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ANALYSIS OF TRAINING LOADS IN POLISH ADOLESCENT ROAD CYCLISTS IN THE PREPARATORY PERIOD AND THEIR EFFECTS ON PHYSICAL FITNESS

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- B. Data collection/entry
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Abstract:

Background: Road cycling is one of the most extreme endurance sports. Professional road cyclists typically train ~20 hours per week and cover ~600 km a week. The longest 1-day race in men's cycling can be up to 300 km while the longest multiple-stage races can last up to 21 days. Twenty to seventy accelerations are performed during a race, exceeding maximal aerobic power. Training is a crucial component of athletes' preparation for competitions. Therefore, strong emphasis should be on recording the applied training loads and monitoring how they influence aerobic and anaerobic fitness, as well as performance. The aim of the study was to analyze the training loads in the preparatory period and their effects on aerobic and anaerobic fitness in adolescent road cyclists.

Materials and Methods: The study involved 23 highly trained/national elite male road cyclists. Of them, 16 athletes (age: 16.2 ± 1.1 years; training experience: 5.0 ± 2.1 years) fully completed all components of the study. Aerobic fitness was measured using cardiopulmonary exercise testing (graded exercise test to exhaustion), while anaerobic fitness was evaluated using the 30-second modified Wingate anaerobic test. Each recorded training session time was distributed across training and activity forms as well as intensity zones.

Results: The endurance training form used in the preparatory period was characterized by low-volume ($\sim 7.7 \text{ h} \times \text{wk}^{-1}$), non-polarised (median polarization index 0.15) pyramidal intensity distribution (zone¹~68%; zone²~26%; zone³~1% total training volume). Endurance (specific and non-specific) and strength training forms accounted for ~95% and ~5% (respectively) of the total training time.

Conclusion: Low-volume, non-polarised pyramidal intensity distribution training is probably not an effective stimulus for improving physical fitness in adolescent road cyclists. Disregarding high-intensity exercises in training programs for adolescent cyclists may result in stagnation or deterioration of physical fitness.

Introduction

Road cycling competitions are very demanding in some respects. Analysis of road cycling races has shown that the average distance covered during a competition is 53km (1.4h) in youth, 77-94km (2.0-2.4h) in juniors, and 150km (3.9h) in elite cyclists [1,2]. Interestingly, during such long-lasting competitions, work intensity may be very high.

The percentage of the total flat race time in professional cyclists at an intensity below 70%, between 70 and 90%, and above 90% of maximal oxygen uptake ($\text{VO}_{2\text{max}}$), averages at approximately 70, 25, and 5%, respectively [3]. During the race, approximately 20 to 70 accelerations are performed at an intensity exceeding maximal aerobic power [4]. Moreover, male cyclists may generate power of over 1,200W ($17\text{W}\times\text{kg}^{-1}$) during final sprints [5]. What is more, data indicates that competitions in younger categories can be even more intense than those in elite cyclists in terms of internal intensity [2].

From a physiological perspective, sports performance in cycling competitions is determined by both aerobic [3,6] and anaerobic fitness [5,7]. The gold standard for evaluation of aerobic fitness is cardiopulmonary exercise testing (CPET), combining the measurement of: (i) physiological variables such as heart rate (HR), pulmonary ventilation (VE), volume of oxygen uptake (VO_2), and exhaled carbon dioxide (VCO_2); (ii) work rate (e.g. power output) and rating of perceived exertion (RPE) during the graded exercise test (GXT) to exhaustion [8]. For practitioners, the most important indices obtained from GXT are $\text{VO}_{2\text{max}}$ and power output per kilogram of body mass at metabolic thresholds and $\text{VO}_{2\text{max}}$ [9]. Furthermore, the Wingate anaerobic test (WAT) is widely used to assess anaerobic fitness [10]. Classic WAT requires pedaling for 30s at maximum speed against constant resistance. During the test, consecutive crank revolution times are recorded. Based on the obtained data, the following anaerobic fitness indices are calculated: peak (PP), mean (MP), and minimal (MinP) power (absolute and relative), time to obtain peak power (TOPP), and fatigue index (FI).

