

Guidance for Players with Asthma or other breathing problems

WHAT IS ASTHMA?

Asthma and Exercise Induced Asthma (EIA) are airway diseases associated with narrowing and inflammation of the airways. Symptoms include:

- Wheezing when breathing out
- Coughing
- Tightness of the chest
- Excess mucus production
- Breathing difficulties

It is possible for a Player to experience these symptoms only when exercising. This is called Exercise Induced Asthma (EIA) and is caused by breathing in 'unfiltered' air which needs to be warmed and filtered. This 'unfiltered' air causes the lungs and airways to become dry and inflamed.

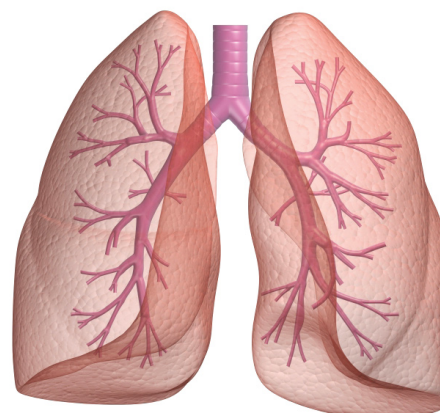


BETA-2 AGONISTS

If you have been diagnosed with Asthma and have to take medication you may have to complete a Therapeutic Use Exemption Form or complete a Declaration of Use otherwise you may be in breach of the rules. This depends on the type of inhaled medication you are taking.

There are 2 types of Beta-2 agonists:

- Short acting (e.g. salbutamol, terbutaline). This is emergency medication as it instantly relieves symptoms and continues to work for 3-4 hours. If you have to use this medication 3-4 times a week that is a sign that your asthma is not being managed effectively so you should speak to your Doctor.
- Long acting (e.g. formoterol, salmeterol.) These take between 10-30 minutes to work and continue for 8-12 hours. It is not recommended that they are used without inhaled corticosteroids.



HOW TO DIAGNOSE & MANAGE ASTHMA?

To make a correct diagnosis of Asthma, a lung function test (Bronchodilation or Bronchoprovocation) is necessary. This test can be carried out by some GPs and respiratory centres. Once correctly diagnosed, it is important that you use appropriate medication to manage your condition or your health and performance are likely to suffer. The 2 main forms of medication are:

- Inhaled corticosteroids are the most effective drugs for long-term control and prevention of Asthma. They reduce the occurrence of symptoms and the need for short-acting Beta-2 agonists. It usually takes a few days to start to feel the effects and a few weeks to get the maximum benefit.
- Inhaled Beta-2 agonists relax the muscles to reduce the airways narrowing. They do not reduce inflammation so unless your asthma rarely affects you it is recommended that inhaled corticosteroids are also used.

ACTION TO BE TAKEN IF PRESCRIBED MEDICATION

Players have a responsibility to ensure that they take appropriate action when prescribed any medication. The table below details the action to take:

Medication	Action required
Salbutamol	Declaration of Use
Salmeterol	Declaration of Use
Formoterol	TUE
Terbutaline	TUE
Corticosteroids	Declaration of Use

Objective medical evidence will have to be provided to obtain a TUE. Details are on the TUE form and your medical staff should help you. Declarations of Use can be completed on the 100% ME website - <http://declaration.uk sport.gov.uk>.

OTHER CONDITIONS WITH SIMILAR SYMPTOMS TO ASTHMA

It is common for Players to be misdiagnosed with asthma when they in fact have other breathing problems.

Many Players only have difficulty breathing during exercise so it can be difficult for medical staff to make an accurate diagnosis in these circumstances as they will not have breathing difficulties when they see the Doctor.

There are a variety of other conditions that have similar symptoms to asthma.

These can often be treated through a range of breathing exercises and may not require medication. Speak to your Club's medical staff about breathing exercises which may have a positive impact on your performance.

OVER-USING MEDICATION

It is very easy to over-use your Beta-2 medication as the results are instant and can get you through a game or a training session. However, if you are relying on your Beta-2 medication it may be a sign that your asthma is not being properly managed. Other down sides are:

- The body may build up a tolerance to the medication, which will make it less effective which will mean you will need to take more - see Upper Limits section
- The airways become more sensitive to asthma triggers, meaning you will have more symptoms.
- Side effects of the substances include increased heart rate and the shakes.
- You put yourself at risk of an anti-doping rule violation - see Upper Limits section

UPPER LIMIT OF SALBUTAMOL

Even if you have completed a Declaration of Use for a salbutamol inhaler you can still commit an anti-doping rule violation if salbutamol levels in your urine are found to be over 1000 nanograms per millilitre. If you are using your inhaler as prescribed you will not reach this level. You are only likely to reach this level if you overuse your inhaler by taking more than the maximum dose permitted. Make sure you read the leaflet that comes with your inhaler to check the maximum amount you should take.

INHALER TECHNIQUE

It is essential that you inhale your medication properly to ensure that the full dose reaches your lungs. You should:

- Be stood up or sat up straight
- Take a few deep breaths and then breathe out gently.
- Place the inhaler in your mouth and seal your lips around the mouthpiece.
- Breathe in slowly, deeply and steadily through the mouthpiece and as you breathe in press the release button to activate the inhaler. This is one 'puff' of medication.
- Continue to breathe in deeply so that the medicine can work its way to your lungs.
- Hold your breath for approximately 10 seconds (or as long as is comfortable) before breathing out slowly.
- If another 'puff' is needed wait 30 seconds and then repeat these steps.

Poor inhaler technique makes the medication less effective meaning you need more which may lead to use going over the upper limit and breaching the rules which could lead to a sanction.

During a game it can be difficult to find time to make sure you technique is correct; however for the medication to be effective you must make best efforts.

FURTHER INFORMATION

For further information please either speak to your Club Doctor, the RFL or the 100% ME Education team.

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