



TAS / CAS

TRIBUNAL ARBITRAL DU SPORT
COURT OF ARBITRATION FOR SPORT
TRIBUNAL ARBITRAL DEL DEPORTE

CAS 2025/A/11254 Riza Kayaalp v. United World Wrestling (UWW)

ARBITRAL AWARD

delivered by the

COURT OF ARBITRATION FOR SPORT

sitting in the following composition:

President: Mr. Vladimir Novak, Attorney-at-law in Brussels, Belgium

Arbitrators: Mr. Jeffrey G. Benz, Attorney-at-law and Barrister in London, United Kingdom
Ms. Carine Dupeyron, Attorney-at-law in Paris, France

in the arbitration between

Riza Kayaalp, Yenimahalle/Ankara, Turkey

Represented by Mr. Hacer Nurdan Yildiz, Attorney-at-law, Ankara, Turkey and Mr. Claude Ramoni, Attorney-at-law, Lausanne, Switzerland

Appellant

and

United World Wrestling (UWW), Corsier-sur-Vevey, Switzerland

Represented by International Testing Agency, Ms. Dominique Leroux-Lacroix, Ms. Ayesha Talpade, and Mr. Anton Sotir, Attorneys-at-law, Lausanne, Switzerland

Respondent

I. PARTIES

1. Mr. Riza Kayaalp (the “Athlete” or the “Appellant”) is a recently retired elite Greco-Roman wrestler from Turkey, with five World Championships, twelve European Championships, and three Olympic medals.
2. United World Wrestling (“UWW” or the “Respondent”) is the international sports federation for the sport of wrestling recognized as such by the International Olympic Committee. UWW has its registered seat in Corsier-sur-Vevey, Switzerland. The UWW is represented in these proceedings by International Testing Agency (“ITA”), which is the agency that handles anti-doping testing and results management for the UWW.
3. The Appellant and the Respondent are collectively referred to as the “Parties”.

II. FACTUAL BACKGROUND

4. Below is a summary of the relevant facts and allegations based on the Parties’ written submissions and evidence adduced. Additional facts and allegations found in the Parties’ submissions and evidence may be set out, where relevant, in connection with the legal discussion that follows. While the Panel has considered all facts, allegations, legal arguments, and evidence submitted by the Parties in the present proceedings, the Award refers only to the submissions and evidence, which the Panel considers necessary to explain its reasoning.
5. The Athlete has competed in international wrestling events since 2007. At the time of the Anti-Doping Rule Violation (“ADRV”), the Athlete was an International-Level Athlete within the meaning of the UWW Anti-Doping Rules (“UWW ADR”). Based on his Anti-Doping Administration & Management System testing history, the Athlete has been subject to more than 55 sample collection sessions since 2014, under the testing authority of both the Turkish Anti-Doping Commission (“TADC”) and UWW. The Athlete has also been included in the UWW’s Registered Testing Pool since December 2022.
6. On 28 May 2024, the Athlete was subject to an out-of-competition doping control test, where two urine samples (the “A-sample” and the “B-sample” and together, the “Urine Samples”) and a blood sample were collected.
7. In the ‘Declaration of Medication/Supplements’ section of the Doping Control Form (“DCF”) associated with the Urine Samples, the Athlete was asked to provide a “*List of any prescription/non-prescription medications or supplements, including vitamins and minerals, taken over the past 7 days (include substance, dosage and when last taken).*” The Athlete declared he had taken “*Multivitamin*”.

8. On 27 June 2024, the laboratory accredited by the World Anti-Doping Agency (“WADA”) in Lausanne, Switzerland, informed the ITA of an Adverse Analytical Finding (“AAF”) for Trimetazidine (“TMZ”) in the A-sample. TMZ is a prohibited substance listed in Section S4 (‘Hormone and metabolic modulators’) of the WADA Prohibited List 2024, and its presence in the A-sample is an ADRV under Articles 2.1 and 2.2 of the UWW ADR.
9. Following receipt of the AAF, the ITA conducted an initial review of the results under Article 7.2 of the UWW ADR and Article 5.1.1 of the International Standard for Results Management (“ISRM”). The ITA found that no applicable Therapeutic Use Exemption (“TUE”) for TMZ had been or was in the process of being granted to the Athlete by UWW or the TADC.
10. On 1 July 2024, the ITA, on behalf of UWW, notified the Athlete of the AAF and imposed a mandatory Provisional Suspension under Article 7.4.1 of the UWW ADR (the “AAF Notification”). The Athlete was advised of the consequences of the ADRV and invited to provide his explanations as to the circumstances that led to the presence of TMZ in his sample.
11. On 5 July 2024, the Athlete responded to the AAF Notification denying the ADRV. The Athlete did not request for the analysis of the B-sample within the given deadline. He requested that the ITA “revoke” the mandatory Provisional Suspension and confirm that no period of ineligibility be imposed on him under Article 10.5 of the UWW ADR.
12. On 12 July 2024, the ITA, on behalf of UWW, issued a Notice of Charge to the Athlete, informing him that, since he had not requested for the opening and analysis of the B-sample, it was undisputed under Article 2.1.2 of the UWW ADR that he had committed an ADRV under Articles 2.1 and/or 2.2 of the UWW ADR. The Athlete was also informed that after analysing the case file and the Athlete’s preliminary explanations, the ITA considered that the Athlete had not established that his ADRV was unintentional and that his conduct displayed, at the very least, indirect intent. The ITA did not find any basis for mitigation under Articles 10.2.3, 10.5, or 10.6 of the UWW ADR. On this basis, the Athlete was subject to the period of ineligibility of four years.
13. On 25 July 2024, the Athlete requested the Laboratory Documentation Package related to his A-sample, which the ITA provided on 30 July 2024.
14. On 1 August 2024, the Athlete responded to the ITA, maintaining his position that his Provisional Suspension should be revoked and that no period of ineligibility should be imposed on him based on Article 10.5 of the UWW ADR. The Athlete requested that the case be referred for adjudication to the Court of Arbitration for Sport in Lausanne, Switzerland (“CAS”) Anti-Doping Division (“CAS ADD”).

15. On 2 August 2024, the ITA informed the Athlete that the case would be referred to the CAS ADD.

III. PROCEEDINGS BEFORE THE COURT OF ARBITRATION FOR SPORT

A. The proceedings before the CAS ADD

16. On 17 September 2024, the ITA, on behalf of UWW, referred the matter to the CAS ADD for adjudication.
17. On 7 October 2024, the Athlete filed his Statement of Defence.
18. On 21 October 2024, the Parties were informed that Dr. Petra Pocrnic Perica, Arbitrator in Gingsins, Switzerland, had been appointed to act as the Single Judge in this procedure.
19. On 16 December 2024, the Parties were informed that the Single Judge deemed herself sufficiently informed to render a decision based solely on the Parties' written submissions, without holding a hearing.
20. On 24 February 2025, the Appellant received a notice of the decision from the CAS ADD under the UWW ADR in the matter of proceedings *CAS 2023/ADD/110* (the "Appealed Decision"), finding as follows:
- 1) *"The Request for Disciplinary Proceedings filed by International Testing Authority (ITA) on behalf of the United World Wrestling (UWW) on 17 September 2024 against Mr Riza Kayaalp is upheld.*
 - 2) *Mr Riza Kayaalp committed an Anti-Doping Rule Violation in accordance with the Articles 2.1/2.2 of the UWW Anti-Doping Rules (UWW ADR).*
 - 3) *In accordance with the Articles 10.2 UWW ADR, Mr Riza Kayaalp is sanctioned with a period of ineligibility of 4 (four) years starting from the date of notification of the present Decision.*
 - 4) *Mr Riza Kayaalp shall receive credit for period of Provisional Suspension served from 1 July 2024 against the period of ineligibility imposed by this Decision.*
 - 5) *All competitive results obtained by Mr Riza Kayaalp from 28 May 2024 until 1 July 2024 are disqualified, with all resulting consequences (including forfeiture of medals, points and prizes).*
 - 6) *The cost of the procedure, to be served to the Parties separately, shall be determined in accordance with Article A24 of the ADD Rules, if necessary.*

7) *Each party shall bear their own legal costs and other expenses incurred in connection with these proceedings.*

8) *All other motions or prayers for relief are dismissed.”*

B. The proceedings before the CAS Appeals Division

21. On 13 March 2025, the Appellant filed, pursuant to Articles R47 and R48 of the Code of Sports-related Arbitration (the “Code”), the Statement of Appeal at the CAS, against the Appealed Decision (the “Appeal”). The Appellant nominated Mr. Jeffrey G. Benz as an arbitrator.
22. On 14 March 2025, the CAS Court Office requested that the Respondent nominate an arbitrator within ten days.
23. On 17 March 2025, the ITA informed the CAS Court Office that the ITA would be acting on behalf of UWW in the matter.
24. On 24 March 2025, the Respondent nominated Ms. Carine Dupeyron as arbitrator.
25. On 31 March 2025, the CAS Court Office shared a copy of the “Arbitrator’s Acceptance and Statement of Independence” form completed by Ms. Carine Dupeyron with the Parties, and drew the Parties’ attention to an annex in which Ms. Dupeyron listed CAS cases in which she was acting as arbitrator, in which counsel for the Appellant and counsel for the Respondent were representing the parties. The CAS Court Office further noted that an arbitrator may be challenged under Article R34 of the Code if the circumstances give rise to legitimate doubts over her/his independence or impartiality.
26. On 4 April 2025, the Parties informed the CAS Court Office that they had conferred and agreed on a procedural schedule for the Appeal, pursuant to which the Appellant should file the Appeal Brief by 25 April 2025, the Respondent should file the Answer by 6 June 2025, and the hearing should take place between 16-26 June 2025 and not last more than a day and a half.
27. On 4 April 2025, the CAS Court Office noted the procedural schedule agreed by the Parties.
28. On 8 April 2025, the CAS Court Office noted that no challenge had been filed against the nomination of Ms. Carine Dupeyron as arbitrator within the deadline prescribed by Article R34 of the Code.
29. On 16 April 2025, the CAS Court Office informed the Parties that the Panel appointed to decide the Appeal was constituted as follows:

