-growth hormone
B. Side-effects of other drugs
   1. Amphetamines
   2. Erythropoietin
   3. Drugs that conceal pain
   4. Diuretics

IV. Damage to integrity of sport
   A. Celebration of human body and spirit through sport
   B. Perversity of sport authenticity as a result of doping
   C. Bad impression on young athletes

V. Results of cheating
   A. Contradiction of fair play
   B. Harmful effect on records

VI. Establishment of anti-doping agencies and policies
   A. Amateur sports agencies
   B. Professional sports drug policies
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“One of the most exciting sports stories in recent years was the attempt to break Roger Maris’ single-season home run record [of sixty-one] in baseball. On September 8, 1998, Mark McGwire of the St. Louis Cardinals made history by hitting his sixty-second home run,” writes William Dudley. He also notes, “However, many people believe that McGwire’s achievement was tarnished by a revelation some weeks earlier that he had been using androstenedione, a compound that temporarily boosts levels of the male sex hormone testosterone” (7). This revelation drew attention to the serious problem of performance-enhancing drug use in professional and amateur sports. Performance-enhancing drugs harm the health of athletes, damage the integrity of sports, and cause cheating; therefore, they should be prohibited from all sports.

A performance-enhancing drug can be defined as a substance that is deliberately used in order “to gain an unfair advantage over fellow competitors,” according to D.R. Mottram (17). Some athletes take these drugs to increase their chances of winning and making or breaking records, while others take them in order to stay competitive with athletes who already use them. The taking of a performance-enhancing drug by an athlete is
known as doping. These drugs can be categorized into seven classes based on their desired effects.

The first class of drugs is used by athletes to build mass and muscle strength. Examples of such drugs are anabolic steroids, human growth hormone (hGH), and human chorionic gonadotropin (hCG). Anabolic steroids, synthetic derivatives of testosterone, have become one of the most commonly used drugs in many sports. They encourage muscle growth by making new protein through the stimulation of bone and muscle cells. The list of steroids is extensive and includes androstenedione, stanozolol, and tetrahydrogestrinone. To quote Robert Voy, former Chief Medical Officer for the United States Olympic Committee, “You show me a sport where increased power, endurance, or speed can possibly benefit the athlete, and I’ll show you a sport where [steroid] use exists” (17). Similarly, hGH, a natural protein hormone, increases muscle mass by stimulating the production of protein and bone, as well as reduces body fat. Another protein hormone, hCG, stimulates the production of a male athlete’s natural testosterone that then fuels muscle development.

The other classes of drugs give unfair advantages to athletes in other ways. The second class of drugs is used for increasing the amount of oxygen in the body’s tissues. These drugs, including the artificial hormones
erythropoietin (EPO) and darbepoetin, stimulate red blood cell production, causing an oxygen increase in the blood so that athletes have more endurance, especially in cycling and track events. Drugs that conceal pain are the third class of performance-enhancing drugs. Narcotics, cortisone, and local anesthetics are examples of these drugs that help athletes to continue to compete by suppressing the pain of their injuries. The next class of drugs stimulates the body and is known as stimulants, which include amphetamines, ephedrine, and strychnine. Athletes use these drugs to assist them in staying alert, reducing fatigue, and maintaining aggressiveness. Stimulants cause an athlete’s lungs to breathe faster, brain to work faster, and heart to beat faster. Typical athletes who use them are football players, basketball players, boxers, and track-and-field competitors. The fifth class of performance-enhancing drugs relaxes the body. Relaxants, such as tranquilizers and beta-blockers, are commonly used to help archers and shooters relax by reducing their body’s heart rate and steadying their nerves. The sixth class of performance-enhancing drugs, diuretics, helps to control weight. Diuretics are primarily used for the purpose of losing weight rapidly by athletes who compete in sports with weight restrictions, such as wrestling, weightlifting, and boxing. The final performance-enhancing drug class masks the presence of other drugs in an athlete’s body so that they
cannot be detected. Examples of masking drugs are plasma expanders and secretion inhibitors. Diuretics can also create this desired effect because they increase urine production, thus diluting any other substance present in the urine.

