



TRANSGENDER INFORMATION SHEET

The use of hormonal therapies for transgender athletes is a complex area and there are different sets of rules around inclusion, anti-doping and endogenous (produced by the person) versus exogenous (from outside the body e.g. tablets/injections/patches) testosterone.

TRANSGENDER MALE TO FEMALE

Transgender male to female athletes can apply for a TUE for prohibited substances such as Spironolactone. Note: WADA documentation states that a TUE for Testosterone should not be approved for females.

TRANSGENDER FEMALE TO MALE

Transgender female to male athletes can apply for a TUE for prohibited substances such as Testosterone.

ENDOGENOUS TESTOSTERONE

The situation of a non-binary person who has endogenous testosterone and wishes to compete in women's competition is dealt with by individual sports rules and policies around participation and inclusion.

Most sports will consider many facets of that person (including their endogenous testosterone levels and physical condition) to determine if they can participate fairly in women's competition and at what level.

This is not considered an anti-doping matter as the testosterone is "endogenous" and not a substance that has been taken, however, the levels of endogenous testosterone may be taken into consideration when the sport considers that person's eligibility to compete. This may involve testing of testosterone blood levels but this is a matter for the individual Sporting bodies and the athletes involved. This is not overseen by ASDMAC or Sport Integrity Australia.

EXOGENOUS TESTOSTERONE

In regard to the use of exogenous testosterone, this falls under the World Anti-Doping Agency's (WADA) Anti-Doping Code (Code) and List of Prohibited Methods and Substances (Prohibited List). The aim of the Code and Prohibited List is to ensure that athletes do not use performance enhancing substances or methods to gain an unfair advantage.

WADA documents such as the International Standard for Therapeutic Use Exemptions (ISTUE) outline the rules regarding TUE applications for the use of prohibited substances (including testosterone) while the Physician Guidelines provide examples of the medical conditions and considerations of performance enhancement. These documents are available on [the WADA website](#).

There are documented medical conditions that result in the need to legitimately prescribe (exogenous) testosterone to cis males (whilst controlling for any additional performance enhancement) and this is the process by which a transgender male who has low or no endogenous testosterone would be assessed.

There are currently no medical conditions in females (cis or non-binary) that would meet the first 2 TUE criteria of being both:

1. a diagnosed medical condition, and
2. not enhancing performance.