



EQUIPE D'ACCUEIL 3920
Marqueurs pronostiques et facteurs de régulation
des pathologies cardiaques et vasculaires



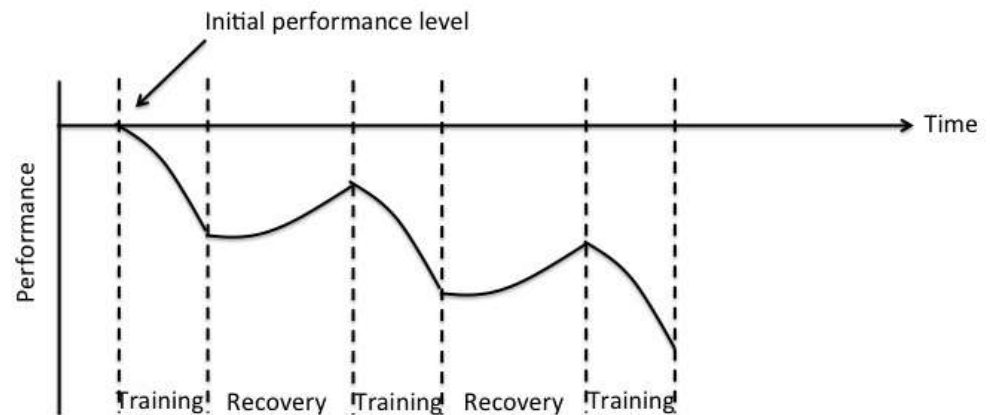
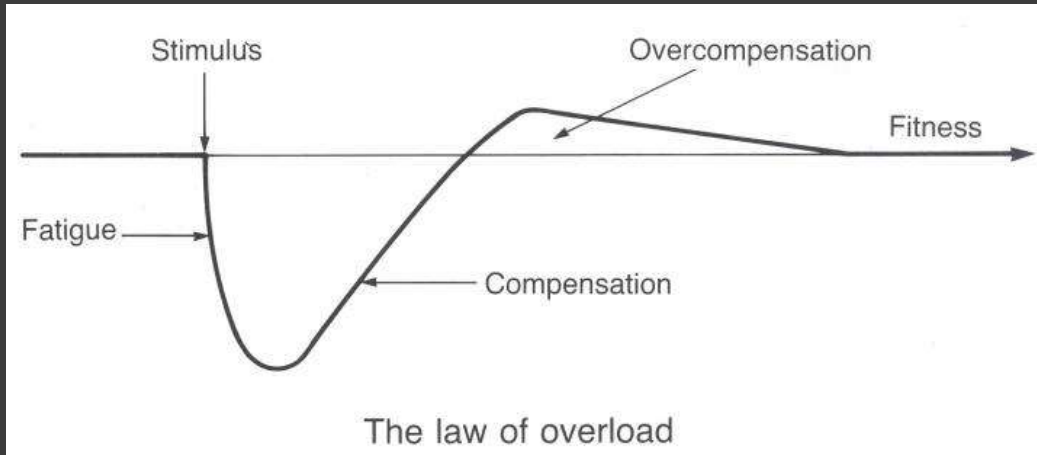
HEART RATE AND HEART RATE VARIABILITY: STILL USEFUL FOR TRAINING MONITORING?

6th International Congress Mountain Sport & Health
12 - 14 November 2015, Rovereto (TN), Italy

Laurent MOUROT

EA 3920 Prognostic markers and regulatory factors of heart and vascular diseases;
Exercise Performance, Health, Innovation platform
University of Franche-Comté, Besançon, France

Generality



Model of overtraining: Training load followed by insufficient recovery results in decreased performance.

Training / fatigue

- Underlying mechanisms not well known and difficulty to correctly appreciate workload.
- Normal response or real fatigue?
- Complex phenomenon dependant on biological and psychological factors

Shephard

Sports Med 2001; 31:167-194

Training / fatigue

⊙ Monitoring tools? Early detection?
Prevention ?

- **cost?**
- **Invasive?**
- **Technical considerations?**
- **Reliability?**
- **Repeatability?**
- **Sensibility?**

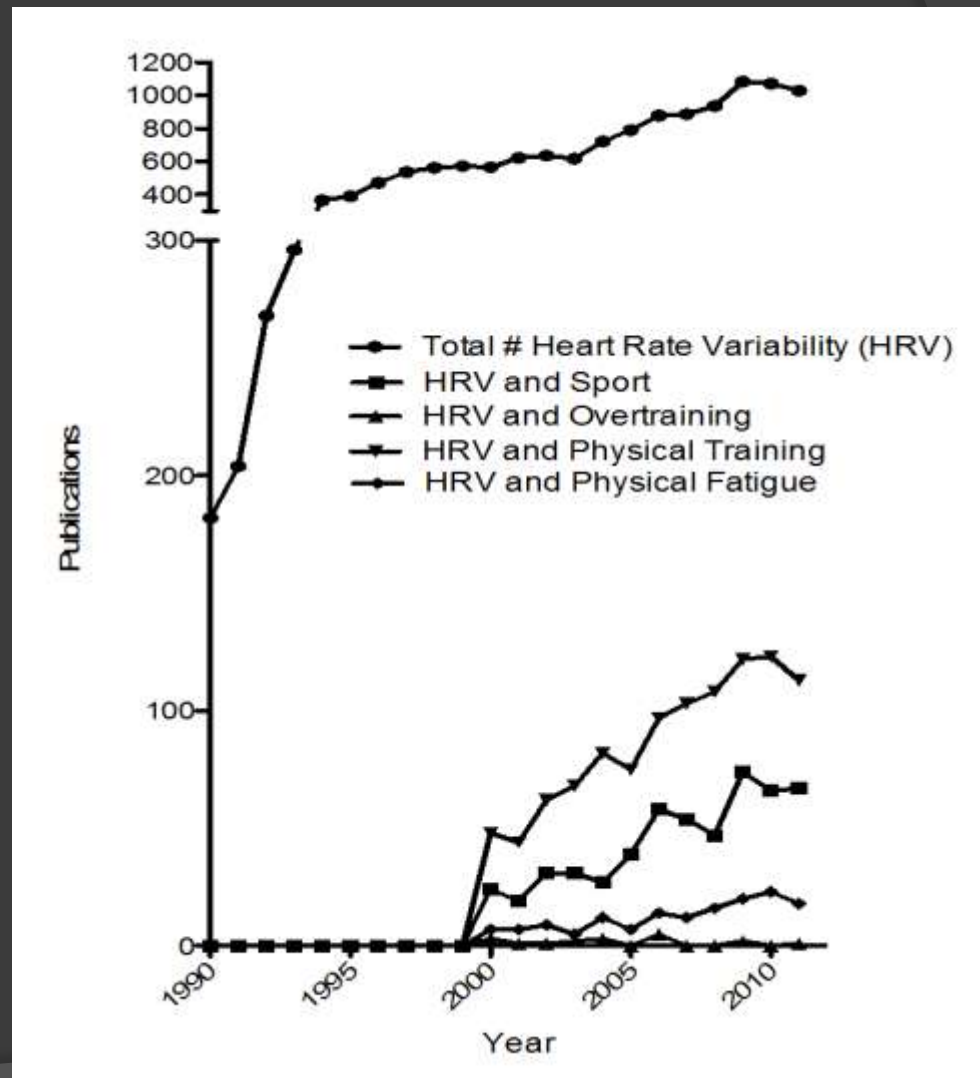


HR and HRV?

