



**Response of the UCI to a report from AFLD**  
**relating to anti- doping activities**  
**at the**  
**2009 Tour de France**

## **PART 1: GENERAL COMMENTS**

### The concept of partnership

On 10 June 2009, the UCI President Pat McQuaid signed a partnership agreement with AFLD President Pierre Bordry. The intention of this partnership was to demonstrate to the cycling family and to the public that UCI and AFLD were collaborating closely to protect the integrity of the 2009 Tour de France. The signature of the UCI President was added to the agreement based on the general definition of a partnership as:

*A relationship between individuals or groups that is characterized by mutual cooperation and responsibility, for the achievement of a specified goal*

The UCI did not actually need the services of AFLD. The UCI has the resources, the expertise and the competence to conduct a large scale testing programme on its own. Under the World Anti-Doping Code, the UCI is the recognised sample collection authority and results management authority, with sole jurisdiction to conduct anti-doping tests at international cycling events. However, to demonstrate its willingness to work in a harmonised international anti-doping community on our premier event, the Tour de France, the UCI agreed to share the responsibilities with AFLD.

The role of the AFLD according to the agreement was modest. In short, they provided the doctors to assist our Doping Control Officers. The UCI also agreed to collaborate on targeted testing before and during the event, based on our respective information sources. While the UCI Anti-Doping programme always welcomes independent and professional scrutiny, the AFLD did not seek that role in the agreement with the UCI. The AFLD's unilateral decision to conduct an informal observer programme, with the unfortunate result of an untimely, incomplete, misinformed and inaccurate report is puzzling and disappointing. It calls into question the motives of AFLD.

The UCI President signed the agreement in good spirit and good faith that the concept of partnership would be upheld. The AFLD has let the UCI down. They have let the UCI down by failing to act as good partners and collaborators. A true partner does not make assertions to the media before communicating them to their partner. A true partner does not fail to acknowledge and recognise the value of the most comprehensive and state-of-the-art anti-doping programme outside of the Olympic and Paralympic Games. A true partner does not make completely incorrect assertions, unfounded accusations, focussing on the most trivial of issues and raising

again issues which have already been addressed? A true partner does not encourage their staff to work closely with UCI colleagues for three weeks and then fail to give them the courtesy and respect of reviewing apparent concerns before reaching conclusions. Most importantly, a true partner in the fight against doping in sport does not take actions which may substantially undermine athlete and public confidence in the harmonisation of the international anti-doping effort.

#### A high volume, complex, state of the art testing programme

It is also timely to remind everyone that the UCI testing programme for this year's Tour de France consisted of a total of 762 tests. Of these, 185 were urine samples, 246 were blood samples and 331 were biological passport samples. This averages out at more than 4 tests per rider and 34 per day. Samples were collected at all times of the day or night and were transported to three different WADA laboratories where they were analysed using every currently available detection method. As you see in our report **no** samples arrived in the laboratory in a state which rendered them unfit for analysis. In addition over 190 samples were collected from riders short listed to start the Tour during the months of May and June. The issues Mr Bordry refers to in his report relate to a very small number of samples out of this total testing programme.

#### Preferential treatment

One of the gravest and most unfounded of AFLD's assertions relates to favourable treatment given to Astana riders. This was an issue which was raised by the AFLD during the Tour in mid July. President Pat McQuaid investigated this issue immediately upon becoming aware of it during the Tour and responded in detail to Mr Bordry. The fact that he raises the issue again shows his complete disregard for the facts and the partnership. Now that the Tour is over, it is even more evident that Astana received absolutely no special treatment, except in the sense of their riders being subject to considerably more doping controls than other riders. Astana riders, who comprised 5% of the total number of participants, were subjected to 81 anti-doping tests, or over 10% of the total tests conducted. In fact the top individual Astana riders received more than three times the number of tests of most other riders in the race.

