Open Access

Long-term Health Effects of Performance-enhancing Drugs on Athletes

Finlay Wir*

Department of Sport & Physical Activity, Edge Hill University, Lancashire, UK

Introduction

Performance-Enhancing Drugs (PEDs) have become a controversial topic in sports, offering short-term gains at the expense of long-term health. This article explores the various types of PEDs, their mechanisms of action and the severe long-term health effects they impose on athletes. Key issues include cardiovascular damage, endocrine disruption, psychiatric disorders and an increased risk of cancer. The article highlights the ethical concerns surrounding PED use and calls for enhanced education and stricter regulations to protect athletes' health. Performance-Enhancing Drugs (PEDs) have been used by athletes across various sports to gain a competitive edge. While the short-term benefits of these substances, such as increased muscle mass, endurance and recovery speed, are well-documented, the long-term health consequences are often overlooked. This article delves into the lasting impact of PEDs on athletes, highlighting the dangers they pose to cardiovascular health, the endocrine system, mental well-being and the increased risk of cancer. PEDs encompass a wide range of substances, each with unique mechanisms of action and associated risks. Some of the most commonly used PEDs include. These synthetic derivatives of testosterone are used to increase muscle mass and strength. However, their long-term use can lead to severe health consequences [1].

Description

EPO is a hormone that increases red blood cell production, enhancing oxygen delivery to muscles and improving endurance. The misuse of EPO is associated with significant cardiovascular risks. HGH is used to stimulate growth, cell reproduction and regeneration. While it can increase muscle mass and reduce body fat, long-term use can lead to a host of adverse effects. These substances, including amphetamines and caffeine, are used to increase alertness, focus and energy levels. Chronic use can lead to cardiovascular and neurological issues. Often used to rapidly lose weight or mask the presence of other PEDs, diuretics can cause severe electrolyte imbalances and long-term kidney damage. One of the most significant long-term health effects of PED use is cardiovascular damage. Anabolic-Androgenic Steroids (AAS) have been shown to cause left ventricular hypertrophy, a condition where the heart's left ventricle thickens, leading to impair cardiac function. This can result in arrhythmias, heart failure and sudden cardiac death. Erythropoietin misuse can increase blood viscosity, making it more difficult for the heart to pump blood efficiently. This increases the risk of hypertension, thrombosis, stroke and heart attacks. Anabolic steroids can lead to hypogonadism, a condition where the body stops producing adequate levels of testosterone. This can cause infertility, decreased libido and erectile dysfunction in men. Women who use anabolic steroids may experience menstrual irregularities, virilisation and infertility [2].

*Address for Correspondence: Finlay Wir, Department of Sport & Physical Activity, Edge Hill University, Lancashire, UK, E-mail: wirfinlay@gmail.com

Copyright: © 2024 Wir F. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 01 July, 2024, Manuscript No. Jsmds-24-146734; Editor Assigned: 03 July, 2024, PreQC No. P-146734; Reviewed: 17 July, 2024, QC No. Q-146734; Revised: 22 July, 2024, Manuscript No. R-146734; Published: 31 July, 2024, DOI: 10.37421/2161-0673.2024.14.378

Human Growth Hormone (HGH) misuse can result in acromegaly, a condition characterized by the abnormal growth of bones in the hands, feet and face. This condition is irreversible and can lead to complications such as joint pain, diabetes and cardiovascular disease. Additionally, HGH can disrupt normal glucose metabolism, increasing the risk of developing insulin resistance and type 2diabetes. The long-term use of PEDs is associated with a range of psychiatric disorders, including mood swings, aggression and depression. Anabolic steroid use has been linked to "roid rage," a phenomenon characterized by extreme aggression and hostility. Chronic steroid users are also at an increased risk of developing anxiety, depression and suicidal tendencies. Stimulants, while initially enhancing focus and alertness, can lead to anxiety, paranoia and even psychosis with prolonged use. The misuse of these substances can also exacerbate existing mental health conditions, making them more difficult to manage over time. The use of certain PEDs has been linked to an increased risk of developing various types of cancer. Anabolic steroids, for example, can cause liver damage, leading to hepatic adenomas and hepatocellular carcinoma. There is also evidence to suggest that prolonged steroid use may increase the risk of prostate cancer in men [3,4].

Human Growth Hormone (HGH) has been implicated in the development of certain cancers, including colon and breast cancer. HGH can promote the growth of existing tumours, making it particularly dangerous for individuals with a history of cancer. The long-term use of diuretics, which are often used to mask the presence of other PEDs, can lead to kidney damage and an increased risk of renal cell carcinoma. The use of PEDs in sports raises significant ethical concerns. Athletes who use these substances gain an unfair advantage over their competitors, undermining the integrity of sports. Moreover, the long-term health risks associated with PED use highlight the need for better education and stricter regulations to protect athletes. Educational programs should be implemented to inform athletes about the dangers of PEDs and the potential consequences of their use. Coaches, trainers and healthcare professionals play a crucial role in this effort, providing guidance and support to athletes who may be tempted to use these substances. The long-term use of stimulants also poses cardiovascular risks, including tachycardia, hypertension and an increased risk of myocardial infarction. The endocrine system, which regulates hormones in the body, is particularly vulnerable to the effects of PEDs [5].

Conclusion

The long-term health effects of performance-enhancing drugs on athletes are severe and wide-ranging. Cardiovascular damage, endocrine disruption, psychiatric disorders and an increased risk of cancer are just a few of the potential consequences of PED use. These risks underscore the importance of promoting clean sports and protecting athletes' health through education, regulation and ethical practices. Athletes, coaches and sports organizations must work together to create an environment where success is achieved through hard work, dedication and fair play, rather than the use of dangerous substances. By prioritizing the health and well-being of athletes, the integrity of sports can be preserved for future generations.

References

 Colberg, Sheri R., Ronald J. Sigal, Jane E. Yardley and Michael C. Riddell, et al. "Physical activity/exercise and diabetes: A position statement of the American Diabetes Association." *Diabetes Care* 39 (2016): 2065.

- Herbst, Antje, Olga Kordonouri, Karl O. Schwab and Frank Schmidt, et al. "Impact of physical activity on cardiovascular risk factors in children with type 1 diabetes: A multicenter study of 23,251 patients." *Diabetes Care* 30 (2007): 2098-2100.
- Lehmann, Roger, Vladimir Kaplan, Roland Bingisser and Konrad E. Bloch, et al. "Impact of physical activity on cardiovascular risk factors in IDDM." *Diabetes Care* 20 (1997): 1603-1611.
- 4. Riddell, Michael C. and Anne L. Peters. "Exercise in adults with type 1 diabetes mellitus." *Nat Rev Endocrinol* 19 (2023): 98-111.
- Riddell, Michael C., Sam N. Scott, Paul A. Fournier and Sheri R. Colberg, et al. "The competitive athlete with type 1 diabetes." *Diabetologia* 63 (2020): 1475-1490.

How to cite this article: Wir, Finlay. "Long-term Health Effects of Performanceenhancing Drugs on Athletes." J Sports Med Doping Stud 14 (2024): 378.