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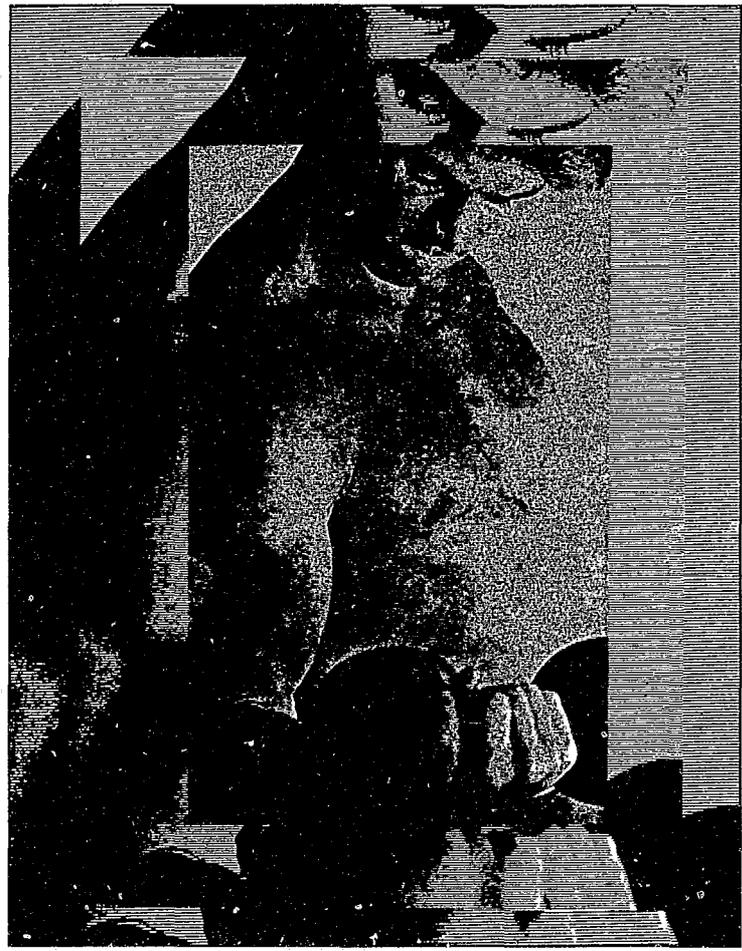
They Shoot Horses, Don't They? Anabolic Steroids and Their Challenge to Law Enforcement

By
GREGORY STEJSKAL, J.D.

In August 1992, a player on the Quebec Nordiques hockey team died of heart failure following a disturbance in his hotel room in Canada. The autopsy revealed he had both anabolic steroids and cocaine in his system.

On the following day, by coincidence, Federal grand jury indictments of over 40 people from Canada, Mexico, and the United States were unsealed, charging the defendants with steroid distribution. These indictments culminated a 2 1/2-year, joint FBI-Food and Drug Administration (FDA) undercover operation targeting anabolic steroid dealers. The FDA estimated that the operation, codenamed Equine,¹ resulted in the purchase or seizure of 8-10 million dosage units of both real and counterfeit steroids. In 1993, additional indictments were returned, charging individuals with steroid distribution, and investigations continue in other cases generated from the undercover operation.

These events dramatically demonstrate the seriousness and the breadth of the steroid problem facing law enforcement today. This article reviews the history of steroid use and abuse, examines the black market operations targeted by Equine, and provides guidance to



law enforcement agencies for prosecution of distributors of both real and counterfeit steroids.

HISTORY

Steroids are a synthetic version of the male hormone testosterone. Anabolic refers to a substance that promotes growth. (Although all

steroids are not necessarily anabolic, for simplicity, the terms will be interchanged.) When taken internally, steroids will, in conjunction with weight training, promote extraordinary weight gain and muscular development.

The idea of using male hormones to enhance performance and



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virility originated in the 1890s, when experiments linked testosterone with certain masculine traits. Initially, some individuals used natural testosterone, with mixed results. One of the limiting factors in the use of natural testosterone was its availability—it had to be obtained from the testicles of animals—a rather unsavory process, especially for the animal.

In 1935, researchers developed the first synthetic testosterone, thereby making it readily available in large amounts. Following World War II, Eastern European weightlifters began using steroids and, as a result, dominated international competitions. It did not take long for other competitors to realize why. Steroid use spread from weightlifting to other athletic endeavors, and today, they are used in virtually any sport whose athletes perceive a benefit.

Steroids have become especially prevalent in football, professional wrestling, track and field, swimming, and bodybuilding,

where abuse is perhaps most widespread.² One bodybuilder indicted in Equine admitted, “to appear in the Nationals [the National Bodybuilding Championships] without using steroids would be like competing in the Miss America Contest without makeup.”

