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## Domestic Policy Council

Gilbert, Alan

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Steroid Use

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**SERIES:**

Gilbert, Alan - Subject Files

**FOLDER TITLE:**

Steroid Use [1]

**FRC ID:**

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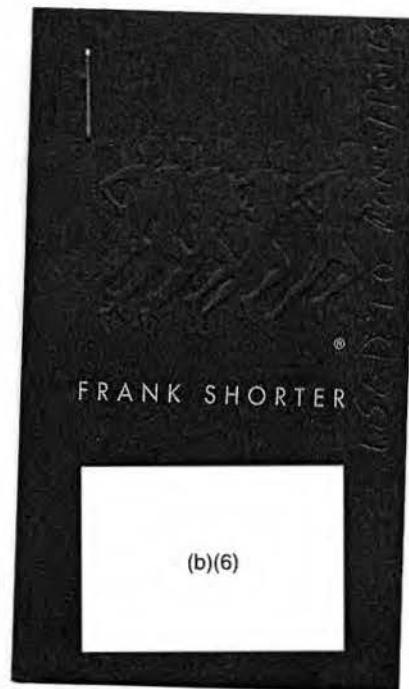
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## Memo to the Record

**Date:** 09/08/2017

**Collection:** Domestic Policy Council

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**RE:** Steroid Use [1]

**Notes:**

A copy of the report entitled "USADA (United States Anti-Doping Agency) 2001 Annual Report" from 2001 is included at this location in this folder. This report is available online at: [https://www.usada.org/wp-content/uploads/2001\\_annual\\_report.pdf](https://www.usada.org/wp-content/uploads/2001_annual_report.pdf) and was not scanned. If the report is no longer available at this address, please contact the George W. Bush Presidential Library.

Stenographic Transcript  
Before the

Subcommittee on Consumer Affairs,  
Foreign Commerce, and Tourism

COMMITTEE ON COMMERCE, SCIENCE,  
AND TRANSPORTATION

**UNITED STATES SENATE**

HEARING ON STEROID USE IN PROFESSIONAL  
BASBALL  
AND ANTI-DOPING ISSUES IN AMATEUR SPORTS

TUESDAY, JUNE 18, 2002

WASHINGTON, D.C.

ALDERSON REPORTING COMPANY  
1111 14TH STREET, N.W.  
SUITE 400  
WASHINGTON, D.C. 20005-5650  
(202) 289-2260

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1 HEARING ON STEROID USE IN PROFESSIONAL BASEBALL  
2 AND ANTI-DOPING ISSUES IN AMATEUR SPORTS  
3

4 Tuesday, June 18, 2002  
5

6 U.S. Senate

7 Subcommittee on Consumer  
8 Affairs, Foreign Commerce,  
9 and Tourism

10 Committee on Commerce,  
11 Science, and Transportation  
12 Washington, D.C.  
13

14 The subcommittee met, pursuant to notice, at 9:30 a.m. in  
15 Building SR-253, Hon. Byron L. Dorgan, chairman of the  
16 subcommittee, presiding.

17  
18 Staff assigned: David Streckland Senior Counsel  
19 *gens*; Carlos Sierra Senior Counsel, Repub.  
20  
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1           OPENING STATEMENT OF HON. BYRON L. DORGAN, U.S. SENATOR  
2 FROM NORTH DAKOTA

3           Senator Dorgan: We'll call the subcommittee hearing to  
4 order. If we can ask that the door be closed, please.

5           Good morning. This morning we are going to hold a  
6 subcommittee hearing, an oversight hearing, on the subject of  
7 steroid use in baseball, and we will go beyond that some to  
8 deal with the issue of the use of performance-enhancing drugs  
9 in other sports, as well.

10          Following the revelation in Sports Illustrated, a rather  
11 lengthy article on the issue of steroid use in baseball, and  
12 other reports over a long period of time about the use of  
13 performance-enhancing drugs, we decided to hold this hearing.  
14 Senator McCain had sent a request for a hearing, and I felt a  
15 hearing was appropriate, as well. And so this is an oversight  
16 hearing that will not necessarily lead to Federal legislation,  
17 although we hope to hear about this issue this morning from a  
18 number of different points of view and, from that, evaluate  
19 what, if any, legislative action is necessary.

20          Let me say that, first of all, I'm a big baseball fan. I  
21 grew up playing baseball in a town of 400 people. I grew up  
22 50 miles from the nearest daily newspaper. I rushed to get it  
23 every day so that I could get to the sports page to try to  
24 find out, in that tiny little piece in a daily newspaper of a  
25 town of 10,000, they gave me just a little information every

1 day of what was happening in baseball, but I was quick to get  
2 there every single day to find out how my favorite player,  
3 Willie Mays, and others, were doing. So I come to this with a  
4 love of baseball, an appreciation of the splendid athletes and  
5 the owners and others who are involved in baseball.

6 Baseball is truly "America's pastime," as it's called.  
7 To become a big leaguer is synonymous with success. And  
8 serious questions these days are raised about that, and we  
9 want to explore them in some detail this morning.

10 Let me start by saying we invited a fair number of  
11 baseball players, especially retired players, to be with us  
12 this morning. None of them chose to want to be here at this  
13 hearing. But serious questions are being raised by baseball  
14 players themselves, both retired and active players, about  
15 what some say is an epidemic of performance-enhancing drugs  
16 among many of baseball's most talented competitors.

17 And the fallout of that, because baseball players are  
18 idols for other youngsters and set examples, the fallout of  
19 that is in college sports, and in high school sports, as well,  
20 where fairness should set the standard for the next generation  
21 of amateur and professional athletes, not performance-  
22 enhancing drugs.

23 The article I mentioned, which was an investigative  
24 article in a Sports Illustrated magazine, described former  
25 National League Most Valuable Player Ken Caminiti as saying

1 that he was on steroids when he won the prestigious Most  
2 Valuable Player award in 1996. Caminiti maintains that the  
3 pressures to perform are so great, he wouldn't discourage  
4 others from using steroids. He also said that at least half  
5 of the major league ballplayers use steroids. We invited Mr.  
6 Caminiti to be present today, as well.

7 Another retired baseball star, Jose Canseco, is working  
8 on a book in which he reportedly will detail his earlier  
9 claims that up to 85 percent of his former colleagues use  
10 steroid drugs. These claims, by some, have been discounted as  
11 not at all related to fact, but they raise questions, and we  
12 want to have people respond to those questions today.

13 Mr. Caminiti says he started using steroids in 1996.  
14 Prior to that time, he had never hit more than 26 home runs in  
15 a season. At the end of that year, however, he hit 40 home  
16 runs, had a .326 batting average, and was selected to the  
17 National League as the Most Valuable Player status.

18 The medical consequences of performance-enhancing drugs,  
19 and specifically steroids, can be devastating -- for example,  
20 heart disease, stroke, aggressive behavior, all kinds of  
21 dysfunctions. The damage to baseball's credibility, however,  
22 can be as great. Unlike professional football, basketball, or  
23 the Olympics, major league baseball, at the present time, has  
24 no drug testing program. Unfortunately, no current or  
25 professional baseball players, as I said, have responded to

1 our invitation today, but we will hear from owners,  
2 representatives of the baseball players, and others at this  
3 hearing.

4 So let me just say, as a fan of this wonderful sport,  
5 that I want this sport to produce splendid athletes that can  
6 be role models for America's youngsters, but I certainly don't  
7 want to see American's pastime become a pastime in which these  
8 wonderful athletes engage in the use of performance-enhancing  
9 drugs in order to make it. That is not what baseball should  
10 be about. Drugs have no place in our culture, and certainly  
11 not in America's big-league ballparks.

12 So, as I said, Senator McCain had also requested, with a  
13 letter, that we hold a hearing on this subject. I'm pleased  
14 to be able to chair that hearing today.

15 And let me call on my colleague, Senator McCain, for  
16 opening comments.

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1 STATEMENT OF HON. JOHN MC CAIN, U.S. SENATOR FROM ARIZONA

2 Senator McCain: Well, thank you, Senator Dorgan, for  
3 chairing the hearing to discuss the prevalence and effects of  
4 performance-enhancing drugs in major league baseball and  
5 sports in general. And I welcome our panel and thank them for  
6 appearing today.

7 I think that everyone should be aware that this committee  
8 does have an oversight responsibility of professional sports  
9 and Olympics, and we do spend time on these issues. And this  
10 one, I think, is important, beyond its effect on major league  
11 baseball players. Like it or not, professional athletes serve  
12 as role models to our kids. Mark McGwire's admission, in  
13 1998, that he was using andro to enhance his performance led  
14 to a fivefold increase in sales of that dietary supplement.  
15 Andro is currently legal and in some ways, I think our  
16 witnesses will tell us today it has some of the same physical  
17 effects and adverse health consequences as anabolic steroids.

18 I'm concerned about baseball. I'm concerned about the  
19 possibility of a looming strike. I'm concerned about the  
20 health of the baseball players themselves. But I'm more  
21 concerned about the effect this recent spate of publicity has  
22 on young athletes all over America. If somehow young athletes  
23 believe that it is not only acceptable, but the way to become  
24 a major league baseball player is through the use of anabolic  
25 steroids, that's a terrible message to send to young American

1 men and women.

2 So I think this issue is more important than just whether  
3 a group of highly paid baseball players are using substances  
4 which will damage, and witnesses will testify, that can be  
5 very damaging to their health. It's the example that is set  
6 for other young Americans that I am far more concerned about  
7 and we should be concerned about.

8 I've gotten to know Mr. Fehr very well. I think he's a  
9 fair and decent and eloquent representative of the players.  
10 I've had the opportunity of knowing Jerry Colangelo for many  
11 years, and I'm very pleased that he's here today. And I hope  
12 that Mr. Colangelo, in his testimony, will touch on the fact  
13 that the NBA and the NFL -- but he has been involved in the  
14 NBA before he was involved in organized baseball -- has  
15 somehow been able to enact rules and regulations as far as  
16 drug testing is concerned, and I hope that baseball players  
17 and the players union will look to what's being done in the  
18 NBA and the NFL as perhaps a model for what can be adopted by  
19 major league baseball players.

20 So I thank you, Mr. Chairman, and I, again, want to point  
21 out that this is more important than whether a bunch of highly  
22 paid athletes are using anabolic steroids. It's far more  
23 important than that, and that's the reason why I think this  
24 hearing today is important. And I hope that the players, as  
25 well as the owners, understand the damage that this can do to

1 the credibility of the game. I don't think any major league  
2 baseball player in the record books would like to have an  
3 asterisk next to their name for having used steroids in order  
4 to enhance their performance as they attempt to attain a  
5 lasting record as outstanding athletes.

6 So, Mr. Chairman, I thank you for the hearing, and we  
7 look forward to hearing the witnesses today.

8 [The prepared statement of Senator McCain follows:]

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1 Senator Dorgan: Senator McCain, thank you.

2 Senator Brownback?

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1 STATEMENT OF HON. SAM BROWNBACK, U.S. SENATOR FROM KANSAS

2 Senator Brownback: Thank you, Mr. Chairman, and thank  
3 you for holding the hearing.

4 I want to join my colleague from Arizona in his comments  
5 about the impact of these being broader than just on the  
6 players themselves. Baseball is America's national pastime  
7 and holds a special place in Americana and our hearts.

8 It's certainly with dismay that I've read so many  
9 disturbing comments made by today's ballplayers who got into  
10 the use of performance-enhancing drugs and steroids and  
11 illegal substances, other than ones that are prescribed by  
12 doctors.