Heart rate / Heart rate variability

Makivić et al.

JEPonline 2013; 16(3):103-131

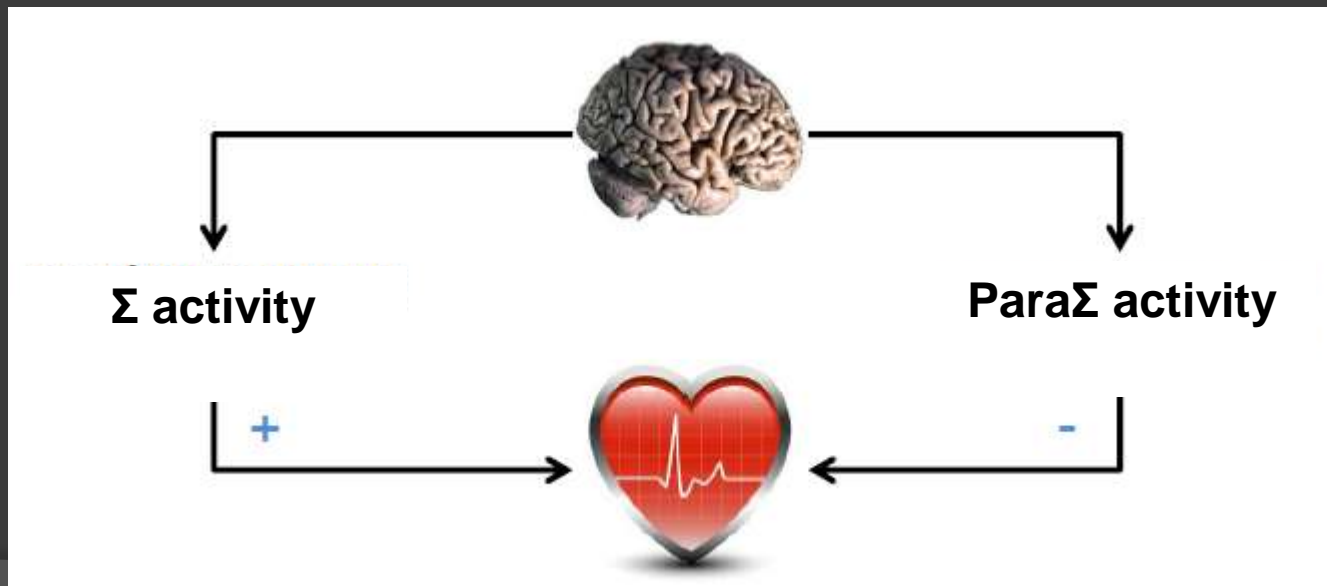


Heart rate / Heart rate variability

- Sinus node regulation

- $HR = HR_i * SNS * PNS$

Rosenblueth and Simeone
Am J Physiol 1934;110:42-55



HRV & ANS activity evaluation

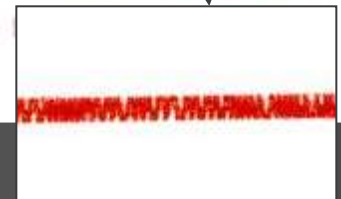
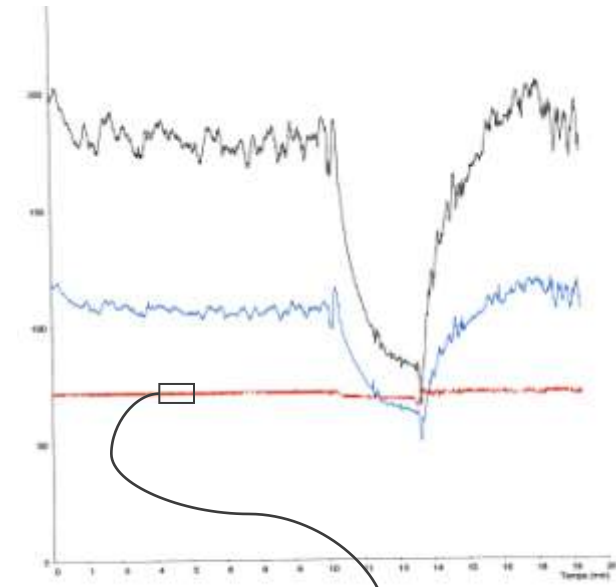
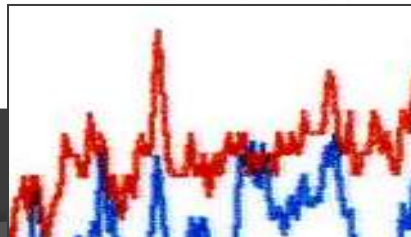
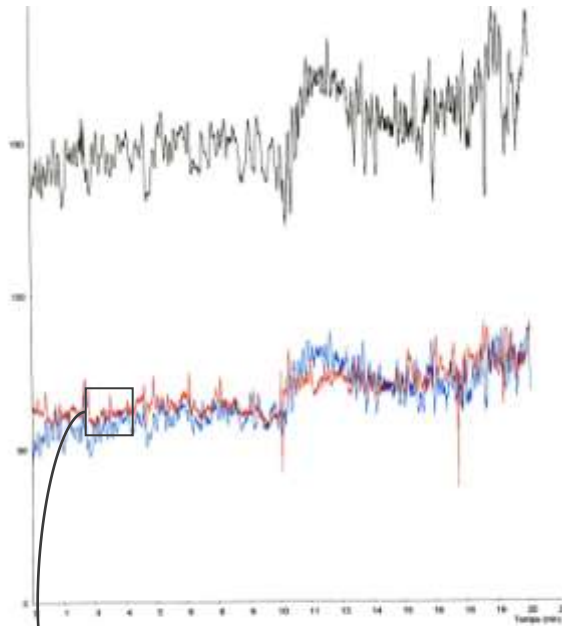
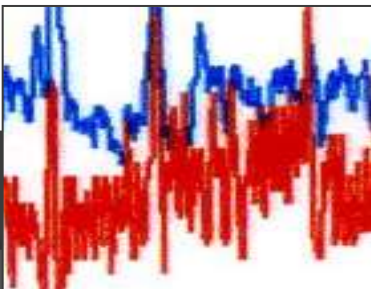
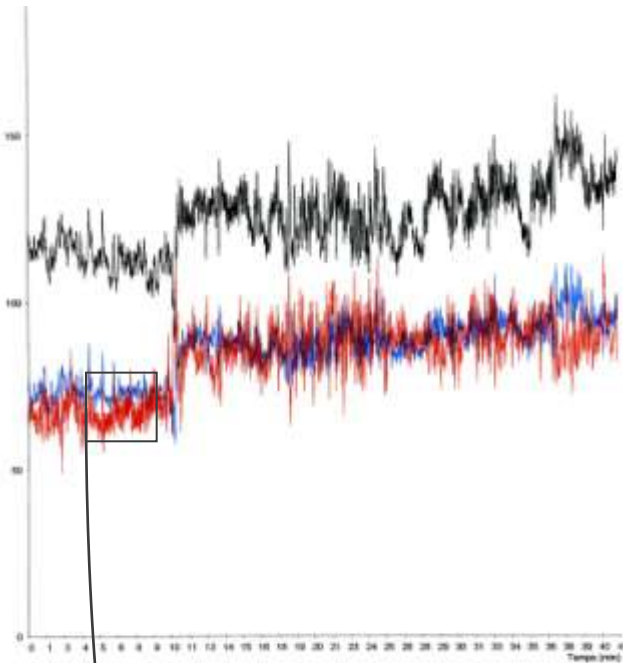
- ⊙ HRV is non-invasive measure
 - of ANS activity: no
 - of the regulation by ANS of the heart: yes but...
 - Of the sinus node response to the ANS activity: yes