President: Mr. Vladimir Novak, Attorney-at-law in Brussels, Belgium

Arbitrators: Mr. Jeffrey G. Benz, Attorney-at-law and Barrister in London, United Kingdom
Ms. Carine Dupeyron, Attorney-at-law in Paris, France

30. On 17 April 2025, the CAS Court Office informed the Parties that the hearing would be held on 17 June 2025 at the CAS Court Office in Lausanne, Switzerland.
31. On 25 April 2025, the Appellant filed its Appeal Brief.
32. On 6 June 2025, the Respondent filed its Answer.
33. On 12 June 2025, the CAS Court Office shared a provisional hearing schedule with the Parties and informed them that Mr. Jeffrey G. Benz would attend the hearing remotely, subject to any objections of the Parties. The Parties were also invited to sign and return to the CAS Court Office an Order of Procedure for the present matter.
34. On 13 June 2025, the Parties returned a signed Order of Procedure.
35. On 17 June 2025, a hearing took place at the CAS Court Office in Lausanne, Switzerland. The Panel was assisted by Ms Lia Yokomizo and Ms Shanaize Yahiaoui, both CAS Counsel, and joined by the following participants:
 - For the Appellant:
 - Mr. Claude Ramoni, Counsel
 - Ms. Hacer Nurdan Yildiz, Counsel
 - Mr. Emre Bas, Counsel
 - Mr. Kaya Arda, Counsel
 - Mr. Riza Kayaalp, Appellant
 - Dr. A., Expert (joining remotely)
 - Ms. B., Witness
 - Dr. C., Witness (joining remotely)
 - Dr. D., Witness (joining remotely)
 - Dr. F., Witness (joining remotely)
 - Mr. Gün Arun, Interpreter

- For the Respondent:
 - Ms. Ayesha Talpade, Counsel
 - Mr. Anton Sotir, Counsel
- 36. At the hearing, the Parties agreed to the following schedule of witness examination:
 - Mr. Riza Kayaalp, the Appellant
 - Dr. A., the Appellant's Expert
 - Dr. C., the Appellant's Witness
 - Ms. B., the Appellant's Witness
 - Dr. D., the Appellant's Witness
 - Dr. F., the Appellant's Witness
- 37. The witness testimonies and arguments raised by the Parties during the hearing are, where relevant, discussed in the corresponding Merits section of the Award.
- 38. At the outset of the Hearing, the Parties confirmed that they had no procedural issues or objections (including in relation to the remote participation of Mr. Jeffrey Benz).
- 39. During the hearing, the Parties had ample opportunity to present their case, submit their arguments and answer the Panel's questions.
- 40. At the end of the hearing, the Parties stated that they had no objections as to the procedure adopted by the Panel and confirmed that their right to be heard had been respected.

IV. SUBMISSIONS OF THE PARTIES

41. The Appellant's Appeal Brief contained the following requests for relief:

“The athlete Riza Kayaalp applies for the Court of Arbitration for Sport to rule as follows:

I. The appeal is upheld.

II. The decision issued by the Anti-Doping Division of the Court of Arbitration for Sport on 24 February 2025 in the case CAS 2023/ADD/110 United World Wrestling (UWW) v. Riza Kayaalp is set aside.

- III. *Mr Riza Kayaalp is sanctioned for an antidoping rule violation with a period of ineligibility of a maximum duration of one year, with the period of Provisional Suspension served from 1 July 2024 being credited against such period of ineligibility.*
- IV. *United World Wrestling shall be ordered to bear all arbitration costs (if any) and to reimburse Mr Riza Kayaalp the minimum CAS Court Office fee of CHF 1,000.*
- V. *United World Wrestling shall be ordered to pay Mr Riza Kayaalp a contribution towards his legal and miscellaneous costs incurred within the framework of these proceedings in an amount that will be specified at a later stage.”*

42. In support of its relief, the Appellant relied on the following principal arguments:

- The ADRV was not intentional pursuant to Articles 10.2.1 to 10.2.3 of the UWW ADR; the maximum period of ineligibility that can be imposed on the Athlete is two years:
 - The source of the AAF has been established by the Athlete. The Athlete took Vastarel in order to treat the symptoms of tinnitus, dizziness, and vertigo, following the recommendation of Dr. F., who treated the Athlete at the emergency department of A Life Hospital in Ankara following a serious incident that occurred during a training session on 13 May 2024. Before taking Vastarel, the Athlete also obtained advice from his personal otorhinolaryngologist (also referred to as an ENT specialist), Dr. C., and his club doctor, Dr. D.
 - The Athlete did not act with “indirect intent” within the meaning of Article 10.2.3 of the UWW ADR. “Indirect intent” can only be established if an athlete manifestly disregards what they know to be a significant risk that their conduct might result in an ADRV. While the Athlete was aware of the risk that medication in general could contain a prohibited substance, he did not manifestly disregard that risk but carefully sought advice from several doctors, including his personal doctor and his club doctor, to ensure that Vastarel was safe to use in terms of doping. In particular, the Athlete’s exchange of text messages with Dr. D. in which he asked whether Vastarel could “harm” him constituted a question as to whether Vastarel could contain a prohibited substance.
 - CAS case-law demonstrates that the use of a product after obtaining confirmation by a sports doctor or another specialist that it was safe to use is not intentional as per Article 10.2.3 of the UWW ADR. CAS case-law has even recognised that athletes who used medication without any medical

supervision or performing any checks were not acting with intent. By contrast, indirect intent has only been found in dubious cases where the athlete relies on alleged advice from a doctor without providing supporting evidence, and/or in circumstances in which it appears doubtful that a doctor would have prescribed such a treatment, and/or in circumstances in which the athlete could clearly derive a sporting advantage from the treatment. None of these factors are present in the current proceedings.

- In Turkey, athletes receive a limited anti-doping education and place far greater trust in their physicians than they do in online research as a source of information about doping, therefore, confirming that the Athlete's enquiry with a specialist doctor cannot be considered manifest disregard of his duty of care.
- The Athlete bears No Significant Fault or Negligence pursuant to Article 10.6.2 of the UWW ADR, meaning that the period of ineligibility should be reduced to one year:
 - The level of care shown by the Athlete, as well as his serious health condition which was aggravated by an incident that occurred during training, are relevant factors to assess his level of fault when viewed in the totality of circumstances, particularly when considered against previous CAS findings of No Significant Fault or Negligence.

43. The Respondent's Answer contained the following requests for relief:

"The ITA, on behalf of United World Wrestling, hereby respectfully requests the Panel to rule as follows:

- 1) The appeal of Riza Kayaalp is dismissed.*
- 2) The decision rendered by the Anti-Doping Division of the Court of Arbitration for Sport on 24 February 2025 (case 2023/ADD/110 United World Wrestling (UWW) v. Riza Kayaalp) is confirmed.*
- 3) Riza Kayaalp is found to have committed an Anti-Doping Rule Violation pursuant to Article 2.1/2.2 of the UWW ADR.*
- 4) Riza Kayaalp is sanctioned with a period of ineligibility of four years from 1 July 2024 until 30 June 2028.*
- 5) All competitive results of Riza Kayaalp from 28 May 2024 until 1 July 2024 are disqualified with all resulting consequences, including forfeiture of medals, points and prizes.*

6) *The arbitration costs, if any, shall be borne by Riza Kayaalp.*

7) *United World Wrestling is granted a contribution to its legal and other costs.”*

44. In support of its relief, the Respondent relied on the following principal arguments:

- It is undisputed that the Athlete committed an ADRV as per Articles 2.1 and/or 2.2 of the UWW ADR.
- The Athlete fails to establish on the balance of probabilities that the ADRV was not indirectly intentional within the meaning of Article 10.2.3 of the UWW ADR (*i.e.*, that the Athlete “*knew that there was a significant risk that [his] conduct might constitute or result in an anti-doping rule violation and manifestly disregarded that risk*”). On the contrary, the Athlete did not take any precautionary measures when taking Vastarel:
 - The Athlete is a highly experienced international-level athlete who, at the time of the ADRV, was preparing for the 2024 Paris Olympic Games and was fully aware of his anti-doping obligations.
 - According to CAS case-law, athletes’ duty of care is heightened when using medication due to the significant risk that it may contain a prohibited substance.
 - The Athlete took Vastarel without exercising basic diligence, such as an internet search. In addition, the Athlete ignored clear warnings (i) on the packaging of Vastarel that it contained TMZ, and (ii) in the accompanying patient leaflet that it “*contains an active substance that may give a positive result in anti-doping tests*”.
 - As per the certified translation submitted by the Athlete in the first instance to the CAS ADD, he consulted his club doctor only as to the effectiveness and potential harmful effects of Vastarel, with no reference to anti-doping.
 - In any event, CAS case-law is clear that athletes cannot satisfy their duty of care by relying entirely on their doctor. Therefore, even if the Athlete had consulted his doctor as to whether Vastarel was safe to use in terms of doping, his conduct nevertheless demonstrated a wilful disregard of his anti-doping obligations and a high degree of recklessness.
- As the Athlete fails to establish that the ADRV was not intentional, the provisions on No Significant Fault or Negligence under Article 10.6.2 of the UWW ADR are not applicable. In any event, even if the Panel finds that the ADRV was not intentional, leading to a maximum period of ineligibility of two years, the Athlete is not entitled to a further reduction of such period, as objective (failing to read the

medicine's leaflet or cross-check its ingredients) and subjective (the Athlete's experience and the fact that the medicine's leaflet was in his native language) elements indicate a significant degree of fault.