Training is a crucial component of athletes' preparation for competition. Therefore, strong emphasis should be on recording the applied training loads and monitoring how they influence physical fitness and performance. Training load can be categorized as either internal or external [11]. Internal training loads are defined as relative biological (both physiological and psychological) stressors imposed on an athlete during training or competition. Measures such as heart rate, blood lactate, oxygen consumption, and ratings of perceived exertion are commonly used to assess internal load. On the other hand, external training loads are objective measures of the work performed by an athlete during training or competition and are evaluated independently of internal workloads. Common measures of external load include power output, speed, acceleration, time-motion analysis, global positioning system, and accelerometer-derived parameters. An inexpensive and widely applied method of quantifying training loads in the practice of endurance sports is the time-in-zone approach [12]. This method is based on the measurement of HR and duration of training spent in 3 intensity zones determined individually in relation to HR at metabolic thresholds. However, the drawback of this method is the underestimated time of high-intensity training [12].

Reporting applied training loads and their effects on physical fitness or performance in various athlete populations using scientific approaches can be relevant for practitioners and scientists. Such data may provide a starting point for designing training programs and/or explaining their positive effects (performance improvement), and prevention of potential negative or no effects of the load used (injury, overtraining). To the best of our knowledge, researchers mainly concentrate on the analysis of internationally competitive training loads in adult cyclists, generally employing a retrospective study design [13–21], while there is a very limited amount of data from studies on adolescent road cyclists [22,23] or research in which the prospective scheme was employed [24]. Therefore, the aim of the study was to analyze training loads applied in the preparatory period and their effects on aerobic and anaerobic fitness in adolescent road cyclists.

Material and Methods

Study design

The study was conducted in Świdnica, Poland (at an elevation of 250 meters above sea level), in a ventilated gymnasium. Basic anthropometric indices and physical fitness were assessed (over the span of 4 days) before and after an 18-week preparatory period (PrPe) (November-March), during which training loads were recorded. GXT and MWAT were performed between 10:00 a.m. and 4:00 p.m. at an ambient temperature of $20\pm 1^\circ\text{C}$ and relative humidity of $40\pm 5\%$. Athletes were tested at the same time of the day ($\pm 1\text{h}$) before and after PrPe to avoid the influence of circadian rhythm. Participants were asked to remain well-hydrated, to refrain from consuming any stimulants for at least 24h before testing, and not to engage in strenuous exercise at least 48h prior to testing. Assessments were performed in the following order: anthropometric measurements (fasting and after using the toilet), GXT (minimum 2 hours after the last meal), and MWAT (minimum 1 hour after GXT). Before each test, the cyclists were familiarized with the testing procedures. Stress tests were performed on a Cyclus 2 ergometer (RBM electronic-automation GmbH, Germany) with the athlete's bike installed (the same bike on which the athlete trained and competed in races).

The ergometer was calibrated in accordance with the manufacturer's recommendations. All procedures were carried out in accordance with the 1964 Declaration of Helsinki and its subsequent amendments. Consent to perform testing was provided by the Bioethics Committee at the Regional Medical Chamber in Kraków (No. 249/KBL/OIL/2021).

Participants

The study involved 23 male road cyclists recruited from students of the Sports Championship School of Cycling in Świdnica, Poland. Finally, material for analysis was taken from 16 athletes (age: 16.2 ± 1.1 years; training experience: 5.0 ± 2.1 years) who fully completed all components of the study. The basic characteristics of the cyclists are presented in Tab. 1. Seven cyclists withdrew from the tests without giving a reason. The inclusion criteria were: (i) progression of biological development - minimum third pubic hair stage on Tanner's Scale [25]; (ii) "highly trained/national elite" level according to McKay's participant classification framework for research in sports sciences [26]; (iii) having a current certificate from a sports medicine doctor regarding the ability to practice road cycling. The exclusion criteria were age above 18 years or the health status making it impossible to perform the stress tests. The participants and their legal guardians were informed about the research protocol in detail and gave their written informed consent to participate in the study.

