



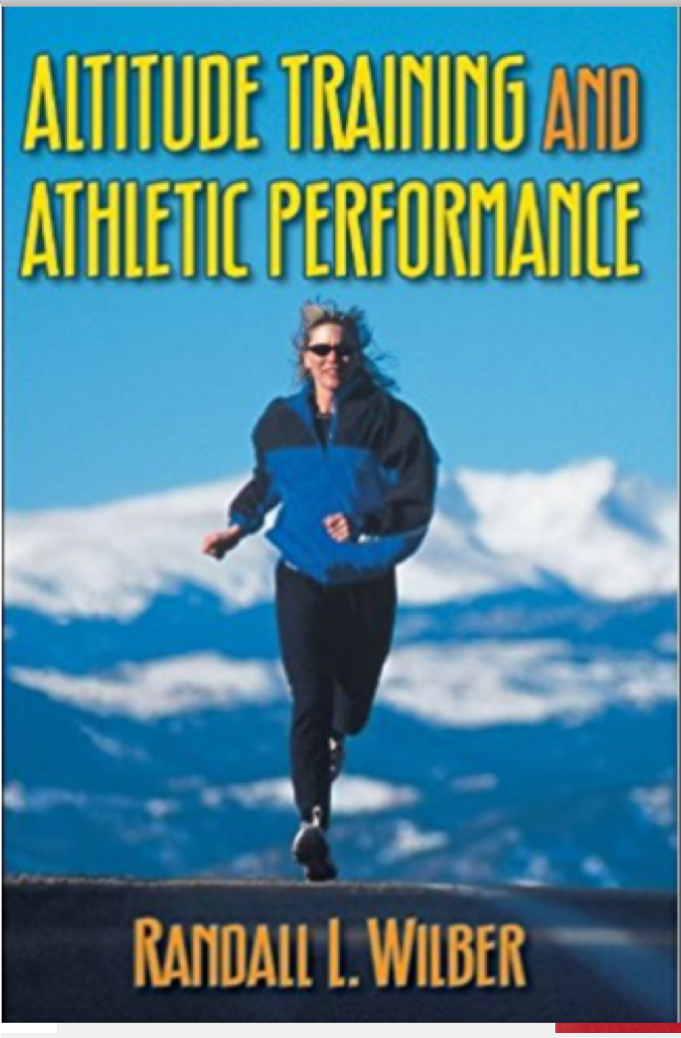
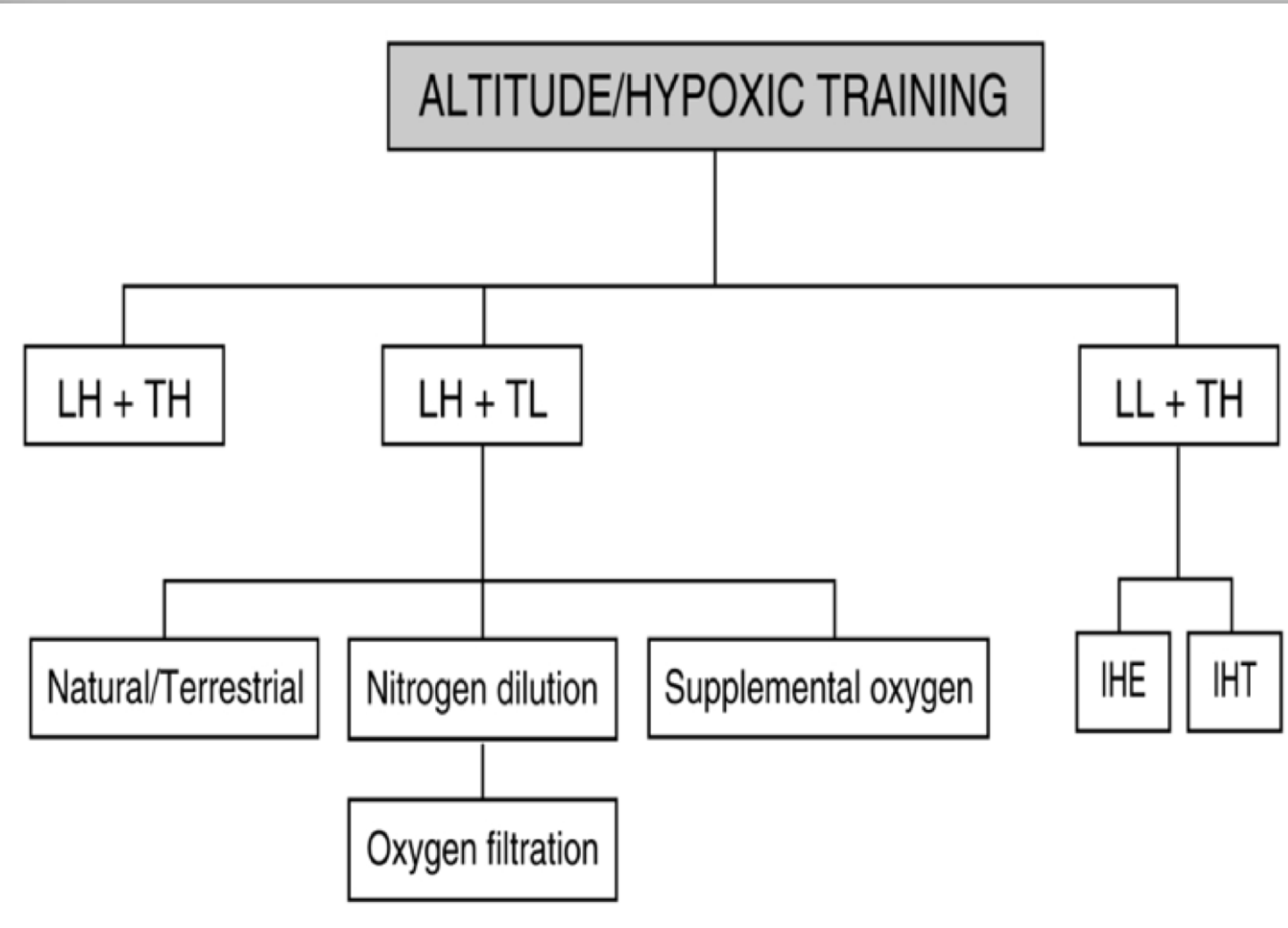
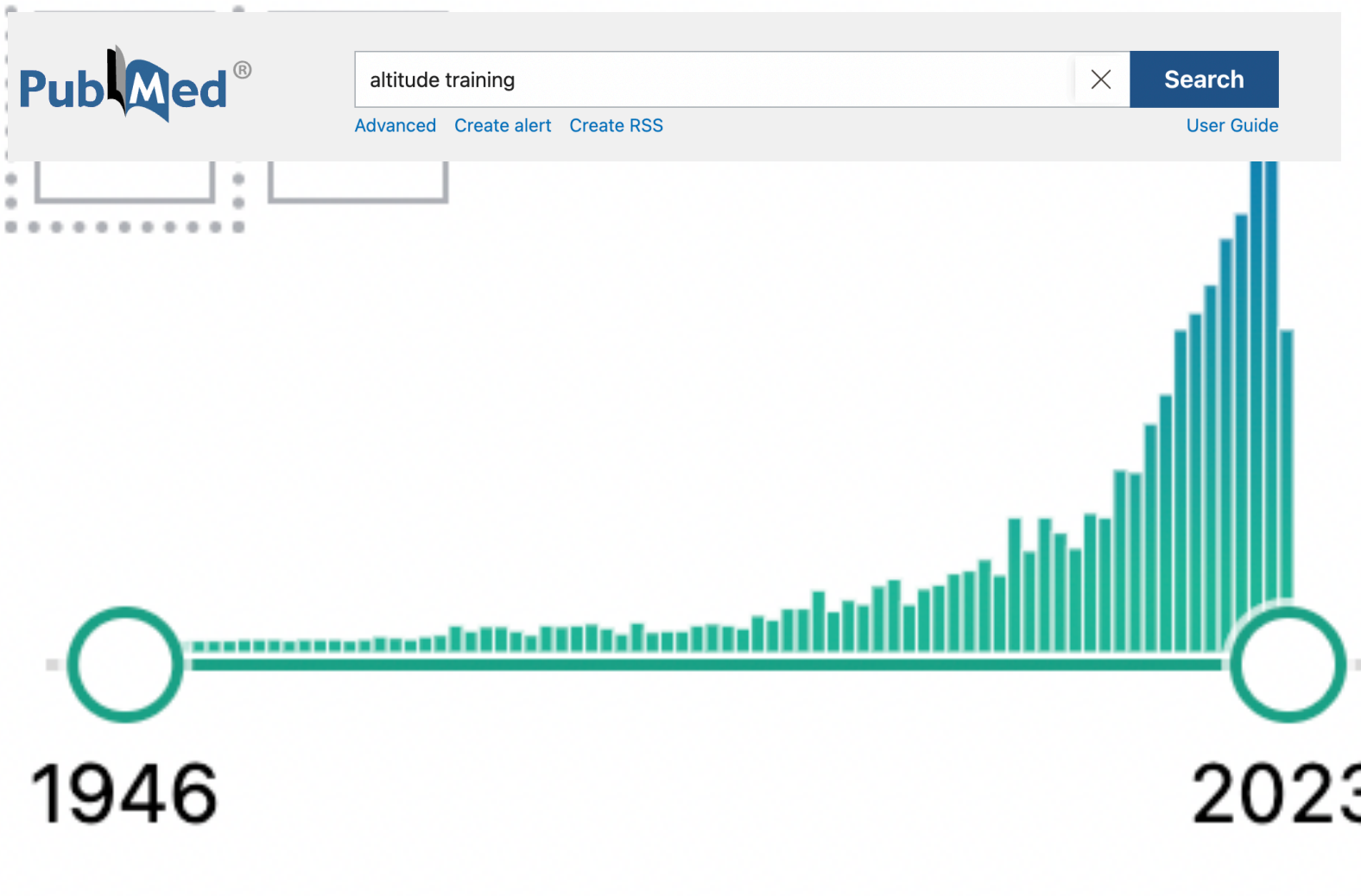
# HOW TO APPLY DIFFERENT ALTITUDE TRAINING METHODS IN PRACTICE?



