



Cardiometabolic health benefits of a six-week high-intensity interval training intervention: a case study

Journal:	<i>Journal of Sports Sciences</i>
Manuscript ID:	Draft
Manuscript Type:	BASES Abstracts

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3 Cardiometabolic health benefits of a six-week high-intensity interval training
4 intervention: a case study
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21 Original Investigation
22 Abstract word count: 397 words
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3 **Title:** Cardiometabolic health benefits of a six-week high-intensity interval training
4 intervention: a case study.
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6 **Background:** Regular physical activity is recommended for patients diagnosed with
7 impaired glucose tolerance (IGT) and Type 2 Diabetes. However, “lack of time” is a
8 common cited barrier in achieving the recommended weekly physical activity
9 guidelines. High-intensity interval training (HIT) has been proposed as a time
10 efficient exercise modality able to elicit similar adaptations in aerobic fitness as
11 traditional moderate-intensity endurance exercise. **Purpose:** The purpose of this
12 case study was to highlight the possible application of a HIT programme for the
13 prevention and treatment of metabolic disorders. The participant was recruited from
14 a larger study, investigating the efficacy of a six-week HIT intervention in a
15 sedentary, male cohort. Pre-testing screening indicated that the participant had IGT.

16 **Methods:** Before commencement the study received institutional ethical approval.
17 The participant was male and sedentary (age; 21 years, stature; 1.88 m, body mass;
18 134.4 kg, body fat; 33.7%, $\dot{V}O_{2\text{peak}}$; 16.8 ml/kg/min). The intervention, involved three
19 weekly, supervised, low volume HIT sessions for six weeks. Each session involved
20 28 minutes of exercise (18 sessions; 5 x 2 minutes starting at 80% of peak power
21 output [weeks 1-2], increasing 10% every two weeks for the remainder of the
22 intervention). Three months after the HIT intervention a follow up assessment was
23 scheduled. Pre, post HIT intervention and 3-month follow up measures included; a
24 $\dot{V}O_{2\text{peak}}$ cycle-ergometer protocol; an oral glucose tolerance test (OGTT); mean
25 arterial blood pressure and anthropometric measures including a 3D body scan
26 (circumferences). **Results:** Changes in two-hour post OGTT glucose were observed
27 (pre; 9.1 mmol/l vs post; 4.0 mmol/l and 3-months; 4.4 mmol/l). The $\dot{V}O_{2\text{peak}}$
28 increased from 16.8 ml/kg/min to 27.1 ml/kg/min pre vs post-intervention, with a
29 further increase (29.1 ml/kg/min) at 3-months follow up. Body weight decreased (pre;
30 134.4 kg vs post; 127.5 kg, and 3-months; 117.2 kg). Body fat decreased (pre;
31 33.7% vs post; 32.7%, and 3-months; 30.3%). Reductions in resting systolic (pre;
32 141 mmHg vs post; 138 mmHg, and 3-months; 129 mmHg) and diastolic (pre; 90
33 mmHg vs post; 85 mmHg, and 3-months; 65 mmHg) blood pressure were observed.

34 **Discussion and conclusions:** Improvements in aerobic fitness and metabolic
35 markers associated with glucose metabolism were observed after a six-week HIT
36 training programme, for an individual with impaired glucose tolerance. Further
37 improvements in the reduction of risk factors for chronic disease were observed after
38 three months follow up. Blood glucose response demonstrated the potential
39 application of HIT for the treatment and prevention of IGT.
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43 **Acknowledgments:** We would like to thank Caroline Douglas and Samantha Nabb
44 for their assistance selecting appropriate behaviour and mood evaluation techniques.
45 In addition, Will Evans and Alasdair O'Doherty for their assistance with blood
46 sampling during data collection.
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Key words: high intensity interval training, HIT, Type 2 Diabetes, T2D, VO2max, OGTT

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