Anthropometric measurements

Body height (BH) was measured using a Seca 213 stadiometer (Seca GmbH & co. kg, Germany) to the nearest 1 mm. Body mass (BM), fat mass (BF), and lean body mass (LBM) were evaluated by means of an MC 780 MA body composition multi-frequency (5kHz/50kHz/250kHz) octopolar analyzer (Tanita, Japan) using the method of electrical bioimpedance [27]. The measurements were conducted under conditions recommended by the analyzer's manufacturer.

Graded exercise test

The graded exercise test began with a 4-minute warm-up performed at 80W. Next, the load was increased by 40W every 2 minutes. The effort was continued until exhaustion, which was manifested in the inability to maintain a cadence higher than 70rpm. During testing, the following physiological variables were recorded breath-by-breath using a Quark CPET ergospirometer (Cosmed, Italy): VE, VO_2 and VCO_2 and HR. The data were averaged across 10-s intervals. The ergospirometer was calibrated according to the manufacturer's instructions. Rating of perceived exertion (RPE) was recorded in the last 15s of each 2-minute interval using the 6-20 Borg scale [28]. Anaerobic threshold (AT) and respiratory compensation point (RCP) were determined based on the dynamics of change in respiratory indices [29]. The following criteria [30] were used for VO_2 max determination: an increase in VO_2 of $<150\text{mL}\cdot\text{min}^{-1}$ with an increase in power, respiratory exchange ratio >1.10 , RPE >18 on the Borg's scale, age-predicted maximal HR $>90\%$ calculated according to Tanaka [31].

Modified Wingate anaerobic test

At baseline, the participants performed a 4-minute warm-up at 90W. During the final 3-5s of the second and fourth of the warm-up, the athletes performed maximal accelerations. Two minutes after the warm-up, the maximal 30-s all-out effort with a stationary start was performed. The resistance applied during the test was set at 10% body mass [32]. At the "Go!" command, the task of the participant was to reach the maximum pedaling rate as quickly as possible and then maintain it in a seated position until the end of the effort (with strong verbal encouragement). Based on the MWAT, the following indices were evaluated: PP, TOPP, MP, MinP, and FI, calculated as $((PP - \text{MinP}) \div PP) \times 100\%$.

Training monitoring

Training load analysis was conducted based on the data recorded by the Edge 530 sport tester (Garmin, USA) and exported first to the Garmin Connect platform and then to Excel. Each recorded training session times were distributed across training form [33] (endurance, strength), activity form [33] (specific: spinning, road, track, or mountain cycling; non-specific: running, cross-country skiing, skating, swimming), and exercise intensity [34] (zone¹: below HR_{AT} ; zone²: between HR_{AT} and HR_{RCP} ; zone³: above HR_{RCP}) using a time-in-zone approach [12]. Moreover, the polarization index was calculated on a weekly basis according to Treff et al. [35].

Statistical analysis

Statistical analysis was carried out using Statistica 13.3 software (TIBCO Software Inc., Palo Alto, CA, USA). Changes in variables were evaluated with the two-tailed paired samples *t*-test or Wilcoxon signed-rank test depending on

normal data distribution, which was examined with the Shapiro-Wilk test. The probability of type-I error below 0.05 was adopted as the level of significance. The effect size for the paired *t*-test samples was calculated by dividing the mean difference by the standard deviation of the difference, while the Wilcoxon signed-rank test, was calculated by dividing the z-value by the square root of the observation number [36]. Test power was calculated post-hoc using G*Power 3.1.9.7 software (input variables: 2-tail, effect size, $\alpha=0.05$, sample size=16).

Results

Anthropometric indices

After the 18-week PrPe, an increase in body mass was observed as a result of a rise in lean body mass. Detailed changes in anthropometric indices are presented in Table 1.