#### The public domain

Before responding in detail to the public assertions made by the AFLD against UCI staff, the UCI wants to make two things clear. Firstly, these sort of unfounded criticisms should not be raised in public. Of course, the UCI will always be responsive to constructive feedback for improvement. We actively seek such feedback from our partners. We acknowledge that the complexities and unpredictable circumstances of anti-doping mean that activities may not be executed perfectly, and we are constantly looking for ways to ensure our activities offer the most professional and consistent programme to riders and their support personnel. The UCI strongly believes that such feedback should be provided initially in a confidential manner with WADA's involvement if appropriate.

However, with the UCI's reputation already shattered by Mr Bordry's actions and rhetoric, there is no recourse but to set the record straight in the UCI's correction of his mischievous and misinformed statements.

## AFLD failings

Secondly, it is important for everyone to understand that AFLD is far from perfect in the implementation of their own anti-doping activities. The common saying which seems relevant here is “people in glass houses should not throw stones”. One recent example demonstrates such a failing.

On 14 May 2009, Mr Bordry and some of his staff members met with the UCI and ASO in Aigle. AFLD and ASO expressed a desire to conduct a large number of targeted out-of-competition tests in the six weeks before the Tour de France. We agreed to provide AFLD with whereabouts information of teams who were training in France during this time. This was to enable AFLD to conduct the large scale out-of-competition testing that they considered necessary. By the start of the Tour, UCI had conducted 190 out-of competition tests on riders short listed for the Tour, while AFLD had conducted 13 tests. Of these, 6 were on French riders whom they have access to test all year round. But of great significance is that 5 of the samples collected from riders in the same French team, were sent to the laboratory with the full names and details of the riders. This completely invalidates the anonymous chain of custody requirements of the Code and International Standard of Testing. Anonymity of samples is the most fundamental principle of anti-doping. To destroy the anonymity of samples is the gravest mistake which can be made. It should never happen. It is the very first and most important lesson which any sample collection official learns. That such a small number of tests were conducted and that five were declared invalid makes us question the competence of the AFLD and their authority to point the finger at others.

The UCI did not make this public

The UCI did not accuse AFLD of giving a preferential treatment to French riders and to one team in particular.

The leakage of highly confidential anti-doping information from French authorities is well known in anti-doping circles and UCI has experienced this for many years. This may be a structural deficiency in that AFLD encompasses both the testing department and the laboratory, which it openly refers to as its analysis department. Even as recently as the 2009 Tour de France, the UCI continued to suffer from a lack of confidentiality from AFLD. As an example, immediately following an early morning blood test, an AFLD staff member informed a representative of ASO, the race organiser, about issues relating to one particular rider and his sample provision. Again, this is a totally unacceptable breach of another fundamental principle of anti-doping – the requirement to preserve the utmost confidentiality of what occurs during a sample collection session. Such information should never be revealed to third parties.

The UCI did not make this public.

The UCI did not put AFLD in the pillory over this.

In addition to matters arising from the Tour de France, on 8 June 2009, the UCI President had previously written to Mr Bordry expressing concern over the unreliable manner in which AFLD doctors were undertaking their role at UCI events. These concerns were mostly related to AFLD doctors simply not attending races to which they had been assigned or to giving riders completely incorrect instructions about the nature of their sample provision. Several UCI international races went without adequate doping control because of the failure of AFLD to fulfil their commitment to the French Cycling Federation and the UCI to send doctors to conduct testing.

The UCI is prepared; if necessary to make all letters to Mr Bordry on these matters public if it will assist in ensuring he takes responsibility for the failings of his own organisation before he casts aspersions on another organisation.

Before moving on to the specifics of the report, it should be added that the UCI is aware of at least three other major International Federations who have experienced significant problems working with AFLD. One International Federation now arranges sample collection and analysis of samples by parties outside of France for its premier event on French soil; another International Federation had to severely reprimand AFLD for failing to conduct sufficient tests on the French national team members before a major World Championships in 2009. Yet another International Federation experienced the same breakdown of anonymity of a sample sent to the laboratory with the athlete's name included.