**Irina Zelenkova, MD, PhD**  
**IOC certified Sport Physician**  
**Zaragoza University**



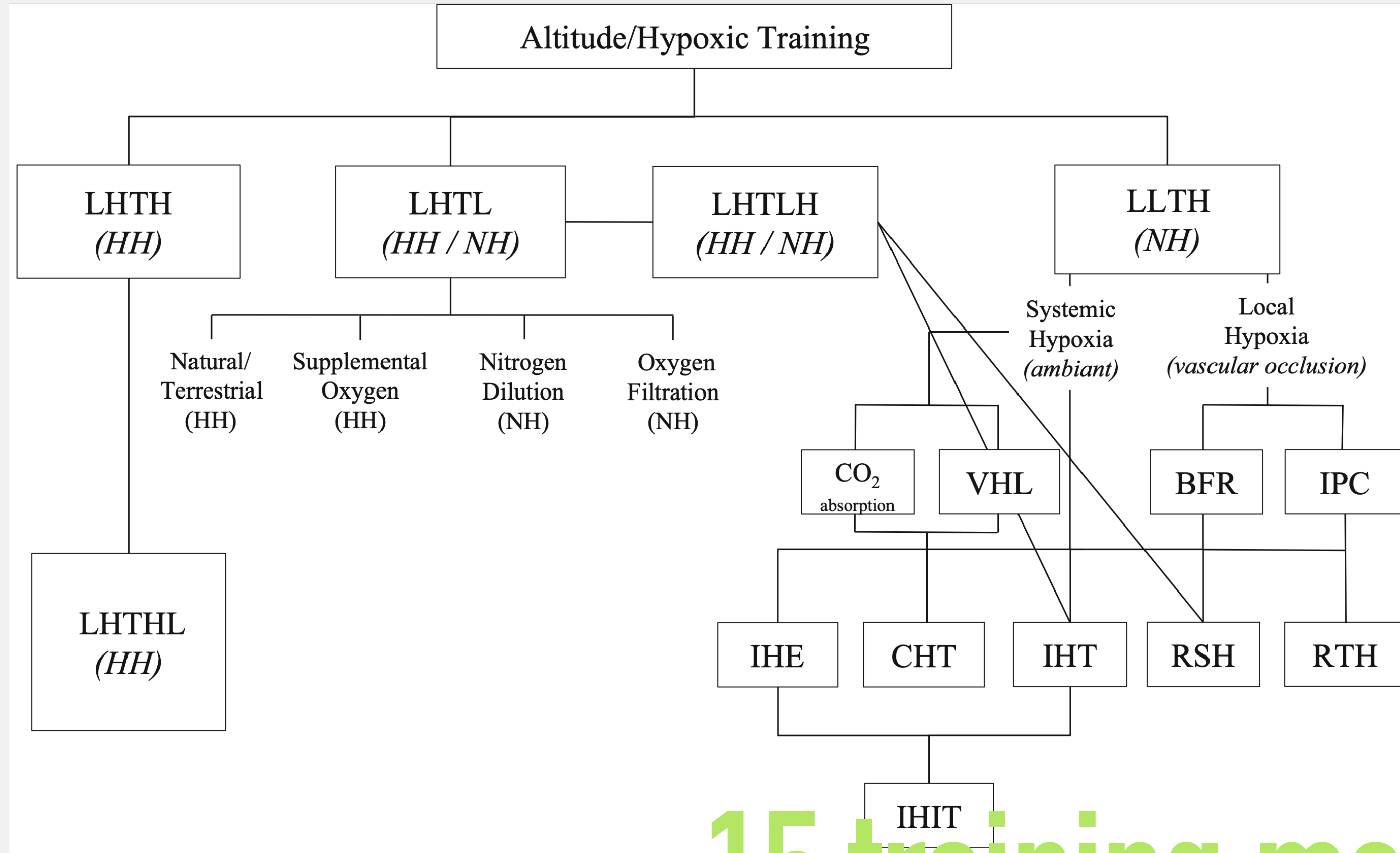
# PANORAMA OF THE DIFFERENT ALTITUDE TRAINING METHODS USED IN THE EARLY 2000s



5 training methods

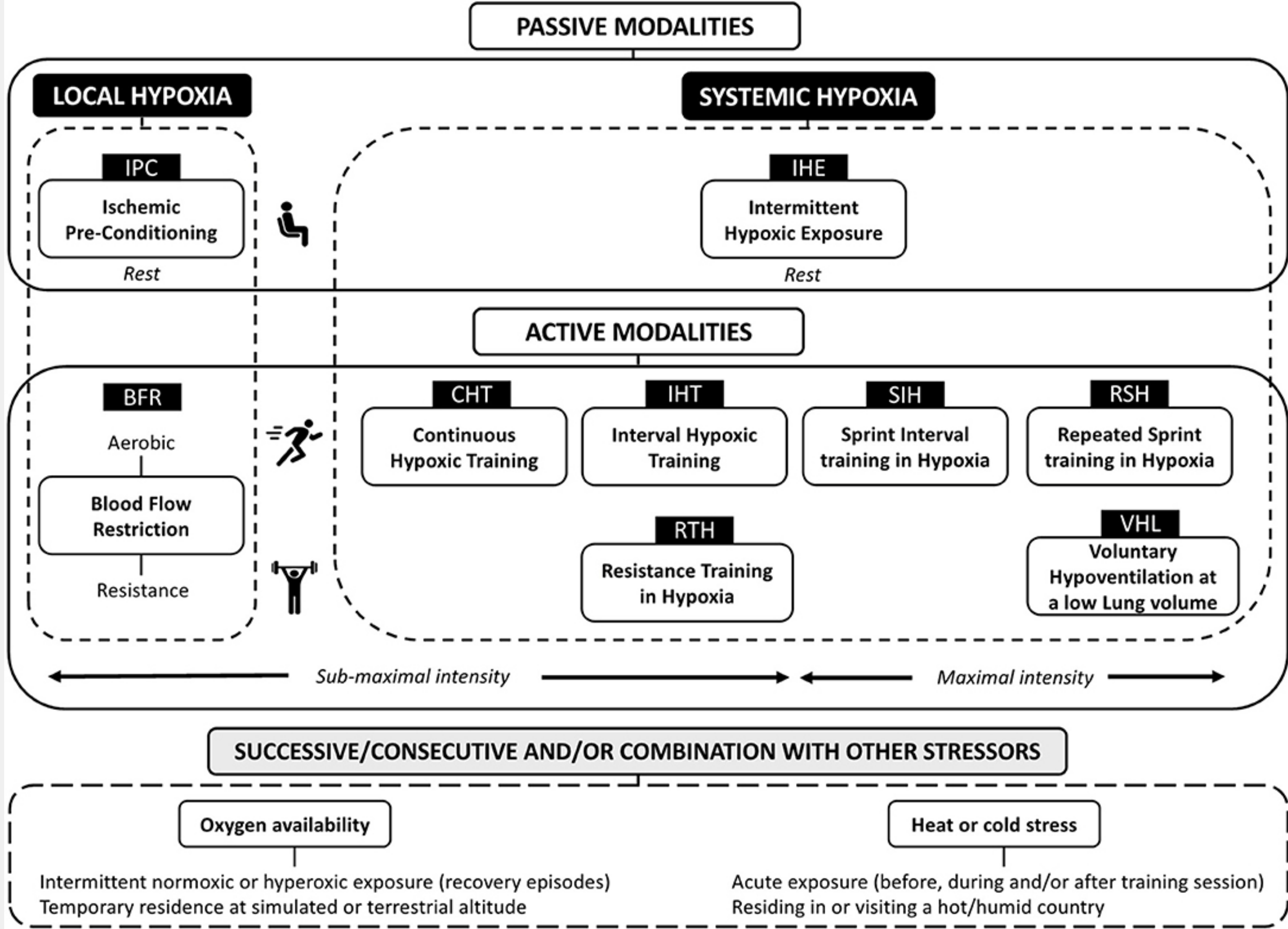
Source: Wilber, 2007.

# CURRENT METHODS IN ALTITUDE TRAINING



15 training methods

# LLTH ALTITUDE TRAINING METHODS







# HOW TO APPLY AND COMBINE DIFFERENT ALTITUDE TRAINING METHODS?

- 05







**LHTL**

**RSH**

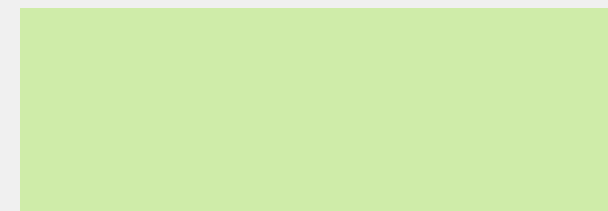
**CHT**

**IPC**



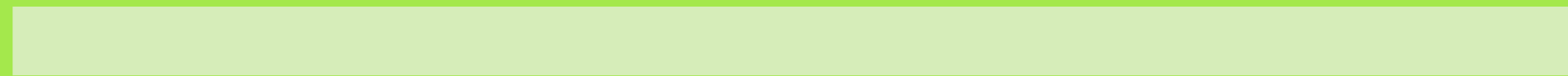
# THE CHOICE OF ALTITUDE METHOD DEPENDS ON YOUR GOAL

What system you would like to target and what goal you would like to achieve?