Why HRV?

25 years, healthy

60 years, healthy

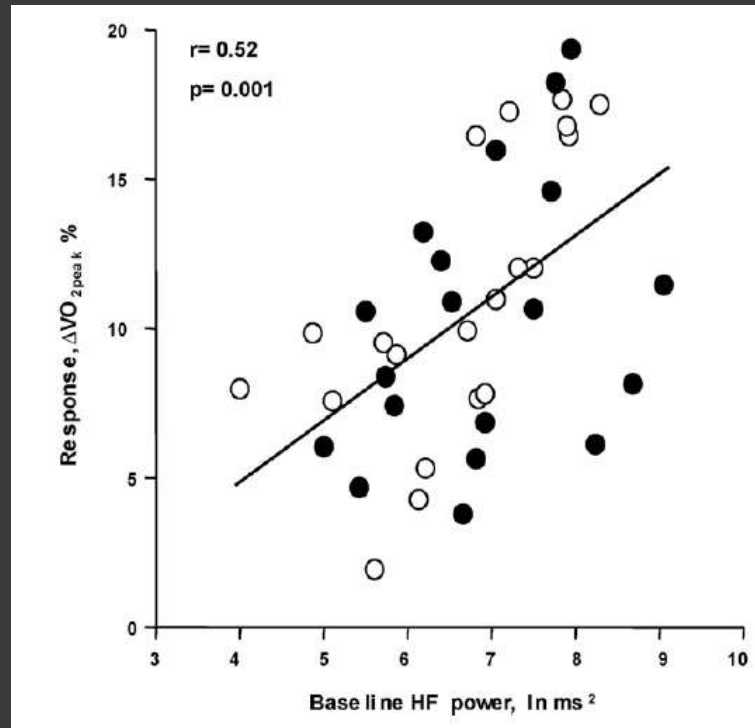
Patient with
neuropathy



— HR
— SAP
— DAP

Why evaluate ANS activity ?

- Individual responses to aerobic exercise



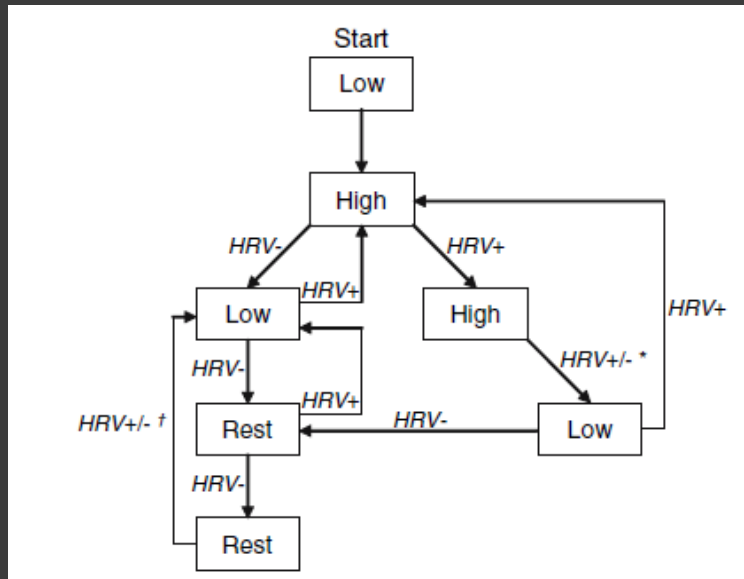
Hautala et al.

Am J Physiol Heart Circ Physiol 2003;285: H1747–H1752

Neuroscience and Behavioural Reviews 2009; 33:107-115

Why evaluate ANS activity ?

