

INTERNATIONAL RUGBY BOARD

IN THE MATTER OF THE REGULATIONS RELATING TO THE GAME

AND IN THE MATTER OF ALLEGED DOPING OFFENCES BY **MIGUEL ÁNGEL GARCÉS van HEURCK** (PERU) AND **PAOLO URQUIETA RUIZ** (PERU) CONTRARY TO REGULATION 21 BEFORE A BOARD JUDICIAL COMMITTEE APPOINTED PURSUANT TO REGULATION 21.20 AND 21.21 CONSISTING OF:

Judicial Committee

Graeme Mew, Chair (Canada)
Dr. Ismail Jakoet (South Africa)
Gregor Nicholson (Scotland)

Appearances

Ben Rutherford for the International Rugby Board

Attendances

Miguel Ángel Garcés van Heurck (Player)
Paolo Urquieta Ruiz (Player)
Tim Ricketts (Anti-Doping Manager, International Rugby Board)
Gabriel Volpe (Vice-President, Federación Peruana de Rugby)
Camilla Comás (English-Spanish Interpreter)

Hearing: 17 August 2012 by way of telephone conference

REASONS FOR DECISION OF THE BOARD JUDICIAL COMMITTEE

1. Miguel Ángel Garcés van Heurck (“Garcés”) and Paolo Urquieta Ruiz (“Urquieta”), collectively referred to in the balance of this decision as the “Players”, were both members of the Peru team which participated in the Las Vegas Invitational Seven-a-Side Rugby Tournament which took place from 7 – 10 February 2012. While in Las Vegas, the Players visited a store which sold (Sports) supplements. There they purchased a product called “HemoRage”. They were told it was “good”. Four weeks later the Players were participating as members of the Peru team at the CONSUR Sevens Tournament in Rio de Janeiro, Brazil. They each underwent in-competition doping control. Analysis of the samples provided by the Players disclosed the presence of Methylhexaneamine (“MHA”), which is listed in category S6. Stimulants on the 2012 List of Prohibited Substances published by the World Anti-Doping Agency (“WADA”).

2. The Players have both admitted that they committed an anti-doping rule violation and have identified their use of the HemoRage acquired in Las Vegas as the source of the MHA which was found in their samples.
3. The Players were selected for in-competition testing following a Sevens match between Peru and Argentina on 10 March 2012. Each of them had signed a Team Member Consent Form which acknowledged, amongst other things, the application of the IRB's doping control regulation (IRB Regulation 21). Neither of the Players disclosed their use of HemoRage on the doping control forms which were completed as part of the testing process. Both of them claimed a lack of specific anti-doping education. Both denied having undertaken any research into the contents of HemoRage prior to using it. Each of them had taken some comfort from the fact that they had bought the supplement in a health supplement store located in a mall in the United States. They had assumed that such a store would not sell products which contained prohibited substances.
4. Following preliminary reviews of the cases in accordance with IRB Regulation 21.20.1, the Players were notified by the IRB of their Adverse Analytical Findings via the Federación Peruana de Rugby (the "Union") by separate letters each dated 17 April 2012 (Spanish translations of these notification letters were subsequently sent to the Players, via the Union, on 24 April 2012). These communications were received by the Players at a meeting with representatives of the Union on 2 May 2012. Accordingly, the Players were provisionally suspended on that date pursuant to IRB Regulation 21.19.1.
5. The Players were informed of their right to have the "B" sample of their specimens analysed. Neither Player having given notice within ten days of the date that they were informed of the Adverse Analytical Findings, it was presumed that they did not wish to have their "B" samples analysed.
6. On 16 May 2012 the Players, via the Union, confirmed their acceptance of their "A" sample findings and indicated that they wished to explain the circumstances.
7. This Board Judicial Committee ("BJC") was appointed to hear the cases against the Players. By letter dated 18 May 2012 the Players were informed of the composition of the BJC and that a hearing would be held at which the issue would be the appropriate sanction to be imposed.
8. The BCJ subsequently provided directions with respect to the exchange of evidence and the provision of written submissions. The hearing was originally scheduled to take place on 25 July 2012 by way of telephone conference. Upon request by Mr Urquieta, the hearing date was adjourned to 17 August 2012.