13 Clearly, there seems to be a major problem and a major  
14 disappointment requiring redress. It seems to me the simplest  
15 course of action would be, as my colleague from Arizona has  
16 stated, for Major League Baseball to follow the National  
17 Football League and the National Basketball Association and  
18 adopt a no-tolerance policy, complete with year-round testing  
19 as well as medical treatment and counseling for violators.  
20 While these policies may not achieve perfect results, they are  
21 an honest effort to do right by their sport, meet the  
22 expectations of the fans, and look after the long-term health  
23 and welfare of their players.

24 Now, I understand that Major League Baseball, which  
25 supports a no-tolerance policy, is constrained by its

1 collective bargaining agreement with its players and  
2 management, cannot unilaterally impose such a steroid-testing  
3 policy. I would urge major league ballplayers to match  
4 management's concern in this matter and employ their  
5 representatives to achieve a resolution. I'm confident that  
6 management and the players can work through this to everyone's  
7 satisfaction, especially the fans and the young children,  
8 young players all across the country watching major league  
9 sports, who I refuse to believe do not mind steroid-assisted  
10 cheating in a game they love. This is a matter internal to  
11 baseball, and that is where it can best be addressed, and I  
12 really hope, for the future of the sport and the future of the  
13 young players watching those professional athletes all across  
14 this country and across the world, that it will be solved by  
15 the sport.

16 Thank you, Mr. Chairman.

17 Senator Dorgan: Senator Brownback, thank you very much.

18 Let me make a very important point. I used the names of  
19 two retired baseball players today only because those players  
20 themselves have been quoted. I think it important, and I  
21 don't believe anyone will -- but it's important that we not  
22 use names of other players. This is not about -- it is not to  
23 tarnish the reputation of players. I only used the names of  
24 two retired players who had already admitted steroid use and  
25 wanted to speak about it publicly. And we had invited both of

1       them to come to this hearing.

2               The Senate has scheduled a cloture vote at 9:45, which is  
3       about two minutes. What I would like to do is to recess the  
4       hearing for two minutes, having taken these opening statements  
5       and then we will go vote and come back. And at that point,  
6       we'll call the witnesses to the witness table and begin. I  
7       don't want to interrupt the testimony of the witnesses.

8               So we will take a ten-minute recess.

9               [Recess.]

10              Senator Dorgan: We'd ask if we could reconvene. And if  
11       our witnesses could take their seats at the table, I will  
12       introduce them.

13              We have Mr. Robert Manfred, starting on my left, who is  
14       the executive vice president for Labor Relations in the Office  
15       of the Commissioner for Major League Baseball. We have Mr.  
16       Jerry Colangelo, the managing general partner for the Arizona  
17       Diamondbacks, which won the World Series last year. Mr.  
18       Colangelo also owns the National Basketball Association's  
19       Phoenix Suns team. We also have Donald Fehr, who is the  
20       executive director and general counsel for the Major League  
21       Baseball Players Association, which is the players union.  
22       He's the lead negotiator for the players in their collective  
23       bargaining with owners. And we have Mr. Frank Shorter,  
24       chairman of the board of United States Anti-Doping Agency, who  
25       is a former Olympic athlete of substantial renown. He won the

1 gold medal in the marathon at the 1972 Olympic Games in  
2 Munich, Germany. We have Mr. Greg Schwab, the former all-  
3 conference offensive lineman for the University of Oregon, who  
4 took steroids in his attempt to make the San Diego Chargers  
5 football team. And we have Dr. Bernard Greisemer, a  
6 pediatrician from Missouri, who has written extensively about  
7 steroid use and teenagers and also has worked as a medical  
8 officer at the past four Olympic Games.

9 So let me begin. Well, let's begin with you, Mr.  
10 Manfred, if we can.

11 And your entire statements will be a part of the  
12 permanent record. You may summarize, and we will ask all of  
13 you to present your statements, following which we will ask  
14 questions.

15 Mr. Manfred, why don't you proceed?  
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1           STATEMENT OF ROBERT D. MANFRED, JR., EXECUTIVE VICE  
2           PRESIDENT FOR LABOR RELATIONS, OFFICE OF THE COMMISSIONER,  
3           MAJOR LEAGUE BASEBALL

4           Mr. Manfred: Thank you. Good morning. My name is  
5           Robert Manfred, and I'm executive vice president of Labor and  
6           Human Resources for Major League Baseball.

7           In recent weeks, the issue of steroid use in major league  
8           baseball has received considerable attention as a result of  
9           revelations by two prominent former players. As I sit here  
10          today, I cannot tell you whether all of the statements made by  
11          these former players are accurate.

12          Senator Dorgan: Move the microphone to --

13          Mr. Manfred: Thank you.

14          I cannot tell you whether all of the statements made by  
15          these former players are accurate. What I can tell you is  
16          that long before anybody was writing about the use of steroids  
17          in the major leagues, our office, at the direction of  
18          Commissioner Selig, undertook a multifaceted initiative  
19          designed to deal with the related problems of steroids and  
20          nutritional supplements.

21          The Commissioner began this initiative approximately two  
22          years ago by convening a meeting of Major League Baseball's  
23          medical advisor, Dr. Robert Millman, and group of team  
24          doctors. This group of respected physicians came to the  
25          meeting burdened by two related concerns. First, they were

1 worried about what they perceived to be a growing trend of  
2 steroid use in both the major leagues and the minor leagues.  
3 The doctors believed that steroids were a threat to the health  
4 of our players and to the integrity of our game.

5 Second, the team doctors were concerned that steroid use  
6 by major league players was sending a very dangerous message  
7 to young people who dream about becoming major league players.  
8 The doctors all agreed that steroid use by young people  
9 created health risks even greater than those faced by adults.

10 The team physicians also came to the meeting armed with  
11 troubling data concerning injuries to major league players.  
12 The discussion centered on facts such as these. There are  
13 approximately 900 major league players on active rosters at  
14 any given time. In 2001, that group of 900 players accounted  
15 for 467 trips to the disabled list. This is a 16-percent  
16 increase from just three years earlier.

17 Not only are more players going on the disabled list, but  
18 their period of disability is increasing. In 2001, players  
19 spent a total of 27,430 days on the disabled list, compared to  
20 slightly more than 22,000 just three years before. This is an  
21 increase of 20 percent. The average stay on the disabled list  
22 has also increased.

23 The cost of payments to disabled players increased from  
24 \$129 million in 1998 to a staggering \$317 million last year.  
25 While the doctors could not scientifically establish a causal

1 connection between the increase in injuries and steroid use,  
2 there was a strong consensus that steroids were a contributing  
3 factor. In this regard, the doctors noted a change in the  
4 type of injuries suffered by players, with many of the  
5 injuries being associated with significantly increased muscle  
6 mass operating on the same joints, ligaments, and tendons.

7 Last, the doctors raised a topic that should be of great  
8 concern to Congress. They noted that since the passage of the  
9 Dietary Supplement Health and Education Act, nutritional  
10 supplement manufacturers have been given much greater freedom  
11 to market potentially dangerous products essentially without  
12 regulation, provided that the products are not claimed to  
13 prevent, diagnosis, treat, or cure a disease or illness. Many  
14 of the doctors expressed the view that some nutritional  
15 supplements, particularly androstenedione, had all of the  
16 properties of an anabolic steroid.

17 In the wake of this meeting, Commissioner Selig  
18 spearheaded the development of a four-point initiative to  
19 address the issue of steroids in professional baseball. The  
20 goal of the initiative was and is to eliminate the use of  
21 steroids and dangerous nutritional supplements in professional  
22 baseball.

23 The first point in the program involved the continued  
24 funding of scientific research on the nutritional supplement  
25 androstenedione in an effort to confirm that the supplement,

1 in fact, has the characteristics of an anabolic steroid. In  
2 conjunction with the players association, the Office of the  
3 Commissioner funded research on this topic at Harvard. In  
4 brief, the study indicates that, taken in sufficient  
5 quantities, androstenedione elevates the level of testosterone  
6 in the body in the same manner as an anabolic steroid. I  
7 recommend the article that summarizes this research to you and  
8 urge Congress to consider passing legislation that would  
9 regulate androstenedione and related substances, such as DHEA.

10 The second point in the Commissioner's initiative was  
11 education. We felt that it was important for our major league  
12 and minor-league players to understand the essential facts  
13 related to steroids and nutritional supplements and the health  
14 risks associated with those substances. Again in conjunction  
15 with the players association, an impressive educational  
16 program was developed. Dr. Millman and Dr. Joel Soloman, the  
17 players association's medical advisor, jointly authored a  
18 booklet entitled "Steroids and Nutritional Supplements," which  
19 has been distributed to all major league and minor league  
20 players. In addition, over the last two years, all major  
21 league and minor league players have attended in person  
22 steroid education programs.

23 The third point in the Commissioner's initiative was the  
24 promulgation of the Minor League Drug Prevention and Treatment  
25 Program. The new policy implemented by the Commissioner

1 dramatically increased the role of the Office of the  
2 Commissioner in minor league testing, banned the use of all  
3 steroids and androstenedione, subjected all minor league  
4 players to three random tests each year, mandated  
5 individualized treatment programs for first offenders,  
6 required discipline for subsequent offenders, and established  
7 confidentiality as a central tenet of the program. Last year,  
8 the Commissioner's office spent more than a million dollars  
9 just on the testing component of this program.

10 The fourth point in the Commissioner's initiative was to  
11 negotiate a steroid program applicable to major league  
12 players. I say "negotiate," because drug testing is, of  
13 course, a mandatory topic of collective bargaining with the  
14 players association.

15 Contrary to the impression created by Mr. Fehr's written  
16 statement, we do not have an agreed-upon steroid policy in  
17 Major League Baseball. The Commissioner has unilaterally  
18 promulgated a policy on steroids that the union has  
19 consistently said is not binding on its players. While we  
20 have worked together in certain situations, the current  
21 regulation is ad hoc at best, and dysfunctional at worst.

22 To address this problem, we made a comprehensive proposal  
23 on steroids to the players association last March. That  
24 proposal would ban the use of steroids and androstenedione,  
25 would require three tests for all major league players each

1 year, would provide treatment programs for first offenders,  
2 would require discipline for repeat offenders, would establish  
3 confidentiality as a central tenet of the program, and would  
4 involve the participation of the players association and its  
5 medical advisor in the administration of the program.

6 To date, we have received no substantive response from  
7 the players association to our March proposal. We remain  
8 hopeful, however, that the Players Association will come  
9 forward and address this issue in a meaningful way at the  
10 collective bargaining table. Over the long term, an  
11 effective, confidential, treatment-based program, including  
12 testing, will be good for all players and for the game.

13 [The prepared statement of Mr. Manfred follows:]

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1 Senator Dorgan: Mr. Manfred, thank you very much.

2 Next we will hear from Jerry Colangelo, who is the  
3 chairman of AZBP Limited Partnership, the ownership group for  
4 the Arizona Diamondbacks. Mr. Colangelo, welcome, and thank  
5 you for being here.

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1           STATEMENT OF JERRY COLANGELO, MANAGING GENERAL PARTNER,  
2           ARIZONA DIAMONDBACKS

3           Mr. Colangelo: Thank you, Senator.

4           Mr. Chairman and members of the committee, thank you for  
5           this opportunity to appear before you today to discuss an  
6           issue of great concern to me, as an owner of a major league  
7           club and as a fan of baseball: the increasing prevalence of  
8           steroids in major league baseball.

9           I am fortunate enough to have been involved in baseball  
10          since 1998, when the Arizona Diamondbacks were admitted to the  
11          National League as an expansion team. Last season, I  
12          experienced the ultimate thrill in all of professional sports,  
13          watching my team win perhaps the most exciting World Series in  
14          baseball history. That win was a tremendous boost for the  
15          State of Arizona and generated terrific publicity for our  
16          sport.