V. JURISDICTION

45. The Appellant submitted that the CAS has jurisdiction under Article 13.2.1 of the UWW ADR, which is confirmed by Article A21 of the Arbitration Rules of the CAS ADD ("AR ADD").

46. Article A21 of the AR ADD provides as follows:

"Unless Article A15 (1) applies, the final decision may be appealed to the CAS Appeals Arbitration Division within 21 days from receipt of the notification of the final decision with reasons by mail or courier in accordance with Articles R47 et seq. of the Code of Sports-Related Arbitration, applicable to appeals procedures. In the absence of appeal, the final decision of the CAS ADD is binding and enforceable."

47. As the Appealed Decision was rendered by a Single Judge, Article A15 (1) does not apply.

48. Article R47 of the Code provides as follows:

"An appeal against the decision of a federation, association or sports-related body may be filed with CAS if the statutes or regulations of the said body so provide or if the parties have concluded a specific arbitration agreement and if the Appellant has exhausted the legal remedies available to it prior to the appeal, in accordance with the statutes or regulations of that body."

An appeal may be filed with CAS against an award rendered by CAS acting as a first instance tribunal if such appeal has been expressly provided by the rules of the federation or sports-body concerned."

49. Article 13.2.1 of the UWW ADR provides as follows:

"In cases arising from participation in an International Event or in cases involving International-Level Athletes, the decision may be appealed exclusively to CAS."

50. The Scope section of the UWW ADR provides as follows:

"Within the overall pool of Athletes set out above who are bound by and required to comply with these Anti-Doping Rules, the following Athletes shall be considered to be International-Level Athletes for the purposes of these Anti-Doping Rules, and, therefore, the specific provisions in these Anti-Doping Rules applicable to International-Level

Athletes (e.g., Testing, TUEs, whereabouts, and Results Management) shall apply to such Athletes:

- a) Athletes holding the annual international license issued by UWW;*
- b) Athletes included in the UWW Registered Testing Pool (or Testing Pool if applicable)."*

51. The Appellant confirms that the Athlete is an “*International-Level athlete under the UWW ADR*”, an assertion that has not been challenged by the Respondent.
52. No Party contested the jurisdiction of the CAS and all Parties fully participated in the proceeding.
53. The Panel notes that Article 13.2 of the UWW ADR (applicable to the Appealed Decision), read in conjunction with Article 13.2.1 of the UWW ADR (applicable to the Appellant as an *International-Level Athlete*), and Article A21 of the AR ADD, provide for an appeal to the CAS.
54. The Panel therefore concludes that the CAS has jurisdiction to entertain the present Appeal.

VI. ADMISSIBILITY

55. Article R49 of the Code provides as follows:

“In the absence of a time limit set in the statutes or regulations of the federation, association or sports-related body concerned, or in a previous agreement, the time limit for appeal shall be twenty-one days from the receipt of the decision appealed against. The Division President shall not initiate a procedure if the statement of appeal is, on its face, late and shall so notify the person who filed the document. When a procedure is initiated, a party may request the Division President or the President of the Panel, if a Panel has been already constituted, to terminate it if the statement of appeal is late. The Division President or the President of the Panel renders her/his decision after considering any submission made by the other parties.”

56. Article R51 of the Code provides as follows:

“Within ten days following the expiry of the time limit for the appeal, the Appellant shall file with the CAS Court Office a brief stating the facts and legal arguments giving rise to the appeal, together with all exhibits and specification of other evidence upon which it intends to rely. Alternatively, the Appellant shall inform the CAS Court Office in writing within the same time limit that the statement of appeal shall be considered as

the appeal brief. The appeal shall be deemed to have been withdrawn if the Appellant fails to meet such time limit.”

57. Article 13.6.1 of the UWW ADR provides as follows:

“The time to file an appeal to CAS shall be twenty-one (21) days from the date of receipt of the decision by the appealing party.”

58. The Panel notes that the Appealed Decision was notified to the Appellant on 24 February 2025. The Appellant filed the Statement of Appeal on 13 March 2025, and therefore within the 21-day time limit prescribed by the UWW ADR.

59. Pursuant to the procedural schedule agreed by the Parties on 4 April 2025, and approved by the CAS Court office, the Appellant filed the Appeal Brief on 25 April 2025 and thus timely.

60. The admissibility was not contested by the Respondent.

61. Accordingly, the present Appeal is admissible.

VII. APPLICABLE LAW

62. Article R58 of the Code provides as follows:

“The Panel shall decide the dispute according to the applicable regulations and, subsidiarily, to the rules of law chosen by the parties or, in the absence of such a choice, according to the law of the country in which the federation, association or sports-related body which has issued the challenged decision is domiciled or according to the rules of law that the Panel deems appropriate. In the latter case, the Panel shall give reasons for its decision.”

63. The Appealed Decision was issued under the UWW ADR, which is not disputed. Accordingly, pursuant to Article R58 of the Code and CAS jurisprudence, the Panel concludes that the UWW ADR (and the WADA Code) should apply as the primary applicable law to the present case.

64. The Panel notes that the facts giving rise to the case at hand took place in May 2024. The WADA Code and UWW ADR in force at that time (and currently) were the 2021 editions. In accordance with the principle of *tempus regit actum*, therefore, the UWW ADR (2021) and the WADA Code (2021) are applicable. The Panel may apply subsequent editions of the WADA Code and UWW ADR with accordance with the principle of *lex mitior* if appropriate.

65. In accordance with Article R58 of the Code, and given that the Respondent is domiciled in Switzerland, Swiss law will apply on a subsidiary basis.

VIII. MERITS

A. Scope of review (*de novo*)

66. According to Article R57 of the Code, “[t]he Panel has full power to review the facts and the law. It may issue a new decision which replaces the decision challenged or annul the decision and refer the case back to the previous instance”.
67. The Panel is mindful that the Appealed Decision was rendered by CAS ADD, by a CAS arbitrator and colleague. That said, the Panel will exercise its duty to conduct a *de novo* review of the present dispute within the scope set out above of the Appellant’s appeal, not least because the CAS ADD proceeding was undertaken without a hearing.

B. Analysis of the Panel

68. Articles 2.1 and 2.2 of the UWW ADR read as follows:

“The following constitute anti-doping rule violations:

2.1 Presence of a Prohibited Substance or its Metabolites or Markers in an Athlete’s Sample

2.1.1 It is the Athletes’ personal duty to ensure that no Prohibited Substance enters their bodies. Athletes are responsible for any Prohibited Substance or its Metabolites or Markers found to be present in their Samples. Accordingly, it is not necessary that intent, Fault, Negligence or knowing Use on the Athlete’s part be demonstrated in order to establish an anti-doping rule violation under Article 2.1.

2.1.2 Sufficient proof of an anti-doping rule violation under Article 2.1 is established by any of the following: presence of a Prohibited Substance or its Metabolites or Markers in the Athlete’s A Sample where the Athlete waives analysis of the B Sample and the B Sample is not analyzed; or, where the Athlete’s B Sample is analyzed and the analysis of the Athlete’s B Sample confirms the presence of the Prohibited Substance or its Metabolites or Markers found in the Athlete’s A Sample; or where the Athlete’s A or B Sample is split into two (2) parts and the analysis of the confirmation part of the split Sample confirms the presence of the Prohibited Substance or its Metabolites or Markers found in the first part of the split Sample or the Athlete waives analysis of the confirmation part of the split Sample.

2.1.3 Excepting those substances for which a Decision Limit is specifically identified in the Prohibited List or a Technical Document, the presence of any reported quantity

of a Prohibited Substance or its Metabolites or Markers in an Athlete's Sample shall constitute an anti-doping rule violation.

2.1.4 As an exception to the general rule of Article 2.1, the Prohibited List, International Standards or Technical Documents may establish special criteria for reporting or the evaluation of certain Prohibited Substances.

2.2 Use or Attempted Use by an Athlete of a Prohibited Substance or a Prohibited Method

2.2.1 It is the Athletes' personal duty to ensure that no Prohibited Substance enters their bodies and that no Prohibited Method is Used. Accordingly, it is not necessary that intent, Fault, Negligence or knowing Use on the Athlete's part be demonstrated in order to establish an anti-doping rule violation for Use of a Prohibited Substance or a Prohibited Method.

2.2.2 The success or failure of the Use or Attempted Use of a Prohibited Substance or Prohibited Method is not material. It is sufficient that the Prohibited Substance or Prohibited Method was Used or Attempted to be Used for an anti-doping rule violation to be committed.”

