



Any players requiring exemption certificates should

ensure that they complete the Therapeutic Use

Exemptions (TUE) Application Form and return

it as soon as possible and no later than 30 days

before the commencement of the competition

in which they are participating.

Therapeutic Use Exemption (TUE)

https://www.wada-ama.org/en/questions-answers/therapeutic-use-

exemptions#node-501

What is a Therapeutic Use Exemption (TUE)?

that require them to take particular medications.

the authorization to take the needed medicine

What are the **criteria for granting** a TUE?

significant enhancement of performance, and

Athletes, like all others, may have illnesses or conditions

If the medication an athlete is required to take to treat an

a Therapeutic Use Exemption (TUE) may give that athlete

The athlete would experience significant health problems without taking the prohibited substance or method

The therapeutic use of the substance would not produce

There is no reasonable therapeutic alternative to the

illness or condition happens to fall under the Prohibited List,



Anti-Doping Rules? Since the WBF Executive Council meeting held in October 2008 in Beijing,

the WBF accepted the **Anti-Doping Code from** WADA (the World Anti-Doping Agency).





Are you aware of







These rules are in force, which means that Players in the Open, Women's and Youth (Junior and Youngsters) Teams in World Bridge Teams Championships will be liable for Anti-Doping Tests.



https://wada-mainprod.s3.amazonaws.com/resources/files/wada-2016-prohibited-list-en.pdf

The 2016 Prohibited List

- Substances and methods prohibited at all times (In- and Out-of-Competition)
 - S0. Non approved substances (experimental)
 - S1. Anabolic agents
 - S2. Peptide hormones, Growth Factors, related substances and Mimetics
 - S3. Beta-2 agonists
 - S4. Hormone and metabolic modulators
 - S5. Diuretics and masking agents
 - M1. Manipulation of Blood and blood components
 - M2. Chemical and physical manipulation
 - M3. Gene doping
- Substances and methods prohibited In-Competition
 - S6. Stimulants
 - S7. Narcotics
 - S8. Cannabinoids
 - S9. Glucocorticosteroids
- Substances prohibited in particular **sports** (not or no longer in Bridge...)
 - P1. Alcohol (> 0.10 g/L)

What happens if an athlete is granted a TUE?

TUEs are granted for a specific medication with a defined dosage. They are also granted for a specific period of time and do expire. The athlete needs to comply with all the treatment conditions outlined in the TUE Application.

use of the otherwise prohibited substance or method.

P2. Beta-blockers

LEGEND - These substances may influence:

- Physical performance
- Mind performance
- Possibily Physical and/or Mind
- Clearance of other drugs ("masking agents")















PART 4 ROLES AND RESPONSIBILITIES

You must know and comply with all "applicable anti-doping policies and rules."

They must use their considerable influence to promote a clean sport philosophy.

You must take responsibility for what you "ingest," meaning what you eat and drink and anything that

may enter your body. The essential rule is this: if it is in your body, you are responsible for it. In legal terms, this is called "strict liability."

You must inform medical personnel that they are obligated not to give you prohibited substances or methods. You must also take responsibility to make sure that any medical treatment you receive does

Coaches, trainers, managers, agents and other support personnel are often role models for athletes. They,

They must know and comply with all anti-doping policies and rules that apply to them or the athletes

You must cooperate with anti-doping organizations investigating anti-doping rule violations

They must cooperate with Anti-Doping Organizations investigating anti-doping rule violations.

They must not use or possess any prohibited substance or method without a valid justification.

There are also other types of anti-doping rule violations. The Code spells these out:

for the purposes of giving it to a friend or relative, except under certain very limited justified medical circumstances – say, buying insulin for a

Trafficking or attempted trafficking in a prohibited substance or method.

Administration or attempted administration of a prohibited substance or

As an athlete, the Code specifically says that you are responsible for knowing what makes up an anti-

Such violations can involve more than just a positive test - which, in the language of the Code, is called an

For example, it is also an anti-doping rule violation to use and possess prohibited substances and methods.

Tampering or attempted tampering with any part of doping control. For example, intentionally

As an athlete, you have certain roles and responsibilities. These include:

You must be available for sample collection

too, have certain rights and responsibilities. These include

They must cooperate with the athlete-testing program.

PART 5 WHAT IS DOPING?

"Adverse Analytical Finding.

diabetic child. See Article 2.6.

method to an athlete. See Article 2.8.