17          Unfortunately, in recent weeks, baseball has been forced  
18          to endure a spate of negative publicity as a result of  
19          revelations of steroid use by two former players. These  
20          comments suggest that steroid use is prevalent in baseball and  
21          on the increase. I believe this trend must be stopped and  
22          reversed for two principal reasons -- one, to protect the  
23          players safety and health, and, two, to protect the integrity  
24          of the game.

25          First, it is my understanding that players who use

1     steroids risk serious health consequences, such as increased  
2     likelihood of injury, high blood pressure, high cholesterol,  
3     hypertension, depression, and even infertility. Major League  
4     Baseball should do everything within its power to discourage  
5     players from taking these risks.

6             Major league players make it to this elite playing field  
7     because of their unwavering commitment and desire to win. As  
8     an all-state high school and an All-Big-Ten basketball player  
9     for the University of Illinois, I understand and appreciate  
10    this desire to compete and succeed. Indeed, it is this desire  
11    to succeed that produces greatness.

12            Unfortunately, some players' desire is so strong that  
13    they are willing to take steroids in an effort to get an edge  
14    over other players. They do this in spite of the negative  
15    consequences that may result from using steroids. This  
16    conduct, at the major league level, has the inevitable domino  
17    effect of forcing other baseball players, in both the major  
18    and minor leagues, to engage in the same conduct. In fact,  
19    many players believe that without this same edge, they may be  
20    placed at a competitive disadvantage as compared to other  
21    players.

22            My purpose here is not to blame the players for this  
23    conduct. Instead, my purpose is to shed light on a problem  
24    that can be remedied and to encourage all those involved to  
25    work together to do so.

1           As Rob Manfred discussed, Major League Baseball has done  
2 everything possible, everything that is possible to do without  
3 the Players Association's consent, to prevent and end steroid  
4 use. We believe, however, that more needs to be done.

5           Based on my experience as an owner of the Phoenix Suns, a  
6 team in the National Basketball Association, the  
7 implementation of a comprehensive, mandatory steroid testing  
8 program would go far towards addressing this serious problem.  
9 Unlike Major League Baseball, the NBA has a mandatory steroid  
10 testing program in place for its first year and veteran  
11 players, which was agreed to by the National Basketball  
12 Players Association. This testing program is set forth in the  
13 parties' 1999 collective bargaining agreement.

14           Pursuant to the NBA's testing program, each first-year  
15 player is subject to up to 4 unannounced steroid tests per  
16 year, and each veteran player is subject to 1 unannounced  
17 steroid test per year. It is my opinion that the NBA's  
18 testing program has been instrumental in discouraging players  
19 from using these dangerous and illegal substances.

20           We are hopeful that baseball will have a mandatory  
21 steroid testing program in the near future. Such a program  
22 would be a necessary and fundamental step in the direction of  
23 ridding steroid use in Major League Baseball.

24           And, in summary, when I see the cartoons, the editorials,  
25 the columns that attack the credibility of our players, we

1 have a serious problem. I've very concerned about the health,  
2 as I said earlier, both short term and long term. And this is  
3 everyone's issue. It's not an owners' issue, it's not a  
4 Players Association issue. It's an issue that we must deal  
5 with collectively. When you look at the economic impact, in  
6 terms of the loss of millions of dollars, that's serious.

7 And enough can't be said about the role model influence  
8 that players have. Our fans are being affected. They're  
9 questioning the athletes themselves.

10 And so I would urge that the Players Association  
11 recognize that this is not an "if" or a "maybe." This is a  
12 must -- something that must be done, for all the appropriate  
13 reasons.

14 Thank you.

15 [The prepared statement of Mr. Colangelo follows:]

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1 Senator Dorgan: Mr. Colangelo, thank you very much.

2 Next we will hear from Donald Fehr, executive director  
3 and general counsel for Major League Baseball, for the Major  
4 League Baseball Players Association. Mr. Fehr, welcome. You  
5 may proceed.

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1           STATEMENT OF DONALD M. FEHR, EXECUTIVE DIRECTOR AND  
2           GENERAL COUNSEL, MAJOR LEAGUE BASEBALL PLAYERS ASSOCIATION,  
3           NEW YORK

4           Mr. Fehr: Thank you, Mr. Chairman.

5           My name is Donald M. Fehr, and I'm privileged to serve as  
6           the executive director of the Major League Baseball Players  
7           Association, a position I've held for more than 15 years now.  
8           The MLBPA is the exclusive collective bargaining  
9           representative of all major league players, and I appear here  
10          today in response to the committee's invitation to testify.

11          As the Chairman indicated, there were a number of current  
12          major league players that were also invited to testify. Due  
13          to the pressures of the schedule -- we don't have off days in  
14          baseball that amount to anything -- it was impossible for them  
15          to appear, and I trust that the committee will understand.

16          First, we appreciate the committee's interest in and  
17          concern about the recent reports of the use of illegal  
18          steroids in major league baseball which has led to this  
19          hearing and which has prompted the comments made by the three  
20          Senators that we heard from as the hearing began.

21          Let me be clear, on behalf of myself and my entire  
22          membership. The Major League Baseball Players Association  
23          neither condones nor supports the use by players or by anyone  
24          else of any unlawful substance, be it steroids or otherwise,  
25          nor do we support or condone the unlawful use of any legal

1 substance. I cannot put it more plainly. Both the use of any  
2 illegal substance and the illegal use of any lawful substance  
3 are wrong.

4 As the members of the committee know, and as was  
5 reflected in the opening statements this morning, and as Mr.  
6 Manfred and Mr. Colangelo have mentioned, we are currently  
7 engaged in the process of negotiating new collective  
8 bargaining agreements with the major league clubs covering  
9 terms and conditions of employment for major league players.  
10 It's no secret that collective bargaining in baseball is  
11 sometimes a difficult process. That certainly has been the  
12 history. But it is also clear, as has been mentioned, that  
13 the appropriate venue in which these issues will be addressed  
14 is within that process. And it is certainly my hope and that  
15 of my membership that, before too much longer, we will be able  
16 to reach a just, fair, and effective agreement with the owners  
17 on all of the issues which divide us, certainly including the  
18 ones that brought us to this hearing today.

19 As it happens, I was scheduled to begin to make a trip to  
20 see all of my members for the purpose of discussing collective  
21 bargaining. While all the meetings aren't scheduled yet, the  
22 first one, as it happens, takes place tomorrow morning in  
23 Montreal. And I can assure the members of the committee that  
24 these issues will receive serious and thoughtful discussion in  
25 those meetings. And I think it goes without saying that the

1 recent publicity and the interest of this committee will help  
2 to spur that process.

3 Additionally, however, as I think is also clear, we are  
4 not engaged in the process of collective bargaining here, and  
5 I will not be doing that.

6 I also appreciate very much the Chairman's comments that  
7 we will not be discussing individuals here. That's difficult  
8 to do, and I certainly believe that's the appropriate course.

9 Let me further correct what may be a misimpression. If  
10 one were simply to pay attention to cursory sound bites or  
11 sensational magazine covers or some of the other press  
12 coverage that we've seen, one might believe that Major League  
13 Baseball and the Players Association have no substance use or  
14 abuse program, have not cooperated together, have not thought  
15 about these issues, have not considered what to do, or, if we  
16 have such a program, if we have thought about these things, if  
17 we have considered what to do, that it bears no reference to  
18 steroids. As Mr. Manfred has indicated, that clearly is not  
19 the case.

20 For a long time the Players Association and the clubs  
21 have worked together with medical professionals that we  
22 jointly appoint to develop programs which are directed and  
23 administered by those physicians. Those programs have a  
24 testing component, based upon reasonable cause to believe that  
25 a player has engaged in misconduct or other activity affecting

1 his ability to play.

2 With respect to steroids, the views of our physicians,  
3 which are entirely endorsed by the Players Association, as  
4 well as the clubs, are, in fact, reflected in the brochure or  
5 the booklet that is referenced in my testimony and that Mr.  
6 Manfred has referenced, entitled "Steroids and Nutritional  
7 Supplements," which, as Rob has indicated, is the principal  
8 educational document that we utilize and has been distributed  
9 to all players. The committee has copies.

10 And as that document makes clear, all AAS s, as the  
11 document refers to it -- anabolic androgenic steroids -- are  
12 classified under Federal law as Schedule III drugs requiring a  
13 doctor's prescription to be lawfully used. There are serious  
14 health risks. There are serious penalties for unlawful use or  
15 distribution, et cetera.

16 But, as the Chairman and the members of the committee  
17 certainly understand, this an issue not so easily disposed of  
18 as perhaps the sound bites and the rhetoric might otherwise  
19 suggest. There are some significant and complex public policy  
20 issues involved. Consider just one example. Substances that  
21 you might say have "steroidal properties," like DHEA, or that  
22 we believe to be, in fact, steroids, androstenedione, are  
23 fully legal under Federal law, are sold over the counter in  
24 health food and other stores all across the country and, so  
25 far as I know, are without even the simple protections of a

1 warning label or an age restriction on purchase, even though  
2 the medical evidence is pretty compelling of the dangers of  
3 some of those substances, especially to women and to youth.

4 As was suggested in that booklet, which I remind everyone  
5 was jointly authored, it may well be time for the Federal  
6 Government to revisit whether such products should be covered  
7 by Schedule III or otherwise the subject of appropriate  
8 legislation or regulation, and we would welcome such  
9 examination by the Congress, by the Food and Drug  
10 Administration, or by any other appropriate body.

11 Another important issue which is implicated in this  
12 discussion we summarize in a single word, and that's  
13 "privacy." We believe that any program can be successful, on  
14 steroids or anything else, only if stringent safeguards are in  
15 place to protect the privacy of the employees, particularly so  
16 in an industry like baseball in which the lives of the players  
17 -- and the rest of us, for that matter -- are so much in the  
18 public eye.

19 We also recognize the ongoing public debate, which has  
20 been referred to in the opening statements this morning, about  
21 the merits of cause-based versus random testing. The Players  
22 Association has always believe that one should not, absent  
23 compelling safety considerations, invade the privacy of an  
24 individual without a substantial reason -- that is to say  
25 without cause -- related to conduct by that individual and not

1 merely to his status as an employed baseball player.

2 We understand, of course, that the principles underlying  
3 the Fourth Amendment restrictions on unreasonable searches and  
4 seizures are not directly applicable to the private employment  
5 setting. Nevertheless, such principles should not, we submit,  
6 be lightly put aside.

7 Let me address a question that is no doubt on the minds  
8 of the Chairman, Senator McCain, and the other members of the  
9 committee, who for so long have been supporters of amateur and  
10 professional sports in this country. It has been referred to  
11 in the opening statements this morning. What message do we  
12 send the children, the kids who are playing ball, maybe  
13 dreaming of a career in the big leagues? I think it's the  
14 same message that we send the players. Play this great game -  
15 - and we all think it's the greatest one there is -- to the  
16 best of your ability, and do so under the rules. Do not  
17 jeopardize your health. Do not use illegal drugs. And don't  
18 use any drug or any substance, even if entirely lawful, except  
19 on the advice and the recommendation of a competent and  
20 knowledgeable physician for a good and substantial reason.

21 Finally, no one cares more about the game, cares more  
22 about the health of the players, than the players themselves.  
23 In a very real sense, they are the game. They understand the  
24 issues that are involved, and we will find a way, consistent  
25 with the principles we believe in, I am confident, over the

1 course of this collective bargaining negotiation, to reach a  
2 satisfactory conclusion. I can't tell you today what that  
3 will be. I can tell you we're committed to the process.

4 Thank you very much.

5 [The prepared statement of Mr. Fehr follows:]

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1 Senator Dorgan: Mr. Fehr, thank you very much.