# IMPROVE AEROBIC PERFORMANCE

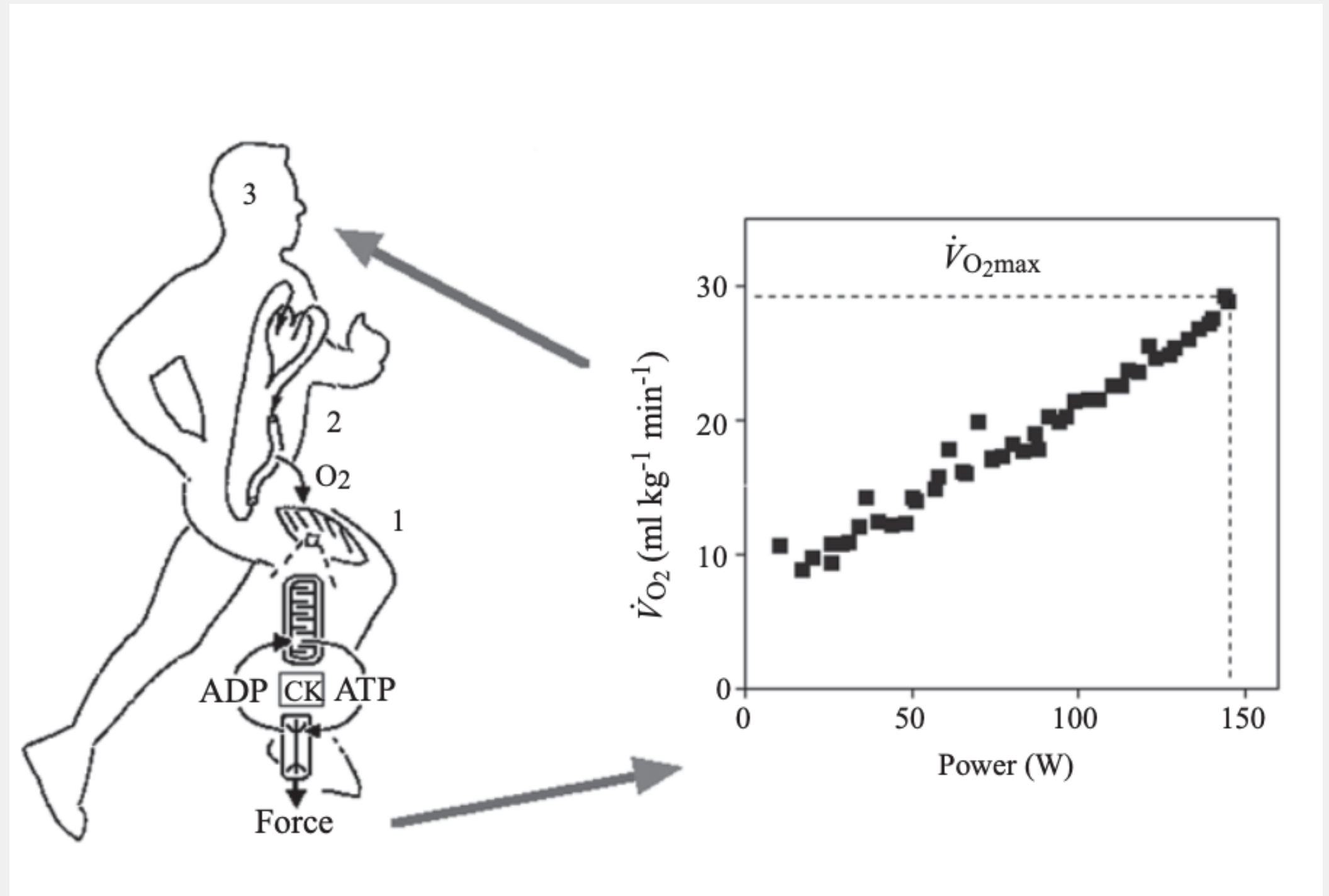




# FACTORS LIMITING AEROBIC PERFORMANCE



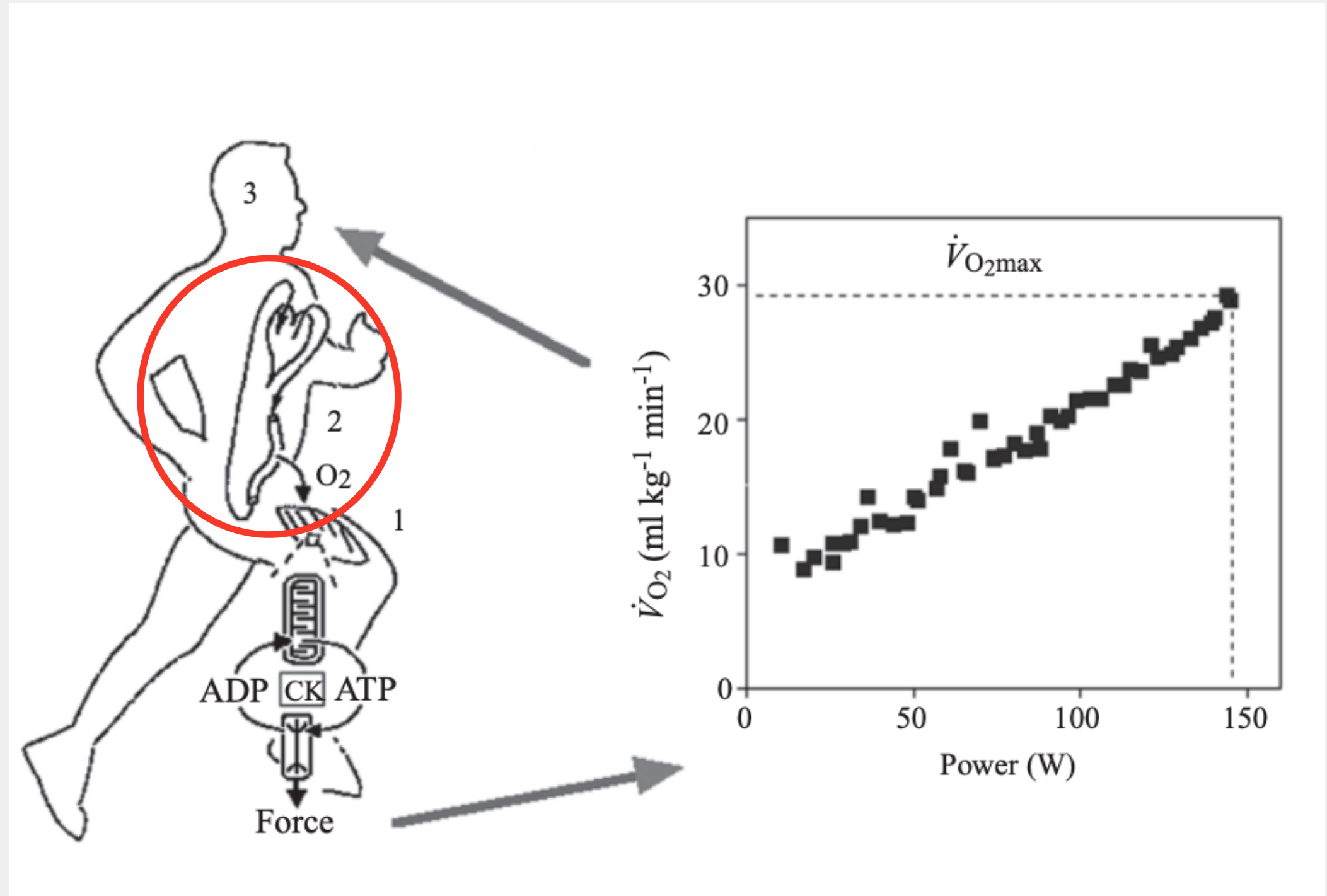
- VO<sub>2</sub>max
- Cardiac output
- O<sub>2</sub> delivery  
[tHb-mass]  
PO<sub>2</sub>
- O<sub>2</sub> extraction
