

The CRONUS

Non-approved and Prohibited Substances and Testing Policy

Testing:

The Cronus has two “standard” forms of testing; Physique Screening and Urinalysis.

Physique Screening:

This is done either during the athletes meetings or on stage before the preliminaries begin. The Physique Screening Panel will perform a visual screening of the athletes’ physique to determine if there is an advanced cause to perform specific further testing on the athlete. This Panel has been in and around the industry as judges, promoters, athletes and more. They are well versed in the “look” that typically associates the use of banned substances and their side effects. By the Panel “flagging” and athlete DOES NOT presume banned substances have been used, but will lead to that athlete specifically being tested and the athlete may be questioned, in private, about potential usage.

Urinalysis:

This is the standard urinalysis test for drug use or banned substance use. Each testing athlete will provide a sample while being supervised to ensure the sample has not been tampered with. The sample will then be sealed and signed for by the athlete. After which, the sample will be sent for testing or may be tested on-site if those services are available to the event.

Other testing:

It is at the discretion of the promoter, with the approval of the CRONUS Board, to perform alternate or additional testing. Should this occur, each athlete will be notified at the earliest possible time.

Medications:

If you are taking any medications that could potentially yield a positive test, provide this medication or list of medications with doctor’s letter(s) to CRONUS **PRIOR** to the event for consideration of exemption for that specific medication. Each case will be handled on a case by case basis.

Positive test results:

Should a positive test occur, the athlete testing positive will be questioned about the test and the substances found. The athlete, at their own expense, has the right to challenge the positive test at a CRONUS approved facility. This test must be performed within 48 hours of receiving notice of the positive test.

**NOTE: Use of any substance giving the athlete a >6:1 TE Ratio is considered a positive test. Use all supplements at your own risk.*

Discipline Actions:

Every positive test will result in the removal of that athlete’s title, award(s), and all prize money will either be withheld or must be returned to CRONUS within 72 hours.

Any further action by CRONUS will be handled on a case by case basis and may include statements to the CRONUS and fitness community, letters of apology to the EVENT sponsors, a single event to a lifetime ban from the CRONUS along with the posting of the athlete’s name and test results.

Prohibited and Non-approved Substances:

The CRONUS utilizes the WADA standards and list of non-approved and prohibited substances. They are as follows and can be found at <http://www.wada-ama.org/en/World-Anti-Doping-Program/Sports-and-Anti-Doping-Organizations/International-Standards/Prohibited-List/The-2011-Prohibited-List/Prohibited-at-All-Times/>

S0. NON-APPROVED SUBSTANCES

Any pharmacological substance which is not addressed by any of the subsequent sections of the List and with no current approval by any governmental regulatory health authority for human therapeutic use (i.e. drugs under pre-clinical or clinical development or discontinued) is prohibited at all times.

PROHIBITED SUBSTANCES

S1. ANABOLIC AGENTS

Anabolic agents are prohibited.

1. Anabolic Androgenic Steroids (AAS)

a. Exogenous* AAS, including:

- 1-androstenediol (5 α -androst-1-ene-3 β ,17 β -diol)
- 1-androstenedione (5 α -androst-1-ene-3,17-dione)
- bolandiol (19-norandrostenediol)
- bolasterone
- boldenone
- boldione (androsta-1,4-diene-3,17-dione)
- calusterone
- clostebol
- danazol (17 α -ethynyl-17 β -hydroxyandrost-4-eno[2,3-d]isoxazole)
- dehydrochlormethyltestosterone (4-chloro-17 β -hydroxy-17 α -methylandrosta-1,4-dien-3-one)
- desoxymethyltestosterone (17 α -methyl-5 α -androst-2-en-17 β -ol)
- drostanolone
- ethylestrenol (19-nor-17 α -pregn-4-en-17-ol)
- fluoxymesterone
- formebolone
- furazabol (17 β -hydroxy-17 α -methyl-5 α -androstando[2,3-c]-furazan)
- gestrinone
- 4-hydroxytestosterone (4,17 β -dihydroxyandrost-4-en-3-one)
- mestanolone
- mesterolone
- metenolone
- methandienone (17 β -hydroxy-17 α -methylandrosta-1,4-dien-3-one)
- methandriol
- methasterone (2a, 17 α -dimethyl-5 α -androstane-3-one-17 β -ol)
- methyldienolone (17 β -hydroxy-17 α -methylestra-4,9-dien-3-one)
- methyl-1-testosterone (17 β -hydroxy-17 α -methyl-5 α -androst-1-en-3-one)
- methylnortestosterone (17 β -hydroxy-17 α -methylestr-4-en-3-one)
- methyltestosterone
- metribolone (methyltrienolone, 17 β -hydroxy-17 α -methylestra-4,9,11-trien-3-one)
- mibolerone
- nandrolone
- 19-norandrostenedione (estr-4-ene-3,17-dione)
- norboletone
- norclostebol
- norethandrolone
- oxabolone
- oxandrolone
- oxymesterone
- oxymetholone
- prostanazol (17 β -hydroxy-5 α -androstando[3,2-c] pyrazole)
- quinbolone
- stanozolol
- stenbolone
- 1-testosterone (17 β -hydroxy-5 α -androst-1-en-3-one)
- tetrahydrogestrinone (18 α -homo-pregna-4,9,11-trien-17 β -ol-3-one)
- trenbolone