2 Next we will hear from Greg Schwab. Mr. Schwab, when I  
3 mentioned you as a witness, I, regrettably, did not give the  
4 second portion of the introduction. I said you were a former  
5 all-conference offensive lineman from the University of Oregon  
6 who took steroids in your attempt to make the San Diego  
7 Chargers football team. I should have proceeded to say, as  
8 well, that you've since become a passionate advocate against  
9 steroid use, as a high school coach and a high school  
10 associate principal. You've had one-on-one experience with  
11 high school students who have attempted to use steroids, and  
12 we appreciate your work. I should have mentioned that as the  
13 second portion of your introduction. I do so now.

14 We welcome you here, and we'll be happy to receive your  
15 testimony.

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1 STATEMENT OF GREG SCHWAB, ASSOCIATE PRINCIPAL, TIGARD  
2 HIGH SCHOOL, TIGARD, OREGON

3 Mr. Schwab: Thank you. It's truly a great honor for me  
4 to be here today.

5 Dietary supplements and performance-enhancing drug use  
6 among high school athletes is increasing at an alarming rate.  
7 Recent studies have shown as much as a 60 percent increase in  
8 steroid use among high school athletes.

9 To better understand what has caused this increase, I  
10 would like to share with you some of the things I have  
11 observed in my 14 years as a teacher, as a coach, and  
12 currently as a school administrator. I would also like to  
13 draw on some of my insights as someone who has experienced  
14 steroid use firsthand for two and a half years as a college  
15 football player and an aspiring player in the National  
16 Football League.

17 For whatever reason, the focus of high school athletics  
18 has shifted today. No longer do we preach the values taught  
19 by participation in a team or individual sport -- the values  
20 of competition, teamwork, dedication, and cooperation. These  
21 values have been replaced by a new focus or value, simply to  
22 excel at the highest possible level.

23 Now, while you may be asking yourself, "What is so bad  
24 about wanting to excel at the highest level," consider what  
25 many of these high school athletes are willing to do in order

1 to excel. High school athletes today use all sorts of sports  
2 supplements. Protein powders, sports drinks, ephedrine,  
3 creatine, and androstenedione are used routinely today as part  
4 of their training regimens. Any high school athlete can walk  
5 into a store or health club and purchase these dietary  
6 supplements, no questions asked.

7 On several occasions, I have had conversations with the  
8 athletes I coached about these issues. Many of them have come  
9 to me to ask my advice about taking supplements to help them  
10 perform at their highest levels. I have always stressed:  
11 take healthier alternatives to these supplements. But for  
12 many, supplements are simply too easy to get. Now, while I am  
13 no expert on this, I have always believed that dietary  
14 supplement use can lead athletes to using performance-  
15 enhancing drugs, like anabolic steroids.

16 The three-sport athlete no longer exists in most high  
17 schools today. They have been replaced by athletes who train  
18 year round, honing their skills in one sport. Basketball  
19 teams play 60 games in the summer, plus a 25-game regular  
20 season schedule. Baseball players play 50 games in fall  
21 leagues in addition to 25-regular season schedules and 50-  
22 game summer schedules.

23 As a football coach, I expect my players to commit  
24 countless hours in the weight room, running, lifting, and  
25 working on fundamental skills. Add to this the proliferation

1 of summer sport camps athletes and coaches can choose from,  
2 and it is no wonder that many high school athletes have no  
3 time for other activities they might be interested in, and it  
4 is no wonder that many athletes feel they have to turn to  
5 supplements in order to have the strength to complete these  
6 long seasons.

7 For many male high school athletes, pro athletes are  
8 major influences. They are the role models. They choose the  
9 jersey numbers of their favorite professional players. They  
10 emulate their training regimens. They emulate their style of  
11 play. And they are influenced by the supplement and drug use.  
12 When a professional athlete admits to using steroids, the  
13 message young athletes hear is not always the one that is  
14 intended. Young athletes often believe that steroid use by  
15 their role models gives them permission to use, that is simply  
16 part of what one must do in order to become an elite athlete.

17 Coaches, whether they intend to or not, put a great deal  
18 of pressure on their athletes. The demands and expectations  
19 of most high school programs rival many college programs. In  
20 a sport like football, where the emphasis is on getting bigger  
21 and stronger, coaches are constantly pressuring their athletes  
22 to gain more weight, to be able to lift more weight than they  
23 could a month ago. As a coach, I caught myself saying to my  
24 athletes the very things that made me feel the pressure to  
25 grow in size and strength beyond what my body was capable of

1 naturally. Athletes grow to feel like no matter what they do,  
2 it is not going to be enough for their coaches. Couple this  
3 with the fact that athletes are, by their nature, highly  
4 competitive, and it is easy to understand why they might turn  
5 to supplements and performance-enhancing drugs, like anabolic  
6 steroids.

7 One of the biggest challenges I faced as a coach was  
8 trying to effectively dissuade my athletes from using  
9 supplements and performance-enhancing drugs. I have always  
10 been very open and honest with anyone who asks me about my  
11 using steroids. I've regularly shared with my athletes the  
12 effects that steroids had on me while I used them for two and  
13 a half years during my career as a football player. My hope  
14 is that if I can relate to them on a personal level, they will  
15 be more likely to listen to me. Too often, though, what they  
16 see is someone who used steroids and turned out fine. Instead  
17 of listening to me because I am being honest, they think that,  
18 if nothing bad happened to me, then they will have the same  
19 experience.

20 The problem is that there is too little information out  
21 there on the dangers of steroids. All adolescents hear is how  
22 much steroids will help them perform. We need to get the word  
23 out at every level and in every way that steroids and  
24 supplements are dangerous.

25 I cannot stress enough how easy it is to get supplements.

1 I cannot stress enough how widespread the use of the  
2 supplements is among high school athletes. Drug stores,  
3 supermarkets, and health food stores all carry these  
4 supplements, and they can be purchased by anyone. While I can  
5 only speak for the athletes I coached, I would say that at  
6 least 70 percent of them have used some kind of dietary  
7 supplement.

8 Percentages of steroid use are much harder to predict,  
9 partly because steroid users simply do not talk about their  
10 use. It is not something that anyone would openly admit to.  
11 Based on my personal experience, the number of the athletes  
12 that I have worked with over the years, a conservative  
13 estimate would be between five and ten percent of the athletes  
14 that I have coached have used steroids.

15 I hope you understand that supplement and steroid use  
16 among high school athletes is a growing problem that needs to  
17 be addressed. I strongly encourage you to take the lead and  
18 help curb this problem. Steroid precursors, sold as dietary  
19 supplements, need to be regulated. They need to become harder  
20 to get. I cannot stress enough what kind of impact supplement  
21 use has on young athletes. This, to me, seems to be the first  
22 step in helping to solve the larger issue of steroid use.

23 Thank you.

24 [The prepared statement of Mr. Schwab follows:]

25 [SUBCOMMITTEE INSERT]

1           Senator Dorgan: Mr. Schwab, thank you very much for your  
2 testimony. We appreciate your being here.

3           Next we will hear from Mr. Frank Shorter, chairman of the  
4 board for the United States Anti-Doping Agency. A former  
5 Olympic athlete, Mr. Shorter won the gold medal in the  
6 marathon at the '72 Olympic Games in Munich, and the silver  
7 medal at the '76 Olympic Games in Montreal.

8           Mr. Shorter, welcome. We're pleased that you are here.  
9 You may proceed.

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1           STATEMENT OF FRANK SHORTER, CHAIRMAN, UNITED STATES ANTI-  
2           DOPING AGENCY

3           Mr. Shorter: Thank you. Good morning, Mr. Chairman,  
4           members of the committee. My name is Frank Shorter, and thank  
5           you very much for the opportunity to appear before you today.

6           I may be better known as an Olympic marathoner and  
7           television commentator, but today I come to you as chairman of  
8           the United States Anti-Doping Agency, which has been  
9           recognized by Congress as the independent -- independent --  
10          national anti-doping agency for the Olympic sport in the  
11          United States. Our mission is to protect and preserve the  
12          health of athletes, the integrity of competition, and the  
13          well-being of sports through the elimination of doping. Last  
14          year, we conducted more than 4,800 tests for steroids and  
15          other prohibited doping substances, many of these totally  
16          unannounced.

17          As is readily apparent from today's headlines, anabolic  
18          steroids and the many steroid precursors sold in the United  
19          States as dietary supplements have become a major problem in  
20          sport. U.S. athletes are in the untenable position of being  
21          at risk of a failed doping test, if they take any dietary  
22          supplement, because of product contamination.

23          In Olympic sport, the most notable systematic,  
24          State-supported program of doping with anabolic steroids was  
25          that conducted by the East Germans from 1974 until the Berlin

1 Wall fell in 1989. For example, after less than two years of  
2 steroid use, the East German women's swimming team competed in  
3 the 1976 Olympics in Montreal. In contrast to their  
4 performance in 1972, when they won only 5 medals, they won 18  
5 medals, including 11 of 13 possible golds in 1976. The  
6 results of this program have since been substantiated through  
7 the testimony of many of the athletes themselves, their  
8 coaches and doctors, during the East German doping trials  
9 where doctors and coaches were convicted.

10 The documented side effects of steroids and steroid  
11 precursors among these East German athletes and others are  
12 severe. They include effects on the liver and reproductive  
13 system, growth arrest in adolescence, susceptibility to  
14 cancers, permanent -- permanent -- masculinization of women,  
15 and feelings of androgyny that are permanent -- let's not  
16 forget the other half of the population here -- shrinking of  
17 testicles and impotence in men, and severe facial disfiguring  
18 through acne.

19 Now, I have a very personal interest in doping in Olympic  
20 sport. I won the gold medal for the United States in the  
21 marathon in the 1972 Olympics in Munich. And four years  
22 later, I ran an even better race, but finished second to an  
23 East German at the Montreal games. At the time, I knew it  
24 would be absolutely possible to increase my performances and  
25 increase my chances of beating the East Germans and others who

1 were using steroids -- and let me tell you, the athletes know  
2 who's doing what -- but it never occurred to me to do so. To  
3 me, that's not what sport is about. I didn't cheat, and I  
4 finished second.

5 In our current sport environment, the availability of  
6 steroid precursors as dietary supplements is of major concern.  
7 And one example, as we've all seen here, is androstenedione,  
8 which originally was developed as part of the East German  
9 steroid program. It metabolizes into the body into the  
10 steroid testosterone.

11 And following the acknowledgment by Mark McGwire in his  
12 home-run record year that he's used androstenedione, as we've  
13 seen, sales in the United States dramatically increased, as  
14 Senator McCain mentioned. This phenomenal demand,  
15 particularly among teenagers, led to the mass marketing of  
16 other steroid precursors, like norandrostenedione, which also  
17 metabolizes in the body and produces a steroid nandrolone.

18 Through our testing program, USADA has recognized a  
19 serious problem with the sale of steroid precursors and  
20 dietary supplements. In increasing numbers, athletes are  
21 failing doping tests after taking mislabeled dietary  
22 supplements. Reasonably cautious athletes know how to avoid  
23 products that have steroid precursors reflected on the product  
24 label. But, unfortunately, a surprisingly high percentage of  
25 dietary supplements contain doping substances, which will get

1 you busted by us, that are not on the label.

2 The International Olympic Committee found, in a recent  
3 study of 624 dietary supplements, that 41 percent of the  
4 products from American companies contained a steroid precursor  
5 or a banned substance, and it wasn't disclosed on the label.

6 The fact that U.S. companies have flooded the market with  
7 steroid precursors has caused the international sporting  
8 community to charge that the United States is the prime source  
9 of international doping pollution. The international  
10 community can't understand why all our professional sports do  
11 not test for steroids and other performance-enhancing  
12 substances. They simply can't understand why we allow steroid  
13 precursors to be sold over the counter, like candy, to our  
14 teenagers and to their teenagers, via the Internet. It is  
15 important to the image of America and to all clean athletes to  
16 not be perceived as a society that condones the use of  
17 steroids and steroid precursors.