69. Articles 10.2 and 10.6 of the UWW ADR read as follows:

“10.2 Ineligibility for Presence, Use or Attempted Use, or Possession of a Prohibited Substance or Prohibited Method

The period of Ineligibility for a violation of Article 2.1, 2.2 or 2.6 shall be as follows, subject to potential elimination, reduction or suspension pursuant to Article 10.5, 10.6 or 10.7:

10.2.1 The period of Ineligibility, subject to Article 10.2.4, shall be four (4) years where:

10.2.1.1 The anti-doping rule violation does not involve a Specified Substance or a Specified Method, unless the Athlete or other Person can establish that the anti-doping rule violation was not intentional.

10.2.1.2 The anti-doping rule violation involves a Specified Substance or a Specified Method and UWW can establish that the anti-doping rule violation was intentional.

10.2.2 If Article 10.2.1 does not apply, subject to Article 10.2.4.1, the period of Ineligibility shall be two (2) years.

10.2.3 As used in Article 10.2, the term “intentional” is meant to identify those Athletes or other Persons who engage in conduct which they knew constituted an anti-doping

rule violation or knew that there was a significant risk that the conduct might constitute or result in an anti-doping rule violation and manifestly disregarded that risk. An anti-doping rule violation resulting from an Adverse Analytical Finding for a substance which is only prohibited In-Competition shall be rebuttably presumed to be not “intentional” if the substance is a Specified Substance and the Athlete can establish that the Prohibited Substance was Used Out-of-Competition. An anti-doping rule violation resulting from an Adverse Analytical Finding for a substance which is only prohibited In-Competition shall not be considered “intentional” if the substance is not a Specified Substance and the Athlete can establish that the Prohibited Substance was Used Out-of-Competition in a context unrelated to sport performance.

[...]

10.6 Reduction of the Period of Ineligibility based on No Significant Fault or Negligence

[...]

10.6.2 Application of No Significant Fault or Negligence beyond the Application of Article 10.6.1

If an Athlete or other Person establishes in an individual case where Article 10.6.1 is not applicable that he or she bears No Significant Fault or Negligence, then, subject to further reduction or elimination as provided in Article 10.7, the otherwise applicable period of Ineligibility may be reduced based on the Athlete or other Person’s degree of Fault, but the reduced period of Ineligibility may not be less than one-half of the period of Ineligibility otherwise applicable.

[...]”

70. The Athlete does not dispute that TMZ, a prohibited substance, was present in the A-sample that he provided on 28 May 2024 and therefore that he committed an ADRV under Article 2.1 and/or 2.2 of the UWW ADR.
71. The Athlete has not submitted that the presence of the prohibited substance in the A-sample is consistent with either a TUE or a retroactive TUE granted in accordance with Article 4.4 of the UWW ADR.
72. The Athlete has limited his case to arguing that (i) the ADRV was not intentional pursuant to Articles 10.2.1 to 10.2.3 of the UWW ADR (the “No Intent Defence”) and (ii) he bears No Significant Fault or Negligence for the ADRV pursuant to Article 10.6.2 of the UWW ADR (the “No Significant Fault or Negligence Defence”).
73. Pursuant to Article 10.2.1 of the UWW ADR, in the case of an ADRV under Article 2.1 or 2.2 of the UWW ADR, “[t]he period of Ineligibility [...] shall be four (4) years”.

74. Pursuant to Article 2.1.1 of the UWW ADR, “*it is not necessary that intent, Fault, Negligence or knowing Use on the Athlete’s part be demonstrated in order to establish an anti-doping rule violation under Article 2.1*”. Equally, pursuant to Article 2.2.1 of the UWW ADR, “*it is not necessary that intent, Fault, Negligence or knowing Use on the Athlete’s part be demonstrated in order to establish an anti-doping rule violation [under Article 2.2]*”.
75. However, where the Athlete demonstrates the absence of intent, or No Significant Fault or Negligence, the period of ineligibility will be reduced. Pursuant to Articles 10.2.1 and 10.2.2 of the UWW ADR, where “*the Athlete or other Person can establish that the anti-doping rule violation was not intentional [...] the period of Ineligibility shall be two (2) years*”. Pursuant to Article 10.6.2 of the UWW ADR, “*if an Athlete or other Person establishes [...] that he or she bears No Significant Fault or Negligence, then [...] the otherwise applicable period of Ineligibility may be reduced based on the Athlete or other Person’s degree of Fault, but the reduced period of Ineligibility may not be less than one-half of the period of Ineligibility otherwise applicable.*”
76. Accordingly, the Panel’s review will focus on whether the Athlete demonstrated to the requisite standard the absence of intent, or No Significant Fault or Negligence, in committing the ADRV and, therefore, whether and to what extent the corresponding period of ineligibility of four years should be reduced.

1. The ‘No Intent’ Defence

77. **Legal framework.** According to Article 10.2.3 of the UWW ADR, “[a]s used in Article 10.2, the term ‘intentional’ is meant to identify those Athletes or other Persons who engage in conduct which they knew constituted an anti-doping rule violation or knew that there was a significant risk that the conduct might constitute or result in an anti-doping rule violation and manifestly disregarded that risk.” Therefore, the notion “intentional” under Article 10.2 of the UWW ADR encompasses an athlete engaging in (i) conduct knowing that it constitutes a violation (*i.e.*, direct intent), but also (ii) conduct knowing that there is a significant risk that it might constitute or result in an ADRV (*i.e.*, recklessness or indirect intent) (*see, e.g., CAS 2023/A/9525, para. 73*).
78. CAS case-law has also defined ‘indirect intent’ as follows:
- “[...] *the Athlete took the risk of ingesting a Specified Substance when taking the Supplement and therefore of enhancing his athletic performance. In other words, whether with full intent or per ‘dolus eventualis’, the Panel finds that the Appellant’s approach indicates an intent on the part of the Appellant to enhance his athletic performance*” (*CAS 2011/A/2677, para. 26*).
- “[...] *the term ‘intent’ should be interpreted in a broad sense. Intent is established – of course – if the athlete knowingly ingests a prohibited substance. However, it suffices to*

qualify the athlete's behaviour as intentional, if the latter acts with indirect intent only, i.e. if the athlete's behaviour is primarily focused on one result, but in case a collateral result materializes, the latter would equally be accepted by the athlete. If – figuratively speaking – an athlete runs into a 'minefield' unharmed. However, an athlete acting in such (reckless) manner somehow accepts that a certain result (i.e. adverse analytical finding) may materialize and therefore acts with (indirect) intent.” (CAS 2012/A/2822, para. 8.14).

“To stay within the well-known 'minefield'-metaphor adopted by various CAS panels to describe the concept of indirect intent (e.g. CAS 2012/A/2822, para. 8.14; also quoted in CAS 2016/A/4609, para. 63): A professional athlete alleging that he or she does not know that pharmaceuticals or medications may contain prohibited substances would just be the same as alleging that one does not know that a minefield contains mines.” (CAS 2023/A/9525, para. 86).

79. **Factual circumstances.** The Athlete submits that he acted without intent (either direct or indirect) to violate the UWW ADR when he used Vastarel repeatedly over the course of approximately one week. The Athlete details the circumstances surrounding this period as follows:

- Since 2020, the Athlete has suffered from tinnitus, dizziness, and vertigo. On 13 May 2024, while training for the 2024 Paris Olympic Games, he suffered an injury in training that exacerbated these symptoms.
- On the evening of 13 May 2024, the Athlete sought treatment at the emergency department of A Life Hospital in Ankara, where he was prescribed a short-term treatment consisting of Vastarel 20 mg, Betaserc 24 mg, and Dramamine 50 mg.
- On the next day, 14 May 2024, the Athlete contacted his long-term personal doctor, Dr. C., who was familiar with his medical condition. During a telephone call, the Athlete explained the prescribed medication to Dr. C., who confirmed the effectiveness of Vastarel. Dr. C. then confirmed that the prescribed medication to take was “*Vastarel tb 2*1*” by WhatsApp message.
- The Athlete then exchanged WhatsApp messages with his club doctor, Dr. D. According to the certified translation submitted by the Athlete in the first instance to the CAS ADD, the exchange was as follows:

[Athlete]: *Vastarel tb 2*1
Ear specialist prescribed for tinnitus
I wanted to consult you about its effectiveness,
and whether it has any harmful effects*

[Dr. D.]: *It is effective, no harmful effects*

- On appeal the Athlete claimed that the certified translation departed from the “*literal translation*” of the exchange, and provided a “*Free English Translation*”:

[Athlete]: *Vastarel tb 2*1*
 Doctor, this is for my tinnitus
 The ear doctor recommended it, so I would like your opinion
 And will it do me any harm?

[Dr. D.]: *It works and cannot do you any harm*

- The Athlete proceeded to purchase Vastarel MR 35 mg (rather than, as subsequently pointed out by Dr. C., the prescribed Vastarel 20 mg) from a pharmacy in Ankara and commence the treatment, which he then discontinued on or around 22 May 2024.