The UCI will now address each of the accusations in detail, providing evidence to rebut the incorrect, misinformed and trivial statements made by Mr Bordry. It will be obvious that Mr Bordry has abused his position as President of a prominent National Anti-Doping Organisation to undermine the efforts of a sport which is doing its best to eliminate doping, and perhaps more importantly to undermine the public perception of the international anti-doping effort.

All of this would seem to put into question the motivation of Mr Bordry and the AFLD, whether it be genuine in the fight against doping or whether he has another objective, another agenda. Either way, the sport of cycling is not well served by such a person and institution as it would now seem to be apparent that his personal agenda overrides his professional agenda.

The UCI and the sport of cycling can no longer nor will no longer accept this.

## **PART 2: RESPONSE TO SPECIFIC ASSERTIONS**

In response to the specific assertions made by AFLD in the report received by the UCI on 6 October 2009, the UCI makes the comments below.

### **1. The UCI failed to conduct tests on an unannounced basis by:**

#### a) speaking in a loud voice in a public place about forthcoming tests

This is completely false.

The basic facts of this accusation are incorrect. The riders stayed in Barcelona on 9 July, not 7 July as stated by AFLD.

The UCI Doping Control Officers (DCOs) did not speak about the teams or riders they planned to test in a public place at any time during the Tour. On the night of 9 July, the UCI DCOs shared a dinner table with UCI race commissaires and did not discuss their anti-doping activities at all.

#### b) failing to use chaperones for early morning blood tests

This is an overstated comment.

In fact chaperones were used to notify riders for early morning blood tests except on the mornings of 3, 4 and 11 July.

It should be noted in the first place that in order to ensure the efficiency of large scale team-based testing, the UCI recognises a different approach which does not involve a chaperone notifying and observing every rider. In some circumstances, the UCI conducts up to 200 tests on riders in one morning. In such testing sessions it is simply not efficient to have the same number of chaperones as riders. Article 139 of the UCI Anti-Doping Rules provides for an alternative approach to in-person notification when testing takes place in-competition but outside the frame of a post finish testing session. The article allows for a rider to be validly notified via his team manager. This approach is also followed by other sports such as skiing and football whenever large groups of athletes are selected for testing at the same time.

On Friday 3 July, only two riders were required to provide a sample. These riders could be notified in-person by the UCI Doping Control Officers.

On Saturday 4 July, the UCI DCOs followed the normal UCI pre-event testing procedure of notifying the team managers of the requirement for riders of their team to be tested.

When it became known that the chaperones would be available for early morning testing, it was decided to use chaperones for testing in the mornings and evenings at hotels. This change to normal UCI procedure was made in recognition of the fact that chaperones were made available for testing other than post-competition testing. UCI also recognised that a smaller number (normally about 10) riders were required to be tested in the forthcoming morning testing sessions, compared to large scale team-based testing sessions where up to 200 riders may be required for testing. The smaller number of riders selected for testing made personal notification by chaperones feasible. The Doping Control Officers were therefore instructed to use chaperones wherever feasible for all testing conducted during the Tour de France.

Chaperones were therefore used as from 5 July during the whole Tour, except on 11 July, for two reasons:

- i) because of a concern by the UCI DCOs that alleged leaks of information relating to which riders were to be tested that morning may have been emanating from the chaperones
  - ii) because the chaperones were lodged a long way away from the hotels at which testing would occur.
- c) listing the names of riders required for testing 30 minutes before the finish of a stage

This was not the procedure followed at the Tour.

In agreement with AFLD doctors, the chaperone coordinator, Mr Witkowski was responsible for posting the names of riders required at doping control approximately 7 km (or 10 -15 minutes) before the finish of the race.

Under UCI Anti-Doping rules, the organiser of a race is required to make chaperones available for post-competition testing. The group of chaperones for the Tour de France, including Mr Witkowski, were appointed by AFLD on behalf of ASO.