Unfortunately, by taking steroids, this bodybuilder destroyed his dream of competing in the Nationals. Due to joint pain and overall weakness, he can no longer lift weights. Like many steroid abusers, he also developed permanent liver damage.

STEROID SIDE EFFECTS

Taken over a period of time, steroids can have detrimental effects on the body. Men may suffer from hypertension, sterility, female breast development, premature hair loss, infections, cysts or other problems resulting from multiple injections, and irreversible heart and/or liver damage. Studies also indicate that steroid use increases the propensity of developing cancer.

Because women, by nature, have little testosterone in their bodies, steroids pose an even greater threat to them. In addition to most of the problems noted above, women develop many masculine traits, such as increased body and facial hair and a deepened voice.³

Beyond the physical effects, steroids also tend to increase aggressive tendencies, resulting in the so-called “roid rage.” Though athletes may benefit from some aggression, aggressive behavior brought on by steroid use can be difficult to control and can manifest itself in situations where such behavior is socially unacceptable or even dangerous. In fact, a recent study indicates that steroid use may lead to criminal or violent behavior, especially in 12- to 17-year-olds.⁴ And in some instances, police officers taking steroids have used excessive force in subduing subjects.⁵

Steroids also are psychologically habit-forming. Sometimes individuals become so enamored with the extraordinary strength and weight gains that steroids bring that they never seem satisfied with their size, which is referred to as “reverse anorexia.” Furthermore, individuals who stop using steroids may become extremely depressed, to the point of committing suicide.⁶

Despite steroids’ negative effects, the pursuit of physical strength and perfection continues to draw many young men and women to the world of black market anabolic steroid use. A 1988 Penn State University study concluded that about 262,000 U.S. teens were experimenting with steroids. Today, studies estimate more than a

million users nationwide, including 500,000 teens.⁷

CURRENT USE

Individuals either inject steroids directly into the muscle tissue or take them orally in tablet form. They also usually cycle them. That is, they take them for a period of time, quit for a period of time, and then repeat the cycle. Dosages might gradually increase to a peak, and then decrease, a process known as pyramiding. Often, users time their cycles so that the steroid-free period coincides with bodybuilding competitions, which may be drug-tested. However, because some steroids remain in the body for long periods of time, users might take other substances to mask their steroid use.

The use of other drugs frequently accompanies steroid use. For example, steroid users often use Percodan and other prescription pain killers to diminish the various aches and pains associated with their strenuous workouts. Further, because the steroids and the physical activity make sleep difficult, many users take Valium or other depressants. Some also use cocaine to counteract the depression associated with steroid-free cycles. Cocaine also acts as an appetite suppressant, helping individuals decrease their body fat levels. Thus, some competitive bodybuilders become walking drug stores.

The different types of testosterone derivatives contained in the various steroid products yield different results, either real or perceived. Some build muscle, others increase definition. Bodybuilders call this definition being "cut" or

"shredded." Because creating large, but highly defined, muscles is the object in bodybuilding, bodybuilders often use more than one type of steroid at a time, a practice known as "stacking."

Stacking makes the marketing of fake steroids feasible on a continuing basis. When a distributor sells both fake and real steroids to a user who stacks, the user will probably experience gains from the real steroids and possibly enjoy some placebo effect from the fake steroids. Thus, the user, in most circumstances, will assume all of the

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steroids are real. This faith obviously benefits the distributor, who can increase sales or help their business even further by acting as "consultants," advising the users which combination of steroids to take.

STEROID SOURCES

United States

At one time, American physicians readily prescribed anabolic steroids to their patients. However, when Congress made steroids a Schedule III controlled substance, it limited the accepted medical uses of steroids to the "treatment of disease pursuant to the order of a

physician."⁸ Clearly, enhancing athletic performance does not fit into this category. For this reason, many physicians who previously had been willing to prescribe steroids to athletes have ceased doing so.

Unfortunately, some veterinarians have filled the void created by these physicians. Veterinarians use anabolic steroids extensively, principally in the treatment of horses. The steroids are administered for the treatment of injury, but are primarily used to enhance the performance of the horse, causing considerable controversy in the horse racing world. Some States have severely restricted the use of steroids in this area.

Due to the use of steroids in veterinary medicine, veterinarians have become—both directly and indirectly—sources for individuals seeking anabolic steroids for their personal use. In fact, agents codenamed the undercover operation Equine because of the large amounts of veterinary steroids being diverted for human consumption. Incredibly, veterinarians prescribe significantly lower dosages for horses than the amounts used by bodybuilders, even though horses weigh about 1,500 pounds.