80. The Athlete’s principal statements at the hearing on the factual circumstances surrounding the ADRV may be summarized as follows:

- Direct examination:
 - On 13 May 2024, the Athlete received a strong blow to his ear from his training partner which caused him to feel unwell. After this incident, he stopped training and returned to his home. His condition did not improve at home, causing him to travel to hospital with his wife that evening.
 - At the hospital, the Athlete explained to the emergency doctor that he was suffering from severe tinnitus, vertigo, and dizziness. The emergency doctor recommended three separate medicines to the Athlete, and advised him to check these medicines with his sports doctor on learning that the Athlete was an athlete. The Athlete returned home.
 - On 14 May 2024, the Athlete contacted Dr. C., a doctor for the Athlete’s family who specialises in otorhinolaryngology and had advised the Athlete on his tinnitus in the past. The Athlete informed Dr. C. of the three medicines that he had been prescribed and asked him which would be the most suitable to take, and whether the chosen medicine was safe to use in terms of doping. Dr. C. advised the Athlete that Vastarel would be the most appropriate medication to treat his tinnitus.
 - The Athlete made a further inquiry with Dr. D., the doctor at the Athlete’s sports club who knew the Athlete well. The Athlete asserted that would never take medication without the validation of Dr. D. The Athlete explained that Dr. C. had recommended Vastarel, and Dr. D. confirmed that this medication would not harm him and that he could use it.

- Cross-examination:

- The Athlete was generally aware that medication may contain prohibited substances, and he had always exhibited care around the use of medication.
 - Once the Athlete returned to training, he experienced severe headaches when his heart rate exceeded a certain level. Seven or eight days after first taking the medicine, the Athlete then consulted with Dr. D., who advised him to stop taking it. The Athlete did not list Vastarel on his DCF because he had stopped taking it, and from his perspective it was “*clean*” medication that he had taken following the advice of three separate doctors.
 - The Athlete reiterated that he had asked both the emergency doctor and Dr. C. whether Vastarel contained a prohibited substance, in response to which both doctors advised him orally that it should not cause him any trouble, but that he should confirm this with his sports doctor.
 - The Athlete slept for much of the period between him visiting the hospital (the evening of 13 May) and him consulting Dr. C. (the evening of 14 May). He consulted Dr. C. when the severity of his tinnitus had not improved upon waking up.
- Panel’s questions:
 - The Athlete confirmed that, although he had suffered from tinnitus and dizziness since 2020 and discussed these conditions with Dr. C., he had never previously taken medication for them. The Athlete explained that these conditions had never previously caused so much discomfort as they had following the training incident, and that previously he had waited for episodes of discomfort to resolve themselves.
81. The Athlete’s argument is, in essence, twofold. First, the Athlete claims that he consulted both his personal and club doctor as to whether Vastarel contained a prohibited substance. Second the Athlete argues that, as per CAS case-law, such consultations are sufficient to demonstrate that he did not manifestly disregard the risk of an ADRV and, therefore, satisfy his duty of care such that he acted without indirect intent.
82. **Medical consultation.** In respect of the first claim, the Athlete asserts that he “*indeed exercised care before starting using a drug to treat his tinnitus. He did not rely on the first prescription of Dr F., but contacted his family otorhinolaryngologist and ensured, before purchasing the product and starting using it, that it was safe by making a direct specific enquiry with Dr. D., club doctor specialising in sports medicine*”.
83. The Athlete claims that his personal doctor, Dr. C., “*verbally confirmed that the prescribed treatment, including Vastarel, was standard for inner ear issues and reassured him that there would be no issue in taking it*”, something which is supported

by Dr. C., who states in his witness statement that “[the Athlete] *also asked me if this medicine would cause any problems in terms of doping, and I told him that it would not cause any problems in terms of doping*”. The Athlete then messaged his club doctor, Dr. D., on WhatsApp to ask him whether the medication “*has any harmful effects*” (as per the certified translation of the exchange submitted by the Athlete in the first instance to the CAS ADD) or “*will [...] do me any harm*” (as per the “*Free English Translation*” submitted by the Athlete within his Appeal Brief).

84. The Athlete claims that these interactions, particularly the later exchange of messages with Dr. D., are “*specific inquiries seeking confirmation that the substance posed no harm or risk in terms of anti-doping*”, and provides various machine translations and subsequent ChatGPT interpretations to demonstrate how the reference to “harm” relates specifically to “*whether the product was forbidden*”. In their witness statements, both Dr. C. and Dr. D. also assert this to be the case, and that they were negligent by not reporting to the Athlete that Vastarel contains a prohibited substance:

- Dr. C. states that “*I wrongly recommended this drug without verifying whether it was an authorized product under anti-doping regulations. When [the Athlete] sent me a picture of the product box, I did not carry out any checks either.*”
- Dr. D. states that “[o]n 14 May 2024, when [the Athlete] sent me an SMS, I made a quick decision as I was working intensively. I did not thoroughly check the product ‘Vastarel’ and did not realise at that time that this product contained a banned substance Trimetazidine. I must say that I was not with the athlete and I replied to him very quickly, without making the necessary checks.”

85. Dr C.’s principal statements at the hearing may be summarized as follows:

- Direct examination:
 - On 14 May 2024, Dr C. received a telephone call from the Athlete. During this call, the Athlete explained that during training he had had an incident, following which he visited an emergency doctor due to symptoms of tinnitus and dizziness. The Athlete explained that the emergency doctor had prescribed Vastarel, Betaserc, and Dramamine, and asked the Athlete to take further advice from an ENT specialist. Based on Dr C.’s experience of treating tinnitus, he recommended Vastarel as the appropriate medication.
 - The Athlete asked Dr C. whether the medication was safe to use in terms of doping, and Dr C. assured him that he could use it. The Athlete relies on Dr C. not to recommend a prohibited substance, and Dr C. made a mistake in not checking whether Vastarel contained a prohibited substance.
- Cross-examination:

- Dr C. did not check the medication, at the time of or after his call with the Athlete, because he had mentally classified it as a clean medicine, and was focused on the Athlete's symptoms.
 - Vastarel was the first medication that Dr C. had prescribed to the Athlete. Dr C. had not previously prescribed medicine to the Athlete because his symptoms were not sufficiently severe.
 - Dr. C. knew that the Athlete had taken Vastarel as a result of his advice, but had not been aware that the Athlete had stopped taking Vastarel after a few days. He would have advised the Athlete to continue to take the medication for at least three months.
- Panel's questions:
 - Dr. C. does not treat any other professional athletes. He has previously checked for the Athlete whether medications contained prohibited substances by researching their active components on the internet.
 - Dr. C. does not keep a patient file on the Athlete, but does remember the existence of hearing tests and the results of an MRI scan, which suggested that the Athlete was suffering from a loss of hearing.
 - The Athlete had not previously asked Dr. C. any questions with respect to anti-doping matters.

86. Dr. D.'s principal statements at the hearing may be summarized as follows:

- Direct examination:
 - Dr. D. is in charge of the health of the athletes of the ASKÍ Sports Club. He works at the club for two and a half hours each week. He consults athletes on matters of both anti-doping and physical complaints. In matters of anti-doping, he gives athletes who consult him information and advice about the products that they are taking.
 - The Athlete contacted Dr. D. via WhatsApp, explained that another doctor had advised him to take Vastarel, and asked whether that medicine would benefit or harm him. Dr. D. explained to the Athlete that Vastarel was commonly used to treat tinnitus and dizziness, and that because it would not affect his performance by increasing his stimulation or strength, he could use it without any doubt.
 - The Athlete had previously consulted Dr. D. as to his opinion on medication, including two days before the day on which he had asked about

Vastarel. Dr. D. stressed that he considered the Athlete to be very meticulous, and to have never ingested a medicine without consulting between three and five doctors beforehand.

- Six or seven days after starting the treatment, the Athlete told Dr. D., that he was suffering from strong headaches. Dr. D. advised the Athlete to stop using Vastarel and make further checks regarding next steps.
- Cross-examination:
 - Alongside his work at the ASKİ Sports Club, Dr. D. is a doctor at a family health institution. He is responsible for providing anti-doping advice to roughly 400-450 athletes at the sports club, although he stressed that many of these athletes also consult their own doctors.
 - To verify that a medicine is safe to use, Dr. D. typically checks its active compounds against the publications and website of the TADC.
 - In the context of the Athlete's status as a professional athlete, Dr. D. interpreted his question "*Ve bana zararı olurmu*" as a reference to the potential anti-doping implications of taking the medicine. Dr. D. replied to this message quickly, stating that Vastarel would cause the Athlete no harm as he believed it to be an efficient medicine that had been prescribed by a specialist with respect to tinnitus, and was not aware of its active compound. Dr. D. then forgot to check the medicine following this conversation.
 - Dr. D. had previously worked closely with the Athlete, and had investigated other products that the Athlete had asked him about.
- Panel's questions:
 - Dr. D. clarified that when checking medication on behalf of an athlete, he first focused on its effectiveness in treating the athlete's specific complaint, and then checked whether it contained any prohibited substances.
 - Dr. D. did not find out that Vastarel contained a prohibited substance until the Athlete informed him on 1 July 2024.
 - Dr. D. would have checked the active compounds of Vastarel if the Athlete had not mentioned that an ENT specialist had already prescribed the medicine to him. In his capacity as a club doctor, Dr. D. frequently refers athletes to specialists, who know that they are athletes and adapt their recommendations and advice accordingly.