Table 1. Anthropometric characteristics (median (1st and 3rd quartiles)) of the cyclists studied

	pre-test	post-test	Difference (%) pre-post	p-value	ES	p
Body height (cm)	178.0 (174.3-180.5)	178.3 (174.8-180.8)	0.3 (-0.3-0.4)	0.738	0.24	0.23
Body mass (kg)	64.5 (59.8-68.1)	65.5 (62.4-69.9)	2.5 (0.9-4.6)	0.004*	0.87	0.95
Fat mass (kg)	10.1 (8.7-11.7)	9.8 (9.2-12.5)	2.5 (-3.2-8.22)	0.317	0.27	0.27
Fat mass (%BM)	15.6 (14.8-17.6)	15.9 (14.0-17.8)	-0.4 (-4.0-5.8)	0.947	0.02	0.05
Lean body mass (kg)	54.0 (50.7-57.7)	54.8 (52.3-59.4)	2.0 (1.0-4.7)	0.002*	0.99	0.98

p-value – probability of type-I error, * – statistically significant difference, ES – effect size, P – test power

Aerobic performance

Following the 18-week preparatory period, P_{AT} (W and $W \times kg^{-1}$), P_{VO2MAX} (W), and VO_{2max} ($L \times min^{-1}$) improved significantly. No changes in P_{AT} ($W \times kg^{-1}$), P_{RCP} (W and $W \times kg^{-1}$), or VO_{2max} ($mL \times kg^{-1} \times min^{-1}$) were found, whereas P_{VO2MAX} ($W \times kg^{-1}$) deteriorated substantially. Detailed data regarding changes in aerobic fitness indices are shown in Table 2.

Table 2. Indices of aerobic performance (median (1st and 3rd quartiles)) before and after the 18-week preparatory period

	pre-test	post-test	Difference (%) pre-post	p-value	ES	p
P_{AT} (W)	200 (200-200)	200 (200-240)	16.7 (0-16.7)	0.012*	0.63	0.63
P_{AT} ($W \times kg^{-1}$)	3.0 (2.9-3.2)	3.3 (3.0-3.6)	12.9 (-1.4-16.6)	0.014*	0.75	0.80
P_{RCP} (W)	280 (280-320)	320 (280-320)	0.0 (0.0-12.5)	0.059	0.47	0.40
P_{RCP} ($W \times kg^{-1}$)	4.6 (4.2-4.7)	4.6 (4.4-5.0)	-0.4 (-3.3-9.1)	0.207	0.35	0.26
P_{VO2MAX} (W)	360 (360-400)	400 (400-400)	9.1 (0.0-10.0)	0.025*	0.56	0.53
P_{VO2MAX} ($W \times kg^{-1}$)	6.2 (6.0-6.5)	6.1 (5.8-6.3)	-2.3 (-4.6-(-0.7))	0.008*	-0.81	0.86
VO_{2max}^A	3.82 (3.65-3.94)	4.10 (3.85-4.14)	5.4 (1.6-7.6)	0.002*	1.02	0.97
VO_{2max}^B	58.5 (57.5-61.4)	60.5 (57.8-63.0)	2.5 (-2.9-5.3)	0.065	0.53	0.51

P – power, HR – heart rate, VE – pulmonary ventilation, VO_2 – oxygen uptake, AT – anaerobic threshold level, RCP – respiratory change point level, max – maximal level, ^A - $L \times min^{-1}$, ^B - $mL \times kg^{-1} \times min^{-1}$, p-value – probability of type-I error, * – statistically significant difference, ES – effect size, P – test power

Anaerobic performance

After the preparatory period, no changes were found in PP (W), TOPP, or MP (W). Furthermore, relative PP, MP, and FI substantially decreased. Detailed data are shown in Table 3.

Table 3. Anaerobic performance (median (1st and 3rd quartiles)) before and after the 18-week preparatory period

	pre	post	Difference (%) pre-post	p-value	ES	p
PP (W)	913 (889-974)	905 (851-983)	-1.8 (-7.6-2.3)	0.183	-0.36	0.27
PP (W×kg⁻¹)	14.3 (13.9-14.9)	13.8 (13.0-14.2)	-5.3 (-10.7 to -1.5)	0.015*	-0.71	0.76
TOPP (s)	3.05 (2.40-3.77)	3.55 (2.95-4.40)	0.35 (-0.33-1.33)	0.133	0.41	0.34
MP (W)	736 (685-778)	724 (662-776)	-2.6 (-5.3-1.4)	0.134	-0.41	0.34
MP (W×kg⁻¹)	11.4 (11.2-11.5)	10.9 (10.2-11.3)	-4.9 (-9.0 to -2.5)	0.002*	-0.99	0.96
FI (%)	42.9 (39.3-49.5)	38.6 (36.6-41.8)	-8.4 (-23.5-0.3)	0.004*	-0.89	0.91