Anti-Doping Rule Violation Rule Established

9. At the outset of the hearing on 17 August 2012, each of the Players confirmed his acceptance of the Adverse Analytical Findings. Accordingly, we

are satisfied that the Players have each committed an anti-doping rule violation contrary to Regulation 21.2.1¹

Documentary Record

10. The BJC had before it a record which included the Doping Control Forms, Player Consent Forms, the Sample Analysis Reports from the Sports Medicine Research and Testing Laboratory in Salt Lake City, USA, the Preliminary Review Reports and certain correspondence between the Board and the Union and between the Players and the Union/Board.

11. The following witness statements were tendered:

- a) Paolo Urquieta Ruiz;
- c) Miguel Ángel Garcés van Heurck;
- c) Maser Madueño (Peru Sevens Coach).

12. The Players each gave oral testimony at the hearing. The BJC was also assisted by additional information provided through post-hearing correspondence by representatives of the Union.

13. Written submissions were also received from the Board (it being open to the Board and the Players to provide written submissions both before and after the hearing).

The Players' Account

(A) *Miguel Ángel Garcés van Heurck*

14. Garcés is 23 years old (22 at the time of the anti-doping rule violation). He works for a public relations agency and is pursuing university level studies. He is an amateur Player who has participated for Peru at international level for the past four years.

15. Garcés acknowledged that he had heard about anti-doping in general. However, he was unaware of the list of Prohibited Substances and, although he has visited the IRB website on numerous occasions, had never consulted the IRB's anti-doping web pages.

16. Garcés and his fellow Player, Urquieta, were in Las Vegas for a Sevens tournament. They went to a store in a shopping mall. Garcés described it as a "nutritional shop". Although they profess to have limited English language skills, the Players engaged a store clerk in conversation. They told him that they were rugby players. They asked if he could recommend something that would help them out with training. The store clerk said "take this supplement – it's a very

¹ The presence of a Prohibited Substance or its Metabolites or Markers in a Player's Sample.

good product". Garcés says that he inquired whether the product was "safe". The store clerk assured him that a mall outlet could not sell illegal products. Garcés assumed that in the United States, personnel working in a nutritional store would be adequately trained. The store clerk's answers reassured Garcés and he bought the product.

17. Garcés returned to Peru on 16 or 17 February. He did not play any matches following his return until the CONSUR Sevens Tournament in March. He used one scoop of the HemoRage supplement prior to each training session. He felt that it was helpful. He said that he "was more resistant" and that he "was able to do more things".

18. Garcés did attempt to read the packaging on the container. The instructions said to take the product once before each training session. He remembers the word "extreme" was on the label. However, he did not read everything that was on the label, which was in English.

19. Garcés acknowledged that he used the product in training to improve his physical skills. He denied using the product during games because he "wasn't training" then. He said that it "did not seem fair to use something to give extra resistance during games". However, Garcés did acknowledge that he used HemoRage at a training session on the morning of 10 March 2012. According to the tournament schedule, Peru's first game that day was at 8:40 a.m. His sample was provided at 7:51 p.m. (after arriving at the doping control station at 5:46 p.m.).

20. Garcés denied having received a copy of the IRB Anti-Doping Handbook in Spanish prior to the CONSUR Tournament. He acknowledged that he had not, at any time, consulted either his coaches or team medical personnel concerning his use of HemoRage. He says that he did, however, mention to some of his team mates that he had bought a product in the US.

21. Garcés says that he forgot to list the product on his doping control form. Because he had taken it for training purposes, he said that it did not enter his mind to do so. He was focused only on the game. He had not previously undergone doping control and was somewhat confused about what was going on, particularly because of a lack of familiarity with the Portuguese language which was being spoken at the doping control station.

22. According to Garcés, if he had had any concerns about the HemoRage product he was taking, he would have spoken to a coach.

(B) *Paolo Urquieta Ruiz*

23. Urquieta is 24 years old (23 at the time of testing). He works in a fish/food processing plant and is studying engineering. He has been playing rugby internationally for the last four years. He has also been an active participant in rugby activities with his club and has coached age grade rugby players.

24. Urquieta's account of how the HemoRage was purchased essentially accords with the evidence given by Garcés.

25. Like Garcés, Urquieta took the HemoRage which he had purchased in the US back to Peru. However, unlike Gracés, Urquieta claims that he did not use the HemoRage as part of his training regimen. In this regard, Garcés, in his evidence, said that Urquieta was using HemoRage during training: Urquieta denied this.