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

b. Endogenous** AAS when administered exogenously:

- androstenediol (androst-5-ene-3 β ,17 β -diol)
- androstenedione (androst-4-ene-3,17-dione)
- dihydrotestosterone (17 β -hydroxy-5 α -androstan-3-one)
- prasterone (dehydroepiandrosterone, DHEA)
- testosterone

and the following metabolites and isomers:

- 5 α -androstane-3 α ,17 α -diol

- 5 α -androstane-3 α ,17 β -diol
 - 5 α -androstane-3 β ,17 α -diol
 - 5 α -androstane-3 β ,17 β -diol
 - androst-4-ene-3 α ,17 α -diol
 - androst-4-ene-3 α ,17 β -diol
 - androst-4-ene-3 β ,17 α -diol
 - androst-5-ene-3 α ,17 α -diol
 - androst-5-ene-3 α ,17 β -diol
 - androst-5-ene-3 β ,17 α -diol
 - 4-androstenediol (androst-4-ene-3 β ,17 β -diol)
 - 5-androstenedione (androst-5-ene-3,17-dione)
 - epi-dihydrotestosterone
 - epitestosterone
 - 3 α -hydroxy-5 α -androstan-17-one
 - 3 β -hydroxy-5 α -androstan-17-one
 - 19-norandrosterone
 - 19-noretiocholanolone
2. Other Anabolic Agents, including but not limited to:
- Clenbuterol
 - selective androgen receptor modulators (SARMs)
 - tibolone
 - zeranol
 - zilpaterol

For the purpose of this section:

* “exogenous” refers to a substance which is not ordinarily capable of being produced by the body naturally.

** “endogenous” refers to a substance which is capable of being produced by the body naturally.

S2. PEPTIDE HORMONES, GROWTH FACTORS AND RELATED SUBSTANCES

The following substances and their releasing factors are prohibited:

1. Erythropoiesis-Stimulating Agents [e.g. erythropoietin (EPO), darbepoetin (dEPO), hypoxia-inducible factor (HIF) stabilizers, methoxy polyethylene glycol-epoetin beta (CERA), peginesatide (Hematide)];
2. Chorionic Gonadotrophin (CG) and Luteinizing Hormone (LH) in males;
3. Insulins;
4. Corticotrophins;
5. Growth Hormone (GH), Insulin-like Growth Factor-1 (IGF-1), Fibroblast Growth Factors (FGFs), Hepatocyte Growth Factor (HGF), Mechano Growth Factors (MGFs), Platelet-Derived Growth Factor (PDGF), Vascular-Endothelial Growth Factor (VEGF) as well as any other growth factor affecting muscle, tendon or ligament protein synthesis/degradation, vascularisation, energy utilization, regenerative capacity or fibre type switching; and other substances with similar chemical structure or similar biological effect(s).

S3. BETA-2 AGONISTS

All beta-2 agonists (including both optical isomers where relevant) are prohibited except salbutamol (maximum 1600 micrograms over 24 hours) and salmeterol when taken by inhalation in accordance with the manufacturers’ recommended therapeutic regime.

The presence of salbutamol in urine in excess of 1000 ng/mL is presumed not to be an intended therapeutic use of the substance and will be considered as an Adverse Analytical Finding unless the Athlete proves, through a controlled pharmacokinetic study, that the abnormal result was the consequence of the use of a therapeutic dose (maximum 1600 micrograms over 24 hours) of inhaled salbutamol.

S4. HORMONE ANTAGONISTS AND MODULATORS

The following classes are prohibited:

1. Aromatase inhibitors including, but not limited to:
 - aminoglutethimide
 - anastrozole
 - androsta-1,4,6-triene-3,17-dione (androstatrienedione)

- 4-androstene-3,6,17 trione (6-oxo)
 - exemestane
 - formestane
 - letrozole
 - testolactone
2. Selective estrogen receptor modulators (SERMs) including, but not limited to:
 - raloxifene
 - tamoxifen
 - toremifene
 3. Other anti-estrogenic substances including, but not limited to:
 - clomiphene
 - cyclofenil
 - fulvestrant
 4. Agents modifying myostatin function(s) including, but not limited, to:
 - myostatin inhibitors

S5. DIURETICS AND OTHER MASKING AGENTS

Masking agents are prohibited. They include:

- diuretics
- desmopressin
- plasma expanders (e.g. glycerol; intravenous administration of albumin, dextran, hydroxyethyl starch and mannitol)
- probenecid

and other substances with similar biological effect(s).

NOTE: Products like Taraxatone, SHREDDER, Xpel, H2O Lean and so on are NOT banned by CRONUS and will NOT test positive

Diuretics include:

- acetazolamide
- amiloride
- bumetanide
- canrenone
- chlorthalidone
- etacrynic acid
- furosemide
- indapamide
- metolazone
- spironolactone
- thiazides (e.g. bendroflumethiazide, chlorothiazide, hydrochlorothiazide)
- triamterene

and other substances with a similar chemical structure or similar biological effect(s) (except drospironone, pamabrom and topical dorzolamide and brinzolamide, which are not prohibited).