- Mitochondria



# FACTORS LIMITING AEROBIC PERFORMANCE

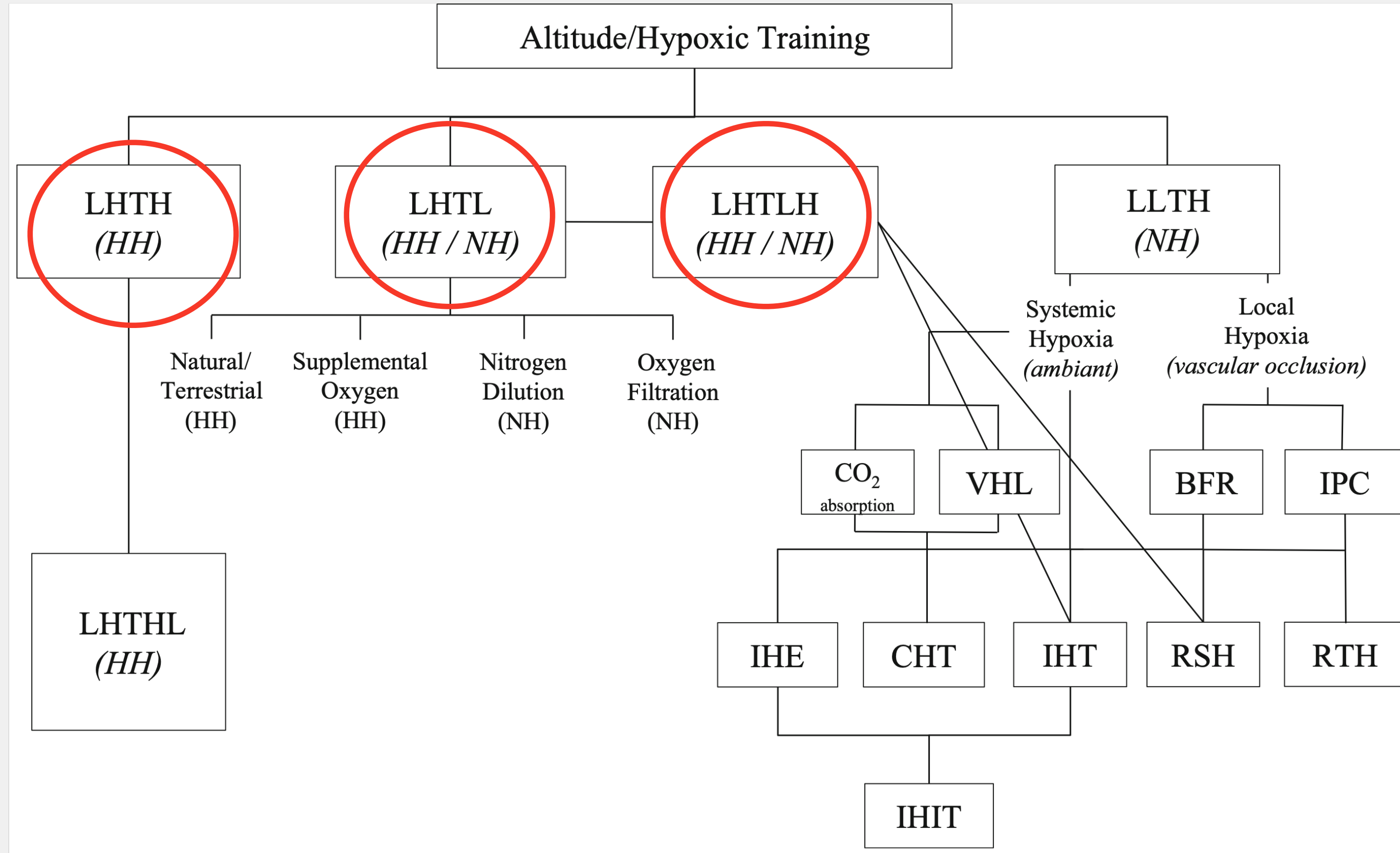


- VO<sub>2</sub>max
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[tHb-mass]  
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- Mitochondria

