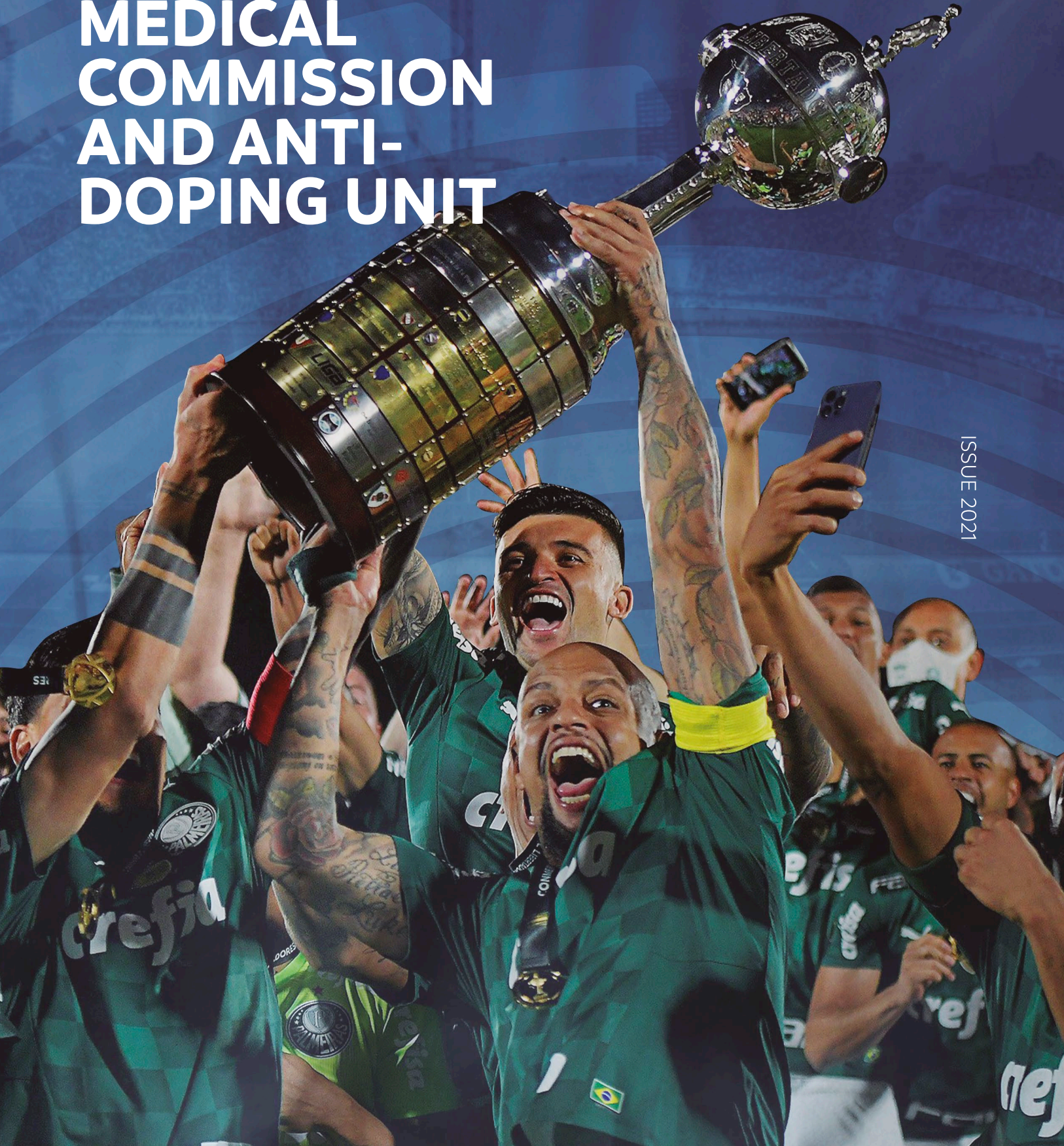




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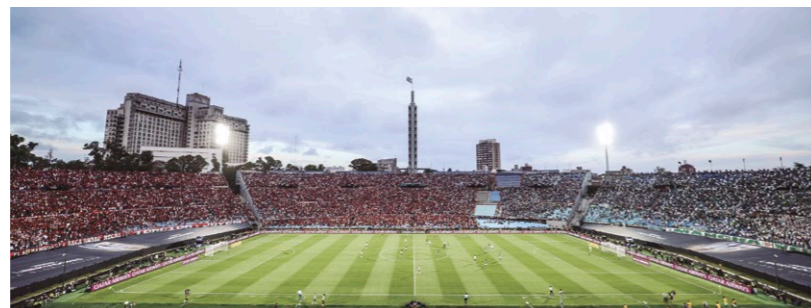
SCIENTIFIC JOURNAL OF THE

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Gratitude to those who care for football

2021 marks the end of the second year of the COVID 19 pandemic worldwide. Although the spread of the virus has slowed down, its impact on various areas of life and society continues, including, of course, football and sport in general. Never before has the role played by medical teams in associations, clubs and competitions been so important, so crucial. Their contribution to keeping football safe has been decisive.

The health protocols implemented by CONMEBOL have proven to be highly effective time and time again in every match and tournament. In May of this year, CONMEBOL was able to launch a massive vaccination

campaign that reached players, coaches, referees, assistants and other members of the football community. It was the only civil society organisation on the planet that managed to launch such a campaign.

Fortunately, in the case of South American football, the urgent did not overshadow the important. While measures were being taken to halt the spread of the disease, the usual work of the medical committees was also being carried out. Anti-doping tests, both in and out of competition, injury analyses and the exchange of information and knowledge between our doctors were carried out smoothly and with the usual efficiency.

The 2022 brings forth new and great challenges. One of them is the World Cup, scheduled for December in Qatar. We must all stay focused, do our job and push together the South American teams that manage to qualify for the World Cup. We want the Cup to return to its first home and the contribution of the medical teams to this end will be fundamental.

Alejandro Domínguez W-S. CONMEBOL President



MEDICAL COMMISSION AND ANTI- DOPING UNIT

President

Pride for a job well done

Looking back over the year that is coming to an end, we at the CONMEBOL Medical Commission can only feel a sense of pride and gratitude for having carried out our tasks and responsibilities to the full. It was not an easy year. The COVID 19 pandemic is still ongoing, with new strains of the virus and dangers lurking into the fragile normality we have recovered. Since this phenomenon began in March 2020, the CONMEBOL Medical Commission and the medical teams of the associations and clubs have been dedicated to putting science at the service of South American football and the sport. With strict health protocols, we have achieved an efficiency level of more than 99% on thousands of

screening tests carried out in the various tournaments. Safety was further enhanced by the mass vaccination of players, coaches, assistants, referees and other members of the football community.

CONMEBOL has managed to run its competitions smoothly, bringing the joy and excitement of football to millions of people across the continent. But this work around the pandemic is nothing short of exceptional. At some point, the spread of the virus will slow down and begin to recede, bringing the end of the global epidemic in sight. That is why these achievements are so important: because they were accomplished while medical teams continued to go about their normal,

decades-long work. No responsibility was neglected.

On a personal note, I can only express my gratitude for the collaboration and willingness of the doctors of the associations and clubs of the ten countries that make up CONMEBOL. And, of course, I would like to congratulate all of them for their great work.

Dr. Osvaldo Pangrazio President of the MEDICAL COMMISSION



PART ONE:

MEDICAL COMMITTEE



a.

CONMEBOL TOURNAMENTS DURING THE PANDEMIC

During 2020, CONMEBOL's Medical Commission had a new situation. Initially, it was bewildering, with health measures and policies differing greatly from place to place. In addition, there was a clear lack of knowledge about the pandemic and its evolution. Faced with this situation, considering that it could happen soon and then, when the WHO used the "pandemic" classification, it set the means to act according to the circumstances. It always follows the advice of experts and standards dictated by the health authorities of each country.

The year 2021 has been a complicated year, to say the least, given the number of CONMEBOL competitions and having to organize sporting activities with a cyclical pandemic against which we had to be forewarned, but also had to plan ahead. A change of trend in the number of accumulated positive cases could lead to a cancellation or new regulations that would force the event to be suspended or a change of approach.

CONMEBOL's Medical Commission has covered all the tournaments with the same objectives, but prepared to change in the event of any eventuality or health obligation that may arise. In addition to vaccination and preventive measures, CONMEBOL has made a great effort to monitor the virus and, once detected, to isolate the carrier. As an example, the tests carried out in the different championships in the last two years (*Table 1*) (*Table 2*).

Table 1. RT-PCR tests made by CONMEBOL during 2020

	Pruebas RT-PCR	Resultados positivos	%
CONMEBOL Libertadores 2020	16.681	68	0,4%
CONMEBOL Sudamericana 2020	10.328	17	0,16%
ELIMINATORIAS FIFA Mundial Catar 2022	4.523	14	0,3%
Total	31.532	99	0,3%

Table 2. RT-PCR tests made by CONMEBOL during 2021

CONMEBOL tournaments	Month	Duration	RT-PCR tests	Positive results	%
CONMEBOL Libertadores Femenina 2020	March	Argentina 17 days	2.792	9	0,3
CONMEBOL Libertadores Futsal 2021	May	Uruguay 8 days	1.100	11	1
CONMEBOL Copa América 2021	June-July		28.772		
Eliminatorias Futbol Playa - Mundial FIFA 2021	July	Brazil 9 days	1.373	0	0
CONMEBOL Libertadores Femenina 2021	November	18 days	1.373	5	0,1



This was how CONMEBOL was constantly preparing the return of football and official competitions. In addition to the economic situation that has arisen, the lack of competitions has left another important consequence, the personal performance of each player, away from his work and his team, and of course the damage that this could bring to the national teams.

Let's analyze the evolution of these last two years.

In April 2020, the study and the possibilities to return to competitive football were carried out. A month later, in May 2020, the first CONMEBOL COVID19 Protocol was published, the regulations developed by CONMEBOL for its official competitions without interfering with the health regulations of each country. In addition, CONMEBOL Medical Officials were trained and team doctors were informed of the regulations

so that, as far as possible, they could incorporate them into their own clubs.

In June 2020, meetings were held with the different Member Associations and the Ministries of Health of the ten countries and videoconference meetings were held with the doctors of the clubs and national teams participating in the CONMEBOL tournaments. The Medical Commission continued its work and in July 2020 formed the Expert Committee for Covid-19 and created the digital medical platform for the monitoring and coordination of test results for the detection of COVID-19.

That same month, the president of CONMEBOL held a meeting within the framework of the MERCOSUR summit. Also in July, the Copa America 2020 was scheduled to take place in Argentina and Colombia, but as is well known, it was cancelled. In August 2020, the stadiums

were adapted to comply with CONMEBOL's Covid-19 Protocol and the actions of the Medical Commission were also adapted to this protocol.

In September 2020, the CONMEBOL Sudamericana and Libertadores restarted, marked by the application and effectiveness of health protocols against COVID19 for our competitions. With the rescheduling of these competitions, the finals were held in Córdoba and Rio de Janeiro respectively, in January 2021.

Table 3 and Table 4 summarise the recommended protocols for the training camp period and during the competition for the teams. During the competition some teams returned to their home country after the end of the match and travelled back from their home country to play their match. This varied between delegations, but all delegations performed the RT-PCR test before travelling.

Table 3. Covid-19 Protocol during the concentration of the delegations prior to the 2021 America's Cup competition.