- Tailored training



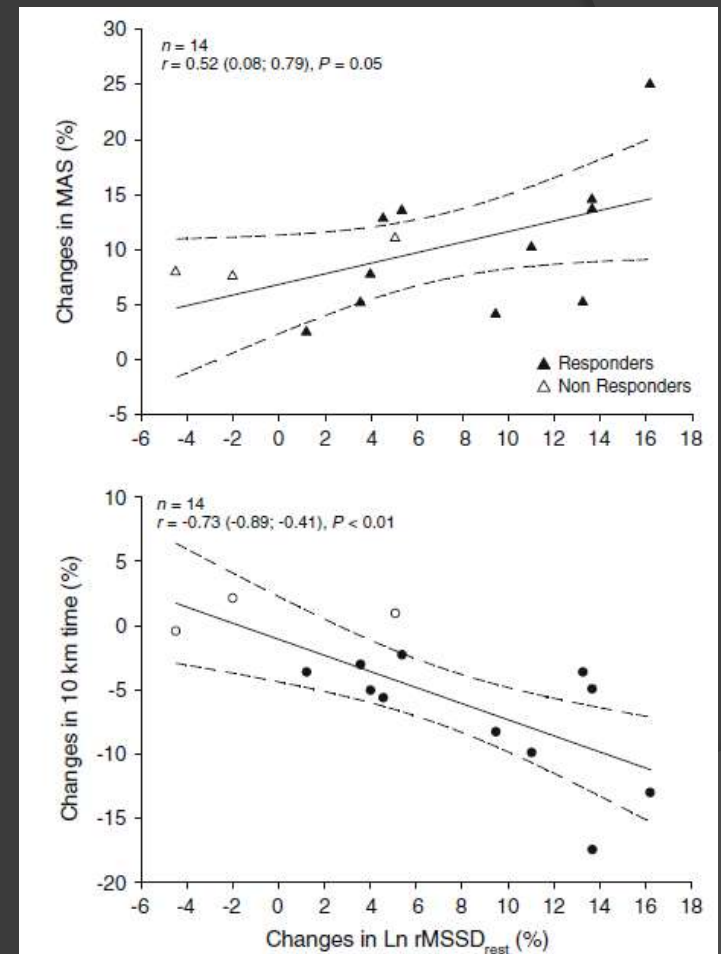
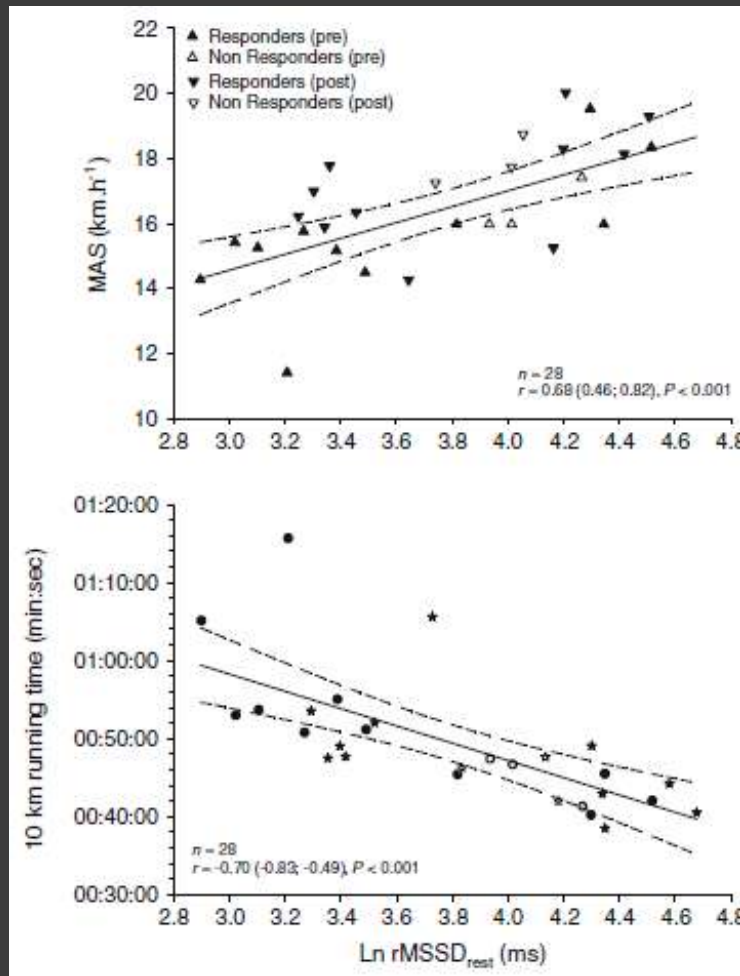
Kiviniemi et al.

Eur J Appl Physiol 2007; 101:743-751

Med Sci Sport Exer 2010; 42(7):1355-1363

- High intensity session if increase or no change in morning HRV.

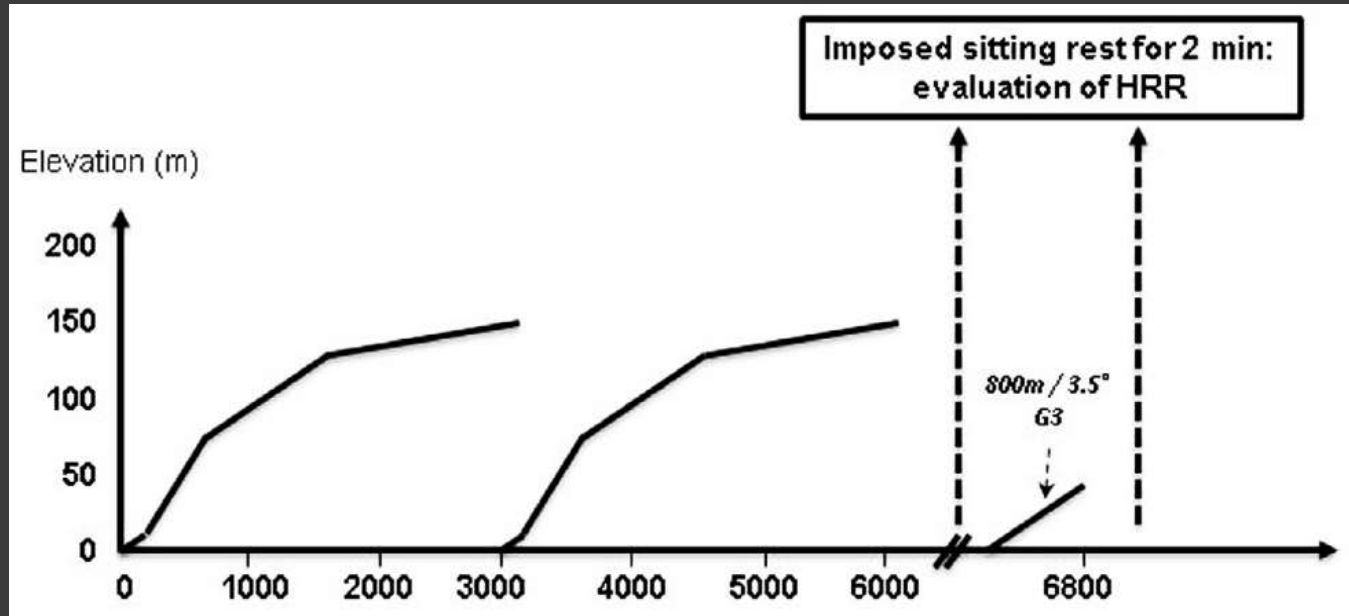
Link with performance ?