18 The status quo presents significant health risks for  
19 athletes and the general public. It undermines the image of  
20 the United States and our athletes as actually being committed  
21 to drug-free sport. The solution to the steroid precursor  
22 problem is to follow the lead of other nations and regulate  
23 steroid precursors as steroids, give them steroid status.  
24 This could be accomplished through a minor modification of the  
25 Controlled Substances Act that already recognizes the

1 importance of regulating immediate precursors to controlled  
2 substances -- in other words, precursors in manufacturing, as  
3 opposed to metabolizing in your body. With only a minor  
4 modification, the definition in the act of "immediate  
5 precursor," the Attorney General would have the authority to  
6 classify steroid precursors as controlled substances equal to  
7 steroids. It is likely that the production of these steroid  
8 precursors will stop as soon as they can no longer be sold  
9 over the counter.

10 Our organization considers Congress to be the appropriate  
11 place to turn for the necessary leadership on these issues.  
12 USADA believes we are in the midst of a health crisis that's  
13 rooted in professional and amateur sport and impacts the youth  
14 of our nation. It's not limited to their quest for athletic  
15 performance and accomplishment, but also includes the basic  
16 pursuit of recognition.

17 Now is the time to enact change that will prevent our  
18 children from becoming a generation exposed to wide steroid  
19 use. Children have always emulated their sports idols. I  
20 did. And these same children -- we have to wake up to the  
21 fact -- more often than we would like to admit, know much more  
22 than adults -- their parents and everyone else who's an adult  
23 -- do about just what their idols did and are doing to achieve  
24 their goals. They should never have to feel that, at some  
25 time in their athletic careers, there will be no choice but to

1 take these illegal performance-enhancing drugs and the  
2 precursors that produce these drugs in their bodies.

3 We plead with you to provide intervention to this health  
4 crisis and seek legislation and regulation.

5 Thank you.

6 [The prepared statement of Mr. Shorter follows:]

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1 Senator Dorgan: Mr. Shorter, thank you very much.

2 And, finally, we will hear from Dr. Bernard Greisemer.  
3 He is a pediatrician from Missouri who has written extensively  
4 about steroid use and teenagers.

5 Dr. Greisemer, thank you for being here. Why don't you  
6 proceed?

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1           STATEMENT OF DR. BERNARD GREISEMER, PEDIATRICIAN,  
2           SPRINGFIELD, MISSOURI

3           Dr. Greisemer: Thank you, Mr. Chairman.

4           This year, I will begin my 25th year as a pediatrician  
5           and sports medicine specialist, and I appreciate this  
6           opportunity to present both medical information and my  
7           concerns regarding the increasing use in young athletes of  
8           products that contain anabolic steroids. The highly  
9           publicized use of these substances by professional athletes  
10          does influence the incidence of use in elementary, middle  
11          school, high school, and collegiate athletes.

12          For purposes of our discussion, pediatricians do not  
13          distinguish between anabolic steroids and steroid precursors  
14          that are in dietary supplements. These substances have the  
15          same effects. These substances have the same health risks.

16          There are three points I would like to briefly address  
17          that serve to reinforce some of the statements that Senator  
18          McCain made in his opening comments. There are major health  
19          problems associated with the use of anabolic steroids in all  
20          age ranges. However, the side effects of anabolic steroids in  
21          younger athletes have the potential of far greater risks than  
22          they do in adult athletes. Young athletes who start using  
23          these products in the middle school years and continue to use  
24          them through adolescence and into adulthood are likely to face  
25          higher risks of cardiac, hepatic, dermatologic damage. Many

1 of my teenage male athletes are very unhappy to learn that  
2 managing their premature male pattern baldness is very  
3 difficult if they have been using dietary supplements with  
4 steroids since they were in 7th grade. The risk of  
5 cardiovascular complications of the use of these substances  
6 are the subject of ongoing research. And the possibility that  
7 the complication rate for younger athletes is higher than the  
8 adult population is only now beginning to be explored. The  
9 list of organ systems in young athletes that can potentially  
10 suffer severe adverse effects of anabolic steroids includes  
11 nearly every organ system in the human body.

12 One side effect of these substances is unique to the  
13 younger athletes. Medical research has documented that  
14 anabolic steroids, even when used in disease management,  
15 result in the acceleration of pubertal development and  
16 premature height growth arrest. This adverse effect is not  
17 seen in the adult population of athletes and is unique to the  
18 skeletally immature young athlete. This growth arrest is  
19 irreversible.

20 In women of all ages, many of the effects of these  
21 substances on the vocal cords and the reproductive system are  
22 irreversible. The evidence that these products result in  
23 long-term health complications in young women and may even  
24 result in severe deformities in their offspring is currently  
25 coming to public attention in Germany.

1           Younger athletes also have an additional problem. The  
2 product disclaimers and fine print lists of side effects that  
3 accompany these substances are often written in language that  
4 exceeds the reading comprehension level of middle school  
5 students. Young athletes see the flashy banners, hear the  
6 endorsements of professional athletes, and see the effects of  
7 these drugs on professional athletes when they are competing  
8 on television. Young athletes are less likely to read and  
9 understand warning labels.

10           Further, in many circumstances, the labeling of products  
11 containing anabolic steroids is either inaccurate or  
12 unavailable. This fact is primarily what brings young  
13 athletes into our offices with questions about anabolic  
14 androgenic steroids.

15           This leads to my second point of discussion. The effect  
16 of media exposure and marketing campaigns on young athletes is  
17 clearly established. Perception about self image, peer  
18 relationships, and success are easily manipulated at this age  
19 range. Major corporate efforts and financial resources are  
20 targeted at this age range in attempts to influence lifestyles  
21 and purchasing trends. These trends are expected to persist  
22 into adulthood. This statement is supported by research in  
23 our medical literature and by research from the media,  
24 advertising, and marketing industries.

25           In this context, professional athletes are major role

1 models for our young athletes in the clothes they wear, the  
2 cars they drive, the food they eat, and the drugs and dietary  
3 supplements they take. The millions of dollars that are spent  
4 by major corporations in linking their products to a  
5 particular athlete, team, or sporting event counter any  
6 argument that professional athletes are not affecting the  
7 lifestyles of our young athletes. Use of and media exposure  
8 of the use of anabolic steroids among professional athletes  
9 also directly affects the interest in, the perception of  
10 benefits of, and the use of these substances in our young  
11 athletes.

12 I need to emphasize that I and other pediatricians are  
13 seeing the effect that professional athletes' behavior has in  
14 affecting the behavior of our young athletes at increasingly  
15 younger ages over the last two decades. We see this in the  
16 questions they ask regarding anabolic steroids and other  
17 dietary supplements that are promoted as having anabolic  
18 performance-enhancing effects. We see the frequency of these  
19 questions with each new media expose of the use of these  
20 substances by professional athletes.

21 Pediatric medical literature has now documented the use  
22 of these products that contain anabolic androgenic steroids in  
23 athletes as early as the middle school age range. Recent  
24 research has documented use of anabolic androgenic steroids in  
25 2.6 percent of both male and female young athletes as early as

1 5th grade.

2 In my experience, one of the most compelling reasons that  
3 these young athletes are using or are thinking about using  
4 these products is that the media and the aggressive marketing  
5 campaign used by manufacturers all identify these products --  
6 and in the case of manufacturers, heavily promote the use of  
7 these products -- as being used by the pros.

8 Third, pediatricians strongly agree with the Surgeon  
9 General of the United States that physical activity and proper  
10 nutrition are critical components of health in our young  
11 people. Establishing lifelong patterns of physical activity  
12 in the middle school and high school age ranges is one of the  
13 most effective means of achieving this goal. Youth sports are  
14 the most important way in which American youth become and  
15 remain physically active. Any role model for youth in the  
16 arena of sports could have a positive influence on these young  
17 athletes to initiate and to continue competitive physical  
18 activity.

19 Conversely, any perception that a young athlete can't  
20 participate, compete, or excel in sports without the use of  
21 anabolic steroids will adversely affect youth participation in  
22 sports. If the perception involving professional athletes and  
23 anabolic steroids is that everybody does it or you can't win  
24 without these substances, many young athletes will either stop  
25 participating or start using these substances.

1           With physical activity becoming an increasingly important  
2 component of health in America, any effort to reduce the use  
3 of anabolic steroids, at all levels of competition, will  
4 increase the participation rates of our young athletes, who  
5 understand that they can just do it without cheating.  
6 Pediatricians are adamant in their support of any program or  
7 legislation that strives to keep our young athletes healthy  
8 and strives to keep our youth sports programs healthy and  
9 drug-free.

10           In summary, I strongly urge you to support any program  
11 that seeks to improve the health of the children in America.  
12 I strongly urge you to consider the impact of the use of the  
13 anabolic androgenic steroids by professional athletes and the  
14 effect that it has on our young athletes. Any effort to curb  
15 the use of these products in athletes of all ages, whether by  
16 drug-testing programs and educational programs that are  
17 currently being developed by USADA, or by supporting youth  
18 programs that promote healthy training and conditioning  
19 alternatives to the use of these drugs, will be helpful to us.  
20 Pediatricians are working hard to develop healthy, drug-free,  
21 physically active young Americans.

22           I thank you again for this opportunity to bring this  
23 important issue to your attention.

24           [The prepared statement of Dr. Greisemer follows:]  
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1 Senator Dorgan: Dr. Greisemer, thank you very much.

2 You have -- or someone has a series of samples in front  
3 of them. Is that -- who brought those samples?

4 Mr. Shorter: Yeah, we all did. These were just a trip  
5 to a local supplement store -- went in and bought them. And  
6 this would be androstenedione. This would be  
7 norandrostenedione. The doctor can explain this one. This  
8 one has progesterone. I don't know why you would want to rub  
9 a gel, if you're a man, on your arm with something that's --

10 Dr. Greisemer: Now, why one of my male 18-year-old  
11 patients would want to put an oral contraceptive on his scalp  
12 is beyond me.

13 Senator Dorgan: Well, it's beyond us, as well.

14 [Laughter.]

15 Senator Dorgan: You want to --

16 Mr. Shorter: But I think the operative -- the  
17 illustration is, this essentially -- androstenedione -- was  
18 developed by the East Germans, because it was a very  
19 convenient way of basically getting testosterone into the  
20 bodies of their athletes, and you can buy it like candy -- a  
21 12-year-old kid.

22 Our main attorney sent his 11-year-old son into a health  
23 food store last year, and he was able to buy all this stuff.

24 Senator Dorgan: So let me start, then, with a question  
25 that relates to that. If, for example, in baseball, they ban

1 steroid use and test for it -- have a rigid testing regime --  
2 but don't deal with the precursors, have they solved the  
3 problem, Mr. Shorter?

4 Mr. Shorter: Well, if they test for -- the doctor can  
5 answer that a little better -- but if they do ban the use of  
6 testosterone, no, they would have to ban the use of  
7 androstenedione.

8 Dr. Greisemer: The dietary precursors, the level of  
9 sophistication in testing will pick up the dietary supplement  
10 precursors of anabolic steroids. So if they allow testing,  
11 they will pick up the use of those precursors.

12 Senator Dorgan: And, Mr. Colangelo, you have ownership  
13 of both a team in Major League Baseball and also in the  
14 National Basketball Association. You have two professional  
15 teams. You have testing mandatory in one and not in the  
16 other. Is that correct?

17 Mr. Colangelo: Yes.

18 Senator Dorgan: Can you describe the two circumstances?  
19 Do you feel confidence that the testing with respect to the  
20 NBA players is effective and testing that can be relied upon?