	National teams (players, coaches, medical staff, managers, etc.)	Referees
Vaccine	Recommended	Recommended
Test	All RT-PCR(-)	All RT-PCR(-)
Travel	Plane: CONMEBOL Protocol Bus: CONMEBOL Protocol	Plane: CONMEBOL Protocol Bus: CONMEBOL Protocol
Visit	Restricted: virtual Relatives: RT-PCR(-)	Restricted: virtual Maintain personal home control
Meals	Buffet	Buffet
Hotel	Avoid contact with hotel staff Employees involved with the RT-PCR equipment(-)	Avoid contact with hotel staff Employees involved with the RT-PCR equipment(-)
Remarks	Comply with the country's health regulations Comply with airline regulations	Comply with the country's health regulations Comply with airline regulations
Anti-doping training	Follow CONMEBOL Protocol	Follow CONMEBOL Protocol

Table 4. Covid-19 protocol during the competition, for delegations

	National teams (players, coaches, medical staff, managers, etc.)	Referees	Zone 1 Staff (all persons entering Zone 1)
Test	All RT-PCR(-)	All RT-PCR(-)	All RT-PCR(-)
Periodicity test	Test every five days (Antigens) 48 h before the match RT-PCR	Test every five days (Antigens) 48 h before the match RT-PCR	48 h before the match (24 h. before meeting) RT-PCR
Travel	Plane: CONMEBOL Protocol Bus: CONMEBOL Protocol	Plane: CONMEBOL Protocol Bus: CONMEBOL Protocol	Plane: CONMEBOL Protocol Bus: CONMEBOL Protocol Transfers to the stadium in a private vehicle or van with few people.
Visit	Restricted: virtual Relatives: RT-PCR(-)	Restricted: virtual	Restricted: virtual
Meals	Buffet	Buffet	Buffet
Hotel	Avoid contact with hotel staff Employees involved with the RT-PCR equipment(-)	Avoid contact with hotel staff Employees who have a relationship with RT-PCR(-) referees	Avoid contact with hotel staff
Remarks	Comply with Brazilian sanitary regulations Comply with airline regulations	Comply with Brazilian sanitary regulations Comply with airline regulations	Comply with Brazilian sanitary regulations Comply with airline regulations
Anti-doping competition	Follow CONMEBOL Protocol		Follow CONMEBOL Protocol
Hygiene / health	Entry permit by CONMEBOL, with PCR(-) certificate, 48 hours prior to entry.	Entry permit by CONMEBOL, with PCR(-) certificate, 48 hours prior to entry.	



I. CONMEBOL Libertadores Women's 2020 - Argentina

The CONMEBOL Libertadores Femenina was held in Argentina, at the CA Vélez Sarsfield and Deportivo Morón stadiums, starting on March 3 and ending on March 22. Sixteen clubs participated, following the CONMEBOL Covid-19 Protocol and keeping the tournament doctors with the established prevention provisions.

Six nasal swabs for RT-PCR testing were performed during the championship on the players, coaches and officials of the officially accredited clubs, referees, the local organizing committee, as well as the press and digital media.

The number of RT-PCR tests was 2,792, of which 2,783 were negative, as 9 positive cases were detected, i.e. 0.3% of the tests.

The public attended the event in accordance with CONMEBOL protocol.





II. CONMEBOL Libertadores Futsal 2021 - Uruguay

CONMEBOL Libertadores de Futsal, was held in Uruguay, from 16 to 22 May 2021. It had people in the stands that had to comply with the rules established in the protocol. Covid-19 tests were performed to the 12 participating delegations, the local Organizing Committee,

the team of people who attended the sports center, the CONMEBOL team, the press, as well as the supporting staff of the delegations. Three dates of nasal swabbing were established with a total of 1,100 tests, finding 11 (9%)

positive cases and 1,089 negative cases.

It should be noted that 20% of injuries were detected, that is to say, one out of five players were treated, of varying degrees, by the medical services.



III. CONMEBOL Copa América 2021 - Brasil

The biggest event held in 2021 was the Copa America 2021, where 10 teams participated and played a total of 28 matches, in a first group stage, two groups of five teams, quarterfinals, semifinals, third and fourth place and final.

The arrival of the teams and the organizing committee, as well as adding staff for the adequacy and maintenance of the stadiums required an action protocol in Copa América 2021 against Covid-19. The sanitation of public spaces (stadiums) and private spaces (hotels) was carried out.

Preventive strategies (RT-PCR test) and elementary rules were established, such as the provision of gel alcohol devices, using large and ventilated spaces, avoiding crowds of people and maintaining social distance. The number of RT-PCR tests performed was 28,772.

In case of finding a positive result, immediate confinement was carried out, each hotel had an area prepared for this purpose. The confinement established according to protocol was total isolation for ten days, leaving on day 11, provided that there had been no symptoms, at least, in the last four days.

In addition, a hospital was contracted at each site for immediate referral of potential patients with symptomatology.

All tests were performed and analysed by the same laboratories, one at each site, with proven capacity, guarantees and efficiency.



Action protocol

It acted at four levels by establishing three bubbles and a fourth group, the tertiary force, outside the bubble.

Level 1: Delegations and players

Level 2: CONMEBOL staff

Level 3: Referees

Level 4: External workers, mainly in stadiums, and hotel staff and drivers related to the bubbles. Media professionals, some of whom entered Zone 1 of the stadiums, were always required to present a certificate of a negative RT-PCR, carried out a maximum of 48 hours before the match.

In some cases, sequencing was carried out to determine the strain, as there was concern about new strains, although they have not demonstrated any major danger.

During the first or qualifying phase

The initial days were the most complicated of the tournament, as the delegations were tested, including the players, who had just arrived in Brazil from their previous training camps, some teams had played qualifiers and, in principle, all came with tests carried out in their points of origin with negative tests.

In these first days we found two highly infected teams and a number of external staff working in the stadiums with infection. We proceeded to their immediate isolation and not to break the bubble where they were incorporated. In some cases we proceeded to new tests in the following days to avoid the appearance of new cases.

Table 5 shows how twelve of the 18 infected players were detected in the test carried out on their arrival on June 11 and 12, of the remaining 6, 4 were players infected from the same delegation and only two from other delegations, sporadically.

Table 5. Players infected with Covid-19 in Copa América 2021

Player	Country	Date PCR (+)	Quarantine	Vaccine	
1	A	11/6/21	Yes	Sinovac 09/06	Asymptomatic
2	A	11/6/21	Yes	Pfizer 2 months ago	Odynophagia. Asymptomatic ECG changes T wave inversion V3V4V5
3	A	11/6/21	Yes	Sputnik V 26/5	Asymptomatic
4	A	11/6/21	Yes	Sinovac 26/05 and 09/06	Odynophagia
5	A	11/6/21	Yes	Sinovac 26/05 and 09/06	Assintomático
6	A	11/6/21	Yes	Sinovac 26/05 and 09/06	mild discomfort in lower back pain
7	A	11/6/21	No	Sinovac 26/05 and 09/06	Asymptomatic
8	A	11/6/21	Yes	Pfizer 5/5 and 26/5	Asymptomatic
9	B	12/6/21	Yes	1 dose	Asymptomatic
10	B	12/6/21	Yes	1 dose	Asymptomatic
11	B	12/6/21	Yes	1 dose	Asymptomatic
12	B	12/6/21	Yes	Sinovac 26/05 and 09/06	Asymptomatic
13	B	16/6/21	Yes	1 dose	Asymptomatic
14	B	16/6/21	Yes	1 dose	Asymptomatic
15	A	16/6/21	Yes	Sinovac 26/05 and 09/06	Asymptomatic
16	A	16/6/21	No		Asymptomatic
17	C	15/6/21	Yes	1 dose	Asymptomatic
18	D	25/6/21	No		Asymptomatic



Until June 14, 3,045 RT-PCR tests were performed, among players, delegation members, CONMEBOL staff and service providers in the stadiums. The overall percentage of Covid-19 positives was 1.7%, a high percentage due to the incorporation of the teams to the competition. The RT-PCR performed between June 11 and June 28, 2021, comprising the first phase of the championship, shows a total number of 139 positive cases, out of 18,262 tests performed, representing 0.74%. In this first phase, 24 positive cases were returned to duty after the end of their confinement.

After the first week of competition the percentage of positives started to decrease to reach a final percentage of 0.62% of positive cases.

The referees lived in their own bubble, in a hotel in Rio de Janeiro, from where they travelled to the designated match. They went to training every day. They travelled to the various venues by air, taking care to maintain the recommended hygiene and prevention measures. However, there were three positive cases, all of them occurred in the third week

of the competition and all of them in trips to Brasilia, one was an individual infection (30/6/21) and the other two were infected, at the same time, in the same trip (5/7/21).

The positive cases, once the period of confinement was over, came back to their jobs, in the case of the players, they were integrated to the training sessions. No new RT-PCR tests were performed on those who recovered, as advised by the Brazilian health authorities.

Of the 12 sequences obtained, 10 had the same variant, P1, VOC Gamma GR/501Y.V3, and the other two were variant B.1.621 (VOI). The sequences obtained do not show the appearance of strains different from the usual ones in Latin America.

Most of the infections in the four Copa America venues occurred in the external workforce of the stadiums, a population that did not live in the health bubble, they did so in their homes. All stadium workers followed the same protocol, performing an RT-PCR test two days before each match. Those who tested positive were confined for ten days before returning to work.

Positive cases were known in four delegations, two members were found to be untraceable and were isolated in their own delegation. Only one person from one delegation was admitted to hospital due to an anxiety attack. Therefore, the incidence among players, with the exception of two delegations, has been minimal and the incidence among CONMEBOL staff, despite their necessary mobility, was also very small, only one case.

The official CONMEBOL competitions, especially Copa America, have ended up being a sporting and health success, the incidence of Covid-19 has been minimal as it has followed an exhaustive and costly protocol that has served to maintain the health of all staff without reducing their working conditions.



IV. CONMEBOL Beach Soccer - FIFA World Cup Qualifiers - Brazil

It was held, coinciding with Copa America 2021, also in Brazil, in the city of Rio de Janeiro, the beach soccer championship were qualifiers for the World Cup 2021, held in Russia. The ten CONMEBOL teams participated, divided into two groups.

The delegations, players, officials and CONMEBOL

staff followed the CONMEBOL protocol set for transfers, training and competitions. Sanitary bubbles were set up in each of the delegations and on the competition field.

Nose and throat swabs were done periodically, every two days, the first upon arrival of the delegations, 325 swabs (25 June) were negative. The next swabbing, a total of 347 (27 June) were also negative and finally, the last swabbing (29 June) showed no positive cases. In addition, 24 swabs were taken from the referees, 18 from the CONMEBOL staff and 27 from the photographic and broadcasting equipment.



Injuries during the championship

Throughout the beach soccer championship, an injury was detected that forced the player to withdraw from the match due to a fracture of the medial cuneiform bone and the base of the fourth metatarsal (Figure 1), an injury caused by contact of the player's foot against another player's leg.

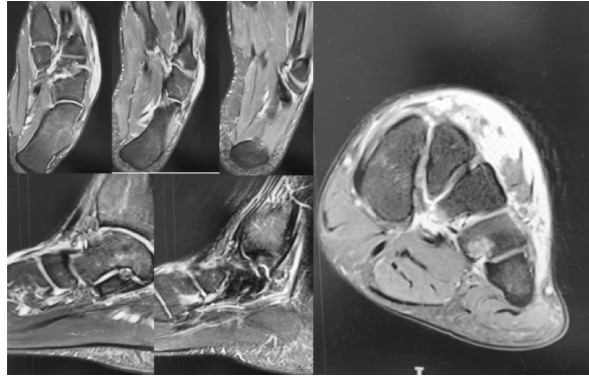


Figure 1. MRI, multiplanar images in T1 and T2 sequence and proton density with fat suppression. Small fracture of the cuboid bone of the left foot reaching the articular surface, without misalignment, with bone edema and fracture at the base of the fourth metatarsal. Edema and irregularity of the muscle fibers of the extensor digitorum brevis of the first toe and extensor digitorum brevis of the fingers.



