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### April 18, 2005

The day they told me I had tested positive for the banned performance enhancing method of homologous blood transfusing I threw forward my arm, and said – “It’s a mistake. Take another sample”.

I was refused.

At that moment, sometime around 8 PM on September 16, 2004, I began the long process of trying to get to the bottom of those results.

There has been a lot of speculation about my case so I’ll try to set things straight the best I can issue by issue. Some of the details are more complicated than others but I’ll try to keep things simple. I have nothing to hide, and I don’t mind sharing all the twists and turns of my story with you. Even the parts I can’t explain. Here goes -

Spring Off Scores: An off score is a measurement based on an equation incorporating hemoglobin and reticulocyte counts. These counts are measured during random “health tests” conducted on riders during races. They are also commonly referred to as “vampire tests” – because drug control officers visit the race hotel to wake riders and take their blood before a start.

Health tests administered on my blood at Liege-Bastogne-Liege, the Tour of Romandie and Dauphine Libere registered uncharacteristically low reticulocyte counts, which is the count of new red blood cells.

Medical expert Jim Stray-Gundersen, who has conducted more than 10,000 blood tests on athletes participating in doping research programs, testified during my hearing that my reticulocyte counts from these three races were so low they “are not to be believed”. Of the thousands he’s evaluated in his career, he has only seen one test come up as low as mine – and it was an instance when he knew for a fact, the sample had been “mishandled” during transport to the lab.

My story really starts at the Tour of Romandie when Phonak disputed the entire team’s hematocrit readings from one of the UCI’s morning health tests. Riders who did both Liege and Romandie showed gains of an average of 4 points in a span of 4 days. In addition, the readings were also about 4-5 points higher than the team’s own results taken the night before.

I had been health tested before the start of Stage 2. After the stage, I was told I would have to provide an additional anti-doping test because my hematocrit result from the morning was high. One of the things I was tested for was EPO. The result was negative.

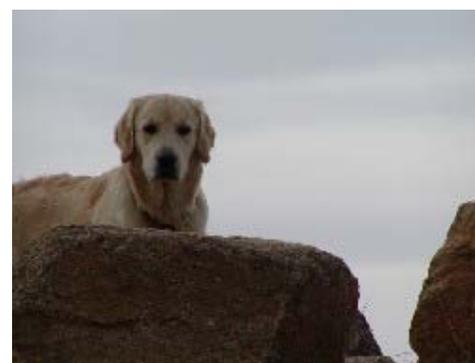
Hematocrit readings are meant to measure the percentage of red cells in your blood. These readings can vary for a number of reasons. Everything from the machine’s calibration to the way the sample is drawn can affect the result. In 2004, multiple teams complained to the UCI about scores they felt were inaccurate. In fact, Dr. Zorzoli, of the UCI, testified to this fact in the Phonak/CAS hearing in January.

My hematocrit score at Romandie was inaccurately high. I know this because I can compare it to the UCI’s own test from Liege (45.3), taken just four days before. To give you an idea of how variable these numbers can be, the UCI test conducted on July 1st, the day before the Tour de France started, registered my hematocrit at 38. Again, my team complained, but this time about the score being too low. Inaccuracy of the readings can go both ways.

If someone’s hematocrit, hemoglobin or reticulocyte readings are incorrect, the “off score” will be incorrect. This is why the off score is not used to determine a doping offense. It is widely known that the measurements used to calculate the score are prone to some instability.

Warnings: There have been lots of rumors circulating that I had received multiple warnings about irregularities in my blood tests in 2004. To clarify, the conversations about the results of my health tests were actually more about mutual concerns than accusations.

The Phonak team was the first to raise a red flag about results associated with my tests. The team felt there was something wrong



with the UCI's health test measurements from Romandie. A meeting regarding those measurements was requested by Phonak, and took place in Switzerland in early May. I was not present, but the team management and various UCI officials were.

The discussion boiled down to the fact that the Phonak team and UCI were using hematocrit machines manufactured by different companies. Phonak agreed to purchase the same machine the UCI uses so if a discrepancy was ever noted again, there would be a similar starting point at the basis of the argument. That machine was up and running for the team by the Tour de France.