21 Mr. Colangelo: Yes. First of all, I was more or less  
22 appalled to find out that baseball did not have a program when  
23 I came into baseball, because I have been front and center in  
24 the NBA on this issue. I had some personal experiences with  
25 our basketball team years ago in Phoenix, and basically took

1 on the Players Association on this issue, head on. I've been  
2 a strong proponent of random mandatory testing, not to catch  
3 anyone, but to serve as the ultimate deterrent. I'm convinced  
4 that that's exactly what needs to be done.

5 I think this is a program that could be monitored  
6 internally, as we do in the NBA, between the Players  
7 Association and ownership. It does work. It may not be  
8 perfect, but it's a program that exists. And I'm very happy  
9 that we have one in the NBA and very hopeful that we have one  
10 in Major League Baseball soon.

11 Senator Dorgan: Mr. Fehr, I'm going to ask you a  
12 question, but I want to follow on that with Mr. Shorter and  
13 Dr. Greisemer. In the NBA, they have a testing program.  
14 Would that testing -- or perhaps I should ask Mr. Colangelo --  
15 -- would that testing pick up these precursor supplements? And  
16 are these precursors supplements banned in the NBA?

17 Dr. Greisemer: I can't answer the question of whether  
18 they are banned, but I know that if adequate testing is done,  
19 depending on the testing they do, they will pick up use of  
20 these precursors.

21 Senator Dorgan: So if someone in the NBA were taking  
22 andro, they would pick that up in the testing?

23 Dr. Greisemer: And if the testing program uses the  
24 appropriate panels, they will pick it up.

25 Senator Dorgan: I see. I would be interested to try to

1 understand whether in the other sports that do mandatory  
2 testing, whether those supplements are included as banned  
3 substances.

4 Mr. Colangelo: You know, the only comment I'd like to  
5 add there is, certainly I'd like to see these products taken  
6 off the marketplace. I would. But we can't control that.  
7 That's in your domain. But short of that, if leagues ban the  
8 use of substances, and a player chooses to use the substance,  
9 whether he can buy it off the counter or not, it's still  
10 breaking the rule. And so, you know, an intelligent person  
11 makes that decision, one way or the other.

12 And so, you know, I think it's important to note that in  
13 the NBA, as it is in the NFL, privacy, which seems to be the  
14 big obstacle, you know, as far as the Players Association is  
15 concerned, can be dealt with, again, because there is a  
16 partnership that exists, one, to educate the players, number  
17 two, to help those who have a problem, and they have the  
18 opportunity to come forward and be helped. But, you know, if  
19 people make mistakes over and over again, then you have to  
20 deal with it.

21 It's a privilege to be a professional athlete. It is not  
22 an entitlement, and rules are rules.

23 Senator McCain: If my colleague would yield -

24 Senator Dorgan: Yes, of course.

25 Senator McCain: -- I've just been handed a piece of

1 paper that says the NBA does consider androstenedione illegal,  
2 in answer to your question.

3 Senator Dorgan: Yes, thank you.

4 Mr. Fehr, let me ask you, the articles that have been  
5 written in recent days, and the follow-up articles as well,  
6 have quoted some wonderful star players in baseball who also  
7 expressed great regret that others are taking banned  
8 substances. And, I mean, you know, I said at the start, it's  
9 not my interest in tarnishing baseball. I love baseball. I  
10 think it's a wonderful game, and it's played by splendid  
11 athletes. And, as I indicated, some of the great stars in  
12 baseball have also expressed great regret about others who use  
13 steroids.

14 As you begin your meetings with baseball players, let me  
15 ask you, generally, do you think -- is there a problem here?  
16 Is this much ado about nothing? Is there a problem? If so,  
17 is it a big problem? Can you give me a sense of what you and  
18 what the players think about this issue?

19 Mr. Fehr: Am I supposed to pay attention to the light  
20 that went on in front of you? I'm not -- if I'm not, I won't.  
21 It just happened to go on. I don't know if I have a time  
22 limit.

23 Senator McCain: Not when the Chairman asks the question.

24 Mr. Fehr: Okay. Let me respond, if I may, on several  
25 different levels, because I think it's obviously an important

1 question. First of all, I think that, in the meetings with  
2 players, we will have a frank and open discussion. I wouldn't  
3 expect to make public the nature of those discussions.

4 Players have a right to treat their discussions with their  
5 staff and their executive director as confidential, and they  
6 expect me to do the same. And the results of those meetings  
7 will, in large part, although not entirely, drive the  
8 collective bargaining position that we will eventually take.

9 Secondly, there are, I think, perhaps three levels of  
10 problems. One is a public perception problem, and that's a  
11 problem which exists whether or not there's an underlying  
12 problem that has to be dealt with in some appropriate way that  
13 we need to look at in a fashion that everyone can live with,  
14 first of all. Secondly, it may well be that we have to  
15 reexamine in some fundamental way the education efforts that  
16 we have been doing -- that's one of the subjects that  
17 undoubtedly will come up in my discussions with players across  
18 the board -- and translate that into the collective bargaining  
19 discussions we have with the clubs.

20 Third, though, if you'll permit me, I want to widen the  
21 discussion a little bit, beyond baseball. As is apparent from  
22 the testimony of every witness you have in front of you today  
23 and from the various bottles of substances that are on my left  
24 about four feet down the road, something changed in this  
25 country in the last ten years.

1           What changed, in my judgment, are two things. A wide  
2           variety of substances are now available, apparently across the  
3           board, without the ordinary kinds of caution which have  
4           previously attached to the sale of substances, whether it's an  
5           age restriction, whether it's a warning label, whether it's  
6           "Don't take, except on the advice of doctor," whether it  
7           should be by prescription, whatever it is.

8           The second thing which has happened is mammoth,  
9           widespread, monumental, across-the-board advertising to the  
10          extent that what we now see on television -- all day, every  
11          day, and in every magazine that you pick up -- is an ad. And  
12          the ad says, "Feel bad? Here's this pill." If it's a  
13          prescription, "Go see your doctor." If it isn't, "Go the  
14          health food store and take it." That's a fundamentally  
15          different scenario than I faced growing up and that I suspect  
16          you faced growing up. And that's a reality which I think  
17          relates to whether or not there needs to be substantially  
18          greater regulation.

19          We've had comments about the effects on kids and on women  
20          of the testosterone precursors. And, in my testimony, I had  
21          indicated that we think that needs to be looked at all over  
22          again. In the research we did that was jointly funded with  
23          Major League Baseball, and on the advice of the doctors that  
24          have talked to both of us, I can find or have no memory of any  
25          redeeming quality for any of these substances for a child or

1 certainly for a woman. And yet there they are. And so I  
2 think we have problems on a multiplicity of levels.

3 And, with all due respect, I don't think the problems  
4 that are being described now are going to be solved based upon  
5 whether or not baseball gets their collective bargaining  
6 agreement. That's a problem we'll have to deal with on our  
7 own for baseball, but the problems are rather more widespread  
8 than that.

9 Senator Dorgan: Senator McCain?

10 Senator McCain: Thank you, Mr. Chairman. Mr. Manfred, I  
11 appreciate your testimony very much, but there's something I  
12 don't quite get here. If Major League Baseball feels as  
13 strongly as you say they do about testing athletes, why would  
14 you agree to a contract with the players that prohibits  
15 testing?

16 Mr. Manfred: The last collective bargaining agreement  
17 that we reached did not contain a provision that allowed  
18 testing. The contract doesn't prohibit it, but it doesn't  
19 have a provision that would allow us to go ahead with it. If  
20 you recall, that contract was a product of a long and  
21 difficult strike. And, frankly, the issue of steroids has  
22 become one that has been higher on the horizon since the  
23 conclusion of that agreement in the mid-1990s.

24 Senator McCain: Mr. Fehr, I understand and appreciate  
25 your comments, particularly concerning the confidentiality of

1 your discussions with the players, and I understand that  
2 you're going to be visiting every team in both leagues here  
3 shortly over the next period of time. Can you at least assure  
4 the committee that this will be a very, very important item of  
5 discussion with the players?

6 Mr. Fehr: I have no hesitancy at all about doing that, I  
7 think, for two reasons, one of which is that the players will  
8 insist on it, given the publicity that's happened. And the  
9 second one is that we have an obligation to bargain this issue  
10 in good faith and have every intention of doing so. So while  
11 we have a lot of issues to discuss, I think as you know and  
12 perhaps the other members of the committee know, there are  
13 more than a few things that divide us. I expect this to be a  
14 very significant topic of discussion, yes.

15 Senator McCain: And you will perhaps carry the message  
16 that, I think, is prevalent, not so much in this committee,  
17 but in the United States of America, that the credibility of  
18 their performances and the confidence of the American people  
19 in the reliability and validity of the game is at stake here.

20 Mr. Fehr: I --

21 Senator McCain: Let me just -- before you answer --  
22 Shilling says that muscle-building drugs have transformed  
23 baseball into something of a freak show. Quote, "You sit  
24 there and look at some of these players, and you know what's  
25 going on," he says." Quote, "Guys out there look like Mr.

1 Potato Head, with a head and arms and six or seven body parts  
2 that just don't look right. They don't fit. I'm not sure how  
3 steroid use snuck in so quickly, but it's become a prominent  
4 thing very quietly. It's widely known in the game."

5 Isn't that pretty damning comment on the part of one of  
6 the greatest athletes in baseball? And I'll let Mr. Colangelo  
7 speak after you respond.

8 Mr. Fehr: I make it a habit, and also by direction from  
9 my membership, not to comment on comments that individual  
10 players make. And so the players are perfectly able, and do,  
11 speak for themselves. And I don't attempt to comment on that.

12 I will say players read the newspapers. They watch  
13 television. They understand the visibility and the  
14 significance that this particular controversy has at this  
15 point in time. And whatever else I do, I fully and accurately  
16 report feelings transmitted to me, certainly in hearings like  
17 this, and I will do so.

18 Senator McCain: Thank you, Mr. Fehr.

19 Mr. Colangelo?

20 Mr. Colangelo: Senator, I'd go as far as to say, based  
21 on my own conversations with my players, that they're  
22 basically crying out for some program which would involve  
23 testing -- as long as there is privacy. And I'm not speaking  
24 for any one player. I'm just saying, generally speaking,  
25 conversations with my players, they recognize it's an issue,

1 it's a problem, and they would like to see it resolved. So  
2 this is -- this is not rocket science.

3 To me, this is a very simple thing. There's a problem.  
4 One side is willing to solve the problem. We need the  
5 cooperation of the Players Association to resolve the issue.  
6 And hopefully it will be done in collective bargaining during  
7 this period of time.

8 Senator McCain: Mr. Shorter, I want to thank you for  
9 your credibility and the information you bring before this  
10 committee. In the interest of straight talk, I would like to  
11 say that I don't know what legislation could be contemplated  
12 by this committee or any member of Congress to force anything  
13 on the baseball players and the Players Association. Maybe we  
14 could think of something.

15 But think the purpose of this hearing is to try to ensure  
16 that the American people are informed, not only of the  
17 problem, but, as Mr. Shorter points out, and Mr. Greisemer,  
18 that there are solutions to this issue. It's not an insoluble  
19 issue. Is that right, Mr. Shorter?

20 Mr. Shorter: That's right. Really, a -- the place to  
21 start is a very simple amendment of the act to give the  
22 Attorney General the power to decide if a precursor should be  
23 included. And this simply -- as we read the act, and our  
24 legal people read the act, in essence, now it exists that  
25 precursors in the -- very simply put, a precursor, in the

1 course of manufacturing, is banned. If there's a controlled  
2 substance and, in the course of manufacturing, a precursor  
3 identified in the manufacturing process is banned.

4 To , it seems just logical and common sense that your body  
5 is a pretty good manufacturing organism, and if you were to  
6 make a -- that process extends over into the human body, so  
7 that a precursor in your body manufacturing that prohibited  
8 controlled substance should also be banned. It's -- as  
9 someone mentioned, it's not rocket science.