Canada

Although the Ben Johnson Olympic scandal and subsequent public hearings heightened public awareness of the consequences of using steroids, at the time, Canada surpassed the United States in steroid availability. To counteract this, Canada revised its statutes in 1991 to encompass all anabolic steroids, including those marked

A Tale From Operation Equine



Operation Equine led to the indictment of several Canadian suppliers. One of the suppliers agreed to sell an undercover special agent a large amount of steroids, but only if the agent would take delivery in Ottawa. The undercover agent agreed and advised the Royal Canadian Mounted Police (RCMP) of this arrangement.

The RCMP provided security and surveillance when the subject delivered a carload of steroids to the undercover agent. When the RCMP confronted the subject, he fled on foot through the streets of downtown Ottawa. Although the subject was anabolic, he was not very aerobic, and the Mounties got their man when he collapsed from exhaustion after running about 2 blocks.

The subject turned out to be the son of a judge on the Canadian Federal Court of Appeals. The RCMP surveillance identified the subject's supplier and two other associates. The car contained an estimated \$100,000 to \$150,000 worth of steroids. However, because at that time Canada's statute excluded veterinary steroids, the subjects could only be charged with selling approximately \$6,000 worth of steroids.

for veterinary use, which had previously been excluded. As a result of the new law and energetic enforcement by Canadian authorities, the supply of steroids arriving in the United States from Canada has diminished significantly.

Mexico

The other major source of steroids for the U.S. market is Mexico. In Mexico, steroids, like many drugs that require a prescription in the United States, can be purchased over the counter. This probably explains the abundance of pharmacies in Mexican border towns. Individuals purchase steroids over the counter in Mexico, then illegally transport them across the border into the United States.

Some Mexican pharmacies have taken this one step further and, in effect, act as mail-order houses for customers in the United States. Customers contact Mexican pharmacies, which fill orders and pay couriers to carry the drugs across the border. Then, the courier mails or ships the order to the customers. By smuggling orders across the border before mailing them, the pharmacy reduces the risk of interception by U.S. Customs.

One Michigan dealer arrested during Equine received Percodan, Valium, and almost all of his real steroids from a Mexican pharmacy. He had the orders sent to "mail drops"—associates who would store the steroids. This dealer kept a running inventory and distributed the steroids to his various customers, who also sold to others.

Europe

Europe—including Eastern Europe and the former Soviet Union—

also serves as a source for steroids, albeit less significant than the other sources. Some of the steroids coming from Canada originate in Europe. However, because of logistical problems and expense, the volume of steroids from Europe has not matched that of the other sources.

PROFILE OF A STEROID DISTRIBUTER

During Equine, the FBI instituted a court-authorized telephone wiretap on the Michigan distributor. The wiretap, coupled with other investigative techniques, provided a unique view of this high-volume steroid distribution organization, which sold real steroids and manufactured and sold fake steroids.

This dealer ran a relatively sophisticated operation. He obtained the bottles, caps, and stoppers from a company that also supplied many legitimate pharmaceutical companies. Consequently, the bottles, caps, and stoppers matched almost exactly those supplies that a legal manufacturer would have used.

In addition, the dealer had the labels, boxes, and package inserts professionally printed. One difficulty he did face was imprinting the lot number and expiration date on the box and bottle label. Because drug manufacturers usually imprint these numbers, they use a different ink and format than the label manufacturers. Initially, the Michigan dealer used a handstamp (agents seized several during the search of his home), but he soon devised a more efficient method. Developing a computer program with variations to facilitate the formats of different manufacturers, he printed

lot numbers and expiration dates on the labels using his computer's dot-matrix printer.

Records obtained from the company that provided bottling supplies to the Michigan dealer show the volume of his counterfeit steroid operation. In 1990 and 1991, the Michigan organization obtained over 55,000 2-cc vials and 18,500 10-cc bottles. This distributor and other counterfeiters indicted in Equine needed bottle-filling devices in order to meet their customers' demand.

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Under Federal law, the illegal sale of anabolic steroids has been a felony since 1988.

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COUNTERFEIT STEROIDS

Counterfeiters duplicate the carton and the container of legitimate steroids, but not the contents. Counterfeit steroids contain no or only trace amounts of testosterone.

Generally, the counterfeiters mix vegetable oil with alcohol in about a 10 to 1 ratio. They add alcohol to destroy bacteria—a genuine threat because the counterfeiters usually take few, if any, precautions to sterilize the facilities or containers.

