



Sports-medicine MDs want steroid supplements off shelves

The American College of Sports Medicine says anabolic steroids such as androstenedione, as well as other “dietary supplements,” should be re-evaluated and considered drugs.

The college, which has 17 000 members in more than 70 countries, says some products now labelled as supplements should be considered drugs because they contain recognized active ingredients. Dietary supplements are supposed to have little or no physiologic effects.

On Aug. 31, the college asked the US Food and Drug Administration (FDA) to reconsider its Dietary Supplements Health and Education Act of 1994. In Canada, for instance, users need a prescription to obtain androstenedione. In the US, it is an over-the-counter product.

“Steroid hormones, whether labelled as drugs or hormones, can have side effects long after their use,” says Dr. Gary Wadler, an American expert in sports-related drug use. In September, his phone rang off the hook following the sudden death of Florence Griffith Joyner, the 38-year-old sprinter who won gold at the 1988 Olympics. She was suspected of steroid use, but this was never proved.

“That category of supplements should be recategorized,” says Wadler, an associate professor of clinical medicine at New York University. “I don’t know how manufacturers got away with it [the dietary supplement label]. It’s absolutely incredible. I’m hoping reason will prevail.”

These “supplements” are attractive to professional baseball and basketball players because they are not screened for steroid use, says Wadler.



Jeannie Simpson

He said baseball’s new Sultan of Swing, Mark McGwire, was “living on” creatine as he chased Babe Ruth’s home run record this summer.

In its statement to the FDA, the college focused on the use of the dietary supplements androstenedione, dehydroepiandrosterone, creatine and hydroxy B methyl butyrate (HMB), a new supplement that promises to increase lean body mass while decreasing fat and muscle damage associated with bodybuilding.

Wadler says HMB received inadequate trials, with only 28 subjects receiving the substance for just 3 weeks. “Our concern is that many of the newer substances have not yet been tested for their long-term physiological and potentially adverse effects. Even more of a concern is the use of these products by adolescents.”

At the moment, supplement manufacturers don’t have to prove whether their products are safe or effective. “And if people have an adverse effect, the FDA has to go to court, it can’t just pull the product off the shelves,” says Wadler. “[Current legislation] allows manufacturers lots of leeway providing they don’t make any medical claims.” — *Barbara Sibbald*

With apartheid behind them, South Africa’s MDs unite under single body

South Africa’s physicians have responded to the establishment of democracy in the country by uniting under one banner — the South African Medical Association. Dr. H.A. Hanekom, the secretary general, says the new organization replaces the Medical Association of South Africa and other organiza-

tions created because of the apartheid policy that used to divide the country. “The objective is to unite the various organizations into a credible and truly representative association that is able to exercise a meaningful role in the transformation of the health care system,” he explained in a letter to the CMA.

There appears to be considerable interest in the new organization, with as many as 70 new membership applications arriving per day. The first president is Dr. Bernard Mandell, an orthopedic surgeon, while Dr. Zolile Mlisana, a pediatrician, is the first chair of the Board of Directors.