PP – peak power, TOPP – time do obtain peak power, MP – mean power, FI – fatigue index, p-value – probability of type I error, * – statistically significant difference, ES – effect size, P – test power

Training loads

Numerical data for training volume across training forms, activity forms, and intensity zones are presented in Table 4. A graphical representation of training volume in 18 consecutive 7-day mesocycles for training forms, intensity distribution, and polarization index are presented in Figures 1 and 2.

Table 4. Training volume [h×wk⁻¹] (median (1st and 3rd quartiles)) distributed across training forms, activity forms, and intensity zones

Training form	Activity form	Zone ¹	Zone ²	Zone ³	Σ Zone ¹⁻³
Endurance	Specific	4.2 (3.7-6.7) 60.0%T	1.5 (1.2-2.4) 23.1%T	0.1 (0.0-0.1) 0.9%T	5.8 (5.0-9.2) 84.0%T
	Non-specific	0.4 (0.0-0.9) 7.6%T	0.3 (0.0-0.5) 3.5%T	0.0 (0.0-0.0) 0.4%T	0.7 (0.0-1.5) 11.5%T
	Overall	5.6 (4.1-7.0) 67.6%T	2.2 (1.5-2.5) 26.6%T	0.1 (0.1-0.1) 1.3%T	7.7 (5.5-9.5) 95.5%T
Strength	N/A	N/A	N/A	N/A	0.2 (0.1-0.6) 4.5%T
Total training volume (T) = 7.9 (6.5-10.0)			Polarization-Index = 0.15 A.U. (0.08-0.24)		

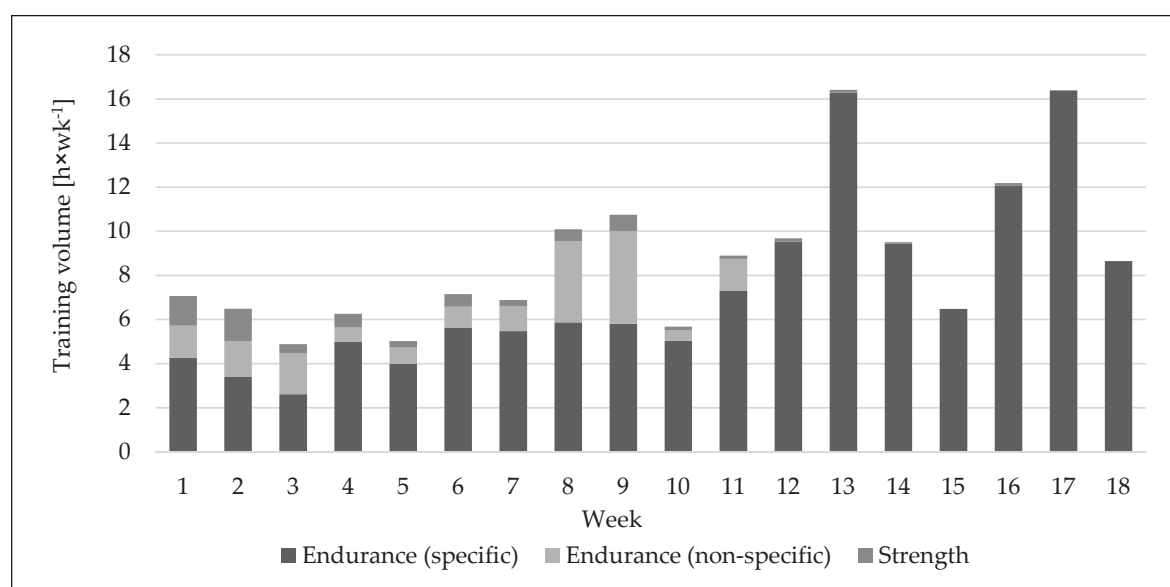


Figure 1. Endurance (specific, non-specific) and strength training volume during each 7-day mesocycle

