



Complete Summary

GUIDELINE TITLE

Use of performance-enhancing substances.

BIBLIOGRAPHIC SOURCE(S)

Gomez J. Use of performance-enhancing substances. Pediatrics 2005 Apr;115(4):1103-6. [8 references] [PubMed](#)

GUIDELINE STATUS

This is the current release of the guideline.

All policy statements from the American Academy of Pediatrics automatically expire 5 years after publication unless reaffirmed, revised, or retired at or before that time.

COMPLETE SUMMARY CONTENT

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SCOPE

DISEASE/CONDITION(S)

Use of performance-enhancing substances

GUIDELINE CATEGORY

Counseling
Prevention
Screening

CLINICAL SPECIALTY

Pediatrics

INTENDED USERS

Physicians

GUIDELINE OBJECTIVE(S)

To convey a general policy with regard to performance enhancing drugs

TARGET POPULATION

Pediatric patients (from birth to 18 years of age) using or at risk of using performance-enhancing substances

INTERVENTIONS AND PRACTICES CONSIDERED

Screening

1. Risk assessment
2. Inquiries regarding the use of performance-enhancing drugs
3. Additional investigative tests for patients using performance-enhancing drugs

Counseling/Prevention

1. Proactive discouragement of performance-enhancing drug use
2. Patient and parent education
3. Use of training and nutrition programs
4. Counseling of patients using performance-enhancing drugs

MAJOR OUTCOMES CONSIDERED

- Incidence of performance-enhancing drug use
- Risk factors associated with performance-enhancing drug use

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Not stated

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Not stated

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

Not stated

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

To assist the pediatrician in dealing with users or potential users of performance-enhancing substances, the American Academy of Pediatrics offers the following recommendations:

1. Use of performance-enhancing substances for athletic or other purposes should be strongly discouraged.
2. Parents should take a strong stand against the use of performance-enhancing substances and, whenever possible, demand that coaches be educated about the adverse health effects of performance-enhancing substances.

3. Schools and other sports organizations should be proactive in discouraging the use of performance-enhancing substances, incorporating this message into policy and educational materials for coaches, parents, and athletes.
4. Interventions for encouraging substance-free competition should be developed that are more positive than punitive, such as programs that teach sound nutrition and training practices along with skills to resist the social pressures to use performance-enhancing substances.
5. Colleges, schools, and sports clubs should make use of educational interventions that encourage open and frank discussion of issues related to the use of performance-enhancing substances, with the aim of promoting decisions about personal drug use based on principles of fair competition and character rather than on the fear of getting caught.
6. Coaches at all levels, including youth sports, should encourage wholesome and fair competition by emphasizing healthy nutrition and training practices, taking a strong stand against cheating, and avoiding the "win-at-all-costs" philosophy.
7. Inquiries about the use of performance-enhancing substances should be made in a manner similar to inquiries about use of tobacco, alcohol, or other substances of abuse. Guidelines for patient confidentiality should be followed and explained to the patient.
8. Athletes who admit using performance-enhancing substances should be provided unbiased medical information about benefits, known adverse effects, and other risks. When appropriate, additional testing may be necessary to investigate or rule out adverse medical effects.
9. The pediatric health care professional providing care for an athlete who admits to using a performance-enhancing substance should explore the athlete's motivations for using these substances, evaluate other associated high-risk behaviors, and provide counseling on safer, more appropriate alternatives for meeting fitness or sports-performance goals.
10. Nonusers of performance-enhancing substances should have their decisions reinforced while establishing an open channel of communication if questions about performance-enhancing substances arise in the future.
11. Pediatric health care professionals should promote safe physical activity and sports participation by providing or making available sound medical information on exercise physiology, conditioning, nutrition, weight management, and injury prevention and by helping to care for sports-related medical conditions and injuries.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of supporting evidence is not specifically stated for each recommendation.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

Appropriate care of pediatric patients who use or may use performance-enhancing drugs

POTENTIAL HARMS

None stated

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

IMPLEMENTATION TOOLS

Patient Resources
Pocket Guide/Reference Cards

For information about [availability](#), see the "Availability of Companion Documents" and "Patient Resources" fields below.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness
Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

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ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2005 Apr

GUIDELINE DEVELOPER(S)

American Academy of Pediatrics - Medical Specialty Society

SOURCE(S) OF FUNDING

American Academy of Pediatrics

GUIDELINE COMMITTEE

Committee on Sports Medicine and Fitness

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Committee on Sports Medicine and Fitness, 2002-2003: Reginald L. Washington, MD, *Chairperson*; David T. Bernhardt, MD; *Jorge Gomez, MD; Miriam D. Johnson, MD; Thomas J. Martin, MD; Frederick E. Reed, MD; Eric Small, MD

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FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

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GUIDELINE AVAILABILITY

Electronic copies: Available from the [American Academy of Pediatrics \(AAP\) Policy Web site](#).

Print copies: Available from American Academy of Pediatrics, 141 Northwest Point Blvd., P.O. Box 927, Elk Grove Village, IL 60009-0927.

AVAILABILITY OF COMPANION DOCUMENTS

The following is available:

- American Academy of Pediatrics. Guidelines for pediatricians: performance-enhancing substances. Sports shorts. 2004 Nov. Issue 12.

Electronic copies: Available in Portable Document Format (PDF) from the [American Academy of Pediatrics \(AAP\) Policy Web site](#).

PATIENT RESOURCES

The following is available:

- American Academy of Pediatrics. Guidelines for parents, coaches, and athletes: performance-enhancing substances. Sports shorts. 2004 Nov. Issue 12.

Electronic copies: Available in Portable Document Format (PDF) from the [American Academy of Pediatrics \(AAP\) Policy Web site](#).

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NGC STATUS

This NGC summary was completed by ECRI on May 17, 2005. The information was verified by the guideline developer on June 27, 2005.

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