Mr Witkowski was given the list of riders by the UCI DCOs following their selection. It was not possible for the UCI DCOs to be sure when Mr Witkowski posted the names as they were at that time already in the doping control station awaiting riders.

d) notifying a rider before the start of the Montpellier stage

UCI DCOs have **no** knowledge of **any** rider being notified before the start of the Montpellier stage. In fact, throughout the whole Tour, no riders were ever informed by UCI DCOs before the stage of their selection for testing.

The selection of riders was made before the race on the day of the Montpellier stage due to the requirement for the UCI DCOs to act as race commissaires at the request of the President of the Commissaires Panel. This request was made to the DCOs on the basis that they are both also trained as race commissaires and their assistance by following a team during the team time trial would help in the smooth conduct of this particular stage. The DCOs agreed to assist in the spirit of teamwork and to support the UCI's commitment to the successful conduct of the race. They correctly considered that this additional role would not adversely affect their ability to fulfil their anti-doping responsibilities.

Because of the particular circumstances of this stage, the chaperones were provided with the rider selections before the start of the race and instructed to proceed to the finish line. All riders were successfully notified at the finish line of this stage.

Although **no** rider was notified of his selection for testing before **any** stage of the Tour, the AFLD assertion may be a reference to a situation where one of the DCOs notified a team director that one of the riders in his team would be notified for testing by a chaperone at the finish line and so he should look out for the chaperone. This situation occurred approximately five minutes before the team had crossed the finish line at the Montpellier stage. The UCI acknowledges that in-person notification directly to the rider is the preferred means of notification and as such there was no necessity to notify the team director in this case. DCOs are instructed that for post-competition testing, third parties such as sports directors should not be notified unless there is a problem in notifying the rider directly. This has been reinforced to the DCO who notified the team director towards the end of the Montpellier stage.

**2. The UCI failed to make use of chaperones by:**

a) failing to use chaperones at early morning blood testing sessions

This overstated comment has been addressed in item 1b) above.

b) failing to provide vests for three chaperones

This is a trivial issue which does not affect the integrity of the anti-doping process.

All chaperones had proper accreditation throughout the race. Vests are not mandatory but are provided by the UCI to assist riders and race officials recognise chaperones. Additional vests were obtained when baggage issues were resolved. It is trivial to raise such a matter in the public domain.

**3. Failure to provide and retain Notification forms**

This issue does not affect the integrity of sample collection.

Every rider subject to doping control during the Tour received and signed a Notification form.

It is true that UCI DCOs commenced the race with insufficient quantities of duplicate (carbon copy) Notification forms in view of the large numbers of riders that were tested. A temporary solution of photocopying the form was devised until further stocks of forms were delivered on the fourth day the race. For the purposes of doping control a photocopy is as good as a carbon copy.

It is worthwhile commenting that as soon as the rider has arrived at the Doping Control Station within the time limit, has provided a sample and has signed the Doping Control Form, the Notification form becomes redundant. The Notification form has to be kept only in those cases where at the arrival of the rider in the doping control station the DCO is not able to verify when the rider was notified until such verification can occur. However, upon request from the AFLD doctors, all Notification forms from the third week of the Tour were retained.

The issue relating to Notification forms was fully addressed during the Tour. It is trivial to raise it again more than two months after the Tour has finished.

**4. The UCI failed to ensure riders were tested in the required time after notification by:**

- a) allowing riders a period of time longer than 30 minutes before reporting for a post-competition test.

This is a completely misinformed comment.

AFLD demonstrate ignorance of Article 5.4.4 of the *International Standard for Testing*, which is reflected in Articles 143 and 183 of the UCI Anti-Doping Rules. Provided riders are observed at all times by a chaperone, they have the right to take part in the official ceremonies and press conference before proceeding to the doping control station. The 30 minutes time limit starts at the end of such activities. Also the DCO or chaperone may grant additional time to the rider to engage in other preferential activities related to the event, before reporting to doping control.

Award ceremonies and press meetings are inherent to sporting events and in particular to the Tour de France. They cannot be held after doping control. It serves no anti-doping purpose to deprive the riders, the organizer, the press and the public, as is apparently the wish of AFLD, of this part of the event which is also part of the tradition of cycling and indeed of sport.