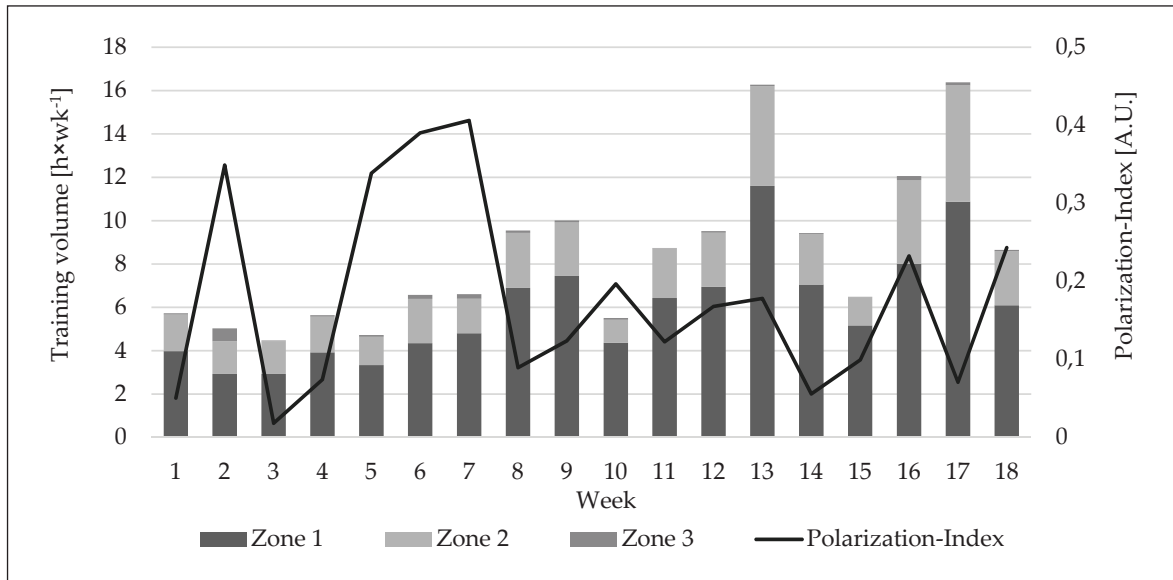


Figure 2. Training intensity distribution and polarization index during each 7-day mesocycle

Discussion

The main finding of this study was that training loads of Polish youth road cyclists in the PrPe period were characterized by low volume and non-polarized pyramidal intensity distribution. What is also significant, the training model implemented in this study had in general no positive effects on either aerobic or anaerobic fitness. To the best of our knowledge, this is one of the first studies in which training loads and their effects on physical fitness in adolescent road cyclists are assessed prospectively.

Training volume and intensity distribution are crucial parameters characterizing sports training. Endurance athletes typically train from 500 hours per year (~10h per week) (distance runners) [37–43] to over 1,000 hours per year (~20h per week) (rowing, swimming, cycling, triathlon) [21,22,44–50] in order to reach an international level. The adolescent road cyclists in the present study trained approximately for 7.9 hours per week during PrPe. Low training volume in the cyclists studied compared to other endurance athlete populations may result from sports level and/or age differences. Furthermore, it should be noted that the preparatory period fell in the winter season. In Poland at this time of the year, temperatures often fall below 0°C, which makes long bike rides difficult.

Many studies across a broad range of endurance sports that have analyzed training intensity distribution (TID) based on the binary approach were consistent with the finding that 75–90% of all endurance training time is performed at low intensity (below the first metabolic threshold). The remaining 10–25% is comprised of high-intensity training performed above the first metabolic threshold [21,33,37,38,49–51]. In the cyclist studied, endurance training time below and above AT accounted for approximately 68 and 27% (respectively) of total training time. The remaining 5% was intended for strength training. The polarization index (median 0.15) and 3 intensity zone approach (zone¹: ~68%, zone²: ~26%, zone³: ~1%) used in this study indicated non-polarised [31], pyramidal [9] TID, in which most training was at zone¹, with decreasing proportions of zone² and zone³. This TID model seems to be commonly applied in elite cyclists. This has been shown in the research by Lucia et al. [19] (78%/17%/5%), Zapico et al. [21] (78%/20%/2%), and Schumacher and Mueller [20] (94%/4%/2%).