87. The Panel finds that, taken in its entirety, the evidence adduced by the Athlete demonstrates a genuine attempt of the Athlete to consult his personal and club doctor respectively as to whether Vastarel was safe to use in terms of doping. The Respondent does not dispute that the Athlete contacted both of these doctors prior to ingesting Vastarel. The reference via WhatsApp message to “harm” contains a degree of ambiguity. However, the testimony of Dr. D. as to his interpretation of the message, alongside his role in advising athletes at the ASKÍ Sports Club on anti-doping matters, suggests on the balance of probabilities that the Athlete intended to ask him if there were any anti-doping concerns vis-à-vis Vastarel, and relied on his answer. This is further evidenced by the fact that the Athlete (i) contacted Dr. D. having already consulted with two doctors and (ii) has a track record of strong opposition to doping. That Dr. D. did not carry out even the most basic research on Vastarel before confirming that it was safe for the Athlete to use represents a serious professional failure.
88. **The ‘manifest disregard’ test.** The question as to whether the Athlete’s medical prescription and attempts to consult multiple doctors are sufficient to demonstrate that he did not “*manifestly disregard*” the risk that he might commit an ADRV is more complex.
89. The Appellant quotes CAS case-law “*where panels have ruled that the use of a product after obtaining a confirmation by a sport doctor or another specialist that the substance was safe to use was not intentional*” (original emphasis) to argue that “*indirect intent’ has been admitted only in ‘dubious cases’ showing a lack of truthfulness by athletes relying on an alleged advice by a doctor without providing supporting evidence, and/or in circumstances where it appears highly doubtful that a doctor would have prescribed such a treatment, and/or in circumstances where the athletes could clearly derive a sporting advantage from the treatment allegedly recommended by a doctor*”.
90. The Appellant’s additional arguments at the hearing on the question of manifest disregard may be summarized as follows:
- The Athlete knew that there was a significant risk that his conduct might constitute an ADRV, but exercised care in checking with his doctors that it was safe to take Vastarel. In this respect, the Athlete was extremely poorly served by Dr. C. and Dr. D., not in the least because the emergency doctor prescribed him two alternatives to Vastarel (Betaserc and Dramamine) to treat his tinnitus, neither of which contains a prohibited substance. This fact prevented the Athlete from applying for a retroactive TUE due to Article 4.2(c) of the International Standard for TUEs.
 - The CAS case-law quoted by the Respondent to establish that athletes have ultimate responsibility for what they ingest and cannot delegate this responsibility to their doctors is only applicable in respect of the degree of athletes’ *fault*, rather than their *intent*.

- Applying the rule that an athlete can never rely on their doctor for the purposes of intent would eliminate all cases in which an ADRV is unintentionally committed in respect of the ingestion of medicine. A genuine medicine would always be accompanied by packaging and/or a leaflet allowing the athlete to personally verify the ingredients.
 - A finding that the Athlete did not display manifest disregard as he relied on his doctors would not open the floodgates to athletes who could claim, *a posteriori*, that they did the same and therefore acted without intent. The Athlete has adduced contemporaneous evidence that he consulted his doctors specifically on whether Vastarel was safe to take vis-à-vis anti-doping.
91. On the contrary, the Respondent submits that even if the Athlete had genuinely attempted to contact his doctors on the issue of anti-doping with respect to Vastarel, *“assurances from a club doctor do not relieve athletes of their duty to conduct at least the most basic checks. CAS case law is abundantly clear that athletes cannot hide behind their doctor’s mistakes”*.
92. The Respondent then asserts that the Athlete failed to carry out *“the most basic and obvious steps”* with respect to the medicine that he ingested, and that the failure to take any of these steps demonstrated *“staggering”* recklessness qualifying as indirect intent within the meaning of Article 10.2.3 of the UWW ADR:
- A simple internet search would have allowed the Athlete to identify that Vastarel contains the prohibited substance TMZ.
 - The packaging of Vastarel expressly stated that it contains TMZ.
 - Based on open sources, the leaflet for Vastarel, which is available in Turkish (*i.e.*, the Athlete’s native language), expressly warned athletes that it *“contains an active substance that may give a positive result in anti-doping tests”*.
93. The Respondent’s additional arguments at the hearing on the question of manifest disregard may be summarized as follows:
- The ADRV committed by the Athlete is a textbook example of an experienced international athlete who did not carry out basic and essential checks which are of paramount importance in the context of anti-doping. The relevant provisions on intent in the UWW ADR refer only to athletes who demonstrate knowledge of a significant risk and manifestly disregard that risk, and not to doctors or other third parties.
 - CAS case-law is clear that an athlete’s duty of care is heightened when using prescribed medicine because of the inherent risk that it might contain a prohibited substance. There is no need for the Athlete to have had an extensive anti-doping

education to be aware of this risk — it was manifestly obvious to the Athlete that he should check medicines prescribed to him. CAS case-law is consistent that athletes have a personal obligation to satisfy the duty of care required when taking medicine, but the Athlete’s testimony established that he does not personally verify any substance that he takes, instead relying entirely on his doctors and therefore displaying manifest disregard as to this risk.

- A finding that the Athlete did not display manifest disregard as he relied on his doctors would open the floodgates for athletes to hide behind their doctors, giving them “carte blanche” to take any medication which they are prescribed without carrying out any further checks.

94. **CAS case law.** Over the course of their written submissions and pleadings on the question of manifest disregard, the Appellant and the Respondent have referred to factual similarities between the present matter and the following CAS awards involving the ingestion of medication, which the Panel summarizes below for ease of reference:



TAS / CAS

TRIBUNAL ARBITRAL DU SPORT
COURT OF ARBITRATION FOR SPORT
TRIBUNAL ARBITRAL DEL DEPORTE

#	Case	Date	Prohibited Substance/Method	Athlete's Checks	Court's Findings on Intent	Final Sanction
1.	<i>CAS 2023/A/9482, CAS 2023/A/9564, & CAS 2023/A/9592</i>	18 March 2025	Closterbol (non-specified substance); the athlete purchased a cream from a pharmacy to treat a cut on her hand	The athlete carried out no checks whatsoever when taking the medication. She did not read the label, check the ingredients, consult a doctor, or conduct any internet research on the cream, despite using it on two separate occasions	The athlete acted with intent, more likely indirect intent (<i>dolus eventualis</i>) rather than direct intent, though the distinction was immaterial for determining the consequences of her anti-doping rule violation	Four-year period of ineligibility
2.	<i>CAS 2022/A/9286</i>	October 2023	Plasmapheresis (prohibited method); the procedure was recommended to the athlete by a doctor, for pain management following a biopsy	The athlete did not carry out sufficient checks regarding plasmapheresis. She did not check if it was prohibited, did not specifically ask her doctors about anti-doping implications, and failed to contact RUSADA about plasmapheresis despite contacting them about other medications on the same day of the procedure	No intent (agreed upon by the parties)	Twelve-month period of ineligibility (reduced as the athlete voluntarily admitted the violation)
3.	<i>CAS 2023/A/9525</i>	29 September 2023	Furosemide (specified substance); the athlete was prescribed pills with weight-loss properties by her doctor for issues with bloating. Eight	The athlete carried out no checks. She did not research the ingredients at any time between receiving the prescription and the competition, and completely relied on her doctor's recommendation without verifying whether the medication	There were strong indications of direct intent, but even if direct intent was not established, the prerequisites for indirect intent	Four-year period of ineligibility

#	Case	Date	Prohibited Substance/Metabolite	Athlete's Checks	Court's Findings on Intent	Final Sanction
			months later, she ingested one pill on the day before a competition, allegedly to treat a urinary tract infection	contained prohibited substances	were "clearly fulfilled"	
4.	<i>CAS 2021/A/8458</i>	31 March 2023	Drostanolone metabolite (non-specified substance); the athlete received an injection, administered by an orthopaedic doctor, to treat a serious knee injury	The athlete carried out no checks whatsoever when taking the medication. She did not ask what was being injected, did not read the ingredients, did not cross-check against the Prohibited List, did not conduct any internet research, and did not ask the doctor to verify if the substance was prohibited (only warning the doctor that she was an athlete)	Indirect intent	Four-year period of ineligibility
5.	<i>CAS 2021/A/7760</i>	4 October 2021	Furosemide (specified substance); the athlete inadvertently ingested a pill prescribed to his wife, which she had returned to the wrong medicine box compartment. The athlete believed he was taking a Litacold pill to treat a headache	The athlete did not perform any meaningful checks. He did not read the label on the medicine strip before taking the pill and took it from a loose strip rather than the original box	No intent (agreed upon by the parties as UEFA could not prove intent to the standard of comfortable satisfaction)	Nine-month period of ineligibility

#	Case	Date	Prohibited Substance/Method	Athlete's Checks	Court's Findings on Intent	Final Sanction
6.	<i>CAS 2020/A/7536</i>	15 June 2021	Growth Hormone-Releasing Peptide 6 (non-specified substance); a local coach at a competition gave the athlete an unlabelled bottle of cream to treat severe blistering on her feet	The athlete carried out no checks when taking the cream. She did not verify its contents, did not confirm the credentials of the person who gave it to her, did not consult any medical professionals about it, and continued using the unlabelled cream for months without investigation	Indirect intent	Four-year period of ineligibility
7.	<i>CAS 2018/A/5739</i>	20 February 2019	Furosemide (specified substance); the athlete inadvertently ingested a pill prescribed to his roommate (mixed up in his medicine basket by the housekeeper), which he mistook for an over-the-counter painkiller to treat a headache	The athlete performed no checks when taking the medication. He removed what he thought was paracetamol/panadol from a blister pack without verifying its identity, despite the fact that product information would have been visible on the packaging	No intent (no evidence presented that the athlete acted in an intentional manner)	Twenty-month period of ineligibility
8.	<i>CAS OG AD 18/004</i>	9 August 2018	Fenoterol (specified substance); the athlete ingested the prohibited substance via an asthma inhaler prescribed to him by his	The athlete asked the national team doctor if the inhaler would cause a doping problem, received confirmation it wouldn't if used as prescribed, informed his club doctor about using inhalers, and checked multiple times	No intent (agreed upon by the parties)	Eight-month period of ineligibility