Prohibited Association, See Article 2.10

Whereabouts Failure. See Article 2.4.

they support.

2015 World Anti-Doping CODE: **ATHLETE Reference Guide**

-> see https://wada-main-prod.s3.amazonaws.com/resources/files/wada-reference-guide-to-2015-codenocode.pdf https://www.wada-ama.org/en/resources/the-code/world-anti-doping-code

The purpose of the World Anti-Doping Code is to protect the rights of the

clean athlete.

What, exactly, is the World Anti-Doping Code?

The Code is the anti-doping system framework. It has been accepted by the entire Olympic movement as well as by various sports bodies and National Anti-Doping Organizations throughout the entire world. It also has been recognized by more than 170 governments, through the UNESCO Convention against Doping

The Code first came into effect in July 2004. A first set of amendments took effect on 1 January 2009. A second set will come into effect on 1 January 2015.

The full text of the Code can be found on the World Anti-Doping Agency's website.

Who is subject to the Code?

- 1. If you are a national or international level athlete, the Code applies to you. "International-level" athletes are defined by the athletes' International Federation. "National-level" athletes are defined by
- 2. Each National Anti-Doping Organization can decide whether and how the Code will apply if you are an athlete competing domestically at a level that does not identify you as "national-level." If you are competing at this level, the National Anti-Doping Organization tests you, and if you return a positive test or tamper with the doping control process or commit another anti-doping rule violation, the Code

As noted before, you are responsible – "strictly liable" – for anything and everything in your system. To establish an anti-doping rule violation for use or presence of a prohibited substance, it is not necessary to

It is not a defense to an anti-doping rule violation that, for instance, someone in your entourage or camp

If you use or try to use a prohibited substance or method, that is doping. The "success" or "failure" of the

What about dietary supplements?

To use but one example, there have been a large number of cases in recent years, including at the Olympic Games, of athletes from different sports testing positive for the banned stimulant methylhexaneamine (MHAI). This stimulant might also be known as, among other things, 1,3-dimethylamylamine or DMAA; it might also be called geranium root extract or geranium oil even if it does not come from geranium oil or plants). These names might – or might not – be on a product label. But "methylhexaneamine" rarely is, even though it is on the Prohibited List.

You should not take a supplement if there is any doubt as to what it might contain.

You should be extremely wary of products that, among other things, claim to build muscle, aid in recovery provide energy or help with weight loss. Because you will be held strictly liable for the consequences of a positive test caused by a mislabeled supplement, the best advice is: you should not take a supplement if there is any doubt as to what it might contain.

Can prohibited substances be found in common medicines?

contain prohibited substances

A TUE must be not retroactively.

unsure what is in a product, do not take it. Ignorance is never

You are responsible for knowing what substances and methods are on the

- the athletes' National Anti-Doping Organization.
- then requires that sanctions be imposed.
- If you are not participating in competition but merely engaging in recreational or in fitness activities, National Anti-Doping Organizations also have discretion to decide whether and how the Code will

Does intent matter when it comes to an anti-doping rule violation?

demonstrate intent, fault, negligence or knowing use on your part.

gave you a substance; or that a banned substance was not listed on a product label; or that a prohibited substance or method would not have improved your performance.

use or attempted use does not matter. It is considered doping.

In many countries, the regulation of dietary supplements can be very lax. It is not unusual for supplements marketed in health-food stores or over the Internet to contain prohibited substances that are not disclosed on the product label. Over the past few years, a significant number of positive tests have been attributed to mislabeled or contaminated supplements.

interfering with a doping control officer, intimidating a potential witness or altering a sample by adding a foreign substance. See **Article 2.5**. Possession of prohibited substance or method. It's not OK to buy or have on you a banned substance

involve more

than just a

positive test

One of the

key principles

anti-doping

effort is to

protect

your health.

Violations can

Yes. Any number of common medications, including painkillers and treatments for colds and the flu, can

obtained in advance,

an excuse.

Prohibited List.

PART 9 CONSEQUENCES OF ANTI-DOPING **RULE VIOLATIONS**

Evading, refusing or failing to submit a sample collection. See Article 2.3.

be frozen. stored and re-analyzed for 10 years.

Samples may

The consequences of an anti-doping rule violation may include the disqualification of results, the imposition of a period of ineligibility, mandatory publication of your violation and, perhaps, financial sanction

Complicity. This covers a wide range of acts: assisting, encouraging, aiding, abetting, conspiring, covering up or "any other type of complicity" involving an anti-doping rule violation or attempted violation by "another person." See **Article 2.9**.