V. CONMEBOL Women's Libertadores 2021 - Paraguay

The swabbing on October 31 resulted two positive cases, one of them in a player who was not vaccinated because she was under the required age and the other case in an official with the two doses of the vaccine.

One player tested positive for pregnancy and had to return home.

Table 6 shows the injuries recorded during the championship.

Table 6. Injuries during CONMEBOL Libertadores Women 2021

Case	Diagnosis	Location
1	Trauma. Transfer to hospital for MRI. Minute 45	Knee
2	Concussion. Transfer to CAT scan hospital. Observation. Minute 84	Head
3	Sprain- Right. Minute 10	Knee
4	Rectus anterior muscle tear. Minute 27	Thigh
5	Rectus anterior muscle tear. Minute 20	Thigh
6	Training. Ruptured right anterior cruciate ligament	Knee





VI. South American qualifiers for the FIFA World Cup Qatar 2022

The CONMEBOL qualifiers for the 2022 FIFA World Cup Qatar qualification during the month of September and October comprised 30 matches, each of which complied with the CONMEBOL Covid-19 Protocol, were held in different cities and each match was organized according to the location and the participating teams. The teams underwent RT-PCR tests during the training camps, before travelling, in the case of the visiting teams, or one or two days before the home team played their match.

In these qualifiers, positive cases were isolated and therefore removed from the team.

Of the 30 matches played, 18 did not report any injuries. However, the injuries reflected in Table 7 were collected.



Table 7. Injuries recorded during the qualifiers (September and October 2021) for the FIFA Championship to be held in Qatar in 2022.

Number	Diagnosis	Region
1	Contusion	Knee
2	Pulled inner calf muscle	Leg
3	Achilles tendinitis	Leg
4	Biceps femoris muscle injury	Thigh
5	Right internal collateral ligament injury	Knee
6	Neck contusion (blow) with dyspnea	Cervical
7	Left hamstring contracture. Left at 35th minute	Thigh
8	Right contusion. Left at 79th minute	Knee
9	Right contusion. Left at 81st minute	Knee
10	Facial contusion, loss of two teeth	Face
11	Meniscal injury	Knee
12	Contracture m. right adductor	Hip (Groin)
13	Contusion left elbow. Hospital tests	Elbow
14	Concussion. Withdrawn 49th minute	Ankle
15	Muscle contracture. Left at 86th minute	Thigh
16	Concussion. Stayed on.	Head
17	Left cheekbone fracture. Not removed	Face
18	Right instability	Knee
19	Right hamstring injury	Thigh
20	Contracture of the right medial calf. Left. Minute 62	Leg
21	Right medial calf contusion. Withdrawn 87th minute	Leg

VII. CONMEBOL 2021 Finals; CONMEBOL Libertadores 2021, CONMEBOL Libertadores Female 2021 and CONMEBOL Sudamericana 2021 – Montevideo, Uruguay

For the first time, three unique finals have been played in the same city during the same week. CONMEBOL Libertadores for men and women and CONMEBOL Sudamericana for men. A new experience that has been very positive for the Medical Commission. No injuries have been recorded in any of the three finals.

The Covid-19 protocol was followed under the supervision of the health authorities of the Oriental

Republic of Uruguay. Nasopharyngeal swabs were performed for entry into the country and repeated every 72 hours thereafter.

The CONMEBOL Sudamericana final, between Athletico Paranaense and Bragantino was played at the Centenario stadium with the presence of 20,000 spectators who followed the Covid-19 protocol.

The CONMEBOL Libertadores women's final between Santa Fe of Colombia and

Corinthians of Brazil was played on 21 November at the Gran Parque Central stadium of Montevideo's Nacional club,

The CONMEBOL Libertadores final was held on November 27, at the Centenario stadium in Montevideo, between the teams Palmeiras and Flamengo, both from Brazil, with about 20,000 spectators in attendance, all of them with negative Covid-19 test.

CONCLUSION

The pandemic has taught us how to act in moments of extreme gravity, it has forced us to take preventive measures, to organise important logistics to distribute vaccines in ten countries and establish an action protocol, to be prepared to resolve any contingency with the best hospitals in each city coordinated by CONMEBOL's official doctors, but it has also given us an experience.

CONMEBOL has made an effort to maintain coexistence protocols for the prevention of Covid-19, has also immunized its staff

by providing and advising the vaccine and finally has tracked the virus by detecting positive cases to proceed to isolation.

In the CONMEBOL Futsal championship, one player arrived in Brazil with symptoms and within four days there were eight members of the delegation infected. Also in the qualifying round of the women's Libertadores Cup, held in Argentina, two female referees arrived in the window period, and a few days later there were four more people affected. Continuing with the referees,

in Copa America three referees were infected during their trip to another city leaving their bubble, one first alone and the other two in a joint trip afterwards. This has taught us to perform nasal swabs more frequently, dropping from 72 hours to 48 hours and requiring only an RT-PCR test, performed at an approved center, no later than two days before arriving at the point of concentration to compete.

We believe that the measures have been adequate, as the effectiveness during the tournaments has been 99.7%.





b. VACCINATION AT CONMEBOL

The vaccine is a guarantee of protection against Covid-19 infection and vaccinated people, in addition to being immunized, in case of infection the effects are milder. It is a fact that in countries with a high percentage of vaccinations, hospital admissions have decreased and also the most serious cases of admission to the ICU.

CONMEBOL has promoted and managed mass vaccination of its members and delegations and was interested in achieving immunization with participants in Copa America and all CONMEBOL competitions.

In order to meet its objectives, CONMEBOL took all necessary measures to prevent the spread of the virus and to prioritise the health of all members of the South American football community from the outbreak of the COVID-19 pandemic.

WHO has stated that: "COVID-19 vaccines protect

against COVID-19 by inducing immunity against the SARS-Cov-2 virus that causes it, i.e. they reduce the risk of it causing symptoms and health consequences. The immunity, which helps vaccinated people to fight off this virus in the event of infection, reduces the likelihood that they will pass it on to others and therefore also protects them. This is especially important because it protects groups at higher risk for severe symptoms of COVID-19, such as health care professionals, the elderly, and people with certain medical conditions." [1] It also states: "COVID-19 vaccines are safe for most people

18 years of age and older, including those with pre-existing conditions of any kind, including autoimmune disorders. These conditions include hypertension, diabetes, asthma, lung, liver and kidney disease, and stable and controlled chronic infections." [1].

Vaccination is essential to avoid the disease or to alleviate the symptoms of COVID-19. However, it is important to understand that even when vaccinated, the preventive measures established in the different protocols must be maintained.

Initially, due to the proximity of the event in Copa América 2021, the arrival of delegations and CONMEBOL staff from different countries with different sanitary standards and with a different situation for Covid-19 was added. This made it necessary to propose two actions, a vaccination protocol for CONMEBOL staff and delegations prior to the competition and the determination of PCR tests prior to the trip, as well as a new test upon arrival at the destination point in Brazil.

In case of finding positives, immediate confinement was carried out, each hotel had an area prepared for this purpose. The confinement established according to protocol was total isolation for ten days, leaving on the 11th day, provided that there were no symptoms, at least, in the last four days.



Vaccination protocol.

CONMEBOL, through President Lacalle Pou of Uruguay, contacted Sinovac Life Science Co. Ltd. of the People's Republic of China, which donated a batch of 50,000 doses of vaccine.

Paraguay was prepared as a general vaccination center,

so CONMEBOL staff and the delegations that needed it went through this center to get their vaccinations.

According to the Donation Agreement signed with the company Sinovac Life Science Co. Ltd (SINOVAC) the beneficiaries of the vaccine doses were the Professional Football players members of the National Teams that disputed the Copa America 2021 and the first division of the Member Associations that make up the CONMEBOL.

Technical Staff of the National Teams that will dispute the Copa America 2021 and the First Division Clubs of the First Division of the First Division of the Member Associations of CONMEBOL. In addition to the officials of the National Teams that will dispute the Copa America 2021 and the First Division Clubs of the First Division of the Member Associations that make up CONMEBOL and the Match officials of the South American Football Confederation. Also included were the officials of the South American Football Confederation. According to the signed agreement, vaccine doses cannot be administered to people who are not among the above-mentioned beneficiaries.

The vaccines were imported from the People's Republic of China to the Oriental Republic of Uruguay and from that country will be exported to the other member countries of CONMEBOL, which authorized the entry of the vaccines. The vaccine was a donation from the producing company and therefore was distributed and applied free of charge.

The vaccines followed the strict transport protocol, with controlled temperature between 2°C and 8°C. Upon entry into each country, national regulations were followed to ensure that the cold chain was not interrupted. In case of non-compliance, SINOVAC was informed in order to discard the vaccines.

The vaccine is indicated for patients over 18 years old, adults 60 years old or older because it does not have live virus and can be used in immunosuppressed patients.

It requires the application of two doses with an interval of between 2 and 4 weeks between the first and second dose. This meant that, sometimes, due to dates, it was not possible to inject both doses, leaving the second dose for after the competition, in some cases when they passed through Paraguay on their return trip and in others in their own countries.

Efficacy of the vaccine in the prevention of COVID-19 disease: 100% for severe forms, 78% for moderate forms and 50% for mild forms.

Each Member Association established the vaccination centres it considered to serve the beneficiary population of its association. Each vaccination centre had the infrastructure required by the health authorities of their country and a responsible coordinator.

All those vaccinated signed a CONMEBOL informed consent form, and when a member of the delegation did not accept the vaccine, he or she had to sign the same document stating that he or she refused the vaccine.



Vaccination operations.

The national teams received their doses of vaccines, which were given to all members of the national team delegation.

The clubs participating in the CONMEBOL LIBERTADORES and CONMEBOL SUDAMERICANA of the 2021 Edition, received one hundred and forty doses of vaccines to be applied to up to 50 football players who are in the good faith list of the mentioned competition and up to a maximum of 20 team officials (coaching staff, delegates) that make

up the delegation of the clubs in the matches already played in the mentioned competitions.

Clubs not participating in CONMEBOL LIBERTADORES or CONMEBOL SUDAMERICANA 2021, received a maximum of one hundred doses of vaccines to be applied to 30 football players who are on the bona fide list of the first division competition of their Member Association and a maximum of 20 match officials (coaching staff, delegates) who have formed the delegation of the clubs in the matches already played in the aforementioned

competitions.

Vaccinations were also distributed to match officials and CONMEBOL officials, i.e. the refereeing team, match delegate or commissioner, match coordinator, security officer, media officer, referee advisor, video advisor, medical delegate, doping control officer, venue manager, as well as other persons delegated by CONMEBOL to assume responsibilities in relation to the match.

All club and national team doctors receiving the vaccines received a training session in which they were given the necessary information about the benefits and risks of administering the vaccine.

The participation of the Club's Doctor was compulsory, who sent the list of the delegation informing about the health conditions of the beneficiaries before receiving the vaccine.

The administration of the vaccine was contraindicated in patients with a known history of allergy or to any component of this vaccine, febrile patients with an



acute illness or suffering an acute condition as a result of their chronic diseases. It is not recommended for people with hypersensitivity to the excipients of the vaccine. It is also not recommended in patients with uncontrolled epilepsy or other neurological disorders, such as Guillain-Barré syndrome, in pregnant women or during the breastfeeding period and in children under 18 years of age.