26. According to Urquieta, despite not having used HemoRage at all during training, he took a small container of HemoRage, similar in size to a can of Coke, with him to Brazil for the CONSUR Sevens Tournament. Following the third match on 10 March he used HemoRage for what he claims was the first time. He did so because he was very tired and wanted to recover.

27. Like Garcés, Urquieta did not do any independent research on the product he was using. He simply relied on what he had been told in the store in Las Vegas. He acknowledged that he had looked at the label. He recalls the name of the product and the colour of the lettering. He does not recall any references to “extreme” or similar language.

28. Like Gracés, Urquieta had signed, but not read, the team member consent form. He had been on the IRB website, and had even seen the large anti-doping icon on the homepage, yet had “never clicked” on it to find out more information with respect to the specifics of his anti-doping obligations. Although he had never been subject to in-competition doping control measures, he had undergone some form of domestic testing through the Peruvian Sports Institute. He explained that this was “just in case we are taking the wrong things”. Urquieta has also used supplements (glutamine and weight gain) provided through the Peruvian Olympic Committee following recommendations made by a nutritionist. Urquieta admitted that he had never told the nutritionist that he had bought and intended to use HemoRage.

29. Urquieta denies that he used HemoRage to enhance his sport performance. He only took the supplement to “recover”.

Doping Education

30. The Union has an individual whose responsibilities include circulating up to date Prohibited Substance lists and other anti-doping information to national team management. The Union acknowledged receipt from the IRB of copies of the IRB Anti-Doping Handbook in Spanish, which had been sent out by the IRB Anti-Doping Manager on 20 February 2012. Regrettably, instead of being distributed to members of the men’s and women’s teams (as intended), the books were distributed to each club president.

31. The Union acknowledged that the cases involving the Players have come as a big surprise to the Union and have provided a wake-up call. It is clear that anti-doping information provided by the IRB has not been getting through to the right people. The Vice-President of the Union did not doubt the Players’ assertions that they had never seen the Anti-Doping Handbook.

32. A copy of the Anti-Doping Handbook was provided to the BJC. It contains comprehensive information about MHA, including the various other names that MHA is known by and, of particular significance, the name of products known to contain MHA, including HemoRage.

Methylhexaneamine

33. The IRB Anti-Doping Handbook contains the following information about MHA²:

What is MHA?

MHA is a stimulant originally derived from the geranium plant but is now mostly synthetically produced. It was first developed as a nasal decongestant in the 1940s but can now be found in dietary or nutritional supplements under many different names other than MHA.

Some products which openly contain, or have been identified in certain countries to contain, MHA or its variants include, Hemo Rage, Jack3d, OxyElite Pro, 1.M.R., Mesomorph, Rocked, Crack, USN Anabolic Nitro, Ergolean Amp 2, DynaPep, Core Zap, C4 Extreme, Nutrimax Burner, NitroX, IBE X-Force, Fusion Geranamine, ClearShot, Black Cats, and Musclespeed. Please note this is not an exhaustive list but provides examples of some commercial supplements which contain, or have been identified in certain countries to contain, MHA or its variants.

MHA was placed on the WADA Prohibited List in 2010. As of 1 January 2011, it is classed as a Specified Stimulant prohibited in-competition only. MHA has caused a number of positive cases in Rugby (and other sports) recently for both amateur and professional Players.

What are the effects of MHA?

The stimulant effects are said to be less than amphetamine and ephedrine and slightly stronger than caffeine. MHA is marketed as a pre-work-out supplement with thermogenic or stimulant properties and may have mild stimulant effects but there is no publicly available data on its specific mechanism of action, absorption, pharmacokinetics, metabolism or excretion.

Anecdotal evidence suggests the effects of MHA last between 1-3 hours, and that it increases focus, heart rate and productivity whilst other users have reported increased anxiety, nervousness and sweating.

² Appendix 1 to these reasons sets out the Spanish version of this text.

