


# Coach

AND ATHLETIC LEADERSHIP

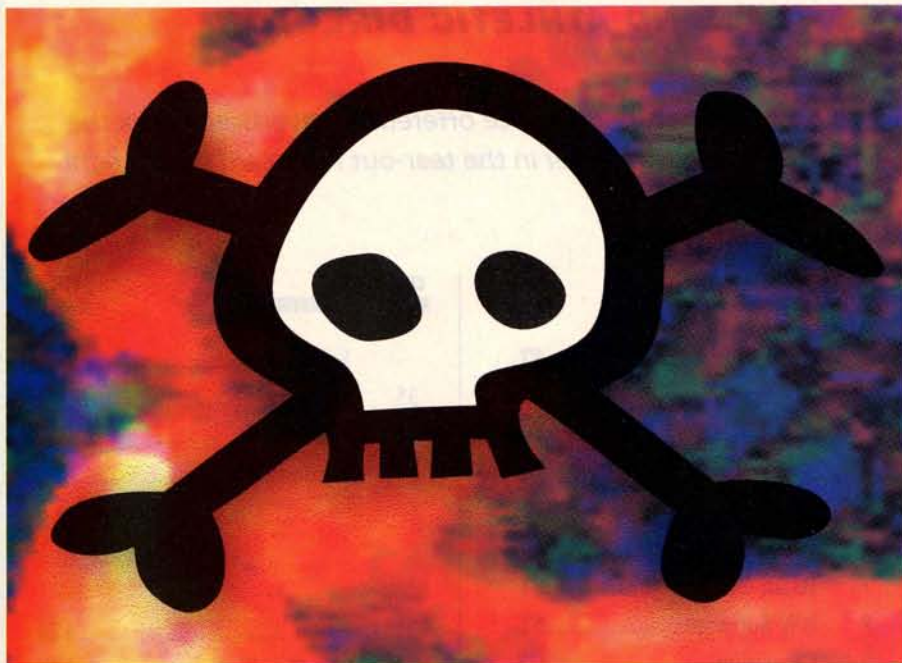
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## Q & A on Steroid Use

*Recent studies indicate that anywhere from a quarter to a half million adolescents are on steroids*

ANABOLIC-ANDROGENIC steroids are synthetic derivatives of the powerful male sex hormone, testosterone.

The "anabolic," or growth-promoting, effects of testosterone include increases in skeletal muscle mass, nitrogen retention, and protein synthesis.

**by Matt Brzycki**  
Coordinator,  
Health Fitness & Strength  
Princeton University

The "androgenic," or masculinizing, effects of testosterone include increase in facial and body hair, a deepening of the voice, and a heightened libido.

Note: The testosterone used for the steroids is chemically modified to enhance the anabolic effects and decrease the androgenic effects. The steroids can be administered by either ingestion or injection.

### HOW WIDESPREAD IS THE USE OF STEROIDS?

A 1988 study indicated that 6.64% of 10th grade male students either used or

had used steroids, and that over two-thirds of the users began taking them at age 16 or younger. The statistics would suggest that 250,000 to 500,000 adolescents are now using or have used steroids. That qualifies steroids as a habit of epidemic proportions.

### DO STEROIDS REALLY WORK?

Research indicates that anabolic steroids can often produce strength gains beyond the capability of training and diet alone, particularly among experienced lifters.

### HOW DO STEROIDS AFFECT THE LIVER?

Virtually all of the literature reports liver disorders. The American College of Sports Medicine believes that the most serious of these disorders are peliosis hepatitis (the formation of blood-filled cysts) and liver tumors.

Both of these conditions are considered irreversible and life-threatening. Rupture of the blood-filled cysts or liver failure resulting from peliosis hepatitis has often been fatal.

Moderate to heavy steroid use in otherwise healthy individuals may eventually cause liver cancer and even death. Many users may not exhibit the symptoms of cancer, but could have the cancers growing in their livers.

The use of anabolic steroids also impairs the excretory function of the liver and results in jaundice. Jaundice—which gives the eyes and the skin a yellowish tint—can often be caused by relatively low dosages. Higher doses appear to increase the incidence of liver dysfunction.

### HOW DO STEROIDS AFFECT THE CARDIOVASCULAR SYSTEM?

Of the five major coronary risk factors pinpointed by the American College of Sports Medicine, two—hypertension and cholesterol level—are enhanced by the use of anabolic steroids.

*cont'd on page 79* ►



The evidence also suggests that moderate doses have the potential to sludge the arteries and cause heart attacks.

### HOW DO STEROIDS AFFECT THE MALE REPRODUCTIVE SYSTEM?

When a male starts introducing extra testosterone into this body, his internal regulatory system will reduce its own production in order to maintain a stable internal environment. If too much "foreign" testosterone is added, the body will no longer produce its own supply.

A 1984 review of the literature revealed athletes on anabolic steroids. This chemical balancing produces an increased potential for numerous feminizing side effects in the male reproductive system.

For example, a decreased sperm count and testicular atrophy have been well-documented. One researcher reported that the sperm count of 15 athletes decreased by an average of 73% over two months of anabolic-steroid treatment.

Other well-documented male-specific side effects include gynecomastia (female-like breasts on the male physique), a high-pitched voice, prostate enlargement, sterility, and functional impotency.

### ARE THERE ANY PSYCHOLOGICAL SIDE EFFECTS?

The use of anabolic steroids, even in

low doses, potentiates certain psychological behavior patterns. In a structured survey of 41 bodybuilders and football players, five of the subjects (12.2%) met the criteria for psychotic symptoms after a testing period.

One of the subjects exhibited auditory hallucinations (hearing voices), while the other four developed other forms of delusions.

