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10	Authors: Joshua Denham, Simon A. Feros and Brendan J. O'Brien
11	Faculty of Health Sciences, Federation University Australia, Mt Helen, 3350, Australia
12	
13	Corresponding author: Joshua Denham, Faculty of Health Sciences, Federation University
14	Australia, University Drive, Mt Helen, 3350. Email: j.denham@federation.edu.au, Ph: +61 3
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39 ABSTRACT

Sprint interval training (SIT) rapidly improves cardio-respiratory fitness but demands less 40 training time and volume than traditional endurance training. While the health and fitness 41 benefits caused by SIT have received considerable research focus, the effect of short-term 42 SIT on 5 km run performance is unknown. Thirty healthy untrained participants (aged 18–25 43 years) were allocated to a control (n = 10) or a SIT (n = 20) group. SIT involved three to 44 eight sprints at maximal intensity, three times a week for four weeks. Sprints were progressed 45 to eight by the 12th session. All participants completed a 5 km time-trial on a public running 46 track and an incremental treadmill test in an exercise physiology laboratory to determine 5 47 km run performance and maximum oxygen uptake, respectively, before and after the four 48 week intervention. Relative to the controls, sprint interval trained participants improved 5 km 49 run performance by 4.5% (p < 0.001) and this was accompanied by improvements in absolute 50 51 and relative maximum oxygen uptake (4.9%, p = 0.04 and 4.5%, p = 0.045, respectively). Therefore, Short-term SIT significantly improves 5 km run performance in untrained young 52 53 men. We believe SIT is a time-efficient means of improving cardio-respiratory fitness and 5 54 km endurance performance. 55 **KEYWORDS:** Time-trial, training load, SIT, VO_{2max} 56 57

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- 59
- 60

61 **INTRODUCTION**

Endurance run performance is important for individuals of average cardio-respiratory fitness 62 who aspire to improve their fitness and performance quickly and efficiently. Moreover, 63 considering the importance of cardio-respiratory fitness and endurance performance in ball 64 sports such as soccer, Australian Rules Football and cricket (5, 15, 18) there is immense 65 coaching emphasis on reducing training load to minimise injury risk, but maximise training 66 time to focus on other skills important to the sport. SIT is an alternative mode of training to 67 traditional constant-rate training as SIT improves cardio-respiratory fitness to a similar 68 degree as constant-rate training but requires 90% less weekly energy expenditure and 66% 69 less total training time (7). 70

71 Typically SIT consists of short, maximal efforts of 15–30 s, repeated several times interspersed with 3–5 mins of recovery. Indeed, SIT may be more effective at improving 72 endurance performance than both continuous running and other high-intensity interval 73 74 training (HIT) programmes. For example, 20 individuals who completed seven to twelve efforts of 30 s sprints thrice weekly for six weeks, improved 3 km run performance greater 75 than individuals who completed constant rate running or four to six four minute efforts at 3 76 77 km average running velocity, over six weeks (4). Others have, however, demonstrated recreationally active participants similarly improve 2 km run performance after either six 78 79 weeks of SIT (4.6%) or constant rate running (5.9%) (13). Therefore, SIT seems to enhance run performance over 2-3 km after six weeks of training, but whether these endurance 80 benefits improve run performance in untrained participants in shorter time-frames and over 81 82 distances exceeding 3 km (a distance requiring greater reliance on aerobic metabolism) is unknown. Furthermore, the lack of inclusion of experimental controls in previous studies (4, 83 6, 13) obfuscates the genuine impact of SIT on endurance run performance. 84

86	Therefore, the purpose of our study was to determine whether a novel and relatively short-
87	term (four week), thrice weekly SIT programme improves cardio-respiratory fitness and 5 km
88	run performance. To that end, we assessed 5 km run performance and $\dot{V}O_{2max}$ before and after
89	either a novel four week SIT (four to eight 30-s maximal sprints, thrice weekly) programme
90	for cases ($n = 20$), or no training for controls ($n = 10$). We hypothesised that relative to the
91	controls, the sprint-interval trained individuals would significantly improve 5 km run
92	performance and $\dot{V}O_{2max}$.
93	
94	METHODS
95	Experimental approach to the problem
96	This study is a controlled trial, where healthy participants performed either four weeks of SIT
97	or no training, to evaluate the effect of SIT on 5 km run performance and $\dot{V}O_{2max}$. $\dot{V}O_{2max}$ was
98	measured during a maximal treadmill test conducted in the university exercise physiology
99	laboratory and the 5 km time-trial was assessed at a public running track. These tests were
100	performed on separate days within one week of commencing the initial SIT session and
101	within one week after the final SIT session.