The extent of doping among athletes is unknown because no definitive studies have been done nor are any conclusive statistics available. Nonetheless, evidence exists that shows a substantial amount of drug use throughout the history of sports. Performance-enhancing drugs have probably been used by athletes for over 2,000 years, starting with the ancient Greek Olympians and Roman gladiators. However, these athletes did not use the advanced drugs of today but instead used substances such as wine-mixtures or mushrooms. Early in the twentieth century caffeine and strychnine were reported being used by athletes. In the 1930s amphetamines came onto the scene and, due to their effectiveness, became a favored stimulant by athletes in the ’40s and ’50s. Anabolic steroids were introduced in the late 1950s and became popular soon thereafter, taking performance-enhancement to a whole new level.

Throughout the twentieth century numerous athletes were caught doping in both Olympic and non-Olympic events. One of the most infamous Olympic drug incidences was the stripping of sprinter Ben Johnson’s gold
medal and world record in the 1988 Seoul Olympics for using the anabolic steroid stanozolol. A famous non-Olympic drug scandal occurred during the 1998 Tour de France in which France’s Festina team, along with several other teams, were disqualified and suspended from the tour because their riders were found to be taking anabolic steroids and EPO.

Currently, steroids are a pressing issue in professional baseball. Tom Verducci reports that Jose Canseco, Ken Caminiti, and Gary Sheffield have openly admitted to using steroids. Also, as written in the *San Francisco Chronicle* in 2004, six players, including Barry Bonds and Jason Giambi, told a grand jury that they too used steroids (39).

Performance-enhancing drugs have side effects that can harm the health of athletes and should be prohibited. Athletes who take these drugs are risking their health, lives, and careers because many of these side effects are serious and even fatal. Anabolic steroids have the broadest range of side effects, which include heart and circulatory diseases (particularly arteriosclerosis), liver damage, and psychological changes of increased aggressiveness and irritability. Other side effects are impotence, urinating pain because of prostate enlargement, baldness, and breast development in men, as well as menstrual cycle disruption, deepened voice, and facial and bodily hair growth in women. For example, an East German Olympic
swimmer in the 1970s, Christiane Knacke-Sommer, “was given regular injections of testosterone [. . .] without her knowledge,” and in 1998 she claimed, in a testimony against her coaches, “that the treatments ‘destroyed [her] body and [her] mind,’ and permanently masculinized her physique and voice” (qtd. in Haley 9). In addition, according to James Haley, Greg Strock, a United States Olympic cycling team member in the early 1990s, “allege[d] that coaches, without his consent, doped him with steroid injections. Strock attributes the breakdown of his immune system and the end of his promising cycling career to large doses of the drugs” (9). Another drug with unhealthy side effects is human growth hormone. hGH has such side effects as the overgrowth of an athlete’s hands, feet, and face due to the increase in muscle and bone development in these areas along with enlargement of internal organs. Extended use of hGH can also cause arthritis, diabetes, and cancer.

Other drugs have side effects that are also harmful to an athlete’s health. For example, amphetamines may cause aggression, anxiety, addiction, a rise in blood pressure and body temperature, and arrhythmias. The side effects of EPO are thickening of an athlete’s blood that forces his heart to work harder, making the chance of heart attack or stroke more likely. Barry R. McCaffrey claims that this drug probably “contributed to
the deaths of 18 Dutch and Belgian cyclists and 12 Scandinavian orienteers in the late 1980s and early 1990s” (69-70). Additionally, drugs that conceal pain can lead to further damage of an athlete’s injury and even cause permanent damage. Finally, diuretics can be harmful because they may interfere with the regulation of the body’s temperature, which leads to electrolyte imbalance, exhaustion, arrhythmia of the heart, and eventually cardiac arrest.