#	Case	Date	Prohibited Substance/Method	Athlete's Checks	Court's Findings on Intent	Final Sanction
			national team doctor	about any additional obligations. However, he didn't personally verify the ingredients		
9.	<i>CAS 2017/A/5301 & CAS 2017/A/5302</i>	8 June 2018	Letrozole (specified substance); the athlete contended that her mother's anti-cancer medication (which contains the prohibited substance) was mistakenly mixed into a family meal during food preparation	The athlete entrusted her mother to prepare the meal she ate, and so her mother's fault is imputed to the athlete. The athlete's mother, a pharmacist by profession, must have been aware of the doping warning on the back of the box of her medication, and knew that her daughter was a high-profile tennis player. The athlete could and should have known that the box of her mother's medication was stored in the kitchen close to the spot where her mother was cooking, and should have suggested basic actions to avoid contamination	No intent (not claimed by the parties)	Ten-month period of ineligibility
10.	<i>CAS 2017/A/5015 & CAS 2017/A/5110</i>	21 August 2017	Clostebol (non-specified substance); the athlete was given cream to apply to a sunburned lip by her team doctor, who had purchased it from a pharmacy near	The athlete only asked the team doctor if the medication was safe to use. She did not examine the packaging (which had a doping warning), check the ingredients, or conduct any internet search about the substance	No intent (not claimed by the parties)	Eighteen-month period of ineligibility

#	Case	Date	Prohibited Substance/Methode	Athlete's Checks	Court's Findings on Intent	Final Sanction
			their training camp			
11.	<i>CAS 2016/A/4716</i>	9 March 2017	Methylhexanamine (specified substance); the athlete had been taking various pre-workouts and supplements given to him by clients of his gym. It was concluded that one of these must have contained the prohibited substance	The athlete did not make any checks as to what he was ingesting or keep any record of the supplements that he was taking. He relied upon his lack of knowledge of what he could or could not lawfully take or ingest, but without making any enquiries at all with anyone	Indirect intent	Four-year period of ineligibility
12.	<i>CAS 2016/A/4609</i>	19 January 2017	Nandrolone metabolite (non-specified substance); following a cycling accident, the athlete received an intramuscular injection from a doctor	The athlete claimed to have asked his doctor and team doctor (primarily the team massager) about the medication (uncorroborated by any evidence except for his own testimony), but did not verify this information himself, did not conduct any internet search, and made no other attempt to check if the medication contained a prohibited substance	Indirect intent	Four-year period of ineligibility
13.	<i>CAS 2016/A/4512</i>	21 November 2016	Clomiphene (specified substance); the athlete ingested prohibited drugs for the purpose	The athlete applied for a TUE for medication to treat his infertility. The TUE was declined, but the athlete continued to take the medication	Indirect intent	Four-year period of ineligibility

#	Case	Date	Prohibited Substance/Method	Athlete's Checks	Court's Findings on Intent	Final Sanction
			of treating his infertility			
14.	<i>CAS 2016/A/4643</i>	30 September 2016	Meldonium (non-specified substance); the athlete was prescribed the prohibited substance by her former doctor (many years before it became prohibited) as a cardio-protector and anti-diabetic	The athlete relied on her doctor (2006-2012) and then her agent to check her medication against the Prohibited List. The athlete did not give her agent instructions as to how this task had to be performed or establish any procedure to supervise and control his actions	No intent (no question of intent was before the panel)	Fifteen-month period of ineligibility
15.	<i>CAS 2015/A/4233</i>	11 July 2016	Salbutamol (specified substance); the athlete ingested the substance via a nebuliser on his team doctor's advice to alleviate asthma-related airway obstruction	The athlete conducted minimal independent checks, primarily relying on his doctor's prescription and medical advice	No intent (agreed upon by the parties)	Two-month period of ineligibility
16.	<i>CAS 2013/A/3327 & CAS 2013/A/3335</i>	11 April 2014	Nikethamide (specified substance); the athlete's mother purchased over-the-counter glucose tablets containing the prohibited substance from a pharmacy on his behalf	The athlete relied on the fact that his mother had told him that the pharmacist had confirmed the tablets were not prohibited for competing athletes. He looked at the packaging but mistakenly assumed "nikethamide" was the French for "nikotinamid" (an ingredient in his regular glucose powder),	No intent (agreed upon by the parties)	Four-month period of ineligibility (reduced from two years due to No Significant Fault or Negligence under 2009 World Anti-

#	Case	Date	Prohibited Substance/Method	Athlete's Checks	Court's Findings on Intent	Final Sanction
				and did not check this further, or read the enclosed leaflet. The athlete did consult his trainer about the medication, but sought nutritional rather than anti-doping advice. He did not consult anti-doping resources		Doping Code)
17.	<i>CAS 2011/A/2582</i>	29 May 2012	Methandienone (non-specified substance); the athlete was prescribed pills by a doctor to prevent growth slowdown	The young and inexperienced athlete carried out no checks on the medication - he simply trusted his father and doctor without verifying whether it contained prohibited substances	N/A (not applicable under 2009 World Anti-Doping Code)	Twelve-month period of ineligibility (reduced from two years due to No Significant Fault or Negligence under 2009 World Anti-Doping Code)
18.	<i>CAS 2008/A/1488</i>	22 August 2008	Hydrocholorthiazide and Amiloride (both non-specified substances); the athlete was prescribed medication by her doctor for pre-menstrual symptoms, hypertension, and oedemas	The athlete only asked her doctor (not a specialist in sports medicine) if the medication would improve her performance, and instructed her mother to ask at the pharmacy if any ingredients would cause a positive test. She did not check the Prohibited List or consult anti-doping resources	N/A (not applicable under 2003 World Anti-Doping Code)	Two-year period of ineligibility (not reduced due to No Significant Fault or Negligence under 2003 World Anti-Doping Code)



TAS / CAS

TRIBUNAL ARBITRAL DU SPORT
COURT OF ARBITRATION FOR SPORT
TRIBUNAL ARBITRAL DEL DEPORTE

95. **Analysis and findings.** Against this background, the Panel finds as follows.
96. First, the Panel accepts that it is an established principle in CAS jurisprudence that “[...] [i]n consideration of the fact that athletes are under a constant duty to personally manage and make certain that any medication being administered is permitted under the anti-doping rules, the prescription of a particular medicinal product by the athlete’s doctor does not excuse the athlete from investigating to their fullest extent that the medication does not contain prohibited substances” (CAS 2008/A/1488, para. 12; see also CAS 2016/A/4609, para. 76).
97. It follows that fact that the Athlete consulted his doctors regarding medication does not provide a “carte blanche” for him to take such medication, but is a relevant factor that can be taken into consideration when determining whether the athlete manifestly disregarded the risk of an ADRV. The Panel notes that, as rightly highlighted by the Appellant, of the three CAS awards cited by the Respondent in its Answer to support the proposition that athletes cannot hide behind their doctor’s mistakes, two (CAS 2017/A/5301 & CAS 2017/A/5302, and CAS OG AD 18/004) concerned athletes who were considered by the CAS to have acted without intent, while the third (CAS 2008/A/1488) did not consider the question of intent, which was not a relevant consideration under the then-applicable 2003 World Anti-Doping Code. Put simply, reliance on doctors could in certain circumstances exclude intent, but not necessarily fault.
98. Second, from the comprehensive survey of CAS jurisprudence above, it is clear that to act with manifest disregard, an athlete must show an *utmost* lack of care as to the risk of committing an ADRV. In each of the seven awards listed above in which the full four-year period of ineligibility was imposed, the relevant athlete failed to prove on the balance of probabilities that they had carried out any active checks whatsoever on the medication or other substance that they had ingested.¹
99. Notably, of the awards in which a period of ineligibility of two years or less was imposed, the question of intent was not subject to extended consideration by the relevant

¹ CAS 2023/A/9482 *Joanna Evans v. World Aquatics*, CAS 2023/A/9564 *WADA v. World Aquatics & Joanna Evans*, & CAS 2023/A/9592 *World Aquatics v. Joanna Evans*; CAS 2023/A/9525 *WADA v. Anti-Doping Control Agency of Bosnia and Herzegovina & Doris Živković*; CAS 2021/A/8458 *WADA v. NADA & Rani Rana*; CAS 2020/A/7536 *Ashley Kratzer v. ITF*; CAS 2016/A/4716 *Cole Henning v. SAIDS*; CAS 2016/A/4609 *WADA v. Italian NADA & Dane Pereira*; and CAS 2016/A/4512 *WADA v. TFF & Ahmet Kuru*. While the relevant athletes in CAS 2023/A/9525, CAS 2016/A/4609, and CAS 2021/A/8458 claimed to have consulted a doctor, the circumstances in which they did so in each matter cast significant doubt on the legitimacy of this claim, while in any case there is no indication that they attempted to independently verify the status of their medication vis-à-vis anti-doping from three (or even two) separate medical professionals.

sole arbitrator/panel, being expressly or implicitly undisputed by the relevant parties.² These are all self-evidently cases in which the relevant athlete failed to carry out appropriate checks (appropriate checks would, *ipso facto*, have prevented the ADRV), but this did not – at least in the eyes of the relevant parties – equate to a level of recklessness constituting a manifest disregard of the risk of committing an ADRV.

