

TESTIMONY OF LLOYD T. BACCUS, M.D.
MEDICAL DIRECTOR, NBA/NBPA ANTI-DRUG PROGRAM

BEFORE THE COMMITTEE ON GOVERNMENT REFORM
U.S. HOUSE OF REPRESENTATIVES

MAY 19, 2005

Chairman Davis and Members of the Committee:

Thank you for the opportunity to provide this testimony.

Since serving as Captain in the United States Air Force Medical Corps in the late 1960s, I have devoted my professional career to the mental and physical health issues associated with substance abuse. I am currently an Adjunct Associate Professor of Psychiatry at the Morehouse School of Medicine, and have previously held other teaching positions at both Morehouse and Emory University School of Medicine. I have advised on physical and mental health programs at correctional facilities throughout the country. In addition to my role with the NBA's anti-drug program, I am currently the President and CEO of Comprehensive Medical Associates, Inc., a company I founded in 1986 and which provides physical and mental health services to a variety of clients.

In 1989, I was asked by the NBA and the National Basketball Players Association to assume the position of Medical Director of the NBA's anti-drug program. In the 16 years I have served in this capacity, I have gained a great

deal of experience in understanding the substance abuse issues faced by NBA players. Over the last six NBA seasons, during which steroids and performance-enhancing drugs were included in the NBA's program, I have also learned a great deal about these substances and their effects on athletes. I am pleased to be able to provide information to the Committee and am fully supportive of its work in this important area.

In my capacity as Medical Director, I coordinate and implement the NBA's anti-drug program, and oversee all in-patient and aftercare treatment and testing of players who have entered the program. Such entry can occur as a result of a positive drug test or because a player has elected to come forward voluntarily to seek treatment. Once a player has entered the program, I will conduct an initial evaluation, arrange for in-patient treatment if medically necessary, develop an aftercare program that involves both dedicated support systems for the player and frequent drug testing, and monitor the player's progress (or lack thereof) and communicate my conclusions to the NBA and the Players Association. In performing this function, I am assisted by certified drug counselors who frequently travel to the player's home city to provide direct support during the initial stages of in-patient care or aftercare, and by a nationwide network of medical providers who assist players with counseling and treatment as medically indicated.

In addition to my role as Medical Director, I also serve as the program's Medical Review Officer ("MRO"). In this capacity, I am called upon to certify test results that have been deemed "positive" by the laboratory for a prohibited

substance. Among other things, the MRO function requires me to determine whether there is a reasonable medical explanation for the presence of a prohibited substance in the player's urine, or whether the particular substance is present at levels that may reflect an endogenous -- rather than an exogenous -- source. Steroids and performance-enhancing substances can impose a challenge in this regard, as a number of banned substances are naturally present at low levels in every human body. Other substances that are present on the NBA's banned list -- such as pseudophedrine -- can appear in over-the-counter medicines, and proper uses of these drugs must be distinguished by the MRO from improper uses for competitive advantage.

It is now, of course, common knowledge that steroids and performance-enhancing substances pose a substantial health risk to those who use them. Heart attacks, strokes, kidney and liver cancers, sterility, and changes to the musculoskeletal system are just a few of the many adverse health effects that have been associated with steroid use. Somewhat less well known, but equally dangerous, are the psychological effects of these drugs, which include increased aggressiveness, changes in mood, and severe depression when use is terminated.

During my tenure as Medical Director, I have not become aware of any evidence that would suggest more than the most minimal use of steroids and performance-enhancing drugs by NBA players. Of the approximately 4,200 drug tests that were conducted by the NBA for these substances during the past six seasons, only 23 were reported back as initial laboratory positives, and only 3 of

those were ultimately confirmed by me as “positive” tests after MRO review. These results do not surprise me, as it is not at all clear that the traditional benefits of steroids and performance-enhancing substances – such as increased muscle mass, strength, and endurance – are, or are perceived to be, advantageous to NBA players. The physical traits that NBA players rely on – particularly, quickness, agility, and dexterity – do not appear to be assisted, and may even be hindered, by the use of these substances.

Nevertheless, I fully endorse the NBA’s decision in 1999 to include steroids and prohibited substances in its anti-drug program, and am pleased to learn that the NBA and the Players Association are currently discussing ways to further strengthen this aspect of the program. A strong and effective testing program is the best way to ensure that steroids and performance-enhancing substances never get a foothold in the NBA.

In addition to drug testing, the NBA’s anti-drug program contains a substantial education and counseling component. Each NBA player, during each season, is required to attend a mandatory “team awareness” meeting, at which substance abuse issues are addressed. These meetings are conducted by members of the program’s professional staff, including a physician and two certified counselors who are retired NBA players. The physician provides information about the adverse health effects of steroids and performance-enhancing substances, describes the drugs on the NBA’s banned list (as it may have been amended from the prior season), provides written work-study materials designed to help players retain what they have learned, and answers questions from players. Drawing on

their experiences as former NBA players, the counselors make the connection between this technical information and the real life circumstances of players from adolescence to professional athletics.

In addition to the annual team awareness meetings, substance abuse education is provided to rookie players prior to their entry into the NBA. This occurs at a mandatory week-long “Rookie Transition Program,” during which the dangers of drug and steroid use – among numerous other topics – are addressed in detail. A presentation on the NBA’s drug program is also given at the NBA’s Pre-Draft Camp in June of each year, where prospective NBA draftees are gathered.

In sum, the NBA’s drug program has been and remains committed to ensuring that steroids and performance-enhancing drugs do not become part of the NBA landscape. I am confident that we will continue to be successful in this endeavor.