THE DISQUALIFICATION OF RESULTS

In an individual sport, an anti-doping rule violation in connection with a competition (for instance, an individual match or race) automatically results in disqualification of the results of that competition. See Article 9.

What does disqualification mean?

It means the loss of results, medals, points and prize money. Your results in other competitions in the same event – for example, the Olympic Games – may also be disqualified. See **Article 10.1**.

What is 'prohibited association'?

There have been several high-profile examples where athletes have continued to work with coaches who have been banned or with other individuals who have been criminally convicted for providing performance-

A new feature of the Code taking effect at the start of 2015 makes it an anti-doping rule violation for you to associate with this sort of "athlete support person" once you have been specifically warned not to engage

THE DETAILS:

You must not work with coaches, trainers, doctors or others who are ineligible because of an anti-doping rule violation or who have been criminally convicted or professionally disciplined in relation to doping.

Some examples of this type of prohibited association include obtaining training, strategy, nutrition or medical advice, therapy, treatment or prescriptions. Moreover, the "athlete support person" may not serve as an agent or representative. Prohibited association need not involve any form of compensation.

This provision does not apply in circumstances where the association is not in a professional or sport-related capacity. Examples: a parent-child or husband-wife relationship.















DOPING CONTROL: Step-by-step

-> see https://wada-main-prod.s3.amazonaws.com/resources/files/Doping_Control_Leaflet_EN.pdf

Athlete testing, or doping control, is an essential programme in both promoting and protecting doping-free sport.

Worldwide doping controls are carried out in accordance with the World Anti- Doping Code and the International Standard for **Testing**, developed by WADA in consultation with its stakeholders.



Athlete Selection

The selection of athletes is based on the requirements of the responsible Anti-Doping Organisation (ADO). The selection may occur in three ways: random, based on established criteria (e.g. finishing position), or targeted.



Notification

A Doping Control Officer (DCO) or Chaperone will notify the athlete of his or her selection for doping control. In general, this notification is done in person. The official identification and the authority under which the sample collection is to be conducted are shown to the athlete.



The DCO or Chaperone will inform the athlete of his or her rights and responsibilities, including the right to have a representative present throughout the entire process. The athlete will be asked to sign the form confirming that he or she has been notified for doping control.

Reporting to the **Doping Control Station**

The athlete should report to the doping control station immediately following notification. The DCO may allow the



athlete to delay reporting to the doping control station for activities such as a press conference or the completion of a training session; however the athlete will be accompanied by a DCO or a Chaperone from the time of notification until the completion of the sample collection process



Selection of Collection Vessel

The athlete is given a choice of individually sealed collection vessels and selects one. The athlete verifies that the equipment is intact and has not been tampered with. The athlete should maintain control of the collection vessel at all times

Provision of Sample

Only the athlete and a doping control official of the same gender are permitted in the washroom during the provision of the sample. Minors or athletes with a disability may also have their representative present in the washroom. However this representative is not permitted to view the provision of the sample. The objective here is to ensure that the doping control official is observing the sample provision correctly.



Athletes are required to remove any clothing from the knees to mid-chest and from the hands to the elbows. This provides the doping control official with a direct observation of the urine leaving the athlete's body. These provisions are meant to ensure that it is the athlete's own urine and help prevent possible manipulation of the urine sample.



The DCO shall ensure that an athlete in Volume of Urine

full view shall provide no less than 90ml

of urine. If the amount of urine does not meet the minimum requirements, the athlete will proceed with the Partial Sample Process (outlined at the end of this leaflet).



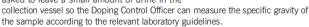
Selection of the Sample Collection Kit

If the athlete has provided the required volume of urine, the athlete will be given a choice of individually sealed sample collection kits, from which to choose one. The athlete verifies that the equipment is intact and has not been tampered with. The athlete will open the kit and confirm that the sample code numbers on the bottles, the lids and the container all match.

Splitting the Sample

The athlete splits the sample, pouring the urine him or herself, unless assistance is required due to an athlete's disability.

The athlete pours the required volume of urine into the "B" bottle. Then the remaining urine is poured into the "A" bottle. The athlete will be asked to leave a small amount of urine in the







Sealing the Samples

The athlete seals the "A" and "B" bottles. The athlete representative and the doping control officer should verify that the bottles are sealed properly

Measuring Specific Gravity

The DCO measures the specific gravity using the residual urine left in the collection vessel. The values are recorded on the doping control form. If the sample does not meet the specific gravity requirements, the athlete may be asked to provide additional samples as



required by the Anti-Doping Organization.