So at an event such as the Tour the France there is nothing exceptional or irregular in a stage winner arriving at the doping control station an hour or more after he finished the race. This circumstance does not affect the regularity or reliability of doping control.

UCI staff members who have acted as WADA Independent Observers or in other capacities at the Olympic Games note that many athletes from all sports arrive at doping control significantly later than the 60 minutes specified in the IOC Doping Control Rules for the Olympic Games. As those athletes remain under observation of chaperones, there is no problem in terms of validity of doping control.

b) delaying the testing of Astana riders for 45 minutes on the morning of 11 July

This issue has been fully investigated and addressed in telephone and email communication with Mr Bordry during the Tour de France.

In addition, a formal letter was sent to Mr Bordry on 5 August assuring him categorically that Astana riders had not been given any preferential treatment. In fact the decisions around the time of testing on the morning of 11 July were made in consultation with one of the AFLD doctors. As has already been explained publicly by the UCI President, two Astana staff members informed the testing team upon their arrival at the hotel that the Astana riders had experienced a delayed transfer the night before and had not been able to go to sleep until after midnight. Therefore they had been given an extra hour to sleep before breakfast. On the basis that the riders could not be informed of their presence, the UCI DCO and AFLD doctor agreed to delay the waking of the riders for 35 minutes. The Astana staff continued to sit with the testing team during this period.

The riders were not informed of the presence of testing staff before their actual notification to attend doping control. The time limit between notification and doping control was ten minutes only, as is the case for all teams tested in the morning.

The UCI is confident that there was no intent by UCI staff members to offer any opportunities for riders to manipulate blood samples at any time during the Tour.

c) inability to test Astana riders on 25 July

This statement misrepresents the circumstances.

On Saturday 25 July high volumes of traffic resulted in some roads being completely blocked.

Despite slow moving traffic, the testing team persevered to try to conduct the tests planned on 3 Astana riders. However by the time of their arrival, the riders were already on the team bus, ready for an earlier than expected departure to the starting place that morning due to the traffic conditions.

Astana officials offered the opportunity to the testing team to accompany the riders on the bus in order to conduct the tests on the three selected riders. However, the UCI DCO and AFLD doctor agreed together not to accompany the team on the bus due to their own obligations for the remainder of the day. The riders selected for the morning testing of 25 July were in fact tested in the afternoon of 25 July.

It is worth noting that by Saturday 25 July, Astana riders had experienced more tests than any other team. Several Astana riders had also been tested the day before after the Mt Ventoux stage on 24 July. Astana were the most frequently tested team because their success in many stages resulted in the requirement for them to undergo post-competition tests. In addition they were included in the AFLD and UCI selections for targeted hotel-based testing. It is also worth noting that the UCI always agreed with all suggestions from the AFLD to test specific riders.

## **5. The UCI failed to request the in-competition analysis menu on samples**

This statement is incorrect.

All urine samples were analysed for every substance in the full in-competition analysis menu. This could have been easily verified by the AFLD by checking with their own analysis department.

Two (2) urine samples collected on the morning before the Tour were incorrectly marked as out-of-competition. This notation was adjusted on the laboratory advice form before the samples were sent to the laboratory so that also these samples were analysed for the full menu.

The AFLD is confused and uninformed about the designation of samples collected for the biological passport. Scientific advice, supported by WADA, indicates that blood samples collected on the first 3 days of a multi-stage event should be designated as "out of competition". The menu of analysis remains the same, but the way in which the sample is treated within the Bayesian statistical model requires that the samples be designated as of out of competition until day three of a multi-day race. The AFLD seems not to be familiar with modern anti-doping techniques.

## **6. The UCI allowed an unauthorised person to be present at a sample collection session**

This occurrence did not affect the integrity of the sample.

Like all athletes, Mr Armstrong was entitled to have a representative of his choice with him during the administrative aspects of sample collection. Although not encouraged, there is no UCI or IST rule which specifically prohibits the taking of photographs. It is, as such, a breach of Article 144 of the UCI Anti-Doping Rules to allow such a representative to be present during the actual provision of a sample unless the athlete is a minor or disabled. However it is the UCI's view that if a rider agrees for a photographer to be present and to take pictures even while he is passing a sample, this does not invalidate the sample.