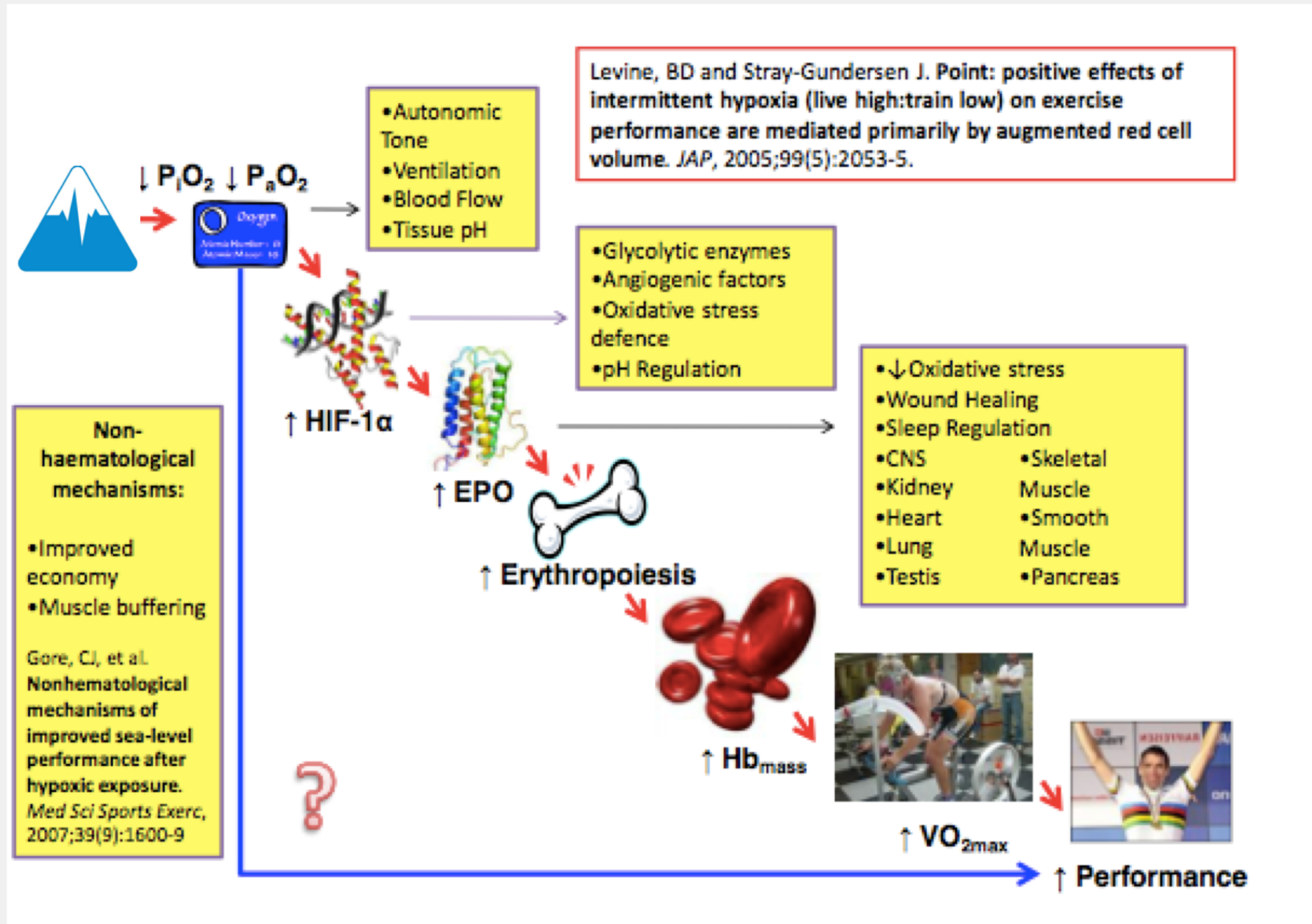




# CURRENT METHODS IN ALTITUDE TRAINING



# ALTITUDE TRAINING FOR PEAK PERFORMANCE

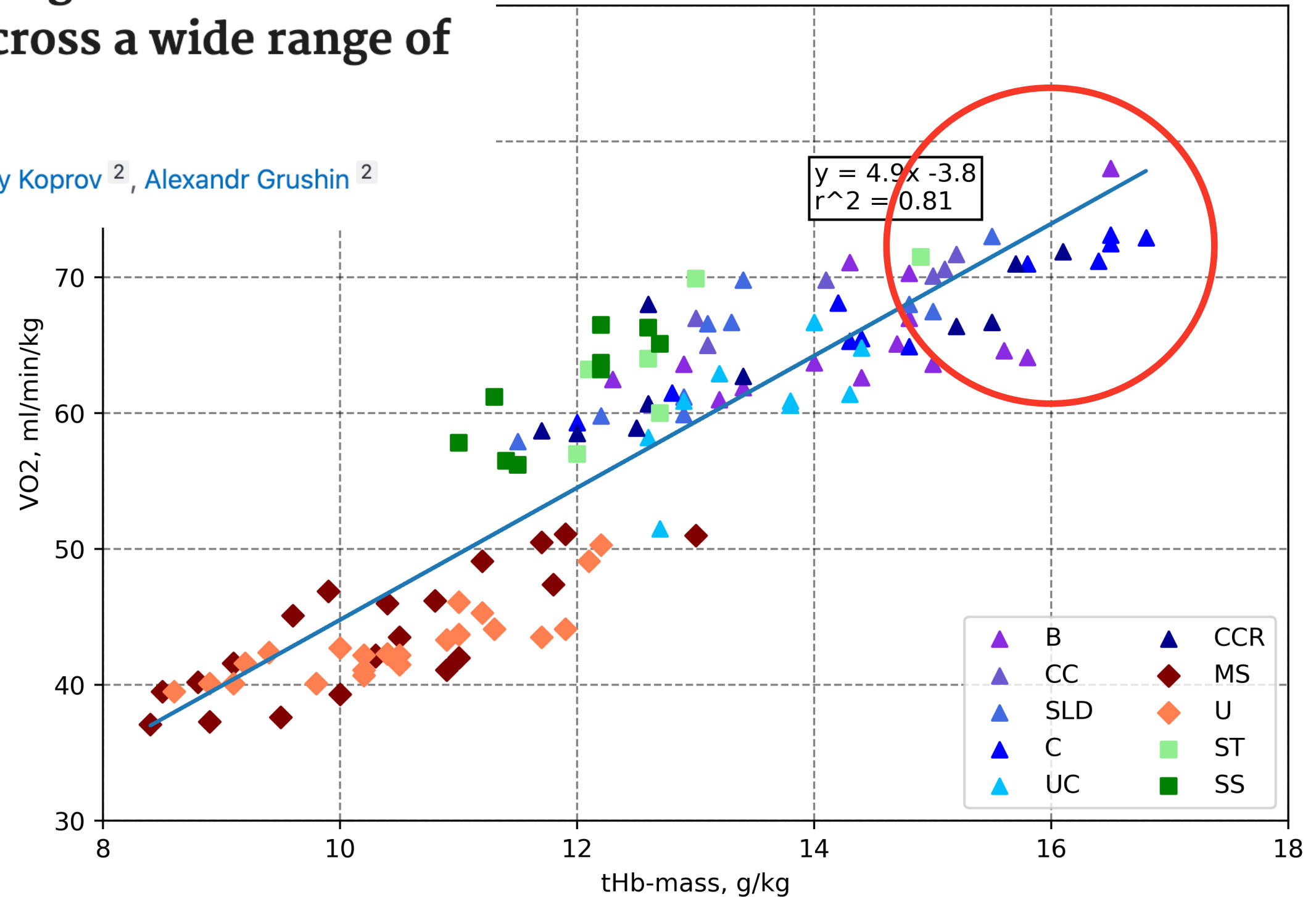


# STRONG RELATIONSHIP BETWEEN VO2max AND THB-MASS



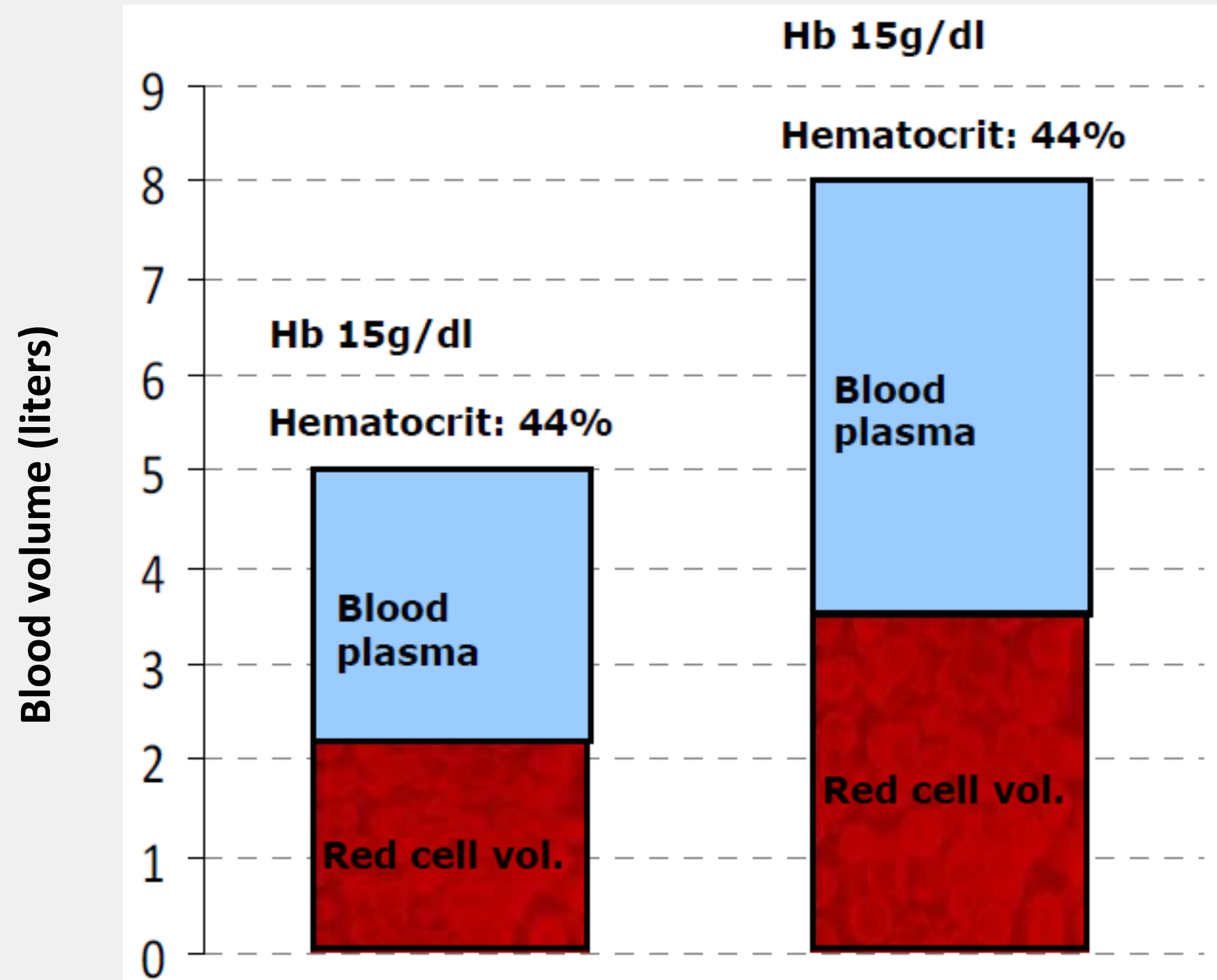
Comprehensive overview of hemoglobin mass and blood volume in elite athletes across a wide range of different sporting disciplines

Irina Zelenkova <sup>1</sup>, Sergey Zotkin <sup>2</sup>, Pavel Korneev <sup>2</sup>, Sergey Koprov <sup>2</sup>, Alexandr Grushin <sup>2</sup>





# WE DON'T KNOW HOW THE ABSOLUTE VALUES ARE



# IMPORTANCE OF tHb-MASS MEASUREMENT



## Individual reaction to the hypoxic exposure

Determination of individual changes in absolute values of tHb-mass.

## Relationship between tHb-mass and VO<sub>2</sub>max

Increase in tHb-mass 1g - increase in VO<sub>2</sub>max 4 ml/min/kg  
(Schmidt & Prommer Exerc Sport Scie Rev, 2010)