Buchheit et al.

Eur J Appl Physiol 2010 ; 108 : 1153-1167

Link with performance ?



Mourot et coll.

Int J Sports Physiol Perf 2015 ; 10 : 11-16

Link with performance?

Table 3 Correlation Coefficients (90% Confidence Limits) Between the Final Performance Time, Cardiopulmonary Variables, Blood Levels of Lactate, and the Postexercise Heart-Rate-Recovery Indexes Calculated During the 6-km and 800-m Time Trials, N = 10

		Final time	VO _{2max}	Mean % VO _{2max}	Mean % HR _{peak}	Final BL _a
6-km time trial	HRR60s	.39 (-.21; .78)	-.21 (-.68; .39)	-.21 (-.68; .39)	.03 (-.53; .57)	-.38 (-.22; .77)
	nHRR60s	.37 (-.23; .77)	-.23 (-.69; .37)	-.20 (-.68; .40)	-.04 (-.58; .52)	-.38 (-.22; .77)
	T30	.27 (-.33; .72)	-.13 (-.64; .45)	-.44 (-.80; .15)	.20 (-.40; .68)	.47 (-.11; .81)
Submaximal exercise	HRR60s	.09 (-.49; .61)	-.31 (-.74; .29)	.07 (-.50; .60)	-.15 (-.65; .44)	-.44 (-.80; .15)
	nHRR60s	.07 (-.50; .60)	-.31 (-.74; .29)	.08 (-.49; .61)	-.17 (-.66; .42)	-.44 (-.80; .15)
	T30	-.36 (-.24; .76)	-.58 (-.86; -.04)	.08 (-.49; .61)	.25 (-.35; .70)	.30 (-.30; .73)
800-m time trial	HRR60s	-.21 (-.68; .39)	.16 (-.43; .65)	.17 (-.42; .66)	-.27 (-.72; .33)	-.43 (-.79; .16)
	nHRR60s	.07 (-.50; .60)	.15 (-.44; .65)	.17 (-.42; .66)	-.28 (-.72; .32)	-.45 (-.80; .14)
	T30	.59 (.06; .86)	-.68 (-.90; -.20)	-.50 (-.82; .07)	.16 (-.43; .65)	-.19 (-.67; .4)

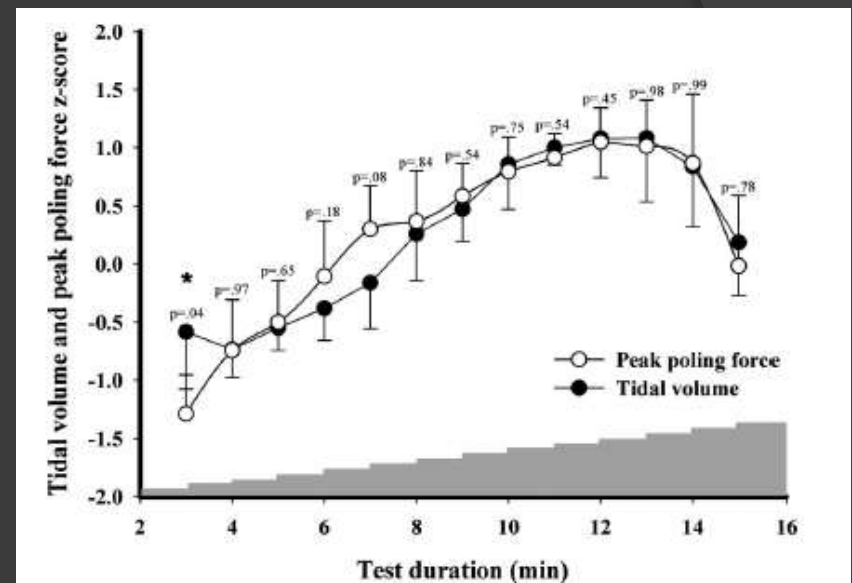
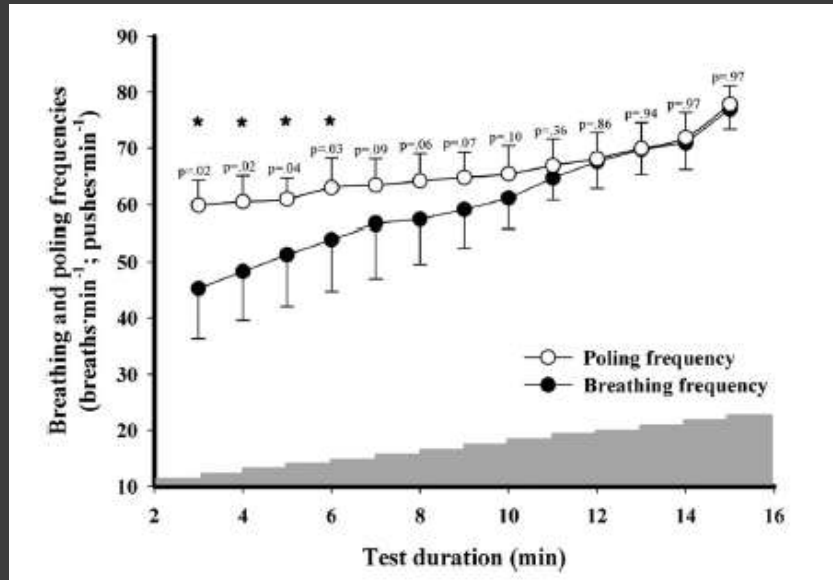
Abbreviations: VO_{2max}, maximal oxygen consumption; HR, heart rate; BL_a, blood lactate during the time trial; HRR60s, difference between HR at the end of exercise and 60 s later; nHRR60s, HRR60s data expressed as a percentage of the final HR; T30, time constant for the short-term (10–40 s) postexercise recovery of HR.

Note: Bold indicates a clear relationship.

Mourot et al.

Int J Sports Physiol Perf 2015 ; 10 : 11-16

Upper body influences



Strength Cond Res 2012; 26(2): 381–387

ANAEROBIC THRESHOLD ASSESSMENT THROUGH THE VENTILATORY METHOD DURING ROLLER-SKI SKATING TESTING: RIGHT OR WRONG?

NICOLAS FABRE,¹ LORENZO BORTOLAN,^{1,2} BARBARA PELLEGRINI,^{1,2} LIVIO ZERBINI,^{1,2}
LAURENT MOUROT,^{3,4} AND FEDERICO SCHENA^{1,2}

Upper body influences

- HRV for determination of ventilatory thresholds: running/cycling

Cottin et al.