In addition, the second dose was not administered to patients who after administration of the first dose had a reaction in the form of severe complications after receiving the first dose of vaccine, severe allergic reactions, convulsive syndrome or fever above 40°C.

When there were members of the delegation with basic diseases or at risk, such as cardiovascular diseases, respiratory diseases or diabetes, etc., they were the first to receive the doses and the list of the delegation was sent in order of priority to receive the vaccination.

High-risk individuals include those with hematopoietic stem cell transplantation, solid organ transplantation, renal replacement therapy, immune-mediated rheumatic disease, oncohematological disease, cytotoxic chemotherapy treatment, metastatic or radiotherapy treatment, primary immunodeficiencies, and HIV infection.

All vaccines could give rise to adverse effects not described above, so it was recommended that any signs or symptoms after vaccination should be reported to the doctor of your Club, or if you are not a member of a delegation, to the doctor of your member association, so that the doctor can evaluate it, assess the treatment and report to the surveillance system. The Medical Commission received a detailed report of all incidents. To avoid mishaps, after injecting the dose, the beneficiaries waited 10-15 minutes at the vaccination site before leaving.

Persons who had acute COVID-19 infection were postponed vaccination until recovery from the disease, and the isolation period, at

least one month after having had the disease, was observed. Persons who had had the disease and had protective antibodies were recommended to postpone vaccination for 6 months.

Persons exposed to or living in close contact with COVID-19 positive cases were recommended to postpone vaccination until the end of the isolation period, to avoid exposing health personnel and other persons during vaccination.

After vaccination, a certificate was issued specifying the date, place and type of vaccine inoculated. When possible, it was recorded with the official certificates. In case the health authorities of the country of application establish other information, the request of the relevant authorities should be used.

All patients who received the vaccine signed the Informed Consent of CONMEBOL and in the case that any member did not accept the injection of the vaccine, they signed the same document stating that they refused the application of the vaccine, without being consulted for their reasons.

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C. EFFECT OF ISOLATION ON ATHLETES



The COVID-19 pandemic has created major and unpredictable changes in the sport that have made it challenging to recover the previous situation. Confinement and mobility restrictions have damaged the spectacle and affected the economy, but have also interfered with athletes' preparation. Not surprisingly, physical and mental disturbances have been detected that have had an impact on the individual performance of athletes. Home confinement created problems with training and planning and caused economic damage [1].

The pandemic has brought with it a change in the lives of athletes. The confinement has been one of the measures put in place to combat the contagion in many countries and the impact of this measure on sport has had consequences, because for a while training has changed, decreasing its frequency and intensity and the return to the activity was intense, with an agglomeration of competitions in a short time, which has led to fears of an increase in injuries.

On a personal level, the lifestyle of athletes, professional or otherwise, has been restricted. Players have been separated from their teams and have followed personal training protocols. Returning to official competitions, avoiding

the risks and maintaining strict compliance with the protocols is a challenge that brings benefits to the athlete and has allowed teams to maintain their level of competition.

Some authors think that the SARS-CoV-2 pandemic will remain in the world for some time, even if a portion of humanity achieves the so-called herd immunity [2].

Fuorilli et al. [3] conducted a survey of 1,668 volunteers, of whom 800 were athletes, 558 coaches and 310 sports managers, to find out the psychological impact of the pandemic and confinement. They report that 34.4% were affected by subjective anxiety or stress while 26.4% considered the psychological impact of giving up regular sport to be severe.

Women were more affected than men, and coaches and managers also suffered more than the athletes themselves. Athletes in individual sports were also more affected than team athletes. In addition, coaches, during confinement, had to provide emotional support and physical recommendations and protocols, maintaining frequent contact, developing a new role to which they were not accustomed [3].

Wong et al., [4] analysing football competitions in Hong Kong, suggest that the risk of infection is high among players, even when performing without an audience. Furthermore, they point out that facemasks increase the physiological body burden, especially in those athletes with comorbidities. They pointed out that the average contact time of the players, per 90 minutes of play, was 19 (range: 6 - 35) minutes, finding for each player 52 episodes of risk of infection, either by contact or by proximity, in each match. Therefore, they recommend minimizing contact between people and maintaining proper hygiene.

Mehrsafar et al., [5] emphasize the effect the pandemic has had on the mental health, mood and life

satisfaction of elite athletes. They surveyed elite athletes in each of the three phases of the pandemic in Germany: home confinement (April 14-24), reopening (May 9-19) and semi-confinement (July 20-31) and found a different influence in each phase on mental health, mood and life satisfaction. The reopening and semi-confinement periods were associated with better mental health, mood and life satisfaction. Hakansson et al., [6], in 327 Swedish elite athletes, 62% of whom were men, 66% considered that the future of their sport had worsened and 51% saw their own future as worse. Feeling unwell during confinement and during the pandemic was reflected by 72% of women and 40% of men; depression criteria were met by 19% of women and 3% of men and anxiety criteria were met by 20%

of women and 5% of men. Although in 249 Romanian athletes, Cosma et al., [7] found no relationship of sex or age with quality of life by the impact of COVID-19.

There are sports in which social distance can be easily maintained and in others this is not possible. Travel, using airports and hotels can increase the risk, but not much more than business travel [8].

The practice of professional sport requires assessing the risk and consequences of any activity and taking steps to ensure that risks are kept to a minimum.

The relaxation of mobility, activity and momentum of the economy has been introduced gradually over time and each moment

has differed from one country to another and even within a country, each area has had different behaviours.

The WHO (World Health Organization) [9] established five points to determine the risk of a social event, (1) does it take place in a country, area or city that has knowledge of active local transmission? (2) does it take place in a localized location or does it occur at multiple sites? (3) does the event include participants from countries that have documented COVID-19 transmission? (4) does the event include people at high risk of severe COVID-19 or people in good health and at low risk? And finally, (5) does the planned event have a high risk of COVID-19 transmission?

WHO has issued and updated reports for mass gatherings [10], for professional sport [11] and for mass gatherings at sporting events [12].

Another interesting aspect was the common life during the competitions, there was concern about the time spent in hotels, buses, airplanes and other enclosed spaces. Contagion in cohabiting groups, such as a family or sports group, is an important factor in secondary transmission. Akaishi et al., [13] studied the transmission of coronavirus 2 (SARS-CoV-2) in cohabiting groups. They collected samples from 4,550 people, of which there were 355 RT-PCR positive cases. Infection occurred more in those who had contact in the dormitory (27.5%), but the percentages varied depending on the size and location of the dormitories, lifestyles and control measures in place among the residents. Transmission among family members was 12.6%, very similar to transmission by close contact outside the dormitories (11.3%). These three groups presented high percentages of contagion if we compare them with the people who maintained contact outside (2.7%), which shows that hygiene measures and the correct isolation of people with a positive PCR reduces the risk of secondary contagion in groups that have to live together, as occurs in the sports delegations.

The availability of high-quality diagnostic tests for SARS-CoV-2 allows for precise oversight and contact tracing at an affordable cost that prevents the spread of the virus. The availability of a vaccination protocol is a key element in achieving herd immunity.



CONMEBOL competitions have taken into account the considerations of the WHO, collected and adapted in its protocol [14] to minimize the risks of transmission in all participating groups, performing appropriate laboratory tests to prevent transmission and keeping traceability of positive cases.

In CONMEBOL, persons eligible to participate in a competition, athletes, coaches, managers, organizers, tertiary workers or spectators are considered to be those who are included in at least two or more of these groups:

V: vaccinated

I: immunized by having passed the disease and have an adequate level of antigens

P: negative RT-PCR test

Acting in this way prevents the acquisition of the disease and also avoids the contagion that allows to continue with the sport competition.

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d. THE AUDIENCE HAS RETURNED TO THE STADIUMS

You have to be safe, but you also have to feel safe.

Outdoor events with spectators and guests have been adapted to prevention measures.

CONMEBOL is responsible for ensuring a COVID19-free bubble with minimal risk of contagion.

To do so, the protocol has been followed, complying with the sanitary regulations established in each country.

In addition to the protocol followed by players, referees and technical teams, organization, CONMEBOL team, stadium employees and external professionals (sanitary, photographers, cameras, etc.), also managers and sponsors and the general public are subject to the security protocol.

All attendees can be grouped into three categories:

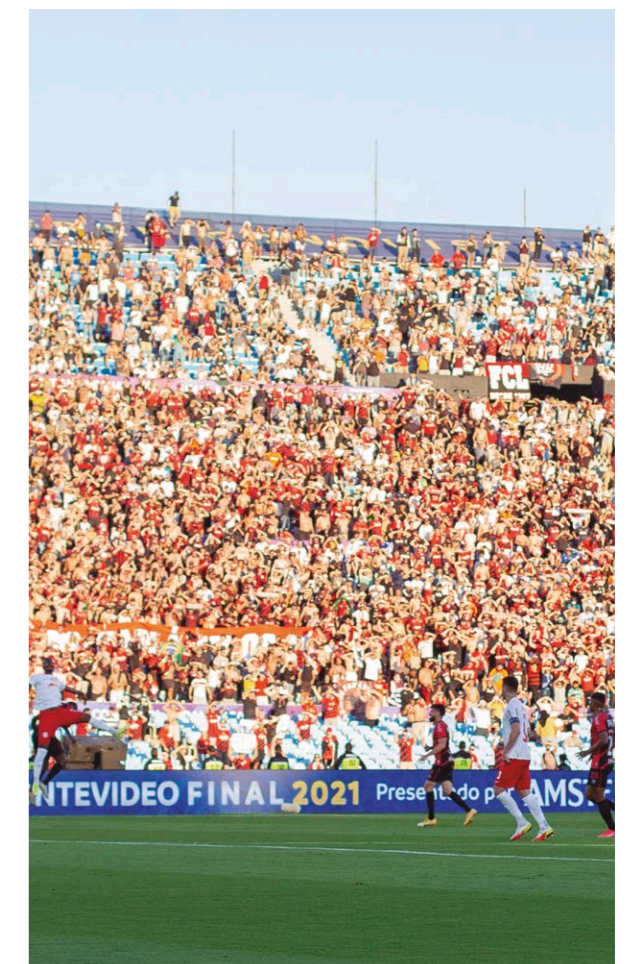
1. Vaccinated persons
2. People who have passed the disease and possess sufficient antibodies
3. People who have not been vaccinated and have not passed the disease

Spectators must voluntarily obtain their certificate of vaccination or COVID-19 clearance, and always a digitally verified RT-PCR test.

The tickets carry a QR code linked to each spectator attending the stadium that links personal data with their location in the stadium.

CONMEBOL will prevent the entry to the premises of any person suspected of contagion, acting in:

1. Entrance to the stadium, which will be done in an orderly fashion and with sufficient time.
2. During game time, maintaining their position without changing places or moving to other points where they are not authorized. The stadium stewards may draw attention to this.
3. At half-time, avoiding crowds of people
4. The exit from the stadium will be in an orderly and progressive manner.
5. Movements inside the stadium. Movements inside the stadium will be avoided, there will be no food or drink stands, avoiding moving from one area to another.



d. The audience has returned to the stadiums



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Basic rules:

- All stadiums will have a CONMEBOL COVID19 medical unit.
- The stadiums facilitate and have in place the fundamental hygiene measures recommended during the pandemic, such as hand washing, hand disinfection, sneeze etiquette, etc., to avoid manual transmissions.
- Persons attending the stadium must have an RT-PCR test (-) with nasopharyngeal swab performed no later than 48 hours before the match.
- All attendees, regardless of their group, will attend the stadium wearing face masks and will keep a social distance from each other.
- Clear concepts for entry and exit and rest, the entrance gates of each spectator will be clearly known and crowds will be avoided.
- It will not be possible to move from one area of the stadium to another, unless justified

- Toilets shall be clearly assigned to each spectator area. Good ventilation and continuous disinfection must be ensured in the toilets.
- No food and beverage stands shall be provided. If possible, vending machines or stalls should be located in open or well-ventilated areas with sufficient space.
- Persons working in the stadium, guarding the entrance or seating people will wear, in addition to face masks, any other protective measures deemed appropriate.
- Security personnel will be prepared to ensure that these measures are met
- Continuous compliance with distance rules avoiding crowds.