Completion of Doping Control Form

The athlete is asked to provide information about any prescription/non-prescription medications or supplements he or she has taken recently. These medications are recorded on the doping control form. The athlete has the right to note comments and concerns regarding the conduct of the doping control session. The athlete should confirm that all of the information on the doping control form is correct, including the sample code number.



The person who witnessed the passing of the sample, the athlete representative. the Doping Control Officer and the athlete will sign the doping control form at the end of the sample collection process

The athlete is given a copy of the doping control form.

The laboratory copy of the doping control form does not contain any information that could identify the athlete



The Laboratory Process

Samples are packaged for shipping to ensure that the security of the sample is tracked. The samples are sent to a WADA-accredited . laboratory. laboratory will inspect the samples upon their arrival to ensure there is no evidence of tampering.

The WADA-accredited laboratory will adhere to the International Standard for Laboratories when processing a sample, ensuring the chain of custody is maintained at all times

The "A" sample will be analyzed for substances on the Prohibited List. The "B" sample is securely stored at the laboratory and may be used to confirm an Adverse Analytical Finding from the "A" sample.

This poster was assembled by







Gabriele PW (Chair), Aubry Y, Federico B, Capelli G, Jelmoni G, Stomphorst J, Dagouret F, Gudge A (Secr.)







DOPING CONTROL: Are you fully aware of what you take?

CAN YOU REMEMBER WHAT SUBSTANCES YOU HAVE **TAKEN LAST WEEK?**

Remembering commercial names and substance content of any Prescription and Non-Prescription Drug or Dietary supplement that you assumed, for any reason, in the days before a competition may be VERY important in case you are selected for Doping Control.

This will help you to fill in the Doping Control Form in the most accurate and complete way.



Completion of Doping Control Form

The athlete is asked to provide information about any prescription/non-prescription medications or supplements he or she has taken recently. These medications are recorded on the doping control form. The athlete has the right to note comments and concerns regarding the conduct of the doping control session. The athlete should confirm that all of the information on the doping control form is correct, including the sample code number.



Antineoplastic and immunomodulating agents

Respiratory system

⇒ Cough and Cold preparations
⇒ Ephedrine

⇒ Anti-histamin

⇒ Glucocorticoids Salbuta ⇒ Salmeterol

IMPROVE YOUR AWARENESS!

One of the purposes of WBF Medical & Prevention Commission is to motivate bridge players:

a)to be trained to remember all the substances (prohibited or not...) they have used in the week before the interview

b) to be aware of the importance of an accurate reporting of drugs and dietary supplements

Alimentary tract and metabolism ⇒ Insulin ⇒ Blood gluo cose lowering drugs ⇒ Antacids ⇒ Antispasmodics ⇒ Antidiarrheals ⇒ Antiobesity preparations ⇒ Drugs for constipation

Anti-infectives

⇒ Antivirals ⇒ Antimycotics

Cardiovascular system ⇒ Antiarrhytmics

- ⇒ Vasodilators
- ⇒ Antihypertensives ⇒ Diuretics
- ⇒ Beta-blocking agents
- ⇒ Atenolol
- ⇒ Calcium channel blockers
- ⇒ Nimodipin ⇒ Nifedipine
- ⇒ Amlodipine
- ⇒ ACE Inhibitors
- ⇒ Statins

Nervous System ⇒ Analgesics Paracetamol

- ⇒ Antiepileptics
- ⇒ Anti-Parkinson drugs Anticholinergics
- ⇒ Dopaminergic agents
- Acetylcholine Methylphenidate
- ⇒ Psychostimulants
 ⇒ Modafinil
- ⇒ Antipsychotics
- ⇒ Piracetam ⇒ Anxiolytics
- ⇒ Benzodiazepine
- ⇒ Antidepressants
- ⇒ SSRI (Selective Serotoni
- Fluoxetine ⇒ Hypnotics

DRUGS

- ⇒ ACTH (Corticotropin)
- ⇒ Thyrotropi
- Somatotropin ⇒ Corticosteroids
- Thyroid therapy
- ⇒ Parathyroid hormones

⇒ Calcitonin

Genito-urinary and sex hormones

Muscoloskeletal system ⇒ Anti-inflammatory drugs
 ⇒ Bisphosphonates

⇒ Muscle relaxants

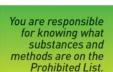
- ⇒ Hormonal contracepitives
- ⇒ Androgens ⇒ Estrogens
- ⇒ Progestogens⇒ Gonadotropins

Blood and blood forming organs

- ⇒ Anticoagulants
- Warfarin
- ⇒ Antithrombotic agents
- ⇒ Heparin ⇒ Antihemorragics

Can prohibited substances be found in common medicines?