In this case, the photographer failed to follow the instructions of the AFLD doctor to leave the toilet area. The UCI DCO was not aware of the difficulties being experienced as he was at that moment performing his tasks in the administration area of the doping control station. When the photographer re-entered the administration area, the UCI DCO covered confidential areas of the form with his hands and explained that photography was not permitted of confidential aspects of doping control.

The UCI will as a result inform riders of their general obligation to discourage a third person being in eyesight of a rider while he is providing a sample.

## **7. The UCI failed to ensure proper storage and transport of samples**

The UCI invested significant time and resources to ensure that blood and urine samples were stored and transported in optimal conditions. Throughout the Tour, samples were stored and transported under correct temperature-specific conditions by specialist courier companies World Courier and Marken.

Over 200 pre-competition samples collected on the Thursday morning before the race were shipped in professional cool chain custody boxes in a privately chartered Air-Glaciers plane. They were accompanied by the staff of the Lausanne laboratory.

On 12 July, samples collected from Milram riders were picked up five hours after provision. The UCI acknowledges that this lengthy delay is not optimal. The courier company, Marken were unexpectedly late, so the samples were left in the custody of the AFLD doctors while the UCI DCOs departed to prepare for the race. The samples should have been stored in the refrigerator of the hotel, but for some reason, the AFLD doctors did not arrange this.

On 19 and 20 July, samples were hand delivered to the Lausanne laboratory by sample collection staff. On both days, cool boxes were used to convey the samples. This is an acceptable and reliable method of transport.

These were the two sole facts on which AFLD voice criticism in their report. That criticism is unfounded, as is shown here. But it is totally unworthy to state on this ground, as does AFLD, that the UCI in general did not provide adequate material to store and transport samples. It shows the spirit in which the AFLD report was made.

Besides, the laboratory is required to report any samples which arrive in a state which renders them unfit for analysis. No such reports were received from any of the three laboratories used for testing.

## **II Structural difficulties of cooperation between an IF and NADO**

In relation to the miscellaneous points raised in the final section of the report, the UCI makes the following comments:

### Relationship with NADOs

The UCI has been one of the most active IFs in creating good working relationships with NADOs. We have successfully worked with over 20 NADOs on in-competition testing, out-of-competition testing, whereabouts and education issues. Our most difficult relationship has been with AFLD which fails to embrace modern anti-doping practices and apparently seeks a monopoly for anti-doping in France, including for international events.

### Friendship with riders

The UCI follows the principle of being “fair but firm”. We treat riders as human beings and with respect. We acknowledge that being familiar with riders is not good practice and we instruct our DCOs to maintain a professional attitude at all times when interacting with riders. During the Tour, as the AFLD itself indicates, nothing occurred which “casts doubt on the integrity of the UCI inspectors and other staff members”.

In particular, with reference to the comments about Lance Armstrong, the UCI can confirm that he received no special treatment. In fact, he is one of the most tested riders in the peloton. He has had 35 tests since October 2008 of which 13 were conducted during the 2009 Tour.

Where AFLD suggest that Mr Armstrong enjoyed the benefit of longer reporting times so that he could rehydrate after the race there is no evidence of dilution in his urine

samples. In fact some samples are so heavily concentrated that they indicate the opposite effect of dehydration. AFLD casts suspicions without looking at the facts.

With respect to the specific assertion that Astana riders were given preferential treatment, it is simply not true that Astana riders were always tested last. Morning testing was based on the logistics of visiting several team hotels in different locations and testing was planned to ensure the most efficient travel arrangements to and between team hotels. In fact there was only one day during the whole Tour de France on which Astana riders were the last to be tested.

#### Failure to provide whereabouts of Astana.

This is completely false. The UCI provided a continuous stream of whereabouts information to the AFLD testing manager, Mr Verdy during the month of June.