Not only should performance-enhancing drugs be banned because they harm the health of athletes, but they also damage the integrity of sport. Sport is a celebration of the human body and spirit. Through hard work and rigorous training athletes display what the human body is capable of achieving. Furthermore, athletes embody the human spirit through their determination, will, and dedication. Doping is contrary to the authenticity of sport because chemicals, not the resources within the athlete, are responsible for his performance that may go beyond natural human capabilities. Drug use is a “great ugly cloud” that hangs over both professional and amateur sports and, consequently, “every great victory is questioned” (Noden 25; McCaffrey 68). Sports journalist Christopher Clarey writes, “[W]henever someone does something remarkable—sets a world record, runs through the pain, steps suddenly from the shadows into the light—it creates as much
suspicion as it does sense of wonder” (qtd. in Dudley 9). What’s more, professional athletes who take performance-enhancing drugs give the wrong impression to young, impressionable athletes who look up to them as role models, thinking that taking these drugs is acceptable. President George W. Bush states the following:

To help children make right choices, they need good examples. Athletics play such an important role in our society, but, unfortunately, some in professional sports are not setting much of an example. The use of performance-enhancing drugs like steroids in baseball, football, and other sports is dangerous, and it sends the wrong message that there are shortcuts to accomplishment, and that performance is more important than character. (“Transcript”)

Performance-enhancing drugs are also at odds with fair play, which is essential to all sports. Using these drugs is “cheating, plain and simple” and should be prohibited (Voy xvi). Fair play in sports requires a level playing field in which no unfair advantage is given to any athlete. On the other hand, athletes who take drugs have a definite advantage over the honest athlete who does not. Furthermore, because of this advantage, records, which are so important in sports, are affected and, as a result, become
meaningless. As McCaffrey points out, “Drug-using athletes verge on creating records that honest human performance cannot best” (76). An example is the 1998 baseball home run race in which Mark McGwire broke Roger Maris’ single-season home run record. Since McGwire used drugs, Scott Pitoniak notes that some people think baseball should reinstate Maris’ home run record “because he was the last player to hit that many without the aid of a performance-enhancing drug” (Pitoniak). Another example is Barry Bonds’ attempt to surpass Hank Aaron’s career home run record of 755. Given that Bonds has used steroids, sportscaster David Kaplan says he would not acknowledge Bonds’ record if he hits 756. Kaplan states that Aaron would still hold the home run record because “Hank did it the right way”—i.e., by not using drugs (Sports Central). Therefore, the only way to prevent cheating, to maintain fair play, and to have legitimate records is to end the use of performance-enhancing drugs in sports altogether.

Sports organizations have recognized the problem of drug use in sports and have established anti-doping agencies and policies. In 1967, the International Olympic Committee (IOC) became one of the first organizations to prohibit drugs and create a list of banned substances. In 1999, the World Anti-Doping Agency (WADA) was formed, according to its chairman Richard W. Pound, to unite sports organizations and
governments around the world “to achieve completely drug free sport. This [. . .] solidarity constitutes today our greatest hope of eradicating the improper use of drugs in sport” (Pound). Every year this agency publishes an extensive list of banned drugs that is used by many sports organizations, including the IOC and the United States Anti-Doping Agency, which was established in 2000 to implement a national anti-doping program for American Olympic sports. The above organizations are related to amateur sports; however, professional sports, including Major League Baseball (MLB), the National Football League, and the National Basketball Association (NBA), have anti-doping policies as well. Yet, many people don’t think these policies are strict enough. For instance, the MLB does not ban amphetamines, while the NBA’s list of banned substances does not include diuretics, masking drugs, nor hGH. Conversely, all of these drugs are prohibited by WADA. Even President George W. Bush is concerned about the lack of control of steroids and “call[s] on team owners, union representatives, coaches, and players to take the lead, to send the right signal, to get tough, and to get rid of steroids now” (“Transcript”).

Sports play an important role in society because they promote the health of our bodies, inspire us to achieve excellence through hard work and determination, and teach us fair play. The use of performance-enhancing
drugs in sports undermines these ideals. These drugs not only damage the
health of athletes and the integrity of sport but are a form of cheating as
well. Therefore, drugs in sports should be prohibited so that sports can
continue to make an invaluable contribution to society.
Works Cited