102

103 Subjects

104 Thirty, apparently healthy young men (18–25 years) were recruited for this study.

105 Participants were initially screened to ensure they were not currently engaging in any

structured high-intensity aerobic exercise training. All participants had not completed any

structured aerobic exercise training in the past year. Twenty participants were allocated to the
SIT (cases) group and 10 participants were allocated to the control group.

109

Participants gave written informed consent and this study was approved by the University'sHuman Research Ethics Committee.

112

113 *Procedures*

Participant VO_{2max} was assessed during a maximal treadmill test, by pulmonary analysis 114 conducted in an exercise physiology laboratory at the university. Before the $\dot{V}O_{2max}$ test 115 participants were fitted with a two-way breathing valve (Hans Rudolph) and expired air was 116 collected into an online metabolic system (Moxus) for gas (O₂ and CO₂) analysis. The 117 118 metabolic system was calibrated before each test using ambient air and gas of known composition. Participants were given a standardised 3-min warm-up at 10 km h⁻¹. The VO_{2max} 119 test commenced at 10 km h⁻¹, and treadmill speed was progressively increased by 1 km h⁻¹ 120 every second minute until volitional exhaustion. VO2max was determined as the highest O2 121 value averaged over 60-s. All laboratory testing was performed preprandially at the same 122 time of day (8–10 AM). Participants were encouraged to hydrate the night before and 123 morning of testing. Within a week of the VO_{2max} assessment each participant completed a 124 supervised 5 km run time-trial on a flat running track in a local park. Participants were 125 126 familiar with 5 km circuit and were advised to hydrate before running. All testing was conducted in the afternoon (4-6 PM). Briefly, participants completed a short 10-min warm-127 up including some light aerobic exercise and dynamic stretches. Participants were supervised 128 and instructed to run maximally at their own pace. 129

Cases completed a standardised SIT programme performed three times a week over four 131 weeks (total of 12 sessions). The sprint duration and recovery period was controlled at 30-s 132 and 4-mins (passive), respectively. Participants were requested to run maximally without 133 pacing for each 30-s sprint. All training was conducted on the University's sports oval and an 134 Accredited Exercise Physiologist (with Exercise and Sport Science Australia) provided 135 participants with verbal encouragement, and supervised each training session. The SIT 136 volume increased from four to eight sprints over the four week intervention (Table 1). Before 137 each training session, participants completed a standardised warm-up entailing a 5-min 138 aerobic warm-up, dynamic stretches and some short (20 m) runs at approximately 70, 80, 90 139 and 100% effort. 140

<<Table 1 about here>>

All participants were instructed not to deviate from their current physical activity, exercise (ifany) and dietary habits during the four week intervention period.

144 *Statistical analyses*

All statistical analyses were performed using IBM SPSS Statistics for Windows (Version 20, 145 IBM Corp, Armonk, NY). Data were tested for normality using the Kolmogorov-Smirnov 146 and Shapiro-Wilk tests, and non-parametric data was log-transformed before further analysis. 147 Paired samples *t*-tests were used to examine fitness and performance changes after SIT, 148 relative to the control group. To ascertain the test-retest reliability of VO_{2max} and 5 km time-149 trial performance, the intraclass correlation coefficient (2, k), coefficient of variation (log-150 transformed), standard error of measurement, and systematic bias (determined by paired 151 samples *t*-test) were calculated. Significance was set at p < 0.05. 152

153 **RESULTS**

Test-retest reliability data is outlined in Table 2. The 5 km time-trial test had excellent
reliability with an intraclass correlation coefficient of 0.99 and a 3.4% coefficient of
variation.

- 158 Figure 1 outlines the fitness and performance changes after four weeks of SIT. Relative to the
- 159 control group who showed a marginal increase in 5 km time-trial performance (mean \pm SD:
- 160 1478 ± 350 to 1447 ± 347 , -2%, p = 0.20, Table 2 and Figure 1), cases had a significant
- 161 improvement in 5 km time-trial performance by an average of 65 s (mean \pm SD: 1464 \pm 298
- to 1368 ± 270 , -4.4%, p < 0.001) following four weeks of SIT (Figure 1). While absolute and
- relative $\dot{V}O_{2max}$ increased after SIT in cases (mean \pm SD: 3.8 \pm 0.6 to 4.0 \pm 0.6, 4.9%, p = 0.04
- and 49.6 ± 4.6 to 51.4 ± 3.8, 4.5%, p = 0.045, respectively), absolute and relative $\dot{V}O_{2max}$ were
- unchanged in controls (mean \pm SD: 3.7 \pm 0.6 to 3.7 \pm 0.6, 0.6%, p = 0.73 and 49.6 \pm 6.7 to

166 49.3 \pm 6.7 -0.6%, *p* = 0.72, respectively, Table 2 and Figure 1).