In fact, at least 17 emails were sent to Mr Verdy providing detailed whereabouts of foreign teams and riders when they were in France prior to the Tour de France.

At least five emails (25 May, 2 June, 3 June, 23 June, 30 June) were directly concerning the whereabouts of Astana riders. Several emails from Mr Verdy acknowledged receipt of such information.

Despite significant effort from the UCI to share whereabouts information with AFLD to enable AFLD to conduct out-of-competition tests prior to the Tour de France, AFLD conducted a total of 13 tests and no more. No Astana riders were tested by AFLD during this period despite detailed information. 6 of the 13 samples were collected from French riders for whom AFLD have full year-round access to whereabouts in ADAMS. As already mentioned, five of the samples were declared invalid because of the incompetence of the AFLD.

#### Relationship between AFLD doctors, UCI DCOs and management staff of AFLD and UCI.

This is perhaps the most disappointing of the AFLD's report. Throughout the Tour the UCI DCOs and AFLD doctors worked collaboratively together. They made decisions in harmony and shared responsibilities equitably. They mostly chose to share dinner together, although other alternatives were available. The DCOs and doctors came to lunch at UCI Headquarters in Aigle on 20 July during the rest day of the Tour de France in Verbier, closeby. Despite their growing tiredness they all expressed general satisfaction about how the testing was proceeding. The AFLD doctors had the opportunity to raise any concerns with the UCI Anti-Doping Manager and UCI Medical Director on this visit. No such concerns were raised at that time. Apparently the far-fetched concerns raised in the AFLD report two months later had to serve other purposes than the quality of doping control in the Tour de France.

UCI Doping Control Officers are entrusted to make operational decisions without referring to UCI Management within the bounds of their responsibility. Contrary to the AFLD report, the Cervelo rider who was tested on 21 July had a blood test immediately following his urine test. In fact the urine test was completed at 17.30 and the blood test at 17.35. Again, it seems that AFLD makes assertions which are completely contrary to the actual facts.

The UCI accepted every suggestion made by AFLD Testing Manager, Mr Verdy, of riders to be selected for anti-doping testing. Mr Verdy regularly provided suggestions

for post-competition and early morning testing of riders. All of his suggestions were accepted and tests planned and executed accordingly

It is worth noting that one of the AFLD doctors was not always comfortable drawing blood from riders. In his professional role as a psychiatrist, he does not have the general requirement to withdraw blood. It is the UCI's experience that phlebotomists who withdraw blood regularly often undertake this role more effectively than doctors who have very little need to draw blood in their professional work. It goes without saying that it is not the doctor concerned who can be blamed for this situation.

#### Sharing of blood profiles

Like all anti-doping organisations, the UCI is subject to strict confidentiality and data protection standards. Without the express authorisation of riders it is not possible for the UCI to transmit their blood profiles to a third party. AFLD is supposed to know this very well. The UCI has the impression that AFLD asks for confidential information only for the purpose of blaming those who have no option but to refuse such an impossible request.

#### **Summary**

The UCI reiterates clearly that the Anti-Doping programme conducted at the 2009 Tour de France was comprehensive and robust, incorporating the most contemporary and advanced collection and analysis techniques. Riders participated in the 2009 Tour knowing that this would be the case. They had also been subjected to many tests in the weeks leading up to the Tour. They knew and understood the risks of doping during the Tour.

As has been demonstrated by the answers above, the AFLD report was based on incorrect facts and overstated assertions. It focuses on supposed imperfections in a sophisticated anti-doping system. Given the uniqueness of this anti-doping programme, it is only the UCI who can be blamed for such imperfections as there is no possibility for them to occur elsewhere. At the same time there is no acknowledgment for all the efforts to plan and conduct a programme to well exceed what is generally accepted as being satisfactory in anti-doping.

The UCI is disappointed and angry that a partner in the international fight against doping chooses to submit such a groundless report which undermines rider and public confidence in the anti-doping programme conducted at the 2009 Tour de France.

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