Int J Sports Med. 2006;27(12):959–967

Int J Sports Med. 2007;28(4):287–294

- Swimming / XCskiing / Ski mountaineering
 - Need to take into account the activity of the arms

Di Michele et al. *Strength Cond Res.* 2012;26(11):3059–3066

Mourot et al. *Int J Sports Physiol Perf* 2014, 9, 695-701

Cassirame et al. *Eur J Sport Sci.* 2015 Oct;15(7):615-22

Training induced fatigue

⦿ Classification

- Sympathic (Basedow)
- Parasympathic (Addisson)

Israel

Medizin und Sport 1976; 16:1-12

Barron et al.

J Clin Endocrinol Metab 1985; 60:803-806

Monitoring & fatigue prevention

Pichot et al.

Med Sci Sports Exerc 2002; 34:1660-1666

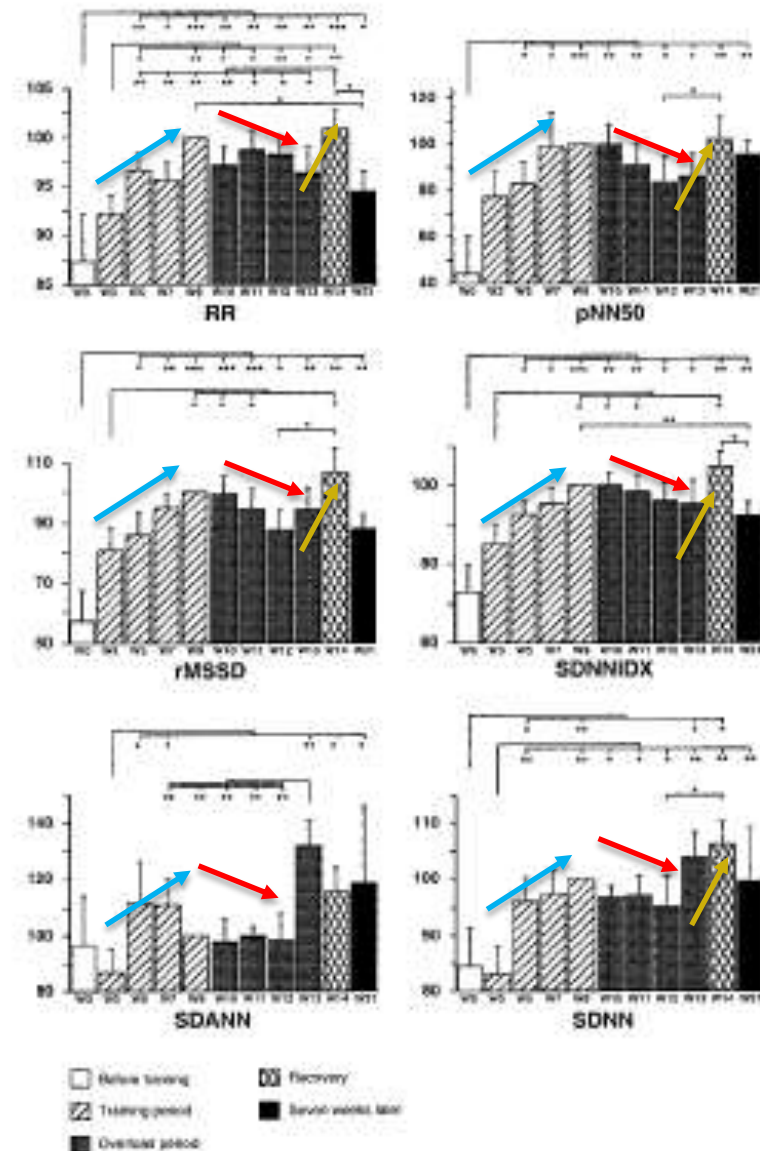
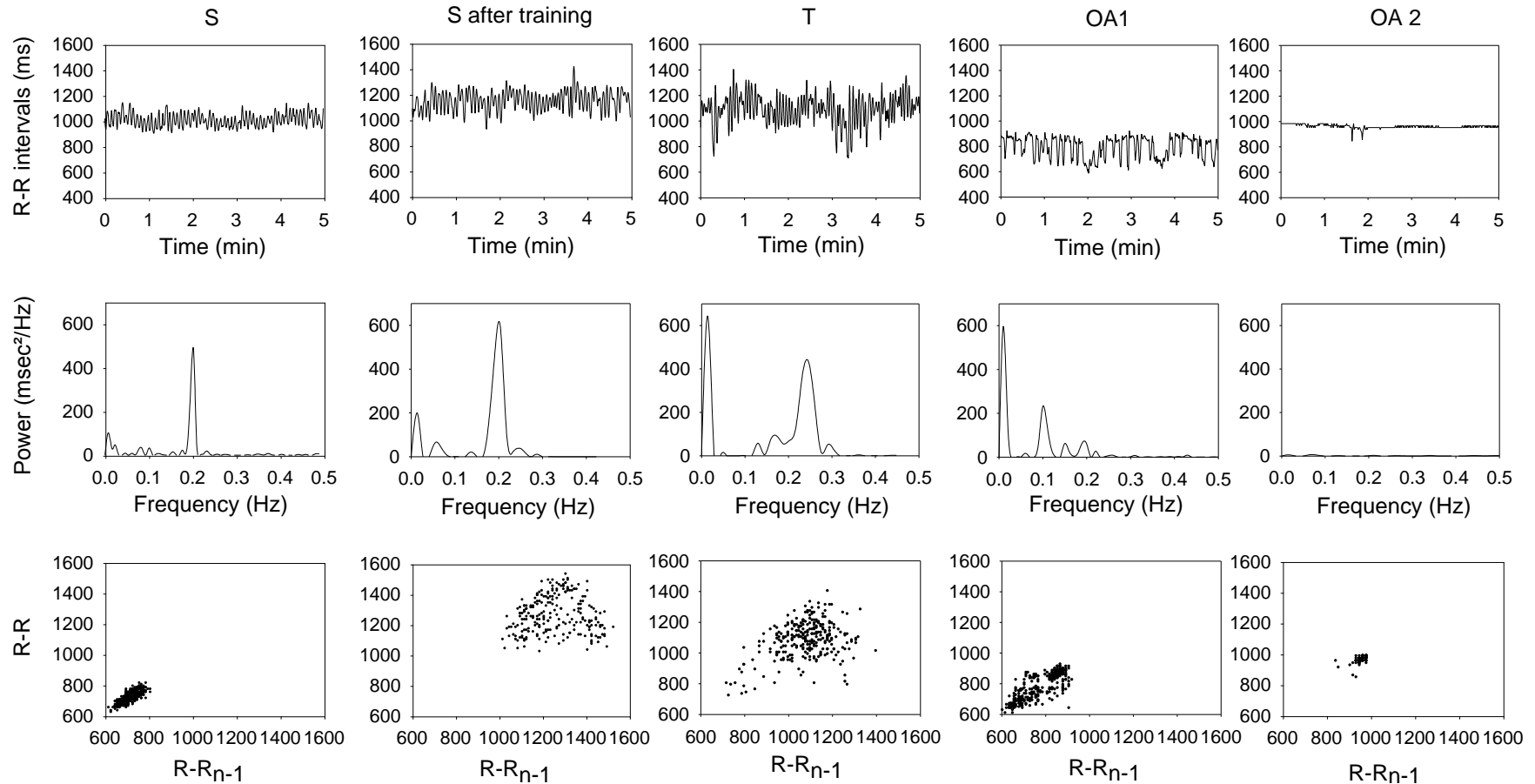