## Current performance level determination

Classification of endurance athlete level: novice, regional, elite



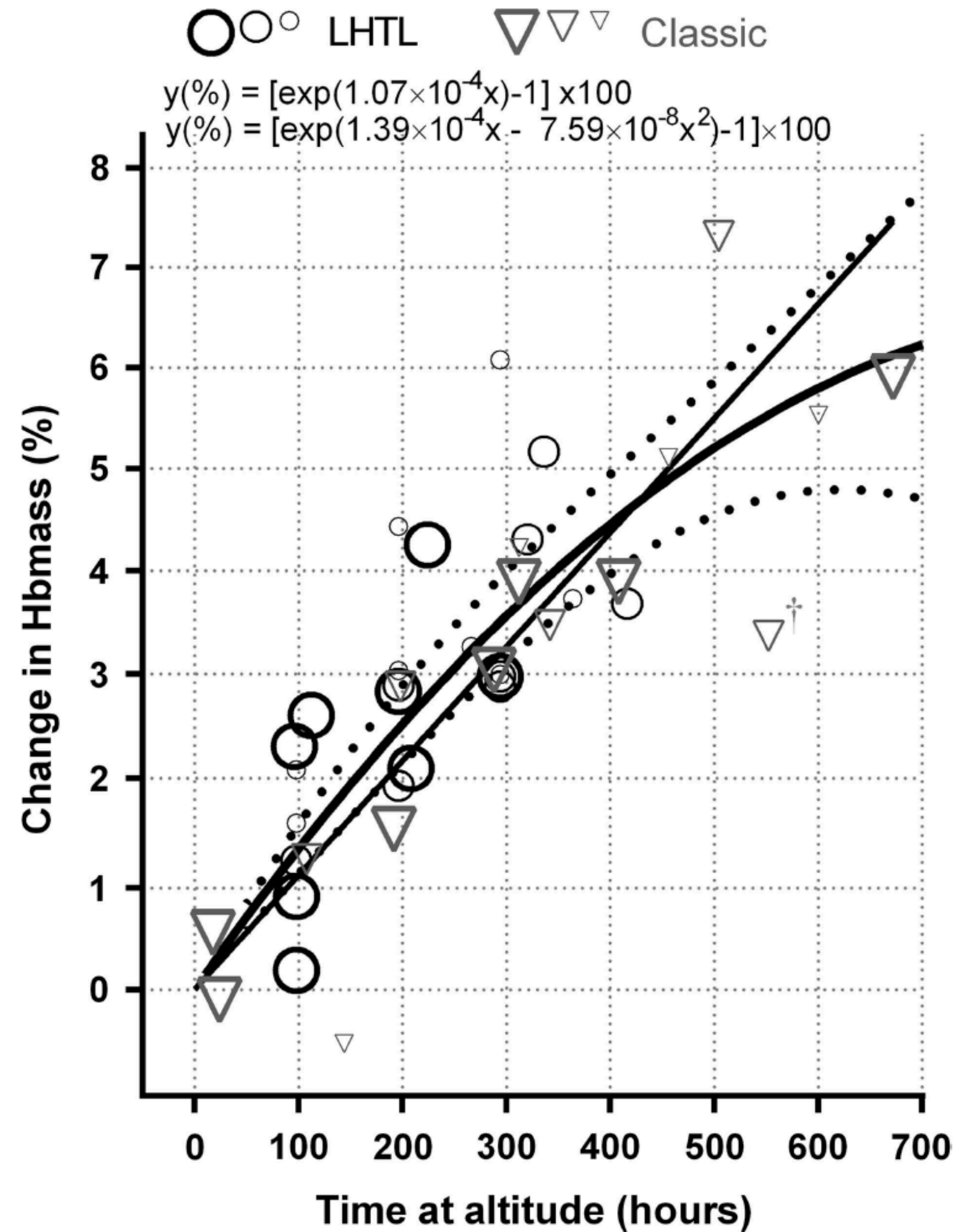




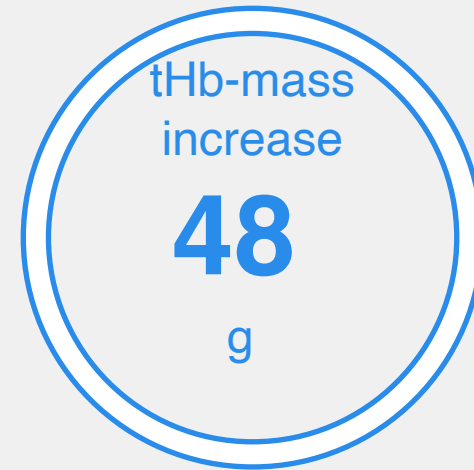
**Kilometer hours:  $\text{km}\cdot\text{h} = (\text{m}/1,000) \times \text{h}$**

During-altitude Hb-mass was estimated to increase by  $\sim 1.1\%/100 \text{ h}$  for LHTL and classic altitude.

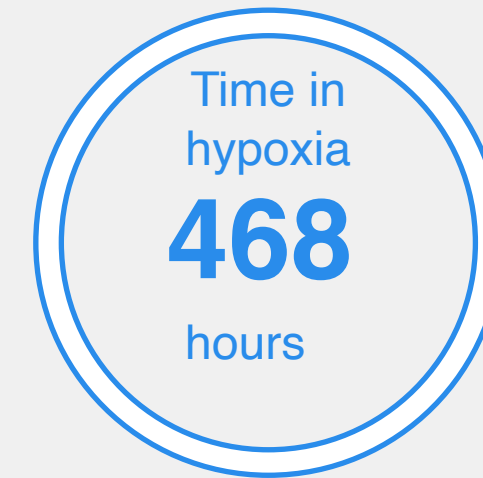
-17



# Athlete A

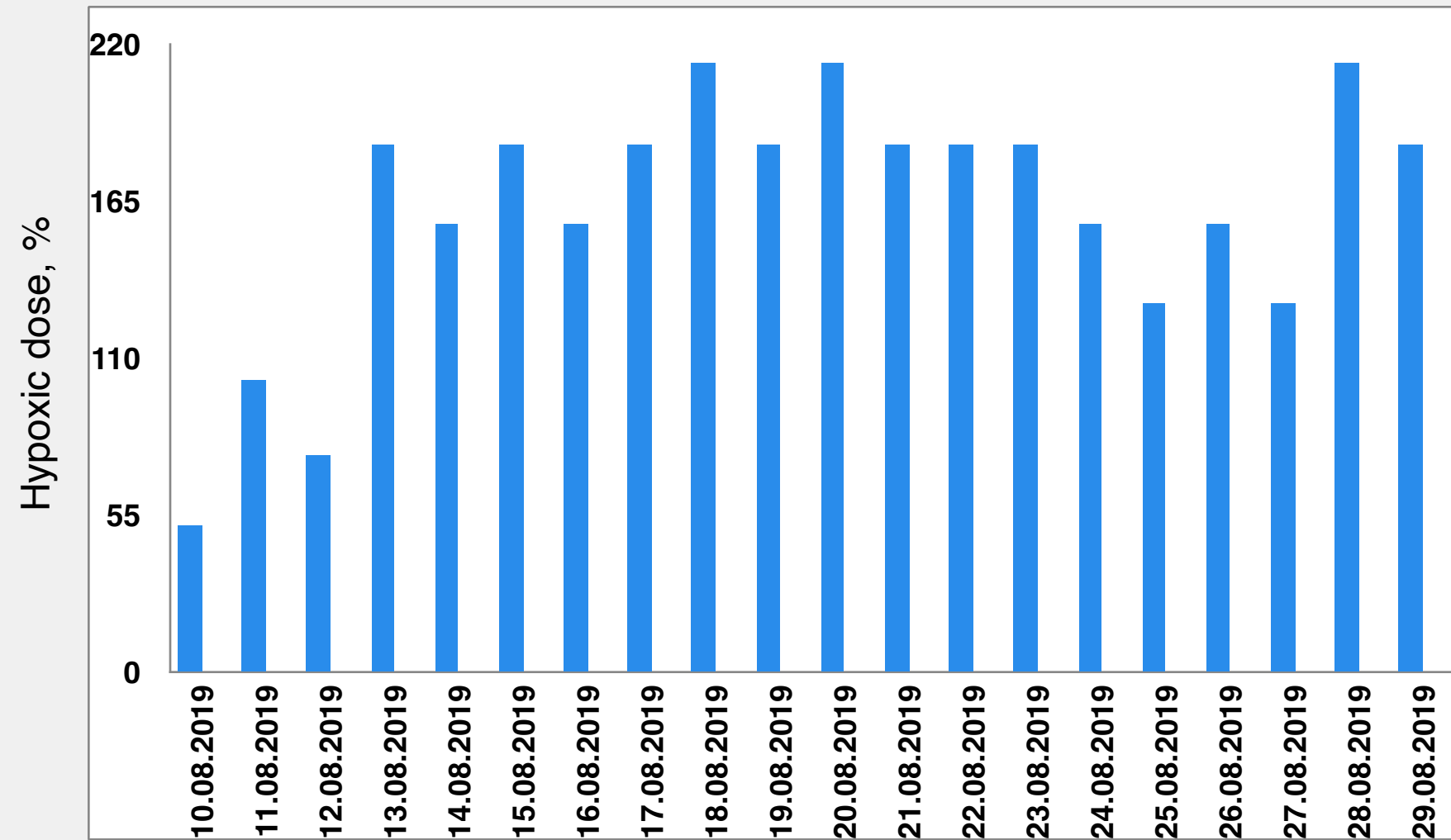
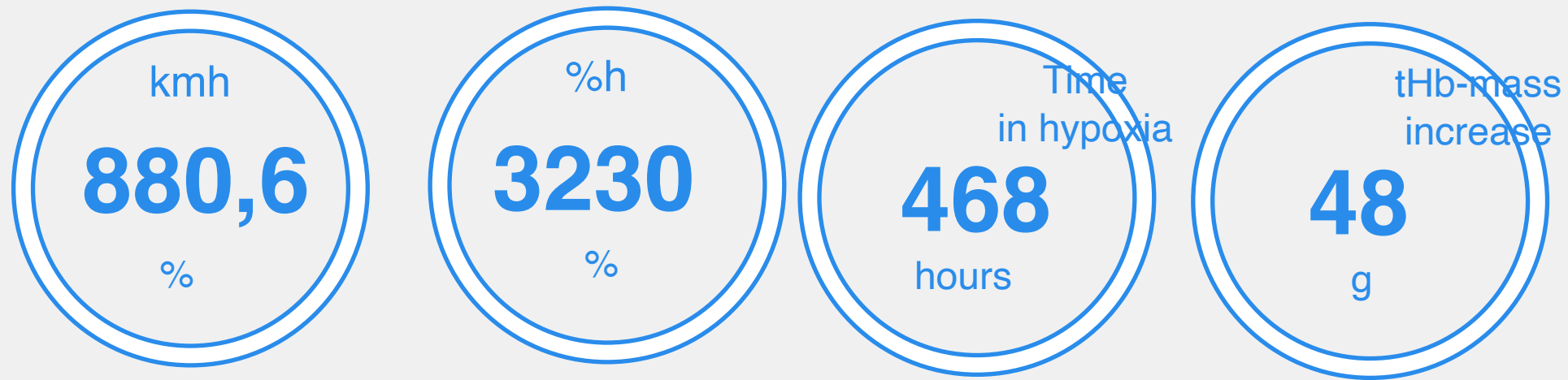