100. Third, the Respondent argues in its Answer that the “*most basic and obvious checks would have alerted the Athlete as to the prohibited nature of the product and averted the ADRV*”. While this may well be correct, imposing this standard on each of the cases listed above would in essence eliminate the possibility of committing an ADRV without intent in all but the most extreme and unlikely circumstances. It has previously been noted by CAS case-law (albeit in the context of fault rather than intent) that:

“[i]t is important to recognise that, in theory, almost all anti-doping rule violations relating to the taking of a product containing a prohibited substance could be prevented. The athlete could always (i) read the label of the product used (or otherwise ascertain the ingredients), (ii) cross-check all the ingredients on the label with the list of prohibited substances, (iii) make an internet search of the product, (iv) ensure the product is reliably sourced and (v) consult appropriate experts in these matters and instruct them diligently before consuming the product.” (CAS 2013/A/3327 & CAS 2013/A/3335, para. 74).

101. This is a helpful lens through which the present question of manifest disregard can be viewed. Carrying out all five of the checks listed above would invariably eliminate almost all ADRVs. Carrying out none of these checks would constitute manifest disregard and thus, at the very least, indirect intent. There must, however, be a middle ground, where if the athlete can demonstrate on the balance of probabilities that they genuinely attempted to carry some of these checks, then the degree of fault or negligence displayed might not be sufficient to constitute manifest disregard. This is inevitably a case-by-case assessment.

102. Fourth, as the Respondent highlighted in its Answer, CAS’ case-law has repeatedly adopted the “minefield” metaphor in respect of indirect intent:

“[...] the term ‘intent’ should be interpreted in a broad sense. Intent is established – of course – if the athlete knowingly ingests a prohibited substance. However, it suffices to qualify the athlete’s behaviour as intentional, if the latter acts with indirect intent only, i.e. if the athlete’s behaviour is primarily focused on one result, but in case a collateral result materializes, the latter would equally be accepted by the athlete. If – figuratively speaking – an athlete runs into a ‘minefield’ unharmed. However, an athlete acting in

² CAS 2022/A/9286; CAS 2021/A/7760; CAS 2018/A/5739; CAS OG AD 18/004; CAS 2017/A/5301 & CAS 2017/A/5302; CAS 2017/A/5015 & CAS 2017/A/5110; CAS 2016/A/4643; and CAS 2015/A/4233.

such (reckless) manner somehow accepts that a certain result (i.e. adverse analytical finding) may materialize and therefore acts with (indirect) intent.” (CAS 2012/A/2822, para. 8.14).

“To stay within the well-known ‘minefield’-metaphor adopted by various CAS panels to describe the concept of indirect intent (e.g. CAS 2012/A/2822, para. 8.14; also quoted in CAS 2016/A/4609, para. 63): A professional athlete alleging that he or she does not know that pharmaceuticals or medications may contain prohibited substances would just be the same as alleging that one does not know that a minefield contains mines.” (CAS 2023/A/9525, para. 86).

103. This metaphor can helpfully be extended in respect of the current proceedings. The Athlete’s attempt to verify prescribed medication through consultations with several doctors, demonstrates an awareness of the proverbial “minefield”. His attempts to navigate said minefield were clumsy and ineffective, but nevertheless do not constitute a manifest disregard of the minefield’s existence, particularly in the context of a genuine medical issue which was confirmed with written evidence and oral testimony at the hearing.
104. Finally, the Panel rejects the point of policy raised by the Respondent during the hearing that a finding of no intent would open the floodgates for athletes to hide behind their doctors. This is manifestly not the case:
- The Athlete at hand is not ‘hiding’ behind his doctors *ex post* with a self-serving and questionable defence. He has submitted detailed contemporaneous evidence of undertaking genuine (albeit ineffective) checks during and in the aftermath of a medical episode, which were confirmed by cross- and Panel-examination at the hearing.
 - The finding of no intent in relation to reliance on doctors would not be unprecedented, as shown by the comprehensive analysis of the CAS case law above.
 - A finding of intent under the UWW ADR is not required to provide an appropriate deterrent against future displays of fault or negligence by athletes.
 - The finding of no intent does not result in no sanction – the Athlete was already prevented from competing in the 2024 Paris Olympic Games and would still be subject to a sanction of ineligibility, albeit not more than 2 years.
105. Accordingly, the Panel finds that the Athlete has discharged his burden of proof to the requisite legal standard in establishing the absence of intent for the ADRV pursuant to Article 10.2.3 of the UWW ADR. The Athlete, therefore, can benefit from the reduction of the period of ineligibility set out in Articles 10.2.1 and 10.2.2 of the UWW ADR.

2. The No Significant Fault or Negligence Defence

106. According to Article 10.6.2 of the UWW ADR, the applicable period of ineligibility may be reduced based on the Athlete's degree of fault, but the reduced period of ineligibility may not be less than one-half of the period of ineligibility otherwise applicable. As the period of ineligibility otherwise applicable is two years, the final period of ineligibility may not be less than one year.
107. In deciding a sanction between 12 to 24 months, the Panel notes the following objective and subjective factors (taking inspiration from the case *CAS 2013/A/3327 & CAS 2013/A/3335*). The objective element describes the standard of care that could be expected from a reasonable person in the Athlete's situation. The subjective element describes what could be expected from that particular athlete, in light of his/her personal capacities.
- As discussed above in the context of intent, almost all ADRVs relating to the consumption of a medicine containing a prohibited substance could be prevented. The athlete could always (i) read the label or leaflet of the medicine used (or otherwise ascertain the ingredients); (ii) cross-check all the ingredients on the label/leaflet with the list of prohibited substances; (iii) carry out an online search of the medicine; (iv) ensure the medicine is reliably sourced; and (v) consult appropriate experts in these matters prior to usage of the medicine. The Athlete failed to undertake many of these checks, instead entirely relying on his doctors. In doing so, the Athlete certainly failed to fully discharge his duty. That said, the Athlete did demonstrate on the balance of probabilities a genuine willingness to check compliance with anti-doping rules, even though such checks ultimately proved ineffective.
 - The Athlete furnished evidence that shows on the balance of probabilities that he suffered from a serious medical incident around the time he was prescribed the prohibited substance at issue, which ought to be taken into account in evaluating the surrounding circumstances.
 - The Athlete is an elite international athlete who has participated in numerous sporting events and undergone doping controls on multiple occasions. The Athlete himself testified that he is seen as a sporting and anti-doping role model in Turkey. From a subjective standpoint, he should know better.
 - The Athlete was prescribed medication by Turkish doctors in his native language and was thus not subject to any compelling language or environmental challenges.
108. Based on a weighing of the above factors, the Panel considers that a sanction of 18 months is appropriate and proportionate.

109. Pursuant to Article 10.13.2 of the UWW ADR, if a provisional suspension is respected by the Athlete, then they shall receive credit for such period of provisional suspension against any period of ineligibility which may ultimately be imposed. In addition, the Athlete shall receive credit for a period of ineligibility served pursuant to an appealed decision against any period of ineligibility which may ultimately be imposed on appeal.
110. The Athlete has been provisionally suspended from 1 July 2024 to 24 February 2025 and is currently serving the period of ineligibility imposed by the Appealed Decision from 24 February 2025. There is no evidence that the Athlete – who has retired from professional sports – has not respected the provisional suspension or the period of ineligibility imposed by the Appealed Decision. As a consequence, the 18-month period of ineligibility imposed by this Award also runs from 24 February 2025. In accordance with Article 10.10 of the UWW ADR, the Panel also upholds the disqualification with all associated consequences, including the forfeiture of any medals, prizes, and points, of all competitive results obtained by the Athlete between 28 May 2024 (the date the positive sample was collected from the Athlete) and 1 July 2024 (the commencement date of the Athlete’s provisional suspension).

IX. COSTS

(...)

ON THESE GROUNDS

The Court of Arbitration for Sport rules that:

1. The appeal filed by Mr. Riza Kayaalp on 13 March 2025 against United World Wrestling with respect to the decision of the Anti-Doping Division of the Court of

Arbitration for Sport under the United World Wrestling Anti-Doping Rules in the matter of proceedings *2023/ADD/110 United World Wrestling (UWW) v. Riza Kayaalp* is partially upheld.

2. The decision of 24 February 2025 by the Single Judge in the Anti-Doping Division of the Court of Arbitration for Sport in the matter of proceedings *2023/ADD/110 United World Wrestling (UWW) v. Riza Kayaalp* is partially set aside.
3. Mr. Riza Kayaalp is sanctioned with a period of ineligibility of 18 months, starting from 24 February 2025, with credit given for the period of provisional suspension from 1 July 2024 until 23 February 2025. All competitive results of Riza Kayaalp from 28 May 2024 until 1 July 2024 are disqualified with all resulting consequences, including forfeiture of medals, points and prizes.
4. (...).
5. (...).
6. All other motions or prayers for relief are dismissed.

Seat of arbitration: Lausanne, Switzerland

Date: 28 October 2025

THE COURT OF ARBITRATION FOR SPORT

Dr. Vladimir Novak
President of the Panel

Jeffrey Benz
Arbitrator

Carine Dupeyron
Arbitrator