Ticket office

Tickets must be personal, non-transferable and identified.

In case of contagion, it will be possible to know the people in the vicinity of the infected person.



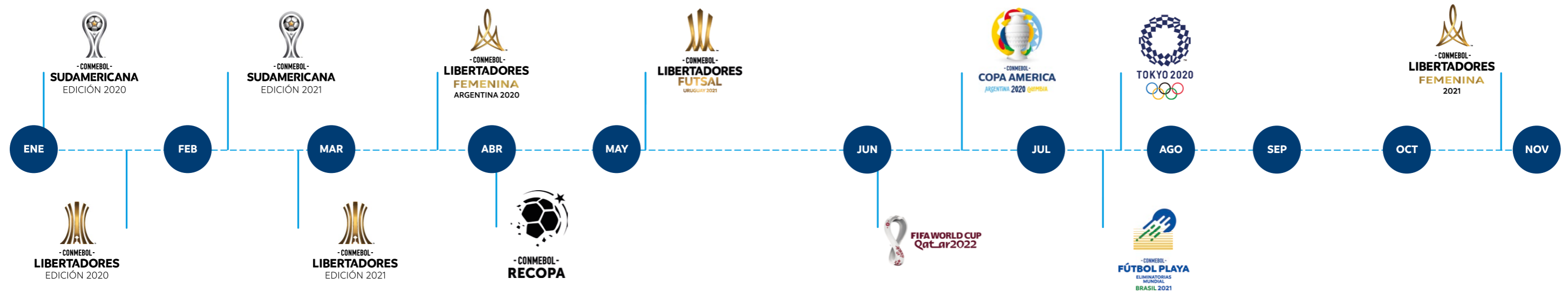
PART TWO: ANTI-DOPING UNIT



a.
**IMPLEMENTATION
OF THE DOPING
CONTROL PLAN
2021**

EXECUTION OF THE 2021 ANTI-DOPING CONTROL PLAN

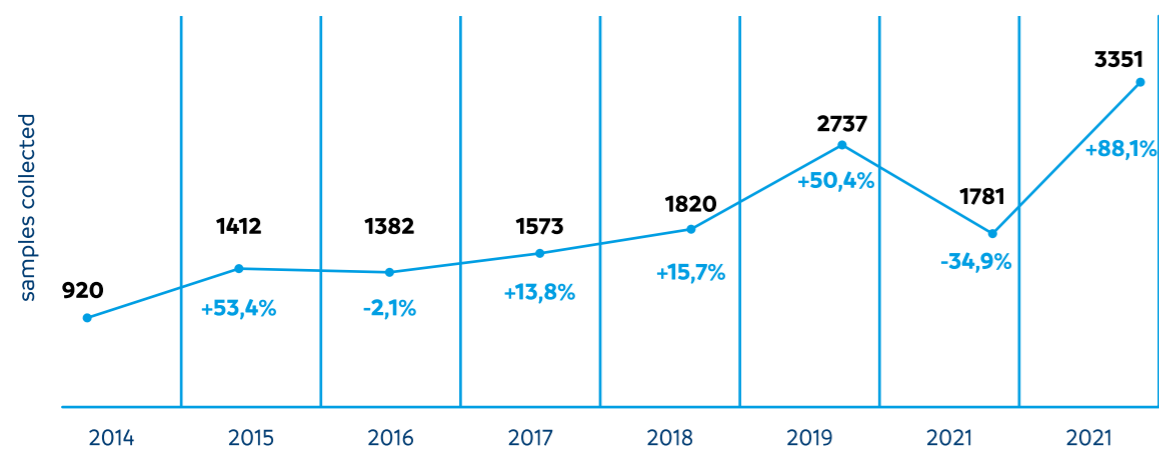
CHRONOLOGY OF CONMEBOL EVENTS EN 2021 - 12 COMPETITIONS



I. Number of samples collected (2014 to 2021)

- Strengthening of CONMEBOL's Anti-Doping Unit represented in the execution of the 2021 Testing Plan, having been the year in which the highest number of anti-doping controls have been carried out.
- New framework for the actions of the Anti-Doping Unit thanks to the signing of the FIFA-WADA Agreement as a third party Sample Collection and Results Management Authority.

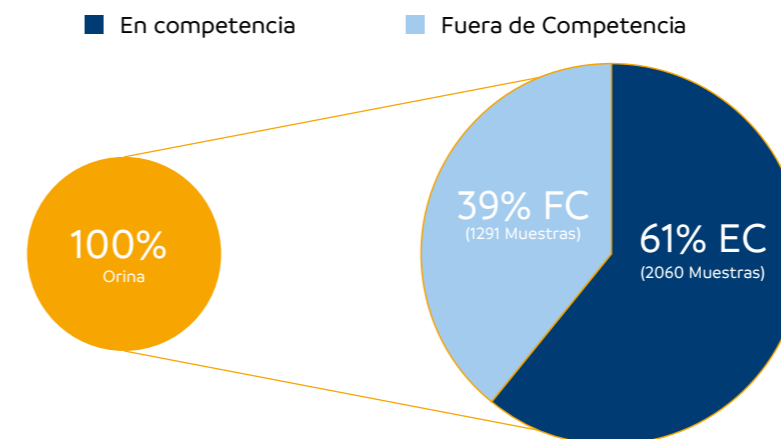
NUMBER OF SAMPLES COLLECTED CONMEBOL (2014-2021)



II. Distribution of the number of samples collected per competition

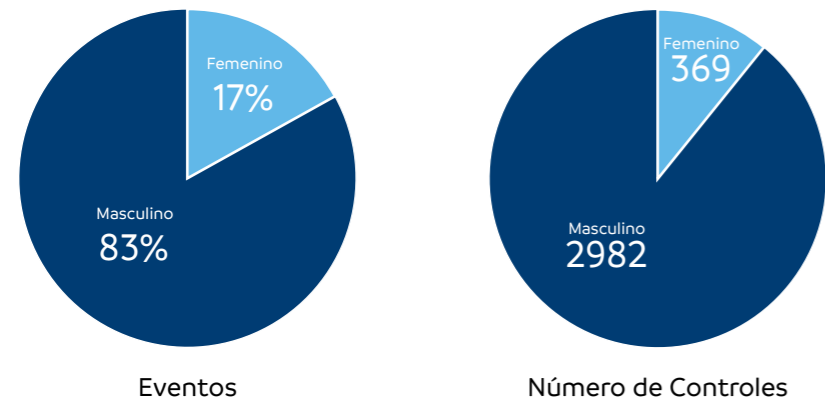
The first out-of-competition tests were carried out in the women's division for the 2020 and 2021 editions of the female CONMEBOL Libertadores.

TYPE OF DOPING CONTROLS CONDUCTED IN AND OUT OF COMPETITION CONTROLS (2021)

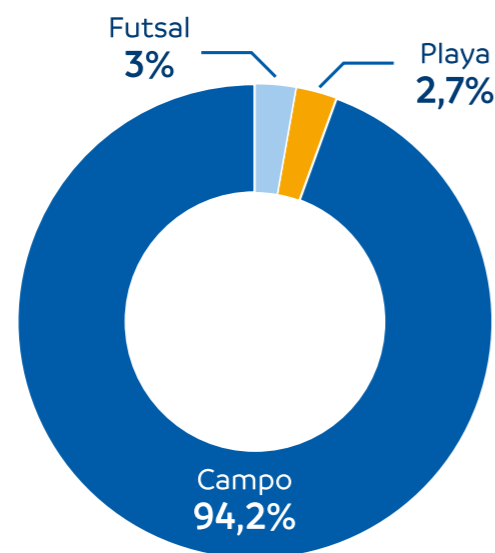


III. Number of samples collected by player gender

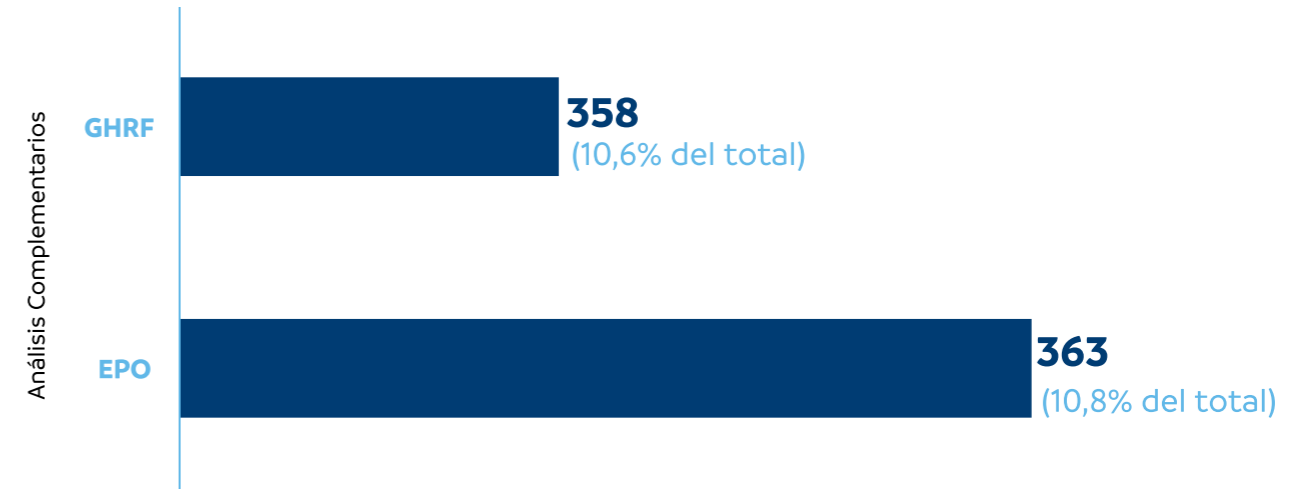
NUMBER OF COLLECTED SAMPLES
DISCRIMINATED BY PLAYER'S GENDER (2021)



IV. Number of samples collected, discriminated by type (2021)



V. Number of complementary analyses applied



VI. Methods of player selection in doping controls.

The Unit performs anti-doping controls, in and out of competition, on players participating in CONMEBOL competitions, collecting urine and/or blood samples. The selection of the players designated for these controls can be determined in two ways; it can be randomly through a



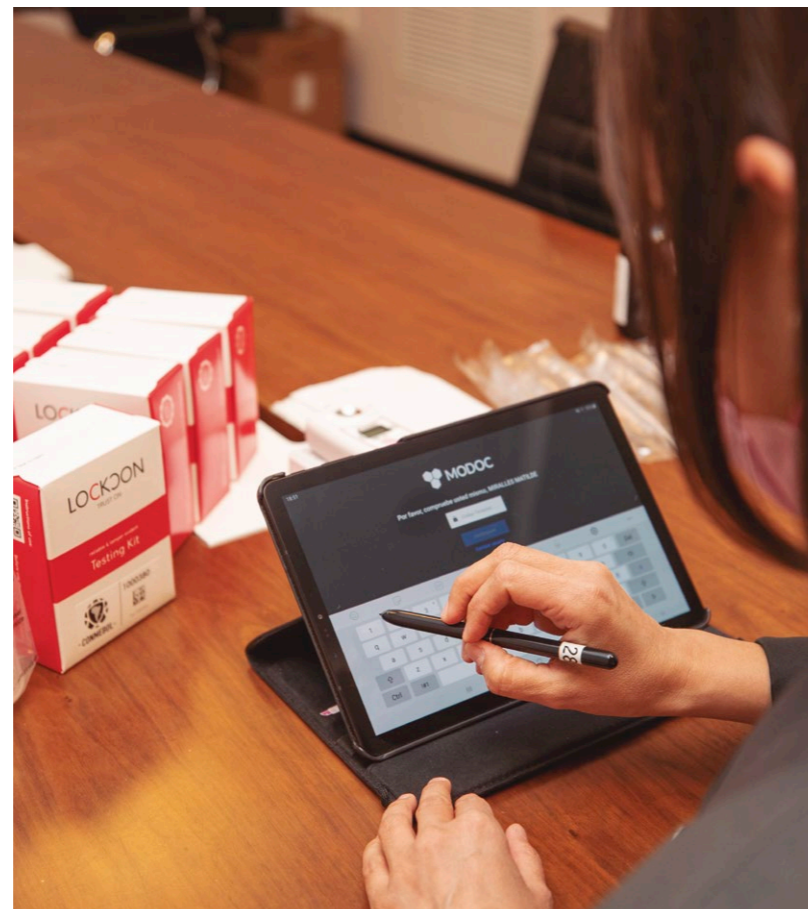
draw that takes place in the second half of the match, varying the minute depending on the discipline, which will be attended by representatives of each team, or it can be directed controls in which any player present in the Good Faith List or Line-up Sheet of the match (in the case of a control in competition) may be selected.