Related substances and other names

MHA has many different variants/names which Players should check for individually if considering the use of any dietary or nutritional supplements. They include but are not limited to:

Methylhexaneamine; Methylhexanamine; DMAA (dimethylamylamine); Geranamine; Forthane; Forthan; Floradrene; 2-hexanamine, 4-methyl-; 2-hexanamine, 4-methyl- (9CI); 4-methyl-2-hexanamine; 1,3-dimethylamylamine; 4-Methylhexan-2-amine; 1,3-dimethylpentylamine; 2-amino-4-methylhexane; Pentylamine, 1, 3-dimethyl-; pelargonium graveolens; pelargonium extract; geranium, geranium oil or geranium root extract.

Warning: *In some cases, the labels and ingredient lists on products are not complete. Players should also be aware that products marketed under the same brand in different countries may contain different ingredients which may not always appear on the product label.*

What is the sanction for a positive test for MHA?

An Adverse Analytical Finding for MHA carries with it a **potential two year sanction** which may be reduced if the Player can establish how MHA entered their system and can present corroborating evidence (that is, from another person or source) that it was not taken to enhance sports performance or mask the use of another Prohibited Substance.

Strict Liability

Players must be aware that, under the policy of strict liability, they are solely responsible for any substance found in their body (regardless of whether the substance was contained in a dietary or nutritional supplement prepared or recommended by team management, medical personnel or other trusted persons and/or whether or not it was listed on the label of the product). Those Players who use dietary or nutritional supplements do so **at their own risk and are advised to exercise extreme caution.**

Sanctions

34. Under Regulation 21.2.1, the “*presence of a Prohibited Substance or its Metabolites or Markers in a Player’s bodily Sample*” constitutes an anti-doping rule violation. The violation occurs whether or not the Player intentionally used the Prohibited Substance or was negligent or otherwise at fault.

Discussion

35. In order to take the benefit of Regulation 21.22.3, each Player must (a) establish to the satisfaction of the BJC on the balance of probabilities how the MHA entered his body; and (b) establish to the comfortable satisfaction of the

BJC that his individual Use of MHA was not intended to enhance his sport performance or mask the Use of a performance-enhancing substance.³ Furthermore, in order to justify any reduction or elimination of the period of Ineligibility, the Player, as a mandatory condition, must also produce corroborating evidence in addition to his word which establishes to the comfortable satisfaction of the BJC the absence of an intent to enhance sports performance or mask the use of a performance enhancing substance.

Cause of Anti-Doping Rule Violation

36. We are satisfied that, on a balance of probabilities, the Players' anti-doping rule violations resulted, in each case, from their ingestion of MHA as a result of using the "Hemo-Rage" product.

Intent to Enhance Sport Performance

37. Both Players assert that their use of HemoRage was not intended to enhance their sport performance. Rather, it was used as an aid to training or to recovery.

38. It is noteworthy that the use of MHA out- of- competition is not prohibited. Out- of- competition testing does not screen for MHA.

39. There is an ongoing debate in the anti-doping world as to what is meant by the phrase "intended to enhance...sport performance".

40. Taking a literal approach, it can be said that the use of a supplement, whether it contains a prohibited substance or not, is intended to enhance sport performance. Good nutrition is part of the regimen of many athletes who seek to be in the best possible shape to compete.

41. In *IRB v. Murray*, a decision of a post-hearing review body of the IRB (27 January 2012) the following approach was articulated (at paragraph 67):

"...in every case, a Player seeking to rely on IRB Regulation 21.22.3 (WADC 10.4) will, as a practical matter, have to satisfy the tribunal either:

- a) that he or she did not know that he or she was consuming a Specified Substance and, hence, could not be said...by the use

³ The nature of the burdens the Player must satisfy are set out in the Comments to Article 10.4 of the WADA Code which is available at www.wada-ama.org. The Comment also elaborates in relation to the type of circumstances which in combination might lead a hearing panel to be comfortably satisfied of no-performance-enhancing intent, for example "the fact that the nature of the Specified Substance or the timing of its ingestion would not have been beneficial to the Athlete; the Athlete's open Use or disclosure of his or her Use of the Specified Substance; and a contemporaneous medical records file substantiating the non sport- related prescription for the Specified Substance..."

of the Specified Substance to have intended to enhance [his/her] sport performance, or

- b) that if he or she did know that a Specified Substance was used, that there was no nexus or link between such use and his or her performance as a player of the Game. Whether or not that link will be established will depend on the particular circumstances of the case.

42. In the present case, after some deliberation, we accept that the Players probably did not know that HemoRage contained a Specified Substance. Accordingly, even if their use of HemoRage could be said to have been intended to enhance sport performance, it would remain open to them to seek a reduced sanction under IRB Regulation 21.22.3.