I also had a face to face meeting with Dr. Zorzoli in June to discuss my health test results. We spoke at length about my reticulocyte counts and what the medical explanations for those readings could be. He recommended a specialist for me to see in Boston to try and get to the bottom of the results. It was a friendly conversation, during which the topic of the new blood transfusion test was raised. Dr. Zorzoli noted that the test would be approved soon, but pointedly noted that I was fine to continue racing.

I was also told that regardless of whether or not we agreed on the accuracy of my hematocrit reading at Romandie, that result put me in the out-of-competition testing pool for extra doping tests between races. I did receive one letter after our meeting confirming this. This news was not concerning to me because I already thought I was in this pool for having met other criteria – which were; being ranked in the top 50 in the world, and for having won an HC Stage race within the last year. In addition, I was already part of the USADA out-of-competition testing program and had been since the spring of 2000. So I didn't protest being included. In fact, I welcomed it.

I agreed to help Dr. Zorzoli with the development of the forms he needed to design to determine the whereabouts of athletes in the program. We traded multiple emails and faxes regarding this subject in the days after our meeting.

So for me, nothing had really changed. I planned to follow up with the hematology specialist in Boston during the off season, and started the Tour de France two weeks later as planned.

Issues with the Blood Transfusion Test: The primary issues we raised about this test during my hearing were:

1. Experts for both sides testified that flow cytometry, the test methodology used for this test, can not prove a blood transfusion has taken place.
2. If the minimum threshold stated in the sole peer review for the test were applied to my test results from the Olympic Games and the Vuelta Espana, both tests would have been declared negative.
3. There was no false positive study conducted during the validation of this test.
4. The "visual criteria" used to determined the results of this test boils down to an "I know it when I see it" evaluation - which when applied in other doping tests, has been considered an unacceptable level of detection that cannot stand alone in determining someone has tested positive. Arbitration panels have stated in previous cases that quantifiable criteria must confirm "visual" criteria. In my case there was no quantifiable criteria used.

Issues with My Results: Of the number of unanswered issues regarding my test results the most concerning are:

The fact the my Olympic A sample was originally declared negative and there was no B sample test result to substantiate changing it to positive.

The antigens declared positive for "mixed populations" in Athens and the Vuelta are not the same.

Santi Perez: When Santi was declared guilty on the day my hearing started - it took two key arguments off the table in my defense. We could no longer contend my case was the first blood transfusion case. Nor could we state that the test had not yet been validated through a judicial process.

Santi Perez tested positive in the off-season but not during the Vuelta where he provided multiple blood samples. And, his judicial hearing was held without him being present. He plans to appeal his case to CAS, the Court of Arbitration for Sport.

The Extortionist: My case is made even more confounding with the added component of someone threatening the Phonak team with inside knowledge about Santi and I being positive before either of us were declared so. Issues and coincidences that cannot be ignored are:

1. On August 25, the extortionist sent his first message stating he knew I would be announced as "positive" at the Olympics. According to the IOC, that conclusion was not made until between September 10 and 16.
2. Out of all the Olympic athletes in Athens, and professional cyclists competing in 2004, the extortionist correctly "guessed" that Santi and I would test positive
3. The extortionist accepted a monetary bribe "to keep an additional rider clean" and "the Phonak team clean in 2005" on November 3, 2004. At that time he stated he needed 9 days to determine if everything would be okay. He was arrested by police after accepting the bribe. Nine days later, the Pro Tour teams were announced and Phonak was told for the first time, they would be left off the list

Circumstantial Support: When they told me I had tested positive I was in discussions with Phonak for a two year extension to my contract that would have taken me through 2007, when I would be 36 years old. I had ten individual sponsors, a foundation, a touring company and a film project on my plate. My life had never been more secure. This was not a time to risk everything. And I never would have.

In addition, the allegations made during my hearing were that I transfused once in the winter and again in early June. This simply doesn't make any sense. A transfusion in January or February would be pointless since I did not start racing until March. In addition, a wintertime transfusion would not result in low reticulocyte or high hematocrit counts in late April or early May.

The spring is an important racing period, but it's not a time when I have any pressure on me to perform. I was happy to win the Tour of Romandie in May, but my goal for the season was seeing how well I could do at the Tour de France.