Yes. Any number of common medications, including painkillers and treatments for colds and the flu, can contain prohibited substances



If you are unsure what is in a product, do not take it. lanorance is never an excuse

You should not take a supplement if there is any doubt as to what it might contain.

DIETARY SUPPLEMENTS

Vitamins (alone or in multivitamin supplements)

- vicamins (alone of in multivitamin star A (b-carotene, ...)

 ⇒ B (B1, B2, B6, B12, B complex, ...)

 ⇒ C (Abscorbic acid, ...)

 ⇒ D (Colecalcipherol, ...)

 ⇒ E (Tocopherol, ...)

- ⇒ K (K1 Phylloquinone, K2 Menaquinone...) ⇒ Similar compounds (Coenzyme Q10, Choline)

Amino Acids (alone or in "cocktails")

- ⇒ Tryptophan
 ⇒ Branched Chain Amino Acids (BCAA)
- ⇒ Glutamin
- ⇒ Aspartates
 ⇒ Carnitine
 ⇒ Arginine
 ⇒ Ornithine

- ⇒ Lysine
- ⇒ Whey proteins/Colostrum

- Minerals (alone or in combinations) ⇒ Calcium ⇒ Phosphate
- ⇒ Magnesiu ⇒ Iron ⇒ Zinc
- ⇒ Chromium ⇒ Boron ⇒ Vanadium
- ⇒ Seleniu

Metabolites, Consituents and Extracts

⇒ Creatine
⇒ HMB (Beta-hydroxy-beta-methylbutyrate)

Herbals

- Capsaicin (Capsicum, Peppers Red, Chili, Cayenne, ... -) Ginkgo biloba Ginseng
- ⇒ Eleutherococcus ("Siberian" or "Russian" Ginseng)
- ⇒ Kaya Kaya
- ⇒ Kava Kava ⇒ St. John's Wort (Hypericum) ⇒ Gamma-oryzanol ⇒ Tribulus terrestris (puncture vine)
- ⇒ Ephedra ⇒ Others (Cordyceps sinensis, Rhodiola rosea, Cytoseira canariensis













Mind & Health M play together



Performance Enhancement & Health

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WBF Health Interview Survey

Use of medicines and dietary supplements among Bridge players in two world-class tournaments

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Bridge players Dietary supplements Doping

ABSTRACT

As the World Bridge Federation is a signatory to the World Anti-Doping Code, top-level Bridge players As the World Bridge Federation is a signatory to the World Anti-Doping Code, top-level Bridge players undergo anti-doping testing in international tournaments. Compared to "physical" athletes, Bridge players are "mind" athletes who are more likely to use medications and dietary supplements simply because they are, on average, older. Data on socio-demographic characteristics, behavioural risk factors, presence of chronic diseases and use of medications and supplements were collected among 125 Bridge players participating in two world-level Bridge tournaments. About one third of the players were older than 60 years, and 76.8% reported at least one chronic condition, with cardiovascular diseases, back/joint problems, insomnia, asthma and diabetes being the most common. 60% of players reported using at least one medication in the preceding week, including substances on the World Anti-Doping Agency prohibited list, whereas 44.0% reported to have used at least one dietary supplement. As "mind" athletes, professional Bridge players' demographic and health-related characteristics indicate to a different pattern of sional Bridge players' demographic and health-related characteristics indicate to a different pattern of drug use than "physical" athletes normally considered under the World Anti-Doping Code. © 2015 Elsevier Ltd. All rights reserved.