Another five subjects met the criteria for "manic episode" during the steroid exposure. One of them bought an old car and deliberately drove it into a tree at 40 miles per hour while a friend videotaped him.

Additional possible psychological side effects include extreme mood swings, sleeping disturbances, euphoria, paranoia, irritability, an increased or a decreased libido and anxiety.

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documented psychological side effect is an increased level of unpredictable hostility. This heightened aggressive behavior is commonly referred to as "roid rage." The classic example is the individual whose steroid-amplified aggression involves him in numerous brawls and creates violent thoughts like "crushing people to death" and "tearing off their limbs."

According to the 1991 National Household Survey on Drug Abuse, more than 80% of the 12-17 year-olds

on anabolic steroids stated that they had acted in an aggressive way against people or had committed a crime against property in the previous year.

Steroid users may also experience a psychological dependency that can lead to depression-related withdrawals upon the discontinuation of the habit.

Linked to the psychological dependency on anabolic steroids in a condition known as "reverse anorexia" or "megarexia." Reverse anorexia is the opposite of anorexia. The anorexic female, no matter how much weight she loses still sees herself as "too fat," just as a megarexic male, no matter how much weight he gains, still sees himself as "too thin."

### DO STEROIDS POSE ADDITIONAL DANGERS TO ADOLESCENTS?

Adolescents on anabolic steroids

may experience a pre-mature fusing of the epiphyseal growth plates located in the ends of the long bones. A pre-mature closure of the epiphyseal plates before completion of the normal growth cycle will result in stunted growth—which is not reversible.

### ARE THERE ANY OTHER SIDE EFFECTS?

Steroid users risk blood poisoning and the spread of communicable disease, including AIDS, from contaminated needles, as well as neural dysfunction from improperly placed needles.

Anabolic steroids can also cause an increase in oil production by the sebaceous (sweat) glands, causing acne break-outs anywhere on the body, particularly the back.

Among the many other possible side effects are fluid retention, unprovoked

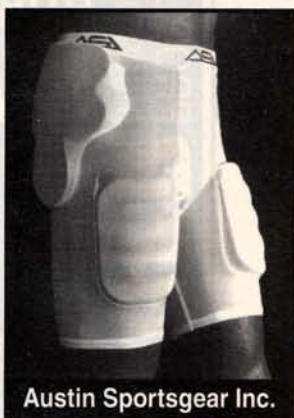
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nose bleeds, arthritis, and peptic ulcers.

### CAN STEROIDS LEAD TO THE USE OF OTHER DRUGS?

Steroid users ask for trouble when they start using other drugs to control the unwanted side effects of steroid use.

For example, amphetamines are

### Perhaps the most frequently documented psychological side effect is an increased level of unpredictable hostility.

taken to combat depression, while diuretics are used to avoid fluid retention and to lower blood pressure.

The 1991 National Household Survey on Drug Abuse reported that males who had used anabolic steroids at some time in their lives were about two or three times more likely to report their current use of illicit drugs.

### HAS ANYONE EVER DIED FROM USING STEROIDS?

In 1989, the Ashtabula County (OH) coroner who examined the body of a high school football player stated that the 17-year-old heart attack was partly attributable to the use of anabolic steroids. This marked the first time

that anabolic steroids had been legally linked to a death in the U.S.

Probably the most publicized fatality was pro football star Lyle Alzado, who believed that steroids produced the brain cancer that eventually killed him. It is extremely likely that steroid usage has contributed to more than a few other deaths.

### WHAT ARE THE CURRENT LEGAL RAMIFICATIONS OF STEROID USE?

The Anabolic Steroid Control Act of 1990 categorized steroids as a Schedule III drug—putting it in the same restricted class as various narcotics, depressants, and stimulants.

Current legislation includes a maximum \$1,000 fine and a maximum one-year sentence for possession (first offense) as well as a \$250,000 fine and up to five years in prison for trafficking.

The Act gives federal drug enforcement officials the authority to regulate manufacturers, wholesalers, doctors, and pharmacies. It also allows for the seizure of assets and money earned through the trafficking of steroids.

Aside from the criminal ramifications associated with the

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distribution of anabolic steroids by individuals who are not authorized to distribute or prescribe them, anyone who provides anabolic steroids to others may face additional civil claims and lawsuits.

For example, when steroids are provided by nonphysicians, such as coaches and trainers, the lawsuits brought against them may be coupled with charges of illegal engagement in the practice of medicine. Under these circumstances, the likelihood of a

finding of negligence and liability are greatly enhanced.

### HOW CAN I TELL WHETHER ONE OF MY ATHLETES IS USING STEROIDS?

Since steroids can be taken orally in tablet/pill form or by direct injection into a muscle, users may have needles, syringes, and pill bottles either hidden or in their possession.

Steroid users often have puncture marks, bruises, scar tissue, or calluses on their upper thighs and buttocks from injections.

The adverse side effects of steroid use also produce give-aways. Steroid users often have: 1) a bloated, puffy look to their faces and skins due to fluid retention; 2) a yellowish tint (from jaundice) to their eyes and skin; 3) an increased incidence of stretch marks; 4) unprovoked nosebleeds; 5)

gynecomastia; and 6) severe acne, especially on the back.

Finally, sudden and significant increases in size, weight, and strength are also indicators of steroids use.

In terms of psychological signs, observers may look for violent and unpredictable rages, severe depression, and an increased libido.

Of course, one or two of these symptoms do not necessarily indicate steroid use. But the appearance of several of these symptoms at one time or over a period of time should put the observer on the alert for steroid abuse. ■

(Matt Brzycki is the coordinator of Health Fitness, Strength and Conditioning Programs at Princeton University, and has a book—*A Practical Approach to Strength Training*—currently in its third edition).



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