Fault

43. In determining whether the applicable sanction should be something other than two years' Ineligibility, the sole criteria is the Players' degree of fault.

44. Both of the Players acknowledged some awareness of anti-doping. While they lacked specific information, Garcés knew enough to ask the shop assistant in Las Vegas if the product was acceptable to use. Yet neither Player took any other steps to obtain further information relating to the products, undertake research, or take advice.

45. Furthermore, there were troubling aspects of the evidence given by the Players. The statement by Garcés that it "did not seem fair to use something to give extra resistance during games" and that he had only used HemoRage before training seems somewhat self-serving and perhaps reflected the discovery by Garcés, who acknowledged he had done some research after becoming aware of his anti-doping rule violation, that the use of MHA is only banned in competition. The veracity of his account of when he last consumed HemoRage prior to being tested must also be questioned. He said it was immediately prior to a training session on the day of his doping control test. Quite specifically, in response to questioning, he said it was consumed prior to training and not prior to the competition warm-up. Yet the first match that he was involved in on the day of testing started at 8:44 a.m.

46. Urquieta's evidence that he did not use HemoRage at all until after the third match on 10 March 2012 also seems improbable. For a month he says he did not use the product at all, even though he had brought it back from Las Vegas and even through his friend Garcés was using it on a regular basis. Then he took a small container of it to Brazil and used it for the very first time for "recovery" after his third match on the day of testing.

47. While it is not necessary to reconcile the discrepancy between the evidence of Urquieta and Garcés concerning Urquieta's use (or non-use) of HemoRage prior to 10 March 2012, the overall feeling which the BJC is left with is one of a

certain amount of discomfort regarding the version of events given by both Players.

48. What is most unfortunate in this case is that anti-doping information specifically targeted at the team that both Players were a member of did not reach the Players.

49. The facts and circumstances of each case are unique and, therefore, the sanctions imposed in similar cases, while instructive, will not be dispositive.

50. In the BJC's view, the sanctions imposed in the cases of *IRB v. Gurusinghe, Swarnithilake and Kumara* (9 months ineligibility) and *IRB v. Murray* (12 months ineligibility) are instructive.

51. Having regard to all of the circumstances, including our concerns about the Players' credibility, we are of the view that each of the Players has exhibited a significant degree of fault. Accordingly they should each serve a term of ineligibility of 12 months.

Decision

52. On 10 March 2012 each of the Players committed an anti-doping rule violation, namely the presence in their bodily samples of Methylhexaneamine. Methylhexaneamine is a Prohibited Substance under both Regulation 21 and the World Anti Doping Code.

53. The sanction imposed for these anti-doping rule violations is a period of Ineligibility of 12 months for each of the Players, commencing 2 May 2012 (the date upon which the Players were notified of the Adverse Analytical Finding and provisionally suspended) and concluding on (but inclusive of 1 May 2013).

54. The Players' attention is drawn to IRB Regulation 21.22.13 which provides, *inter alia* that:

"No Player...who has been declared Ineligible may, during the period of Ineligibility, participate in any capacity in a match and/or tournament (international or otherwise) or activity (other than authorised anti-doping education or rehabilitation programmes) authorised or organised by the Board or any Union or Tournament Organiser. Such participation includes but is limited to coaching, officiating, selection, team management, administration or promotion of the Game, playing, training as part of a team or squad, or involvement in the Game in any other capacity in any Union in membership of the IRB."

The full text of Regulation 21.22.13 concerning status during Ineligibility should be consulted.

Costs

55. If the Board wishes us to exercise our discretion in relation to costs pursuant to Regulation 21.21.10, written submissions should be provided to the BJC via Mr. Ricketts by 17:00 Dublin time on 8 October with any responding written submissions from the Player to be provided by no later than 17:00 Dublin time on 15 October.

Review

56. This decision is final, subject to referral to a Post Hearing Review Body (Regulation 21.25) or an appeal, where the circumstances permit, to the Court of Arbitration for Sport (Regulation 21.27). In this regard, attention is also directed to Regulation 21.24.2, which sets out the process for referral to a Post-Hearing Review Body, including the time within which the process must be initiated.

5 October 2012

A handwritten signature in black ink, appearing to read 'Graeme Mew' with a horizontal line underneath the name.