For the selection of players who will undergo the Targeted Testing, CONMEBOL has improved its player classification system, based on the application of anti-doping intelligence for the categorization and measurement of doping risk of athletes. The system is based on statistical data and cataloguing factors of actions within the field of play, which are seen as parameters for the selection of players who will undergo this type of control.

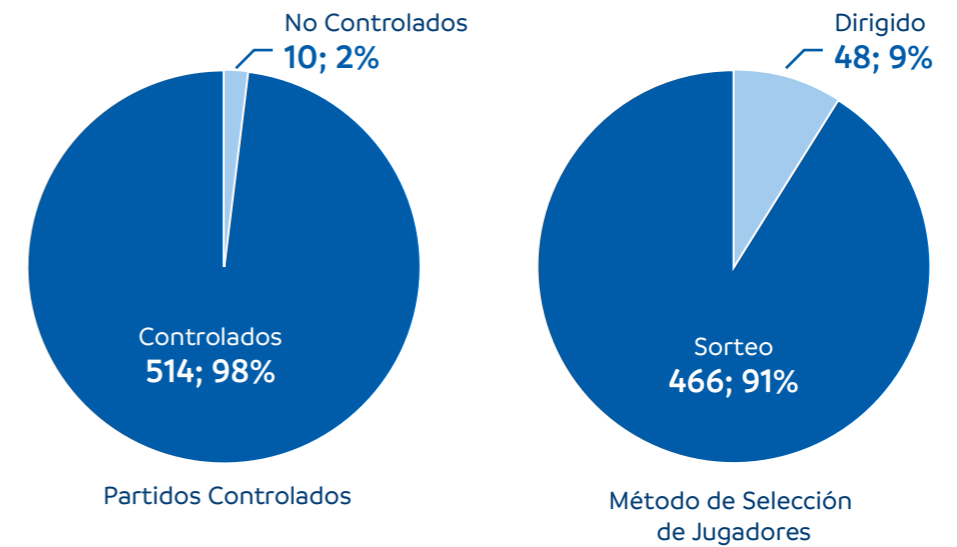
Targeted Testing is based on a careful assessment of doping risks and the effective use of resources to optimise detection. In football, as a team sport, targeted testing is mainly carried out to detect systematic doping. This method consists of the analysis of statistical data of the game, personalized by club and by player, which are followed throughout the competition analyzing individual and collective performance; the relationship between

the minutes played with the performance of each player are used, adding factors such as yellow and red cards, goals scored and conceded, age, physical build, playing position, abnormal biological parameters (blood parameters, steroid profiles, etc.), injuries, non-compliance of reports of doping in the game.), injuries, non-compliance with whereabouts reports, the player's history of checks and the player's rehabilitation after a period of suspension. The selection of these criteria is given in accordance with the WADA International Standard for Testing and Investigations and the Anti-Doping Unit.

This selection method optimizes the collection, evaluation and processing of anti-doping information from available sources, in order to implement an effective and intelligent control plan, establishing a research base of our athletes in all our competitions. In order to professionalize and systematize this selection method, the unit will develop by 2022 a software that will process the required information automatically, resulting in a more reliable and efficient selection process.



NUMBER OF CONTROLLED MATCHES PLAYER SELECTION METHOD (2021)

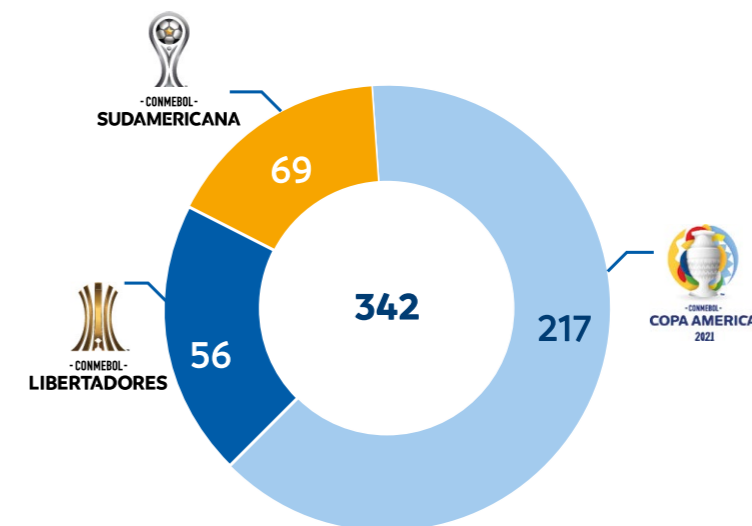


VII. Rapid results processing

Rapid results have been processed for samples from three CONMEBOL competitions, totaling 10.2% of the total doping controls.

RESULTADOS RÁPIDOS LABORATORIO

Of the **3351** Collected Samples in 2021, **342** (10,2%) were selected from the following competencies to be analyzed with quick results:

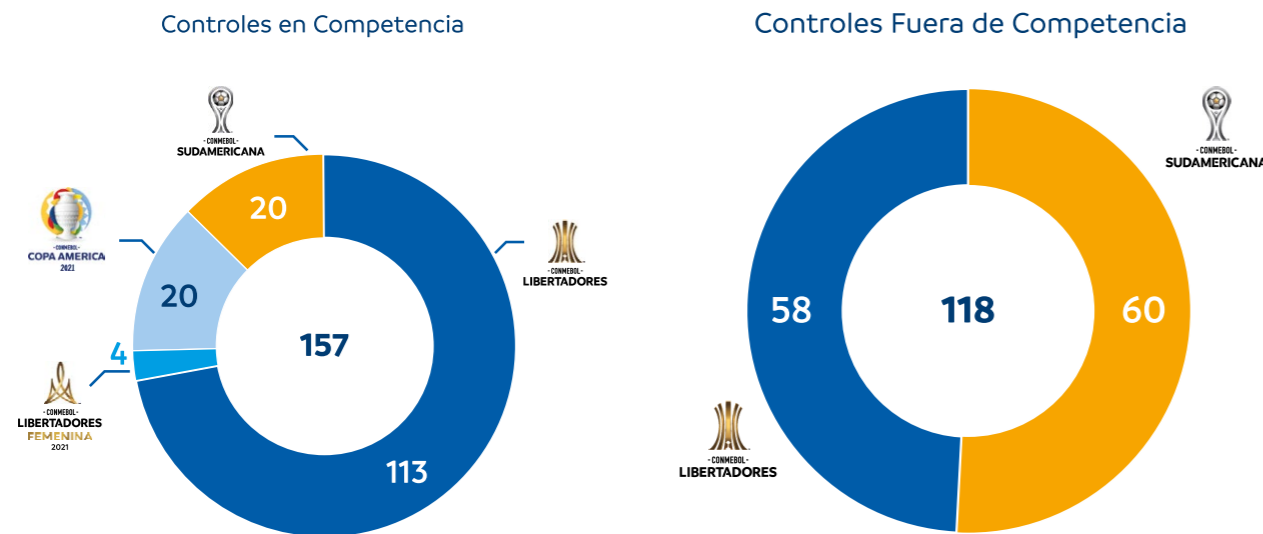


VIII. Sample storage for 10 years

Urine samples have been stored for a period of 10 years (corresponding to 8.1% of all samples collected in the year).

The World Anti-Doping Code 2021 states that Anti-Doping Organizations should, within their test plan distribution, store a number of samples for the purpose of reanalysis with new technologies or procedures in the future. The implementation of new detection methods and the emergence of ever more precise instrumentation and machinery allow for the following detection of forms of doping that a few years ago could go unnoticed by the control systems, which is why they are stored.

Of the **3351** collected samples in 2021, **275 (8,1%)** were selected from the following competencies to be stored for 10 years:



Dados Antidopagem 2021

100% sample collection materials

LOCKCON

Paperless control via Software



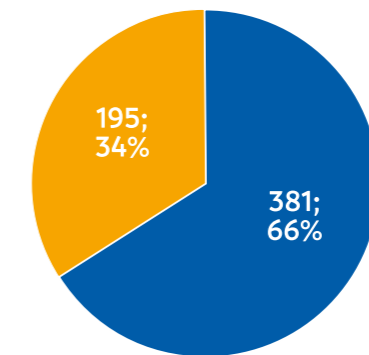
Collected samples sent to **2** laboratories



Deutsche Sporthochschule Köln
German Sport University Cologne

Shipping via DHL – 2021

A total of **576** shipments were made via the DHL platform in 2021: **195**(34%) were anti-doping materials sent to Medical Officers in South America, and **381**(66%) were sent to WADA-accredited laboratories.



■ Nº de envíos realizados de muestras a laboratorios (COLONIA Y UCLA).
■ Nº de envíos de materiales Antidopaje a Oficiales Médicos.

IX. General Anti-Doping Data

(Testing Software, Anti-Doping Materials, Laboratory Sample Submissions)

- Joint work with UCLA Laboratories and COLONIA for the implementation of the Athlete Passport Management Unit (APMU) - Steroid Passport.
- Use of LockCon anti-doping materials at all competitions in 2021.
- Doping Control Management through MODOC Software in 2021 competitions.



Doping Control Software Implementation

The software for doping control is a tool that digitizes the form of the doping control process, the control can be performed with or without internet connection. This provides the advantage of obtaining the information much more quickly for the Player, for the CONMEBOL Sample Collection Authority and for the Laboratory to which the samples are sent for analysis.

Doping Control software requires the use of tablets for the mobile application used by Doping Control Officers.

The implementation dates from 2019 with the CONMEBOL Copa America 2019 - Brazil.

The implementation involves the use of 2 tools, the platform (web) called Backoffice and the mobile application to record the sample collection procedure, all this linked to the WADA anti-doping management system, ADAMS where all the controls are uploaded and the results of the collected samples sent by the Laboratories are linked.

The (web) platform called Backoffice has the purpose of executing the doping control plan for the year, through the creation of anti-doping missions (in-competition and out-of-competition controls), thus fulfilling the function of planning, verifying, storing and exporting anti-doping information from CONMEBOL to ADAMS.