FIGURE 2—Evolution of the time domain indices of heart rate variability calculated on nocturnal periods along the protocol, including basal values measured before the beginning of the protocol (W0); the 8 wk of training period and the following recovery transition week (W3, W5, W7, and W9); the 4 wk of overload training period (W10, W11, W12, and W13); the recovery week (W14); and 6 wk after the end of the protocol (W21). All the calculations were assessed in reference to the week 9 (W9). * $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$.

Monitoring & fatigue prevention



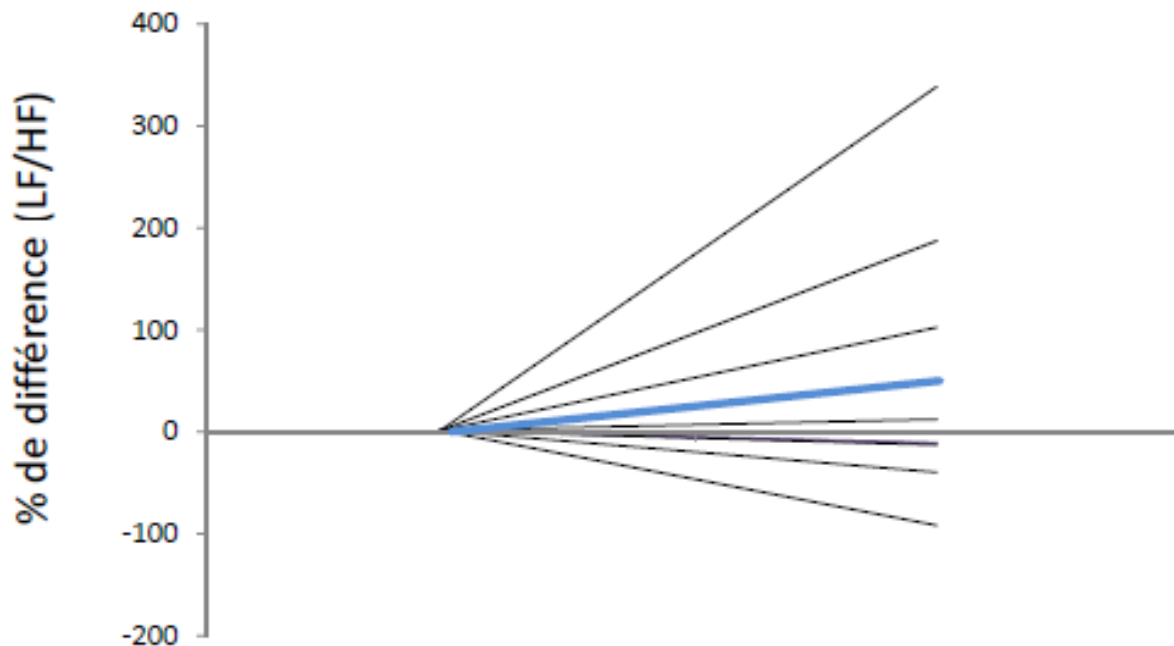
Mourot et al.

Clin Physiol Funct Imaging 2004; 24:10-18

Monitoring & fatigue prevention

⦿ LF/HF

- ~ -10% normal training
- ~ + 50% overload



Uusitalo et al.
Int J Sports Med 1998;
19 : 532-540

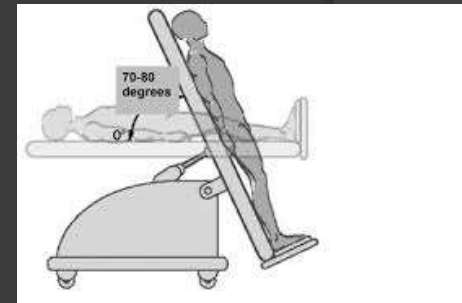
Measurement

During night

Brandenberg et al. *Auton Neurosci* 2005 ;
121 : 81-86

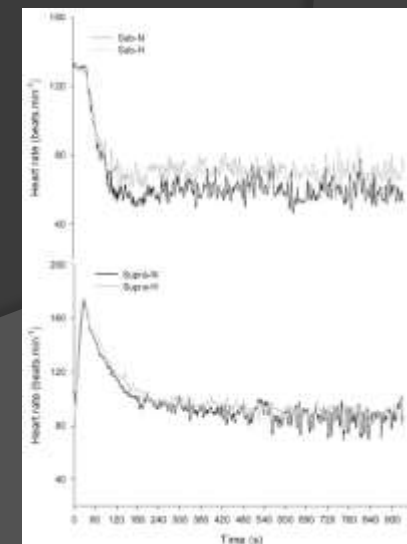
Tilt-test (passive or active)