In June, I finished second at the Dauphine Libere but never once attacked during the race. No one with objectives for the Tour wants to be flying a month ahead of schedule. Winning the Dauphine was not important to me or my team. Getting to the Tour healthy and ready to go was. So there's no logic in the argument that I could have taken a transfusion in early June.

And finally, I would never risk my health or my wife's health for the sake of racing. That just goes without saying.

Normal Values: My hematocrit, hemoglobin and reticulocyte readings – that were of such discussion in the spring, were absolutely normal for the key time periods of my season. My scores all through the Tour de France, Olympics and Vuelta were in a range consistent with ten years of health data I have saved. From my perspective, this is an important point that seemed to have been discounted during my hearing.

When you add my major injuries in the Tour de France that left me with hematomas in my lower back and deep bruises to my kidneys and spine – plus two additional crashes in the Dauphine and Vuelta where I suffered additional bruises and abrasions – it gets difficult to defend the presence of a foreign blood transfusion taken in early June being visible in tests conducted in mid September. My body would have been working over time to heal those injuries – especially the bruises. And that recovery would have flushed away any evidence of the alleged June transfusion.

One expert who helped develop the test and who also testified against me during my hearing agreed that it would be a long shot for an early June transfusion to be visible at the late date of 9/11 – but went on to allege that I must have been “topping off my blood supply with 100 milliliter transfusions throughout the summer” for my tests to come out the way they did.

This raises a few questions – the first being what would topping off a blood supply with shot glass size transfusions accomplish other than keeping the chances of testing positive alive? And why would anyone go to the trouble or risk to their health to do this? This allegation, above all, made me wonder just how invested these researchers were in understanding the practice they were trying to eradicate.

My case is a very complicated one. I could write on and on about the issues we raised, the personal toll all this has had on me, my family and my sponsors and why I think the anti-doping process could be improved. In the days ahead I'll share more.

Thanks for reading.

### **April 6, 2005**

Many thanks to all of you who helped make the Tyler Hamilton Foundation Online Auction and Gala back in Boston such a big success. It was nice to be “home” and to connect with so many of you who share in our mission to eradicate MS and help young cyclists.

Over the last year we were able to accomplish our goal – which was to get the word out about our organization and begin to establish fund raising events that could grow in the years to come. I think we've found our niche with the MS Global ride in Europe our Live Loud and Large screenings of the Tour de France stages and our group rides in Colorado and California.

We are in Europe as I type this planning out our route for the weeklong MS Global ride this fall. This year's event will be even more exciting than last year's which skirted the Mediterranean. We'll be taking the group down a different route which will include a stop in Girona, Spain, the town most of the American cyclists competing in Europe call home.

We're also gearing up to expand the Live Loud and Large screening of the Tour in more cities across the US this summer. Last year we were in about 20 cities. This year we hope to more than double that.

And in addition to these events, we'll also be hosting our group rides in California and Colorado, which are meant to be low key affairs and a chance to ride in good company through some of great terrain. Information regarding these events is always available at [tylerhamiltonfoundation.org](http://tylerhamiltonfoundation.org).

Everyone at our foundation is grateful for the outpouring of support we've received in our first year. We are officially off and running. Even in our early stages of starting up, we've been able to make an impact on the MS and cycling communities. By partnering with the National MS Society to promote their rides across the country and supporting various amateur cycling teams and riders, we've been able to share your generosity with those we hope most to help. So thank you to everyone who's supported our mission and for all you've done to make our accomplishments to date possible.

Outside of the foundation, life has been mostly about training over the last few weeks. It's a little odd to be home during the spring. My wife and I keep thinking it's January because that's the last month we are used to being home. But the annual milestones like Easter, and paying taxes remind us that this year is different.

Luckily, the weather has been really great for training out west. We have experienced an unusually mild winter in Colorado. So that has meant I've been able to get out on the bike a lot. But I have to say that I'm pretty antsy to get racing again. It is tough to be at home when some of my favorite springtime races are going on.

We hope to have a verdict fairly soon in my case. It's an odd feeling waiting for a group of people to decide your fate. But out of respect for the process we accept that these things can take time.

Thanks to all of you who have written in to express your support. I appreciate more than you know, that so many of you have been checking this site for updates. Your patience and diligence are indicative of the cycling community at large, which I've come to find out over the years – is an incredible group for sure.

Thanks for reading.

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