167

<<Figure 1 about here>>

168 DISCUSSION

169 The purpose of our study was to determine whether a novel and short-term (four week), thrice

170 weekly SIT programme improves cardio-respiratory fitness and 5 km run performance in

171 untrained males. To our knowledge, we are the first to demonstrate that 5 km run

172 performance is significantly improved following short-term (four weeks), low-volume SIT.

- 173 Considering the marginal but not statistically significant improvement in the controls (31 s,
- 174 2%), the marked (96 s, 6.5%) improvement after four weeks of SIT translated to a mean 65 s

(4.4%) faster 5 km run performance in cases. Notably, 5 km run performance was improved
in conjunction with increased VO_{2max} (4.5%).

177

Our data showing SIT enhances 5 km run performance corroborates others' showing SIT 178 enhances 2 km(13) and 3 km(4, 6) run performance in recreationally trained individuals. We 179 are the first to demonstrate four weeks of three times per week SIT, in the form of running, 180 significantly improves 5 km run performance – a prestigious and Olympic running distance. 181 Interestingly, the impact of SIT on 5 km endurance performance is established in other 182 exercise modalities. A short-term (two-week) cycle SIT intervention improved 5 km cycle 183 184 performance to a similar magnitude to our protocol (5.2%) (10). Whether SIT improves run 185 performance over longer distances warrants attention. Additionally, whether SIT benefits already well-trained runners is yet to be fully understood, as data has, to date, been equivocal 186 187 (1, 11). Nevertheless, we verify SIT as an effective means of improving running endurance performance in untrained young men. 188

189

The increased 5 km run performance in our study is similar to previously observed 190 improvements after traditional constant-rate endurance training. It was reported, an 191 intervention of three running sessions per week at 75% of VO_{2max} for six weeks improved 5 192 km run time by approximately 80 s (~5%) in 39 untrained individuals (20). Additionally, 193 others have shown 5 km time-trial improved by 78 s (5%) in a group that ran for 20 mins 194 three times per week for six weeks, initially starting at 0.8 km^{-hr⁻¹} below their individual 195 lactate threshold speed with progression to 0.8 km hr⁻¹ above their individual pre-training 196 lactate threshold speed (14). Importantly, a control group was not included in these studies to 197 establish the error of the 5 km time-trial test, which we established was 31 s. Collectively, it 198

appears SIT improves 5 km run performance to a similar extent as constant-rate training, but
in a quicker time frame (four vs. six weeks) and a smaller training duration (249 mins vs. 360 mins) (14).

202

The improvement in run performance was accompanied by a corresponding improvement in 203 \dot{VO}_{2max} . Although previous constant-rate training studies have demonstrated participants 204 increased their $\dot{V}O_{2max}$ to a similar magnitude observed in the our study (3.8–7.7%), they also 205 showed marked improvements in their participants lactate threshold, which could have 206 contributed to the improvements in run performance (14, 20), particularly because not all 207 cases had improvements to $\dot{V}O_{2max}$. Alternatively, an improvement in cardiac output may 208 209 have facilitated the improvement in 5 km run speed, as opposed to improvements in muscle oxidative capability, based on the concepts $\dot{V}O_{2max}$ is chiefly governed by the maximal 210 211 cardiac output and the lactate threshold by muscle oxidative capability (12). Other mechanisms by which SIT may enhance 5 km run performance include improved run 212 economy, running mechanics and potassium regulation. It was previously reported that 213 moderately-trained runners' run economy was improved by 7% after four weeks of SIT, but 214 these subject did not improve their 10 km time-trial performance (11). Moreover, increases in 215 216 knee flexor endurance, coupled with decreases in knee flexion torque and knee flexion/extension ratios are also adaptations associated with sprint training that could have 217 contributed to the improvement in 5 km run performance observed in our study (19). Others 218 have shown in well-trained runners, SIT enhanced key components of the Na^+/K^+ pump that 219 would aid to minimise disturbances in nerve membrane potential and maintain sprint 220 performance, and this was associated with an approximate 3% improvement in 3 km and 221 222 10km run performance (1). The increase in muscle oxidative and anaerobic enzyme activity

are adaptations gained from SIT and is another possible mechanism for the facilitated

endurance performance observed in participants from our study (2, 3, 8, 16).