Schmitt et al. *PLOS ONE* 2013; 8(8): e71588

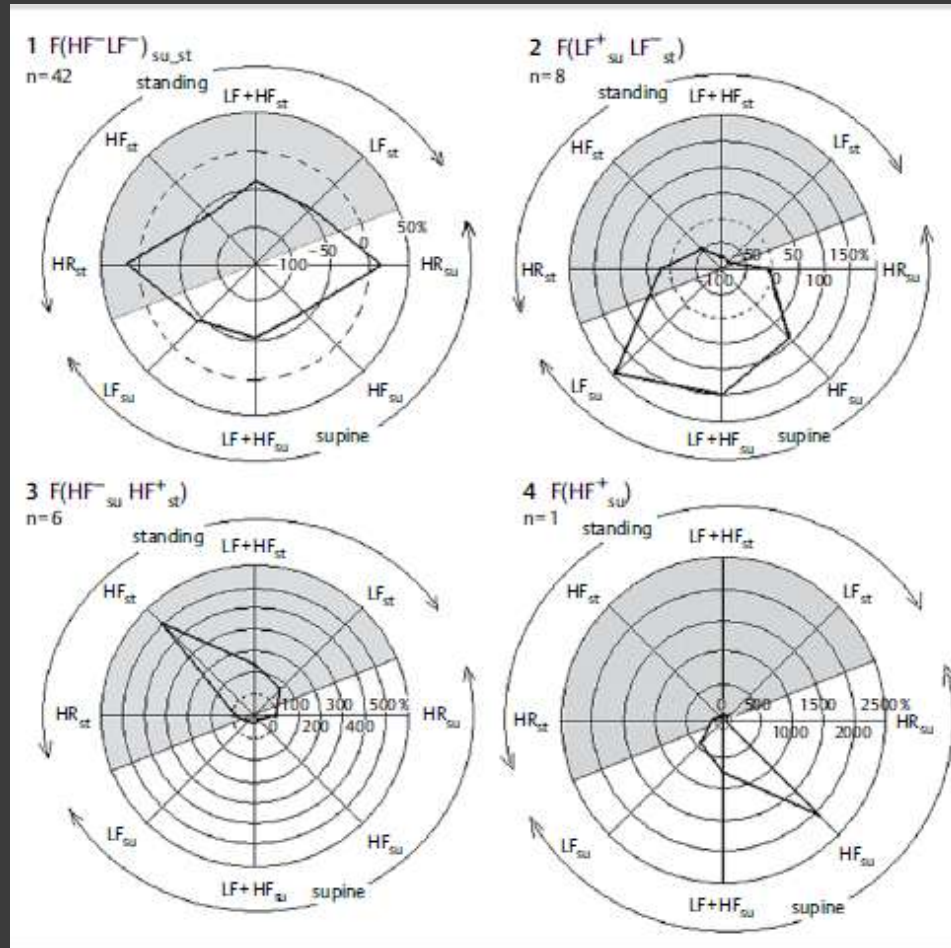


Post exercise recovery

Al Haddad et al. *Int J Sports Med* 2011; 32(8):
598-605



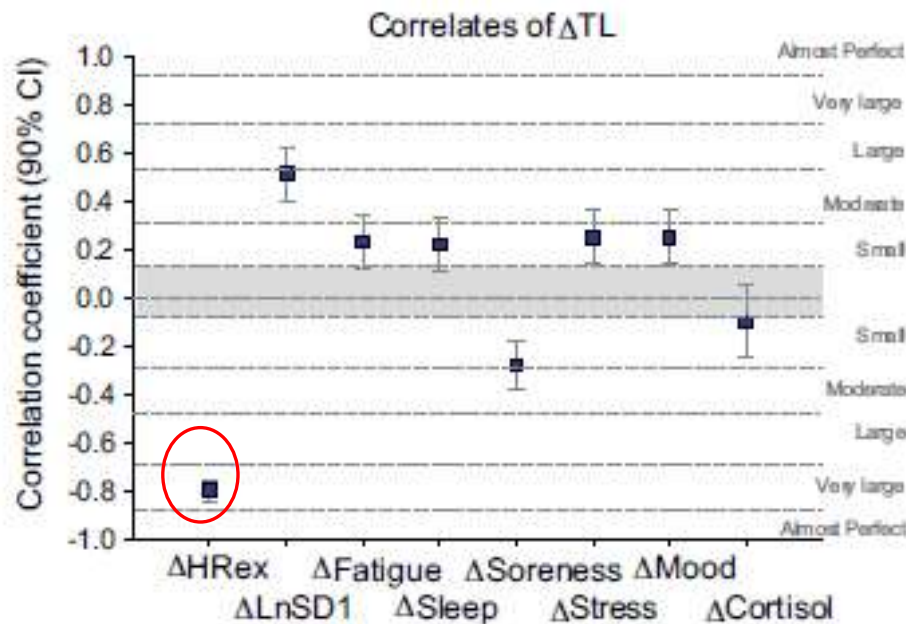
Monitoring & fatigue prevention



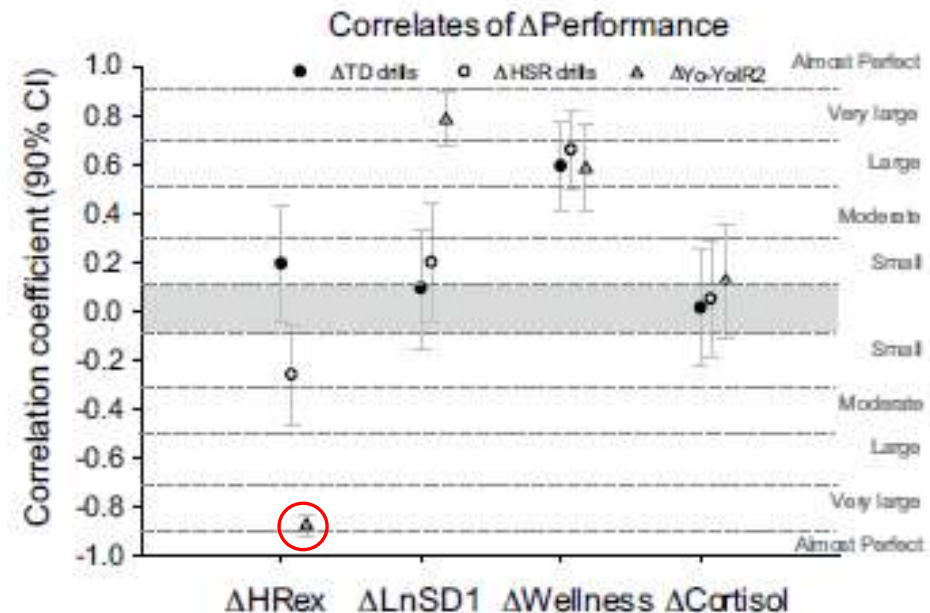
Schmitt et al.
PLOS ONE 2013; 8(8):e71588

Schmitt et al.
Int J Sports Med 2015; 8(8):e71588

Monitoring & fatigue prevention



Buccheit et al.
J Sci Med Sport 2013; 16:550-555



Conclusion

- ⦿ **HR and HRV are useful**
 - easy and valide measurement of the sinus node response to the ANS activity
 - Training response / performance / fatigue
- ⦿ HRV depends on sympathomimetic influence
- ⦿ Not really reproducible
- ⦿ Required highly standardised conditions
- ⦿ **Use for monitoring required carefulness and other tools such as psychological tools.**



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