The implementation of the use of MODOC testing software is 100% in all anti-doping missions conducted by the Anti-Doping Unit.

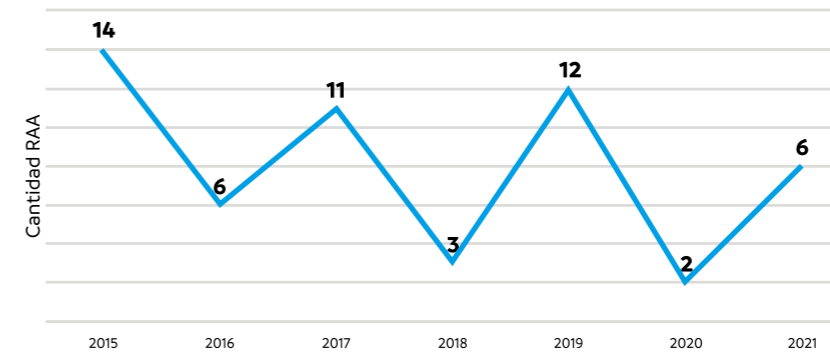
Thanks to this implementation, CONMEBOL became a pioneer in the implementation of technology applied in anti-doping controls in the region and in SOCCER

SISTEMA ADAMS – MODOC 2021

The 2021 Control Plan was implemented with the creation of **565** Anti-Doping Missions on the ADAMS (WADA) and MODOC (PWC) platforms; Registering **3339** Doping Control Forms on the ADAMS Platform in 2021

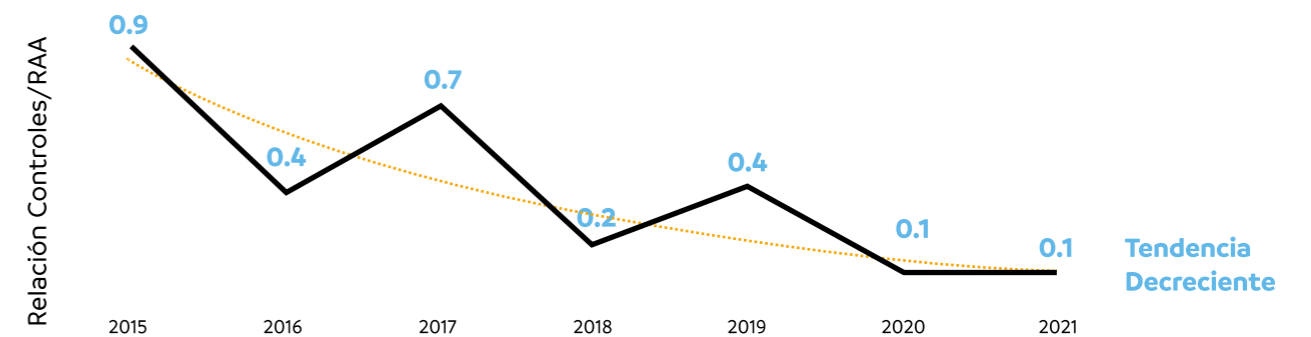


X. Adverse Analytical Findings - Anti-Doping Rule Violations



%RAA / Anti-Doping Controls CONMEBOL (2015–2021)

	2015	2016	2017	2018	2019	2020	2021
N° Controles	1412	1382	1573	1820	2677	1781	3351
N° RAA	14	6	11	3	12	2	6
Porcentaje	0,9%	0,4%	0,7%	0,2%	0,4%	0,1%	0,1%





b. THERAPEUTIC USE EXEMPTION APPLICATIONS

What is a Therapeutic Use Exemption (TUE)?

A football player may suffer from illnesses or conditions that require the use of medication. If it is the case that the substance or substances the player needs to take are on the Prohibited List, a Therapeutic Use Exemption may allow the player to take that medication which would otherwise be prohibited.

What are the criteria for granting a TUE?

1. Any player who consults a doctor who prescribes treatment or medication for therapeutic purposes should ask whether the prescription contains prohibited substances or methods. If this is the case, the player should request alternative treatment.
2. If no alternative treatment is available, a player who has a documented medical history and requires the use of a prohibited substance or prohibited method must first apply for a TUE. However, TUEs are granted only in cases where there is a clear and convincing clinical need and there is no advantage to the player.
3. The application for and approval of TUEs follows a strict procedure as set out in the WADA International Standards for Therapeutic Use Exemptions and the current CONMEBOL TUE policy.

In approving or denying such a TUE, CONMEBOL relies on the following documents in force:

- CONMEBOL Anti-Doping Regulations
- World Anti-Doping Code (WADA), issued by WADA
- International Standard for Therapeutic Use Exemption (EIAUT)

Category	Send AUT request to:	Application submitted by:
Footballers participating in National Competitions	National Anti-Doping Organization (NADO) or other authorized national body, e.g. National Olympic Committee (NOC)	Player/doctor
International Football Players called up for International Tournaments and friendly matches of the confederation; FIFA elite monitoring group	CONMEBOL	Player /doctor
International Football Players participating in International Club Tournaments or who are part of the FIFA elite monitoring group	CONMEBOL	Player /doctor
International players participating in FIFA tournaments (including FIFA World Cup qualifiers) or who are part of the pre-competition monitoring pool	FIFA AUTs granted by CONMEBOL will be automatically recognized.	Player /doctor
FIFA International Registered Testing Pool players	FIFA AUTs granted by CONMEBOL will be automatically recognized.	Player /doctor

Tips for making an AUT application

- Complete the new form electronically. If the form is not legible, it will be considered incomplete and will be returned to the applicant.
- When sending the form via e-mail to unidad.antidopaje@conmebol.com, make sure that the AUT application is correctly filled in, do not forget to include all the necessary documentation and keep the application, as well as a proof of receipt or an acknowledgement of receipt.
- Note: Failure to comply fully with the above points at the outset will delay the granting of the TUE and therefore the start of treatment.

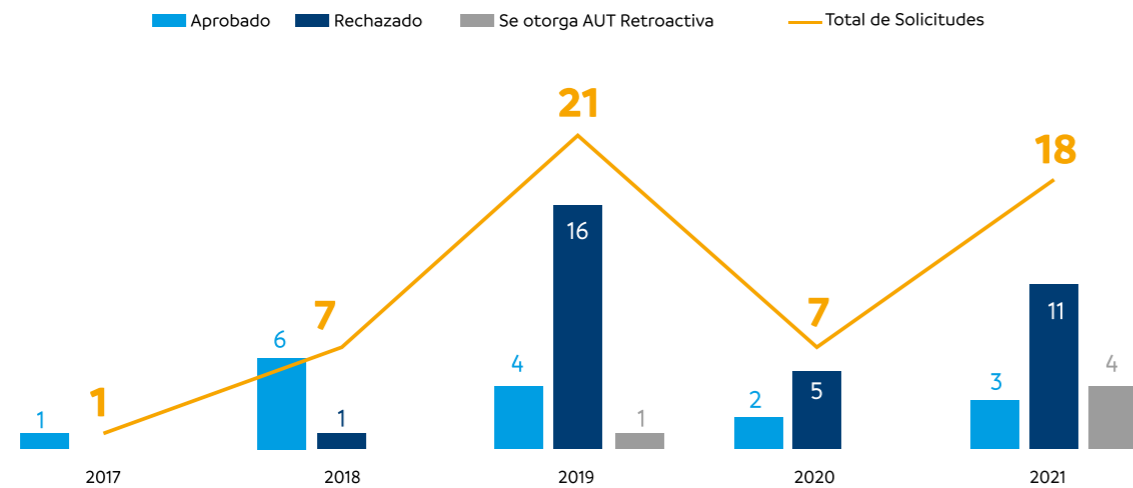
To access the form, please click on the following link
<https://www.CONMEBOL.com/es/comision-medica/docsinfo/aut>

The CONMEBOL TUE Sub-Commission is formed by the following doctors

- Dr. Alejandro Soler – COL
- Dr. Hugo Martínez - PAR
- Dr. Jorge Sarango - PER
- Dr. José Veloso - URU

REQUESTS AUT

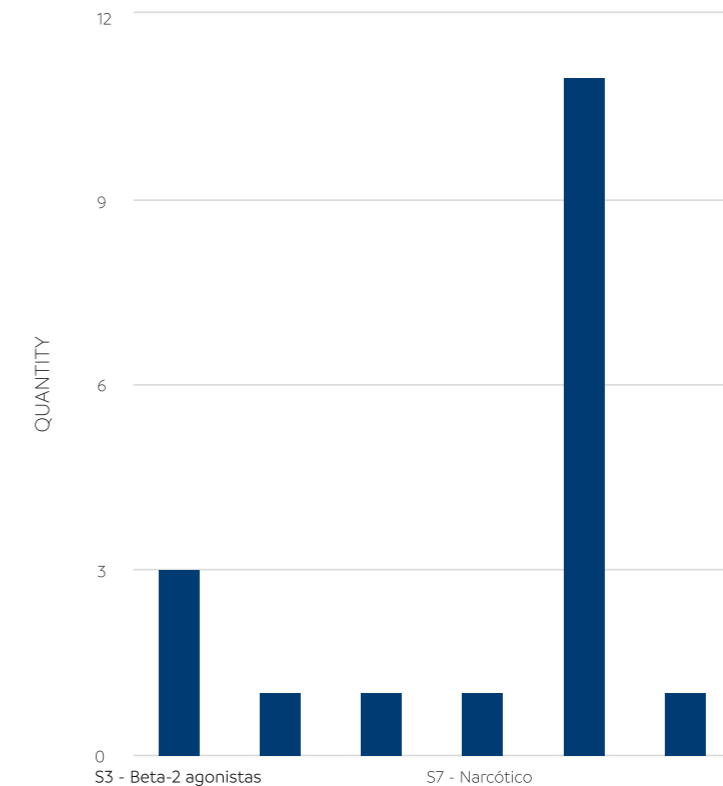
AUT SUB-COMMISSION - CONMEBOL (2017-2021)



Management Overview of TUE Applications Categorized by Substance

SUBSTANCE	QUANTITY
S3 - Beta-2 agonists	3
S4 - Hormone and Metabolism Modulators	1
S5 - Diuretics and Masking Agents	1
S7 - Narcotic	1
S9 - Glucocorticoids	11
Not Prohibited Substance	1
TOTAL REQUESTS 2021	18

CLASSE DE SUBSTÂNCIAS - AUT 2021





C. ANTI-DOPING EDUCATION PLAN 2021

EDUCATION

Anti-Doping Educational Talks in FOOTBALL

Activity that seeks to reach the players and support staff through the design of a pedagogical tool such as educational talks, which are lectures guided by an EDUCATOR specialist in the subject. The talk seeks to directly influence and raise awareness about the fight against doping in FOOTBALL.

Objetivo: To provide basic information to players and support staff (coaches, doctors, physical trainers, physiotherapists, managers) regarding the importance of the risks involved in doping in their health, raising awareness and fight against doping, promoting values and principles of fair play.

Aimed at:

- Professional players.
- Highly competitive players - National Teams.
- Players in training.
- Beginner players.
- Recreational players.
- Coaches.
- Doctors
- Support staff.
- Leaders

Duration time:
45 min

Speakers/Persons in charge:

- Anti-Doping Educators

Topics to be developed

- List of Prohibited Substances and Methods.
- Risks of Nutritional Supplements.
- Anti-Doping Rule Violations.
- Consequences of Doping: Sanctions, Health and Social Harm.