We believe that the simultaneous increase in P_{AT} (W and $W \times kg^{-1}$), P_{VO2MAX} (W), VO_{2max} ($mL \times min^{-1}$), plateau P_{AT} ($W \times kg^{-1}$), P_{RCP} (W and $W \times kg^{-1}$), and VO_{2max} ($mL \times kg^{-1} \times min^{-1}$); and decrease in P_{VO2MAX} ($W \times kg^{-1}$), was the result of increased LBM. Kim et al. [52] and Maciejczyk et al. [53] demonstrated substantial positive correlations between LBM (the main component of which is muscle mass) and absolute indices of aerobic performance. We assume that the factor that was likely to increase LBM in the cyclists studied was strength training, which constituted approximately 5% of the total training volume. Such a combination of endurance (ET) and strength (ST) training is called concurrent training (CT). It stimulates both target peripheral (muscular) adaptations, i.e. hypertrophy and capillarisation [54]. In a meta-analysis performed by Wilson et al. [55], it was demonstrated that CT, compared to ET, produces substantially greater improvement in muscle hypertrophy (mean overall effect size of 0.85 [95%CI: 0.57-1.20] vs. 0.27 [95% CI:

-0.53-0.60]). Another plausible explanation for the increase in LBM is the passage of time (the pubertal period is characterized by dynamic tissue growth and maturation) [56], taking supplements promoting muscle hypertrophy [57], or an interaction effect of these factors [58]. Whatever the cause, the changes are adverse in the context of performance because each additional kilogram of BM produces metabolic heat [59] and requires the supply of energy substrates [60], which additionally burdens the body during long-lasting races.

Following the 18-week PrPe period, anaerobic fitness deteriorated in the studied cyclists. The reason for this is probably the characteristics of the applied training loads, with a small number of high-intensity exercises (analysis of cyclists' training loads showed that only approximately 1% of total training volume constituted exercises above RCP intensity). Low-intensity training is thought to be fundamental in the preparation for endurance events. This type of exercise improves VO_{2peak} by increasing stroke and plasma volume and inducing molecular adaptations for capillary and mitochondrial biogenesis, thereby improving the efficiency of key metabolic components for energy production [61,62]. However, it cannot be expected that this type of exercise will prepare athletes for anaerobic effort [63].

The practical conclusion of this study is that if, for some reason, coaches of adolescent road cyclists cannot include low-intensity training with a volume providing desirable adaptive changes or high volume, low-intensity training is ineffective. A good solution can be the implementation of a more polarised training model by adding high-intensity exercises (above RCP or VO_{2max}). In the meta-analysis performed by Engel et al. [64], it was suggested that young athletes performing high-intensity training can improve both aerobic and anaerobic performance. Moreover, young athletes may benefit from high-intensity training as it requires less time per training session, leaving more time for training sport-specific skills or school education.

The limitations of this study include (i) the small sample size which does not guarantee high test power (for 12 of the 20 indices, test power was below 80%), (ii) the lack of a control group, (iii) the method used to quantify training loads, which underestimates high-intensity training duration [12], (iv) a lack of detailed data about the applied strength training and supplementation.

Conclusions

Low-volume non-polarised pyramidal intensity distribution training is probably not an effective stimulus to improve physical fitness in adolescent road cyclists. Disregarding high-intensity exercises in training programs for adolescent cyclists may result in stagnation or deterioration of physical fitness.

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Institutional Review Board Statement: All procedures were carried out in accordance with the 1964 Declaration of Helsinki and its subsequent amendments. Consent to perform testing was provided by the Bioethics Committee at the Regional Medical Chamber in Kraków (No. 249/KBL/OIL/2021).

Informed consent statement: The participants and their legal guardians were informed about the research protocol in detail and gave their written informed consent to participate in the study.

Data availability statement: The data presented in this study are available on request from the corresponding author.

Conflict of interest: There is a conflict of interest because one of the co-authors is an editor of the journal. We assure that in such cases, the manuscript has been processed by an independent editor in accordance with the principles of ethics, peer review, and publishing.

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