THE LAW

The illegal sale of anabolic steroids has been a felony under

Federal law since 1988.⁹ On November 28, 1990, President Bush signed into law the Anabolic Steroids Control Act of 1990. Effective February 27, 1991, this law placed 27 anabolic steroids and their derivatives into Schedule III of the Controlled Substances Act.¹⁰ Schedule III drugs, by definition, have the potential for abuse, but less than those substances in Schedules I and II, which have a “high potential for abuse.”¹¹ Abuse of a Schedule III drug may lead to “moderate or low physical dependence or high psychological dependence.”¹²

By making steroids a scheduled drug, Congress recognized the seriousness of the steroid problem and enhanced the ability of law enforcement to address the problem. Both the FBI and the DEA are tasked with enforcement.

Classifying steroids as controlled substances also allows for the forfeiture of any property used to facilitate the distribution of steroids and any profit traceable to the sale of steroids. Further, many States have made the mere possession of anabolic steroids a violation, although penalties vary.¹³

Unfortunately, classifying steroids as Schedule III drugs has resulted in unrealistic sentencing guidelines being applied to offenders. The guidelines define a “dosage unit” as 10 cc/ml or 50 tablets of any size, an excessive amount considering a typical dose is only 1 tablet or 1 cc/ml. As a result, only a dealer selling massive quantities of steroids would receive a penalty beyond nominal incarceration.

The manufacture and distribution of fake steroids are prosecuted federally under two statutes. First,

because the counterfeit steroids are mislabeled as real, dealers can be prosecuted under the Sale of Misbranded Drugs.¹⁴ Part of the Food and Drug Act, this law is enforced by the FDA and, collaterally, by the FBI. Second, the seller of fake steroids using registered trademarks or any other counterfeit mark belonging to legitimate drug manufacturers can be prosecuted for Trafficking in Counterfeit Goods.¹⁵

One confusing aspect of a steroid investigation is the myriad of steroid products containing different testosterone derivatives. Under Federal law, there are 27 testosterone derivatives. However, the various steroid products may or may not incorporate the derivative into their names. Because the derivative, not the product itself, must be tested for and charged in a complaint or indictment, investigators should learn to distinguish between steroid

products and their accompanying testosterone derivatives.

CONCLUSION

Despite the efforts of law enforcement, the media, and others to educate the public on the dangers of steroid use, there will always be individuals willing to risk long-term, potentially severe health problems for short-term athletic enhancement. Aspiring athletes should not have to use steroids to reach the pinnacle of their sport. Steroid use perverts the goals of sports and athletic competition. A victory achieved through steroid use is hollow, at best. At worst, the athlete may face prosecution or even death. ♦

Steroid Products and Their Testosterone Derivatives

This table represents only the most widely used steroid products; it is not all-inclusive.

PRODUCT	DERIVATIVE
Anadiol	Testosterone
Anadrol 50	Oxymetholone
Anavar	Oxandrolone
Cheque Drops	Mibolerone
Deca-Durabolin	Nandrolone
Depo-Testosterone	Testosterone
Dianabol	Methandrostenolone
Equipoise	Boldenone
Finaject	Trenbolone
Lyphomed	Nandrolone
Malogen	Testosterone
Nandrabolin	Nandrolone
Parabolan	Trenbolone
Primobolan	Methenolone
Primoteston Depot	Testosterone
Sostenon 250	Testosterone (Esters)
Sten	Testosterone
Stenox	Fluoxymesterone
Winstrol V	Stanozolol

Endnotes

¹ Undercover FBI Agents William G. Randall and John M. Wills, by virtue of their participation in Operation Equine, also contributed to this article.

² Bob Goldman and Ronald Klatz, *Death in the Locker Room II* (Chicago, Illinois: Elite Medicine Publications, 1992), 28-39.

³ *Ibid.*, 4, 107-125.

⁴ Study conducted by the National Institute on Drug Abuse, as reported in *Vitality*, December 1993, 7.

⁵ Charles Swanson, Larry Gaines, and Barbara Gore, "Abuse of Anabolic Steroids," *FBI Law Enforcement Bulletin*, August 1991, 21.

⁶ Study conducted by Dr. Charles Yesalis, as reported by Joannie M. Schrof in "Pumped Up," *U.S. News & World Report*, 1 June 1992, 59.

⁷ *Ibid.*, 55.

⁸ Title 21, USC, Section 802(41); 21 CFR, Section 1306.04(a).

⁹ Title 21, USC, Section 333(e).

¹⁰ Title 21, USC, Sections 802(41)(a), 812, and 841.

¹¹ Title 21, USC, Sections 812(b)(1)(A) and 812(b)(2)(A).

¹² Title 21, USC, Section 812(b)(3)(C).

¹³ See, for example, Michigan Compiled Laws Annotated, Section 333.17766(a).

¹⁴ Title 21, USC, Sections 331(a) and 333(a)(2).

¹⁵ Title 18, USC, Section 2320.