- Doping Control Procedures.
- Rights and Responsibilities of Players and their Support Personnel.
- Therapeutic Use Exemptions.
- The Damage Doping Causes to Sportsmanship.
- Applicable Player Location/Whereabouts Requirements.

The talk is divided into 3 STAGES

Doping in Sport	
Introduction	Brainstorming by interacting with the audience to get to the reason why doping occurs
Main Part	Slideshow, CONMEBOL video
Closing	Commitment of all to fight against doping, closing of the activity with a playful motivational activity.

- 14 anti-doping educational activities were conducted, covering an audience of 1643 (male and female players, coaching staff, doctors and anti-doping officials).
- The anti-doping educational activities were carried out in the framework of the 2021 short competitions, courses in collaboration with the Directorate of Development to the Member Associations (AFA, FEF and FPF), Anti-Doping Workshop with the CBF and other associations.

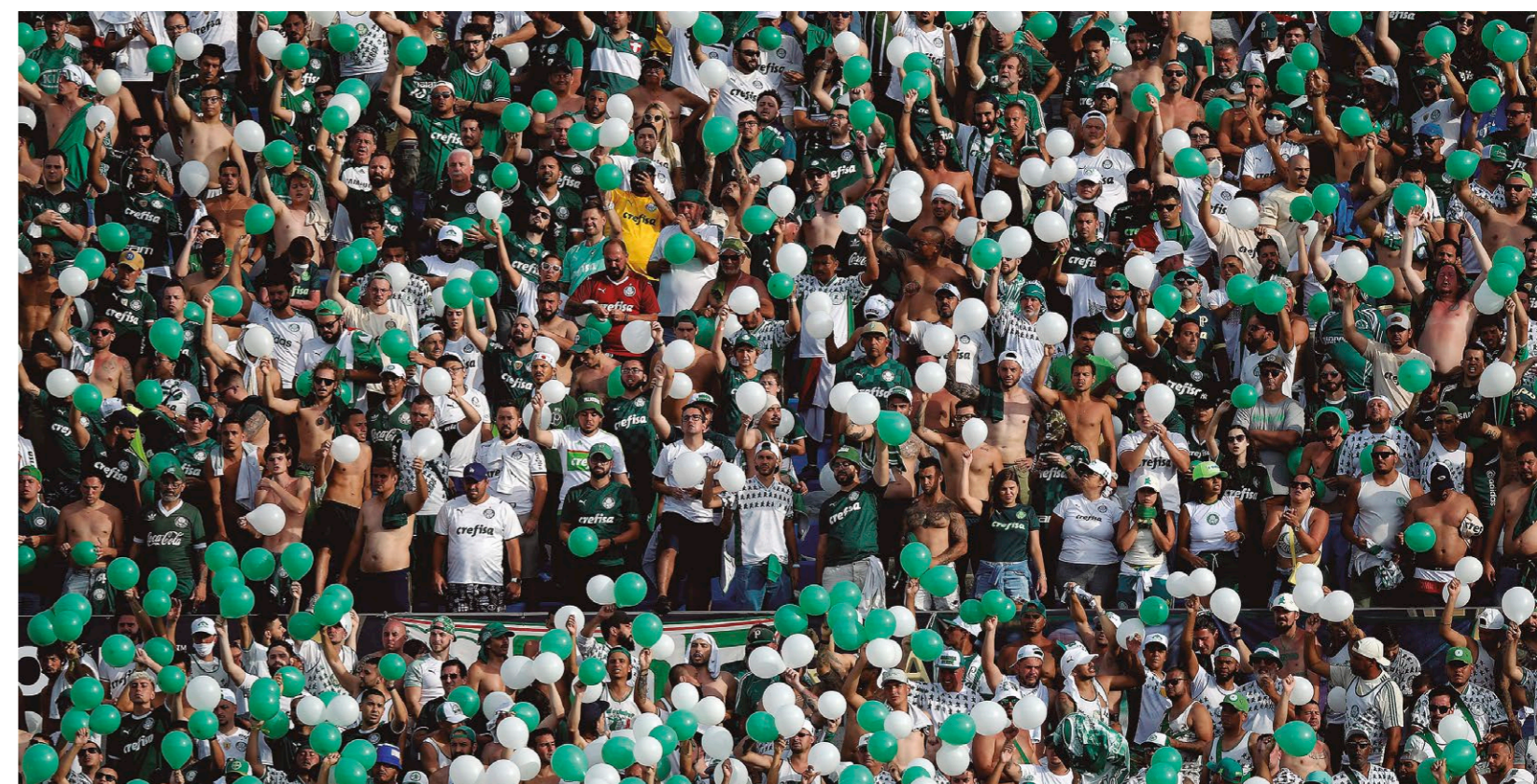
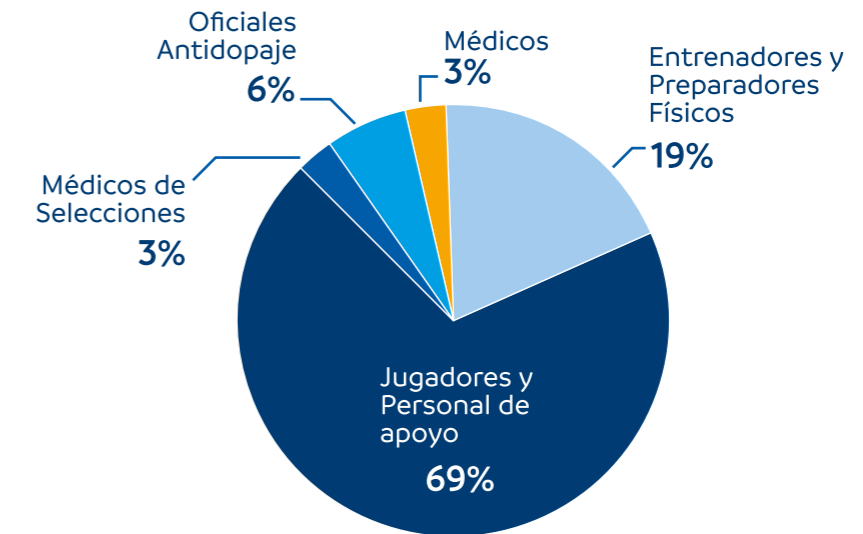
Throughout the year, Anti-Doping Education Activities have covered a total of 1,643 people, including players, support staff (coaches, physical trainers, physiotherapists, managers), anti-doping officials and doctors (national teams and clubs), among others.

EDUCATION PLAN

Anti-Doping Lectures

Eventos onde palestras educacionais antidopagem foram realizadas

QUANTITY	DETAIL		COUNTRY	DATES	AUDIENCE	
7	Directorate of Development	Courses of the Directorate of Development	ECU- PER- PAR	AUGUST TO DECEMBER	314	TRAINERS AND PHYSICAL TRAINERS
1	Short Competitions	CONMEBOL Women's CONMEBOL Libertadores 2020	ARG	MARCH	320	PLAYERS and SUPPORT STAFF
1	Short Competitions	CONMEBOL Women's Libertadores Women2021	PAR	NOVEMBER	350	PLAYERS and SUPPORT STAFF
1	Short Competitions	CONMEBOL Libertadores Futsal 2021	URU	MAY	264	PLAYERS and SUPPORT STAFF
1	Short Competitions	CONMEBOL Beach Soccer Qualifiers 2021	BRA	JUNE	200	PLAYERS and SUPPORT STAFF
1	Medical Selections	Prohibited List 2021		NOVEMBER	200	SELECTION DOCTORS
1	Anti-Doping Officials	CBF Anti-Doping Workshop	BRA	APRIL	101	ANTI-DOPING OFFICIALS
1	SPORTS MEDICINE and Antidoping	ETF	ECU	AUGUST	50	PHYSICIANS
14		14 ANTIDOPAJE educational activities			1643	TOTAL Public





PART THREE:

CHALLENGES OF 2022

2021



CONMEBOL's Medical Commission and Anti-Doping Unit face 2022 challenge

The coming year 2022 is a new challenge for CONMEBOL's Medical Commission and Anti-Doping Unit, although the desire is to forget these last two years of pandemic, we have to schedule the season as if it were still with us.

We will try to encourage and ensure that the vaccines reach everyone, we will organize sanitary bubbles to ensure the presence of spectators, delegations and CONMEBOL teams and we will have to continue with the logistics of the tests to detect infected people and proceed with their isolation.

Hopefully we can forget these past two years! But with this outlook we are preparing for the many tournaments that await us. A challenge that we hope to solve as the last two years, with the accumulated experience that allows us to look with optimism to the future. We thank the CONMEBOL board for their constant support, all the members that make up the Medical Commission and Anti-Doping Unit, all the doctors of national teams and clubs who have understood and collaborated, providing data and ideas, football continues, the Medical Commission and Anti-Doping Unit contribute with their support to ensure that it takes place and we look forward to the next season 2022 (Table 1) with the illusion of programming the field doctors and anti-doping units, hoping to overcome the virus that has swept the world these last two years.



	Event	Athlete gender	Discipline
1	CONMEBOL Copa América	Female	Field
2	Eliminatorias Sudamericanas - FIFA World Cup Catar 2022	Male	Field
3	CONMEBOL - Sub 20	Female	Field
4	CONMEBOL - Sub 17	Female	Field
5	CONMEBOL Libertadores	Female	Field
6	CONMEBOL Libertadores - Sub 20	Male	Field
7	CONMEBOL Libertadores	Male	Field
8	CONMEBOL Sudamericana	Male	Field
9	CONMEBOL Recopa	Male	Field
10	CONMEBOL Copa América	Male	Futsal
11	CONMEBOL - Sub 20	Male	Futsal
12	CONMEBOL - Sub 20	Female	Futsal
13	CONMEBOL - Sub 17	Male	Futsal
14	CONMEBOL Libertadores	Male	Futsal
15	CONMEBOL Libertadores	Female	Futsal
16	CONMEBOL Libertadores	Male	Beach
17	CONMEBOL Copa América	Male	Beach

In addition, the challenges of the Medical Commission and the Anti-Doping Unit are presented as follows

- Increase the percentage of blood samples collected in South America for shipment to WADA-accredited anti-doping laboratories in Europe and the United States.
- Development and Implementation of Software for the application of Directed Controls in competition and out of competition.
- Implement a continuous updating program for Medical Anti-Doping Officials through CONMEBOL's e-learning platform.



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SEMINARIO
COMISIÓN MEDICA
& UNIDAD ANTI DOPAJE
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CONMEBOL

MEDICAL COMMISSION AND ANTI-DOPING UNIT 2021

Official publication of the South American Football Confederation (CONMEBOL).

President

Alejandro Domínguez W-S

Secretary General

José Astigarraga

Under-Secretary-General / Legal Director

Montserrat Jimenez

Assistant General Secretary Football / Director of Development

Nery Pumpido

Chairman of the Medical Commission / Director of the Anti-Doping Unit

Dr. Osvaldo Pangrazio

Staff

Content Writing and Editing

Head of the Medical Commission / Director of the Anti-Doping Unit

Dr. Osvaldo Pangrazio

Anti-Doping Unit Analyst

Elias Paredes

Head of Scientific Studies CONMEBOL

Dr. Francisco Forriol

Assistant to the Medical Commission and Anti-Doping Unit

Sebastián Peña

Responsible for Medical Committee

Federico Rivarola

Photos

Digital CONMEBOL
Staff Images

Medical Committee Analyst

Luis Dioverti

Design

ONIRIA

Head of Anti-Doping Unit

Gabriela Gossen



Confederación Sudamericana de Fútbol

Autopista Aeropuerto Internacional - km 12
Luque - Gran Asunción - Paraguay
email: conmebol@conmebol.com.py
www.conmebol.com



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