Graeme Mew, Chairman

APPENDIX 1
Manual del Anti-Doping
Español Edición 2012 v3

Metilhexaneamina (MHA)

¿Qué es la MHA?

La MHA es un estimulante originalmente derivado de la planta del geranio pero que ahora se produce mayormente en forma sintética. Se desarrolló en la década del 40 originalmente para ser usado como un descongestivo nasal pero en tiempos recientes apareció en suplementos dietarios o nutricionales bajo nombres distintos al de MHA.

Algunos productos que claramente contienen, o que en ciertos países se ha determinado que contienen, MHA o sus variantes, son, Hemo Rage, Jack3d, OxyElite Pro, 1.M.R., Mesomorph, Rocked, Crack, USN Anabolic Nitro, Ergolean Amp 2, DynaPep, Core Zap, C4 Extreme, Nutrimax Burner, NitroX, IBE X-Force, Fusion Geranamine, ClearShot, Black Cats, y Musclespeed. Observar que esta no es una lista exhaustiva pero proporciona ejemplos de algunos suplementos comerciales que contienen, o que en ciertos países se ha determinado que contienen, MHA o sus variantes.

La MHA fue incluida en la Lista de Prohibiciones de WADA en 2010. A partir del 1º de enero de 2011 ha sido clasificada como Estimulante Específico prohibido En competición solamente. MHA ha causado recientemente una cantidad de casos positivos en el Rugby (y en otros deportes) tanto en Jugadores amateurs como profesionales.

¿Cuáles son los efectos de la MHA?

Se dice que los efectos estimulantes son menores que los producidos por la anfetamina y la efedrina y algo mayores que la cafeína. La MHA se comercializa como suplemento previo al ejercicio físico con propiedades termogénicas o estimulantes y puede tener ligeros efectos estimulantes pero no hay datos públicos disponibles sobre su mecanismo específico de acción, absorción, farmacocinética, metabolismo o excreción.

Los casos de los que se tiene conocimiento parecen indicar que los efectos de la MHA duran entre 1 y 3 horas y de que aumenta la concentración, ritmo cardíaco y productividad mientras que otros usuarios han informado un aumento de la ansiedad, nerviosismo y transpiración.

Sustancia relacionadas y otras denominaciones

La MHA tiene muchas variantes y nombres que los Jugadores deben controlar individualmente al considerar el uso de suplementos dietarios o nutricionales. Estos incluyen sin estar limitados a los mismos:

Metilhexaneamina; Metilhexanamina; DMAA (dimetilamilamina); Geranamina; Fortane; Fortan; Floradrena; 2-hexanamina, 4-metil-; 2-hexanamina, 4-metil- (9CI); 4-metil-2-hexanamina; 1,3-dimetilamilamina; 4-Metilhexan-2-amina; 1,3-dimetilpentilamina; 2-amino-4-metilhexane; Pentilamina, 1, 3-dimetil-; pelargonium graveolens; extracto de pelargonium; geranio, aceite de geranio o extracto de raíces de geranios.

Advertencia: En algunos casos las etiquetas y lista de ingredientes de los productos **no están completas**. Los Jugadores deben también advertir que los productos comercializados bajo la misma marca en países diferentes pueden contener diferentes ingredientes que no siempre aparecen en la etiqueta del producto.

¿Cuál es la sanción por un control positivo de MHA?

Un Resultado Analítico Adverso por MHA provoca una **sanción potencial de 2 años** que puede ser reducida si el Jugador puede demostrar cómo ingresó a su cuerpo la MHA y puede presentar evidencias (de otras persona o fuente) que corroboren que no fue ingerida para aumentar el rendimiento deportivo o enmascarar el uso de otra Sustancia Prohibida.

Responsabilidad absoluta

Los Jugadores deben ser conscientes que, bajo la política de responsabilidad absoluta, ellos son los únicos responsables por cualquier sustancia que se encuentre en su cuerpo (independientemente de si la sustancia estaba contenida en un suplemento dietario o nutricional preparado o recomendado por los encargados, personal médico u otras personas de confianza del equipo y/o si estaba o no estaba incluido en la etiqueta del producto). Aquellos Jugadores que usen suplementos dietarios o nutricionales lo hacen **a su propio riesgo y se les recomienda que extremen las precauciones.**