10 Senator McCain: Mr. Greisemer, do you agree with that?

11 Dr. Greisemer: Yes. In pediatrics, it's sort of beyond  
12 why it is banned in the manufacturing process and it's not  
13 banned in a 12-year-old manufacturer.

14 Senator McCain: I thank you. I want to thank the  
15 witnesses. I think the preferred way that all of us would  
16 like to see is a fairly rapid agreement between the owners and  
17 the players along the lines of that of the NBA and the NFL so  
18 that we at least could cure this aspect of the problem.

19 Mr. Shorter raises a broader issue and is involved in a  
20 far broader issue, and perhaps that should be the subject of  
21 further investigation by the Congress.

22 I thank the witnesses for being here today.

23 Senator Dorgan: Senator Fitzgerald?

24 Senator Fitzgerald: Thank you, Mr. Chairman, and thank  
25 you for doing this hearing. I think it's an important

1 hearing. And I want to thank all of the witnesses for being  
2 here.

3 I have a ten year old son who is an absolute baseball  
4 fanatic, and he knows most of the statistics of almost every  
5 major league player in both leagues. I guess he really leans  
6 more toward being a White Sox fan. I tell him that, as a  
7 Senator from Illinois' son, he has to be both a Cubs and a  
8 White Sox fan, and I actually grew up a Cubs fan, as did my  
9 father.

10 But we have frequent discussions where we try to link  
11 current players that my son is growing up with with the  
12 players that I grew up with and some baseball legends of old  
13 like Babe Ruth and Ted Williams. And my son has always taken  
14 the position that the players today are much better than the  
15 players that I grew up with. And I remember telling him about  
16 Ernie Banks, who was the star for the Cubs when I was growing  
17 up. And Ernie, several times, hit over 40 home runs. And I  
18 think, in a couple of years -- maybe 1956, when he won the MVP  
19 championship, or in the late '50s -- I think he hit over 50  
20 home runs. And my son said, "Well, that's nothing." And he  
21 now has 14 players to point to, who, in the last five years,  
22 have hit over 50 home runs. And only 34 players in the whole  
23 history of major league baseball have hit over 50 home runs in  
24 a season. And so I wonder about the validity of comparing  
25 current players now with those legends of old that many of us

1     grew up with. And that's very distressing, to read all the  
2     publicity about possible steroid use in baseball.

3             And I guess, Mr. Fehr, I'd like to certainly encourage  
4     the players union to rapidly try to address this issue. And  
5     I know you have to represent views on both sides, but I'm  
6     aware that there are some players, such as Frank Thomas, who's  
7     a two-time lead MVP, who plays for the White Sox, who -- he  
8     has spoken out in favor of mandatory testing. And I think  
9     he's pointed out that players who don't want to use steroids  
10    are at a competitive disadvantage, because others are. What,  
11    Mr. Fehr, do you think can be done to protect the interests of  
12    those, such as Frank Thomas, who don't want to use steroids?

13            Mr. Fehr: Thank you, Senator. First of all, I think  
14    it's a very difficult trick to be both a White Sox and a Cubs  
15    fan, so I have some sympathy for your son. Usually a single  
16    rooting interest is much easier to have.

17            Secondly, on the real focal point of your question,  
18    unfortunately I'm not in a position in which I can talk very  
19    much about discussions among players on these issues and the  
20    kinds of questions that have been raised by Mr. Thomas to  
21    which you've referred. I can assure you that we will do our  
22    very best to find a way through this. It's part of the  
23    collective bargaining process. We're committed to it. I  
24    can't tell you what the result is going to be ahead of time,  
25    but it's obviously a serious issue which will be treated as

1 such.

2 Senator Fitzgerald: Do you think your members of your  
3 union have -- now that they see that the Senate is holding  
4 hearings on this, do you think they'd understand that, if they  
5 were to oppose mandatory drug testing, that there -- that may  
6 well could invite congressional action that would be more  
7 draconian probably than a voluntary program that -- or a -- an  
8 internal agreement amongst the players and owners in major  
9 league baseball? Are the players aware that they could have  
10 the force of law requiring some kind of mandatory testing?

11 Mr. Fehr: Senator, I think about the best way I can  
12 respond to that is this. I will certainly transmit your  
13 comments. They speak for themselves better than I can. And  
14 we will have to be committed to the bargaining process.  
15 Unfortunately, there's no way to respond to that question  
16 other than in that fashion.

17 I do want to suggest, however, that, depending on how you  
18 approach this, there is -- there are degrees of complexity to  
19 this problem which don't lend themselves to perhaps as simple  
20 of an analysis as people might otherwise want to consider.

21 For example, Mr. Shorter mentioned that you can have  
22 individuals that test positive in the Olympics for banned  
23 substances who effectively had no idea what they were doing.  
24 One of the things I understand to be the case is that you can  
25 test for nandrolone as the result of using creatine - what

1 would pass in this day and age as an ordinary, garden variety,  
2 fully lawful protein or dietary supplement, in that fashion.  
3 And these things have to be worked through.

4 I can assure that, as the players always have, as they  
5 debate and discuss among themselves and talk to one another  
6 and eventually reach a consensus, the views of everyone will  
7 be taken into consideration, and I will certainly transmit the  
8 views of this committee and your comments.

9 Senator Fitzgerald: Mr. Shorter, what are -- Mr. Fehr  
10 points out that there are difficulties in implementing this  
11 testing, and I think that someone pointed out to me that some  
12 individuals just naturally have a higher level of testosterone  
13 in their bodies and could come up with a false positive for  
14 steroid usage. How do we focus our testing so that we're not  
15 coming up with a lot of false positives?

16 Mr. Shorter: Well, I -- again, I would like to have the  
17 doctor comment once I'm done so he can tell me what I said  
18 incorrectly.

19 [Laughter.]

20 Mr. Shorter: But the number of false positives is not  
21 that great, to my level of understanding of this. And in --  
22 it really does come around in the supplement side of it. This  
23 doesn't have to do with false positives for banned substances.  
24 There aren't many.

25 Testosterone, for an example, there is a test that can

1 show whether or not you are taking something that's produced -  
2 - synthetic testosterone -- I mean, if you've taken synthetic  
3 testosterone. The difficulty is in having a test that shows  
4 if your testosterone is elevated. It's a little confusing  
5 here, but if your test isn't specific for androstenedione, if  
6 your body naturally produces the testosterone, a test showing  
7 that it's synthetic won't show it, you see. So you have to  
8 really target your test.

9 Now, that's different from saying whether or not you have  
10 false positives. It's really a question of deciding exactly  
11 what it is you want to test for and developing a test for  
12 those specific things. But that isn't very -- that's not that  
13 difficult. The list is not as extensive as people would  
14 believe.

15 And just another point -- just a personal point on this -  
16 - I think the perception -- the misperception over the last 15  
17 or 20 years has been in part of the problem, people saying,  
18 "Well, you know, the athletes will just go find something  
19 else." So there's not only the question of false positives.  
20 It's, "Oh, there are a myriad of drugs out there. You ban  
21 one, they're just going to find another." It's not true. It  
22 really was a question of the testing being precise. Perhaps  
23 some people feel that maybe some of the agencies doing it  
24 weren't particularly interested in finding certain substances,  
25 so they wouldn't develop tests for those. But the list is not

1 that large. It's not that complicated.

2 And I guess another issue that really -- or another part  
3 of it that really hasn't been emphasized is the fact of  
4 independence. If you're going to test, we truly believe those  
5 doing the testing have to be independent. They have to be  
6 independent. You can cite any number of reasons why. But  
7 common sense alone tells you that if whoever is doing this, if  
8 they have their list and they're independent, that risk of  
9 false positives is not that great. That can be dealt with,  
10 and the procedures you have can be uniform, so you're not  
11 worried about all the other procedural problems and, from the  
12 legal perspective, loopholes. And so you can. So I don't  
13 really think it's a question of false positives as much as a  
14 question of independence.

15 Senator Fitzgerald: Now, you did make the point, Mr.  
16 Shorter, that you thought Congress should act right away to  
17 amend the act that governs the over-the-counter substances and  
18 that we should give the Attorney General the power to decide  
19 if a precursor should be included in the list of banned  
20 substances. You think we should act right now to ban those  
21 substances that are sitting in front of you?

22 Mr. Shorter: Oh, absolutely. I mean, again, if you come  
23 around to androstenedione, the reason it exists was you had a  
24 program where an entire Olympic team -- to be on the Olympic  
25 team in East Germany from 1974 to '89, you had to be on their

1 drug program. You had to be taking the drugs.

2 Senator Fitzgerald: And that's what Mark McGwire used?

3 Mr. Shorter: And this is what Mark McGwire used. It was  
4 developed by the East Germans as a very simple way of getting  
5 testosterone into their athletes.

6 Senator Fitzgerald: Mr. Fehr, do you think those  
7 substances should be a focus of the Major League Baseball's  
8 discussions on what substances should be banned?

9 Mr. Fehr: Whether I think so or not, I think it's clear  
10 that they will be a subject of our discussions.

11 Senator Fitzgerald: Okay.

12 Mr. Fehr: But let me make a further point and emphasize  
13 something that Mr. Shorter has said and that was reflected in  
14 my testimony and Mr. Manfred's testimony and the booklet that  
15 we jointly prepared, which was distributed to players, which  
16 was attached to both of ours. We think that the reason  
17 androstenedione and DHEA and similar compounds are not  
18 regulated now is probably an accident. Probably nobody  
19 thought about it at the time. And in my testimony, I  
20 indicated that it probably is time to review that decision.  
21 I'm not personally familiar enough with the act to know  
22 whether Mr. Shorter's suggested legislative solution is the  
23 right one, but we invite you to reexamine that.

24 And let me put a deliberate point on it, if I can, in  
25 this way. Sooner or later in my discussions with players and

1 in their discussions with one another, someone will raise the  
2 following question. They will say, "Are you telling me that  
3 if the Congress of the United States sees fit not to regulate  
4 X, whatever X is, and make it freely available at the  
5 drugstore down the street, and I'm an adult, and I'm of age,  
6 that somehow I can't buy it?" Because what we do in this  
7 country is we know there are risks to things, and we allow  
8 adults to make choices. If it ought to be regulated, we  
9 invite you to regulate it. If it ought not to be on the  
10 shelves, don't let it be on the shelves.

11 Senator Dorgan: Would you yield on that point, Senator?

12 Mr. Fehr, but that raises the question of, for example,  
13 andro, which is banned in the NBA, but perfectly legal to go  
14 purchase. It is not banned in baseball. By implication, I  
15 guess, you're suggesting that some of the substances that are  
16 banned by the NBA, under any type of testing program in major  
17 league baseball, should be allowed as long as they are not  
18 considered illegal or prohibited from purchase by the United  
19 States Congress. Is that what you're saying?

20 Mr. Fehr: What I am saying, Mr. Chairman, is something a  
21 little bit different than that. I am saying a couple of  
22 things. First of all, we will discuss all of these issues, as  
23 we're obligated to do and as I've indicated that we are fully  
24 committed to doing.

25 But I do want to make the following point. If these

1 substances have the dangers that they are reputed to have, and  
2 we know of nothing in our research which suggests that that is  
3 wrong, then that suggests that there is a legislative or  
4 administrative remedy here which could go a long way toward  
5 addressing the problems, especially with children, that we've  
6 been talking about. And we invite you to reconsider that.  
7 There is, in fact, something the Congress can do.