225

226	A limitation of our study is that we did not include females. Some of the benefits gained from
227	SIT seem to be dependent of gender. For example, males had greater muscle protein synthesis
228	of proteins important for mitochondrial biogenesis after nine sessions of SIT compared to
229	their female counterparts (17). Given these muscle adaptations are vital for endurance
230	performance (2, 8, 9), whether short-term SIT improves 5 km run performance in females is
231	left for future investigations.

232

Future research could focus on optimising training variables, such as the recovery time between sprints, number of sprint repetitions, time required of each sprint, number of sessions required per week and the optimal length of SIT to improve fitness and performance. In fact, the efficiency of HIT in evoking positive adaptations may even be more potent than originally envisaged. It was recently revealed one maximal 4-min effort at 90% of heart rate maximum on a cycle ergometer, performed three times a week for 10 weeks improves $\dot{V}O_{2max}$ by an average of 10% (21).

In conclusion our data reveals SIT is a highly effective strategy to improve endurancerunning quickly in previously untrained young men.

242

243

245 PRACTICAL APPLICATIONS

Physical conditioning professionals must be aware of efficient means of exercise training that 246 augment cardio-respiratory fitness and endurance performance. The results from our study 247 support the use of short-term, low-volume SIT as an effective means for rapidly improving 248 cardio-respiratory fitness and endurance performance. Therefore, team sport coaches should 249 consider incorporating short-term SIT within periodised programmes to improve athlete 250 endurance performance quickly and also to prevent musculoskeletal overuse injuries – a risk 251 associated with traditional forms of exercise that rely on large training volumes to improve 252 endurance performance. What is more, SIT has an added advantage of simultaneously 253 254 enhancing anaerobic qualities required in team sports. Finally, SIT should be encouraged to individuals who perceive time as an obstacle to exercising, as four weeks of thrice weekly 255 SIT consisting of four to eight 30-s sprints (just over 4 hrs of total exercise, including rest 256 257 periods) quickly enhances cardio-respiratory fitness and endurance performance.

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338

339 FIGURE LEGENDS

Figure 1. 5 km time-trial performance and relative $\dot{V}O_{2max}$ before and after SIT.

Relative to the controls (-2.1, p = 0.20), the cases had a significant improvement to 5 km run

- performance (-4.4%, p < 0.001) and relative $\dot{V}O_{2max}$ (4.5%, p < 0.05) after SIT. Data are
- 343 expressed as mean values before and after either four weeks of SIT (cases) or no exercise
- 344 training (controls).
- 345 Legend: * p < 0.05; *** p < 0.001.

348 TABLES

347

Table 1. Description of the four-week SIT programme.

Week	Session #	Training load	Training sprint	Total session	
		(sprints)	time (min)	time (min)	
1	1	3	1.5	9.5	
	2	4	2	14	
	3	5	2.5	18.5	
2	4	4	2	14	
	5	5	2.5	18.5	
	6	6	3	23	
3	7	5	2.5	18.5	
	8	6	3	23	
	9	7	3.5	27.5	
4	10	6	3	23	
	11	7	3.5	27.5	
	12	8	4	32	
	Total				
	time	66	33	249	

350 Legend: # number.

Table 2. Test-retest reliability data for the 5 km time-trial test.

	Variable	Mean trial 1	Mean trial 2	Mean	<i>p</i> -value	SEM	ICC	CV (%)
				difference				
	VO _{2max} (ml·kg·min ⁻¹)	49.57 ± 6.71	49.29 ± 6.67	-0.28	0.72	1.69	0.967 (0.867–0.992)	3.6 (2.5–6.7)
	5 km time-trial (s)	1478.10 ± 349.95	1447.50 ± 347.24	-30.6	0.18	47.07	0.991 (0.963–0.998)	3.4 (2.4–6.4)
352	Results of the 5 km tin	ne-trial test in the con	ntrol group $(n = 10)$, reliability as	s measured by mean	difference	of two trials, intraclass of	correlation
353	(ICC), p-value (two-tailed paired t-test), standard error of measurement (SEM) and typical error as a coefficient of variation (CV) percentage							
354	(%). Upper and lower confidence intervals are expressed in parentheses; confidence intervals are set at 95%. SDs are represented after the mean							
355	of trials 1 and 2.							