The use in- and out-of-competition, as applicable, of any quantity of a substance subject to threshold limits (i.e. salbutamol, morphine, cathine, ephedrine, methylephedrine and pseudoephedrine) in conjunction with a diuretic or other masking agent requires the deliverance of a specific Therapeutic Use Exemption for that substance in addition to the one granted for the diuretic or other masking agent.

S6. STIMULANTS

All stimulants (including both optical isomers where relevant) are prohibited, except imidazole derivatives for topical use and those stimulants included in the 2011 Monitoring Program*.

Stimulants include:

a. Non-Specified Stimulants:

- adrafinil
- amfepramone
- amiphenazole
- amphetamine

- amphetaminil
- benfluorex
- benzphetamine
- benzylpiperazine
- bromantan
- clobenzorex
- cocaine
- cropropamide
- crotetamide
- dimethylamphetamine
- etilamphetamine
- famprofazone
- fencamine
- fenetylline
- fenfluramine
- fenproporex
- furfenorex
- mefenorex
- mephentermine
- mesocarb
- methamphetamine(d-)
- p-methylamphetamine
- methylenedioxyamphetamine
- methylenedioxymethamphetamine
- modafinil
- norfenfluramine
- phendimetrazine
- phenmetrazine
- phentermine
- 4-phenylpiracetam (carphedon)
- prenylamine
- prolintane

A stimulant not expressly listed in this section is a Specified Substance.

b. Specified Stimulants (examples):

- adrenaline**
- cathine***
- ephedrine****
- etamivan
- etilefrine
- fenbutrazate
- fencamfamin
- heptaminol
- isometheptene
- levmetamfetamine
- meclofenoxate
- methylephedrine****
- methylhexaneamine (dimethylpentylamine)
- methylphenidate
- nikethamide
- norfenefrine
- octopamine
- oxilofrine
- parahydroxyamphetamine
- pemoline

- pentetrazol
- phenpromethamine
- propylhexedrine
- pseudoephedrine*****
- selegiline
- sibutramine
- strychnine
- tuaminoheptane

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

* The following substances included in the 2011 Monitoring Program (bupropion, caffeine, phenylephrine, phenylpropanolamine, pipradol, synephrine) are not considered as Prohibited Substances.

** Adrenaline associated with local anaesthetic agents or by local administration (e.g. nasal, ophthalmologic) is not prohibited.

*** Cathine is prohibited when its concentration in urine is greater than 5 micrograms per milliliter.

**** Each of ephedrine and methylephedrine is prohibited when its concentration in urine is greater than 10 micrograms per milliliter.

***** Pseudoephedrine is prohibited when its concentration in urine is greater than 150 micrograms per milliliter.

S7. NARCOTICS

The following are prohibited:

- Buprenorphine
- dextromoramide
- diamorphine (heroin)
- fentanyl and its derivatives
- hydromorphone
- methadone
- morphine
- oxycodone
- oxymorphone
- pentazocine
- pethidine

S8. CANNABINOIDS

Natural (e.g. cannabis, hashish, marijuana) or synthetic delta 9-tetrahydrocannabinol (THC) and cannabimimetics [e.g. "Spice" (containing JWH018, JWH073), HU-210] are prohibited.

S9. GLUCOCORTICOSTEROIDS

All glucocorticosteroids are prohibited when administered by oral, intravenous, intramuscular or rectal routes.

PROHIBITED METHODS

M1. ENHANCEMENT OF OXYGEN TRANSFER

The following are prohibited:

1. Blood doping, including the use of autologous, homologous or heterologous blood or red blood cell products of any origin.
2. Artificially enhancing the uptake, transport or delivery of oxygen, including, but not limited to, perfluorochemicals, efaproxiral (RSR13) and modified haemoglobin products (e.g. haemoglobin-based blood substitutes, microencapsulated haemoglobin products), excluding supplemental oxygen.

M2. CHEMICAL AND PHYSICAL MANIPULATION

The following is prohibited:

1. Tampering, or attempting to tamper, in order to alter the integrity and validity of Samples collected during Doping Control is prohibited. These include but are not limited to catheterisation, urine substitution and/or adulteration (e.g. proteases);
2. Intravenous infusions are prohibited except for those legitimately received in the course of hospital admissions or clinical investigations;

3. Sequential withdrawal, manipulation and reinfusion of whole blood into the circulatory system is prohibited.

M3. GENE DOPING

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

1. The transfer of nucleic acids or nucleic acid sequences;
2. The use of normal or genetically modified cells;
3. The use of agents that directly or indirectly affect functions known to influence performance by altering gene expression. For example, Peroxisome Proliferator Activated Receptor δ (PPAR δ) agonists (e.g. GW 1516) and PPAR δ -AMP-activated protein kinase (AMPK) axis agonists (e.g. AICAR) are prohibited.