8 Senator Dorgan: Senator Fitzgerald?

9 Senator Fitzgerald: Well, I just would like to make the  
10 point that, Mr. Chairman, I think maybe we should have a  
11 follow-up hearing on the issue of whether Congress should act  
12 immediately to ban the over-the-counter substances in front of  
13 Mr. Shorter. We maybe should hear from the other side. I'm  
14 sure the manufacturers and retailers of those products are  
15 probably bitterly opposed to closing that off, but those  
16 materials -- as the doctor pointed out, too -- high school  
17 kids can go in and -- is there any age requirement to go in?  
18 So anybody -- a 12 year old could go in a --

19 Voice From Hearing Room: They did.

20 Senator Fitzgerald: -- health food store and buy that  
21 stuff so they can look like Mark McGwire and hit like Mark  
22 McGwire. I think that would be a good follow-up hearing, Mr.  
23 Chairman.

24 And I want to thank all of the panel members here. I  
25 think this has been very informative. And I would urge both

1 sides in major league baseball negotiations to address this  
2 issue. And I'd urge the owners and the league to be tough,  
3 too, and not take no from the players very easily.

4 And thank you all for being here.

5 Senator Dorgan: Mr. Colangelo, you wanted to comment?

6 Mr. Colangelo: Well, whether or not something's  
7 available over the counter -- you know, it's like looking for  
8 someone to help solve our problem. That's not the issue, in  
9 my mind. This is two parties, the Players Association and the  
10 owners, agreeing to ban certain substances. And there's a  
11 reason for that: not only what's been discussed here, the  
12 health of the individuals, but also, players don't want  
13 another player to have a competitive edge, and that's a big  
14 issue. That, in itself, is good enough reason for us to  
15 monitor our own business, and it would be great to have  
16 Congress help out. And certainly it's going to have impact  
17 with the over-the-counter sales, but that really should not  
18 have an influence on the agreement that should be made between  
19 the Major League Players Association and the owners.

20 Senator Dorgan: Let me ask a couple of additional  
21 questions, then.

22 Mr. Schwab, I read in the sports magazines and journals  
23 these days about high school football teams having linemen of  
24 250 and 300 pounds, and I wonder about 300-pound high school  
25 linemen. How do you find them? Where do you get them? What

1 are they taking, if anything? Can you tell me? I suspect you  
2 don't have statistical evidence, but give me your impression  
3 of what is happening in high school sports, especially with  
4 respect to football, where we see so many very large football  
5 players at the high school level.

6 Mr. Schwab: Like you, I share your amazement at how high  
7 school seniors who are 18 years old are graduating and can  
8 step into Division I college programs and play football as  
9 freshmen. That is amazing to me. When I graduated from high  
10 school 20 years ago, I was 220 pounds. And it took me two  
11 years to get to the point where I could play at the college  
12 level. So it's pretty clear to me that kids today are doing  
13 things, are taking supplements, taking drugs, that are helping  
14 them to get to that level to be able to play at that next  
15 level at very early ages. And it's not uncommon to see 300-  
16 pound high school athletes these days.

17 Senator Dorgan: But a 300-pound athlete who is taking  
18 supplements is not the same as a 300-pound athlete who is  
19 taking banned steroids. I think Mr. Shorter and Dr. Greisemer  
20 said that they can walk into a store someplace and buy these  
21 precursors and take them. I'm not suggesting the health  
22 consequence isn't the same. I don't know the answer to that.

23 But we have a situation today where many of these young  
24 athletes have total access to these supplements that are not  
25 banned. And I assume they are on the receiving end of

1 advertisements. They also see their peers and other players  
2 using them. And I guess that's part of what Mr. Shorter and  
3 Mr. Greisemer talked about with respect to the danger.

4 That, I guess, brings me back to this issue. Mr. Fehr, I  
5 was trying to ask the question. If, for example, andro is  
6 prohibited in the NBA, but it's not prohibited from purchase,  
7 you can walk in and purchase it at a store that sells vitamins  
8 and supplements and so on, whether the determination of what  
9 should be a banned substance is a function of what the  
10 Congress determines ought to be prohibited from sale.

11 I'll come back to that in just a minute. But, Mr.  
12 Shorter, the things that you can buy over the counter in a  
13 store, in many circumstances, I believe, would lead someone to  
14 test positive for drugs in the Olympics. Is that correct?

15 Mr. Shorter: Yes. I cited in my testimony, for example,  
16 that 41 percent of the American products tested in an IOC  
17 survey basically contained substances not on the label:  
18 that's what's so insidious here. Not on the label, that'll  
19 get you banned.

20 Now, I must say, our testing techniques are very, very  
21 sophisticated. We can detect very, very minute quantities,  
22 and probably more than a lot of other testing that goes on.  
23 And that brings around the issue whether or not it's in the  
24 manufacturing or if you're in an industry that does not have  
25 the same regulation, let's say, as prescription drugs,

1 whether or not there might be the temptation to perhaps lace  
2 some of your products so that they might be the talk of the  
3 health club rather than your competitor's product. So that  
4 opens up a whole new area.

5 But the net result is, we cannot recommend to any athlete  
6 -- and at this past Olympic games, just about all the major  
7 nations of the world said to their athletes at the Salt Lake  
8 City games, "Don't take any supplements. You don't know  
9 what's in them. There's a good chance you'll have something  
10 in your body to get you busted."

11 Senator Dorgan: Dr. Greisemer, you talked about very  
12 young people, in junior high school, taking supplements. Can  
13 you describe that? Are these young football players? Young  
14 athletes? What kind of athletes are they, and what kind of  
15 supplements are they taking, and how young are they?

16 Dr. Greisemer: We've had incidents of use and self-  
17 reported incidents of use down in 5th grade, so 11 and 12.  
18 And it's easy for these kids to buy these products at health  
19 food stores, which has been demonstrated by one of the staff  
20 that you saw, his 11-year-old son. We see it predominantly in  
21 football players, but it's now getting fairly pervasive.  
22 We're even seeing some of the young ladies take this just for  
23 body image enhancement. And in some reports in younger middle  
24 school or high school students, approximately 50 percent of  
25 students are now just taking this for physique enhancement,

1 and they're not even playing sports. It's very pervasive.

2 Senator Dorgan: Mr. Schwab, the same question.?

3 Mr. Schwab: I think that the danger with these  
4 supplements is that it's not always the high level athletes  
5 that are using these supplements. It is also the marginal  
6 athlete who is trying to gain that edge -- the wannabe  
7 athlete, the one that maybe isn't 6 foot 8 and 220 pounds,  
8 that isn't gifted genetically. These are also the kids who  
9 are using the supplements, and in very high numbers.

10 Senator Dorgan: Let me go back. Mr. Fehr, I wanted to  
11 allow you to expand on the point I made that the judgment  
12 should be some kind of an agreement in a major sport that only  
13 those substances that are prohibited for sale by the Congress  
14 would be banned, you would still, I assume, have performance-  
15 enhancement drugs available to athletes. I mean, that's why I  
16 assume that, and I don't know this, but I assume the NBA puts  
17 andro on their list because they feel it's a performance-  
18 enhancing drug, and they don't want their athletes to be using  
19 it to enhance performance artificially. So can you respond to  
20 that?

21 Mr. Fehr: Yeah, three things, Mr. Chairman. First of  
22 all, I don't speak for, and don't purport to speak for, the  
23 NBA players or anyone other than my own constituency, so I'm  
24 not going to speak to those issues. I assume they do what  
25 they do for reasons that they believe are good and sufficient

1 to themselves.

2 I think Mr. Manfred is right, that, first of all, the  
3 experience we have with a lot of the kind of substances we've  
4 just been discussing is a product of the period of time since  
5 the last collective bargaining agreement. And the mere fact  
6 that something is not prohibited by the Congress does not mean  
7 it should not be discussed in bargaining, et cetera. I think  
8 it will be. That's first.

9 Secondly, that does not resolve the question which may  
10 arise from time to time, which is, "If this substance is not  
11 prohibited, and if I'm of a certain age, is that not a choice  
12 that I should make?" Now, to ask the question doesn't answer  
13 it, but there are lots of things we say in this country that  
14 are different. You can't buy alcohol when you're in 5th  
15 grade. You can't buy tobacco when you're in 5th grade. You  
16 can't advertise tobacco to kids. You can't do any of that  
17 stuff.

18 Third -- and this is most important point, I think, for  
19 me. And we all have kids, and this is why I think this is a  
20 much more significant issue than just baseball, although  
21 that's where the publicity has been. In fact, if children are  
22 using a lot of these substances, and we've just been talking  
23 about androstenedione, it is in large part because 11-year-  
24 olds can walk into stores and buy them. And there's no  
25 getting around that. And that is something that Congress can

1 do something about, which is why we invite you to take a look  
2 at it. It doesn't answer the question as to what you do in  
3 baseball. But I respectfully suggest it's a much bigger  
4 question than what we do in baseball.

5 Senator Dorgan: Mr. Manfred?

6 Mr. Manfred: I think, from our perspective, it is  
7 important, regardless of what Congress does with respect to  
8 this over-the-counter issue, that that issue should be dealt  
9 with in the short term in the collective bargaining process.  
10 And I really say that for two reasons.

11 First of all, in terms of testing, you can test for andro  
12 with the same type of accuracy that you can test for any  
13 anabolic steroid. And, in fact, most scientists believe that  
14 it is, in fact, an anabolic steroid, which takes me to the  
15 second point.

16 Those over-the-counter substances, in terms of their  
17 impact on the body and the impact on the play of the game,  
18 have exactly the same effect as steroids. And so, while there  
19 may be this flaw in terms of the regulatory process, I think  
20 it's impossible for us to look the other way and/or to wait  
21 for that flaw to be fixed. It's an issue that needs to be  
22 addressed privately, because they, in effect, are steroids.

23 Senator Dorgan: Let me conclude by saying that we should  
24 never and can never and will never take the joy out of sports.  
25 Every young boy or girl in this country aspires to look up to

1 a hero in sports and to emulate them and to play sports. And  
2 it's very important for us to understand the context of a  
3 hearing of this type.

4 The Commerce Committee, in this subcommittee, has sports  
5 as its jurisdiction. We have spent more time, perhaps, on  
6 Olympic issues than others in past years, especially on the  
7 anti-doping issue. But Senator McCain had suggested, and I  
8 agreed, that we should hold a hearing of this type because I  
9 think that, while the recent discussion has been about  
10 baseball, there has been broader discussion about the use of  
11 steroids in sports and the use of performance-enhancement in  
12 sports, and it has a powerful influence on young people in  
13 this country, an enormous influence on our youth.

14 And so the question is, what's happening? What can be  
15 done about it? How can we apply public pressure? How can the  
16 American people have a voice and a role in applying public  
17 pressure to achieve the right result? And the right result,  
18 it seems to me, is drug testing: rigorous drug testing. And  
19 to say to all athletes, professional athletes, and especially  
20 to young athletes, that sports ought to be played on a fair  
21 basis, without performance-enhancing drugs. And I think  
22 everyone agrees on that point.

23 So my hope is that this hearing will contribute to some  
24 understanding and help develop some pressure with respect to a  
25 number of areas of sports to do more testing and to send a

1 message, Dr. Greisemer and Mr. Schwab, to those young kids  
2 across this country that this is not the way to succeed in  
3 sports.

4 I want to thank all of you. You've come from, in many  
5 cases, across the country to testify. And, Mr. Fehr, you're  
6 busy. You've got meetings to begin tomorrow. Mr. Colangelo,  
7 you've traveled halfway around the country. You should be  
8 smiling broadly, because you have a North Dakotan you've added  
9 to your staff at bargain prices, and he's winning almost every  
10 outing these days. *I'm talking about Rick Helling\**, who we're  
11 very proud of.

12 But let me thank all of you who have come today, and this  
13 subcommittee will be discussing this issue in some detail in  
14 the future, as well.

15 This hearing is adjourned.

16 [Whereupon, at 11:36 a.m., the hearing was adjourned.]  
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