



MEMBER FOR MOGGILL

Hansard Thursday, 18 October 2007

SPORTS DRUG TESTING AMENDMENT BILL

Dr FLEGG (Moggill—Lib) (6.16 pm): Like the member for Gregory I am delighted to rise to speak in support of this bill which relates to a matter that is quite close to my own heart. The details of the bill have been well canvassed. Obviously, we are following through at a state level on an initiative from the federal government. I think that is good to see. I think it is good to see governments at different levels and of different political persuasions taking a serious and concerted approach together to this problem. In many respects Australia has been a leading country on the issue of drug testing in sport. It has probably taken a harder line than most other countries. That is in keeping with the fact that not just sport but fair play in sport is very important to Australians.

The issue of doping athletes in particular to improve their performance is one that we are rightly concerned about and one that we are rightly doing something about. The *British Medical Journal* reported that poor quality black market drugs often used in the sports industry have been linked with a number of cases of poisoning, infection and mental illness. The poor quality of the illegal drugs used to dope athletes is only the beginning of the problems that originate from drug taking in sport. Some years ago in the Tour de France we saw the death of Tommy Simpson, which was later attributed to amphetamine use. We have seen recent examples of athletes using drugs, such as Marion Jones.

This bill deals with five classes of drugs. It refers to stimulants such as amphetamines, speed and a number of the newer drugs; narcotics, such as morphine; anabolic steroids, which are probably the drugs that most members of the House would think about first because the physiological effects of anabolic steroids are so obvious if people have watched the sports in which these agents are not banned; diuretics because of their ability to hide the other drugs from detection; and peptide hormones, which have been very popular, particularly the growth hormone and erythropoietin, because up until more recent times those drugs were not tested for so vigorously.

I have had a stint as a sports doctor in Rugby League. I have also had a stint as a GP in which I have seen firsthand the effects of people using illicit drugs for performance enhancing measures. From my short experience in sports medicine, I gained a good understanding of the pressure that is applied to athletes. We should never forget the fact that these athletes are young people and they are prone to pressure. There is a lot of pressure on them to perform. If we are not strong on the taking of drugs in sport we will condemn young people to either be duped into taking performance-enhancing drugs—and there have been cases where young people have been duped and told they were taking some other sort of substance or that the substance they were taking was harmless—or, as we have seen around the world quite prominently, be pressured to do so. There is a real feeling in sports where drug use has been prominent—and all of us are aware of some of those sports—that people cannot compete unless they take the drugs.

I well remember a young woman coming into my medical practice with a muscle bulk that would exceed that of any of the men in this room. She was covered in acne, with oedema, with her sugar level through the roof, with her blood pressure through the roof and her electrolytes were out to blazes. This was a very young woman—20 years old. After confronting her about her illicit steroid use, she simply said,

'Well, I cannot compete because the others use them.' That was a few years ago and I hope that sort of thing is a thing of the past.

Beyond the effects on athletes themselves, athletes are role models for us. We have seen a lot of comment about that. I have a very strong view that in relation to the role models that we have—particularly at this time when the media, with all its new facets, plays such a bigger role in the thinking of young people—we have distorted the image of a normal female body to be that of an overly thin female body. However, we have also distorted the image of a male body. The image that young males aspire to is a bulky image because they have watched World Championship Wrestling or body building and even people like Arnold Schwarzenegger who have admitted to using performance-enhancing drugs. This affects impressionable young people.

From time to time I was told by young male patients that they did not feel they could go to the beach and so forth and they would ask if I could help them improve their bulk. I referred them to a movie called *When We Were Kings.* I hope that some honourable members have seen it. It is worth seeing. It is the story of the fight between Cassius Clay and Joe Frazier in the Congo.

Mr Weightman: The 'rumble in the jungle'.

Dr FLEGG: The 'rumble in the jungle'. I take that interjection. It was held at 5 am in the morning because it was so hot in the Congo.

Mr Lawlor: Wasn't it 4?

Dr FLEGG: Yes, 4 am—early in the morning.

Mr Lawlor: It wasn't Frazier; it was Foreman.

Dr FLEGG: George Foreman, was it? It was, too.

Mr Horan: Blame me.

Dr FLEGG: I would not dare blame the member for Toowoomba South for correcting me on that. I would never do it.

These were two of the most powerful athletes on the planet and yet they had a normal male physique because that fight predated the use of these drugs. A lot has been said tonight and maybe we have rightly focused our comments tonight on the area of so-called recreational drugs. I reject the concept of a recreational drug. The suggestion that narcotics and amphetamines can be used recreationally is wrong. I also reject the idea that these drugs are not performance enhancing. I have heard it said by quite a number of commentators that these are recreational drugs; that they are not performance enhancing. Many performers, particularly in the music industry and other industries, have been users of these drugs because of the appearance of energy that they create. They can also create an aggression that is performance enhancing in many sports and obviously they can have a number of other effects in terms of keeping people awake for longer hours and so forth. I think we should take just as hard a line on these so-called recreational drugs—these narcotic and amphetamine drugs—as we do with steroids and human growth hormones. These sportspeople are role models whether we like it or not.

For years many of us have strongly opposed the use of cigarette smoking in movies. Why have we done that? Because the role models who stand up there on the silver screen are the role models whom young people and impressionable people copy. The same applies when role models, whether they be the footballer who has been in the news in the past few days or Queensland footballers who were revealed not that long ago, say to young people, 'These things are all right. It is cool because top sportspeople use them.' It is just plain wrong. I strongly support the hard line that is taken. I commend the government for the measures that it has put into this bill.

Sport is a wonderfully positive experience at every level. It will remain a wonderfully positive experience if we defend its integrity. If we say that drug cheating, abuse of drugs of one sort or another, is not acceptable and we want a high standard from our sportspeople, then sport will remain a wonderfully positive experience. I know many people in this House have played sport—probably not quite as well as the member for Toowoomba South, in the case of a few members. At whatever level members have played at it will have benefited them and have been a wonderfully positive experience. Let us keep it that way for future generations of young Queenslanders.