Sex.	Male	67	53.6
	Female	58	46.4
Age (years)	::40	29	23.4
	41-50	23	18.6
	51-60	34	27.4
	61-79	38	30.6
Educational	Some high school	. 3	2.4
level	High school graduate	17	13.7
	forme college or rechnical school	12	9.7
	College graduate	92	743
Commisserer*	Europe	52	41.0
	America	36	29.8
	Ania	15	12.0
	Mrica	12	9.6
	Ocrania	10	9.0
Smoking	Never	67	544
	Former	31	25.0
	Occasional	4	3.3
	Current	22	17.1
BMS category	Normal	55	45.1
	Overweight	45	36.5
	Obesia	22	18.0

		N.	8.
Number of		29	23.2
chronic	1	40	32.0
Steamer	22	56	443
Arthritis, joint	Back problems	28	22.5
or back	Joint problems	. 9	7.4
problems	Arthritis problems	. 6	4.1
	Yes, not specified	5	4.1
Sleeping	Innomnia	23	18.7
problems	Not specified	33	9.5
Heart condition/high	High blood personer	21	25.2
blood pressure	Heart condition	3	4.1
Anxiety and	Ansiety	7	5.7
depression	Depression	3	5.7
Kespisatory	Arthma	10	8.1
Goeanns	Other respiratory disease	3	2.6
Diabetes	Diabetes		6.5
	Impaired gluiner teleratur	- 2	2.6
Other chronic	Overall	31	253
Sineane	Gastmintestinal disease	. 7	
	Cancer		
	Circulatory disease	4	
	Thyroid disease thin disease	4	
		- 2	
	Hypercholesterolemia Ostropormis	2	
	Metabolism disease		
	Muscle-iniet disease	1	
	Other (congenital disease)	- 1	

	ATC class	N	3	Prohibited substances
٨	Alimentary tract and metabolom	21	16.8	hule
*	Blood and blood forming organi	. 9	2.2	
c	Cardiovascular system	35	28.0	Hydrochlorothiaride' Atenolof', Bisoprolof', Metoprolof'
D	Dermanologicals	2	1.6	
G	Genito-urinary system and sex hormones	6	4.5	Testosterope
н	Systemic hormonal preparations	9	7.2	
1	Antiinfectives for systemic use	2	1.6	
L	Antineoplastic and immunomodu- lating agrees	1	1.6	Letropole
м	Musculo- skeletal system	10	8.0	
N	Nervous	23	18.4	Desamphetamine
P	Antiparasitic products, insecticides and repellents			
*	Respiratory system	- 1	2.4	Salbutamol*
5	Sensory organi.			
v	Various			

Vitamins-minerals		
Multivitamin	22	17.6
Vitamin A	3.3	0.8
Vitamin It complex	9	7.2
Vitamin C	13	10.4
Vitamin D	9	7.2
Vitamin E	2	1.6
Vitamin K	100	0.8
Multimineral	1 4 9 1 3	3.2
Calcium	9	7.2
Chrome	1	0.8
Magnesium	3	2.4
Petassium	1	0.8
Herbal and other supplements		
Coenzyme Q10	4	3.2
Hiter	2	1.6
air h/Fish oil	11	4.8
Gimeng	4	3.2
Ginkgo Biloha	3	4.8 3.2 2.4 0.8 3.2
Lipoic Acid	4	0.8
Melatonin	4	1.2
Other herbal supplements	6	4.8
Other supplements	14	11.2

WORLD BRIDGE FEDERATION **Medical & Prevention Commission**





Giovanni CAPELLI

This poster was assembled by:



Bruno FEDERICO



Paolo Walter GABRIELE

				Course & suddent course	
		908	95% (3	HX	991.01
Ses	Male	1.00 1.07	2227707	1.00	671-226
	Femule	1.07	0.75-1.54	1.26	671-226
Apriyean)	+40	1.00		1.00	
- Brighton	41-50	1.50	0.71-3.15	0.71	0.21-2.34
	51-60 61-79	1.99	1.07-3.72	3.09	1.25-7.46
	61-79	2.60	1.44-4.09	2.51	1.09-5.64
Continent	Europe	1.00		1.00	
	America .	0.96	0.65-1.40	3.73	1.96-7.01
	Africa	126	0.73-2.18	3.23	1.26-8.29
	Asia	674	0.33-1.66	1.02	0.64-6.06
	Oceania	0.46	0.19-1.07	1.07	0.35-3.28
BMI category	Normal	1.00		1.00	
	Overweight	1.64	1.09-2.48	0.92	0.51-1.66
	Obese	2.10	1.31-3.36	0.50	0.22-1.17
No. of chronic	0	1.00		1.00	
diseases	10	2.14	1.04-4.42	1.00	0.49-2.29
	>2	3.43	1.72-6.63	1.03	0.50-2.14