# Athlete B

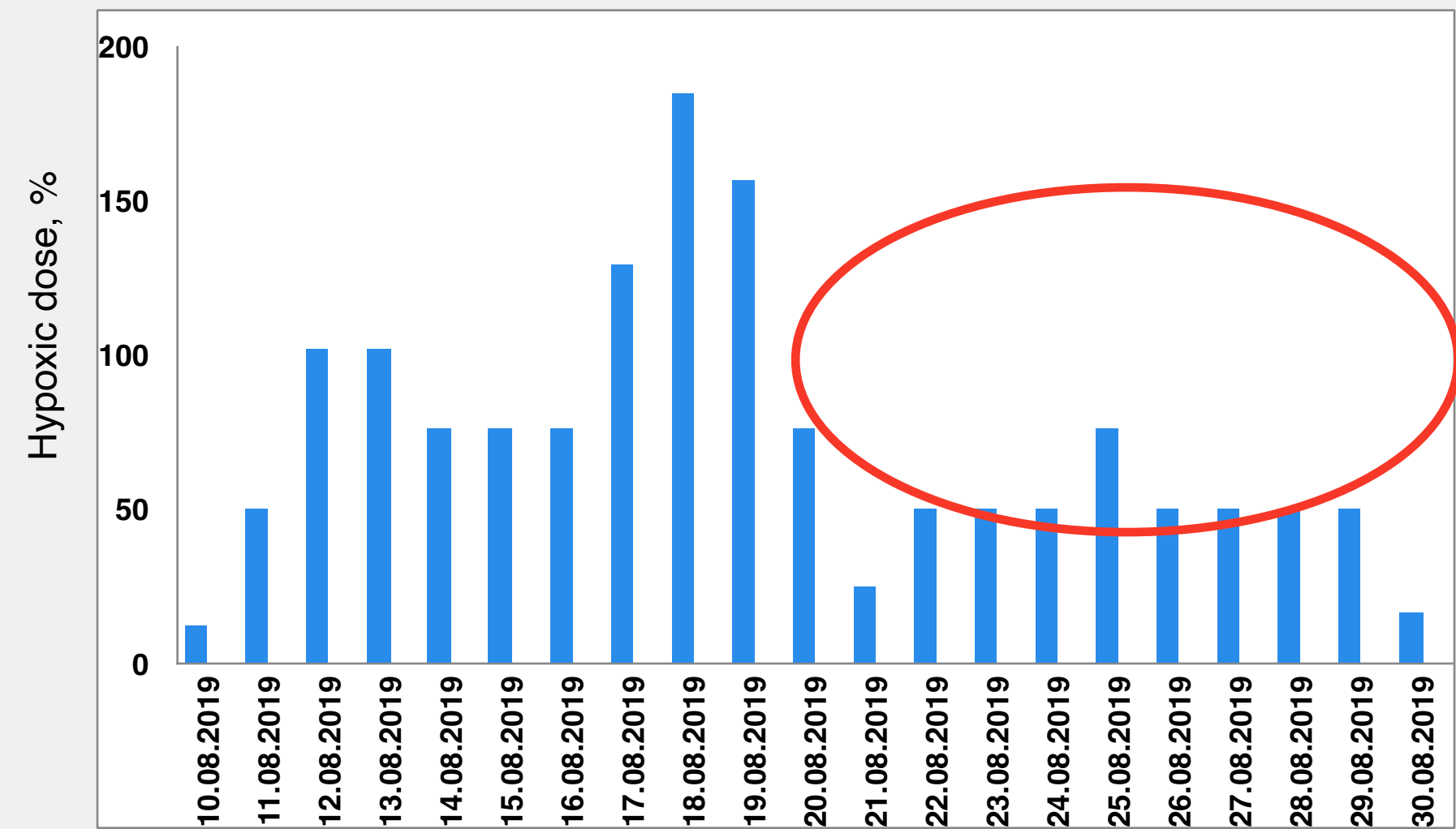
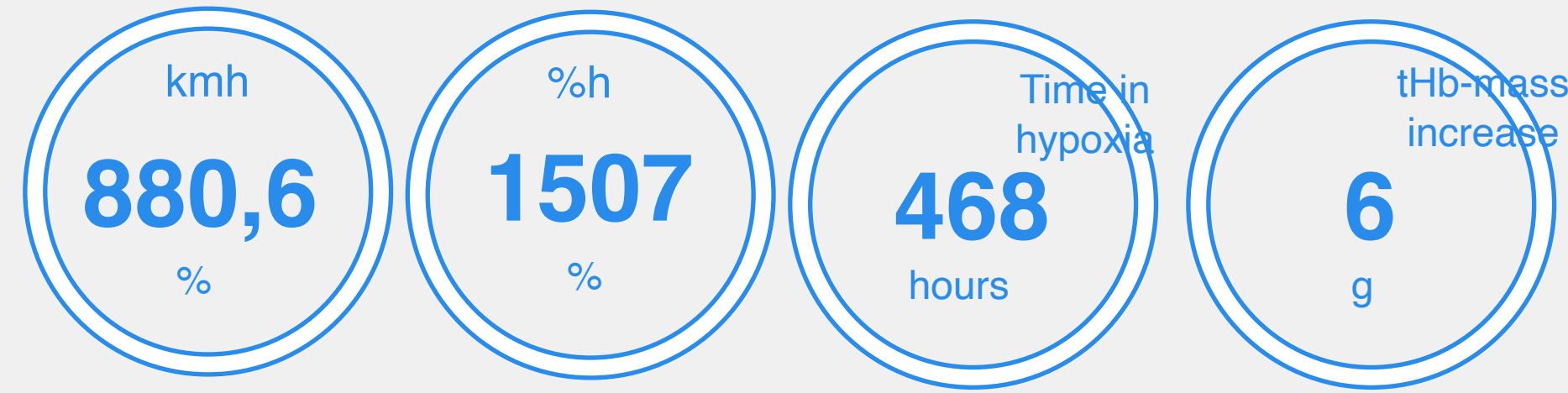




# Athlete A



# Athlete B



# Hypoxic dose - is a powerful tool for the individualisation of the altitude training

Perspectives

*J Appl Physiol* 121: 352–355, 2016;  
doi:10.1152/jappphysiol.00579.2015.

VIEWPOINT |

Time for a new metric for hypoxic dose?

Laura A. Garvican-Lewis,<sup>1,2</sup> Ken Sharpe,<sup>3</sup> and Christopher J. Gore<sup>1,2</sup>

<sup>1</sup>University of Canberra Research Institute for Sport and Exercise, Canberra, Australia; <sup>2</sup>Physiology, Australian Institute of Sport, Canberra, Australia; and <sup>3</sup>School of Mathematics and Statistics, The University of Melbourne, Australia

**Saturation hours: %·h = (98/s - 1) × t × 100%**

Where s is the saturation value (in %) and h is the time (in hours) sustained at this level of saturation.

**Dose-response modelling of total haemoglobin mass to hypoxic dose in elite speed skaters**

 Mikhail Vinogradov,  Irina Zelenkova

doi: <https://doi.org/10.1101/2020.06.18.159269>

**Saturation hours: %·h = (95/s - 1) × t × 100%**

Where s is the saturation value (in %) and h the time (in hours) sustained at this level of the saturation.  
the saturation



# ADDITIONAL TOOLS FOR THE ALTITUDE TRAINING INDIVIDUALISATION

IF THE HYPOXIC DOSE IS TOO  
LOW THE COMBINATION OF  
NORMOBARIC AND HYPOBARIC  
HYPOXIA CAN BE USED

ADDITIONAL EXTERNAL  
STIMULUS CAN BE  
ADDED (HEAT) OR  
HYPEROXIA







22

# **HYPOXIC TRAINING IS NOT A ONE SIZE FITS ALL APPROACH**

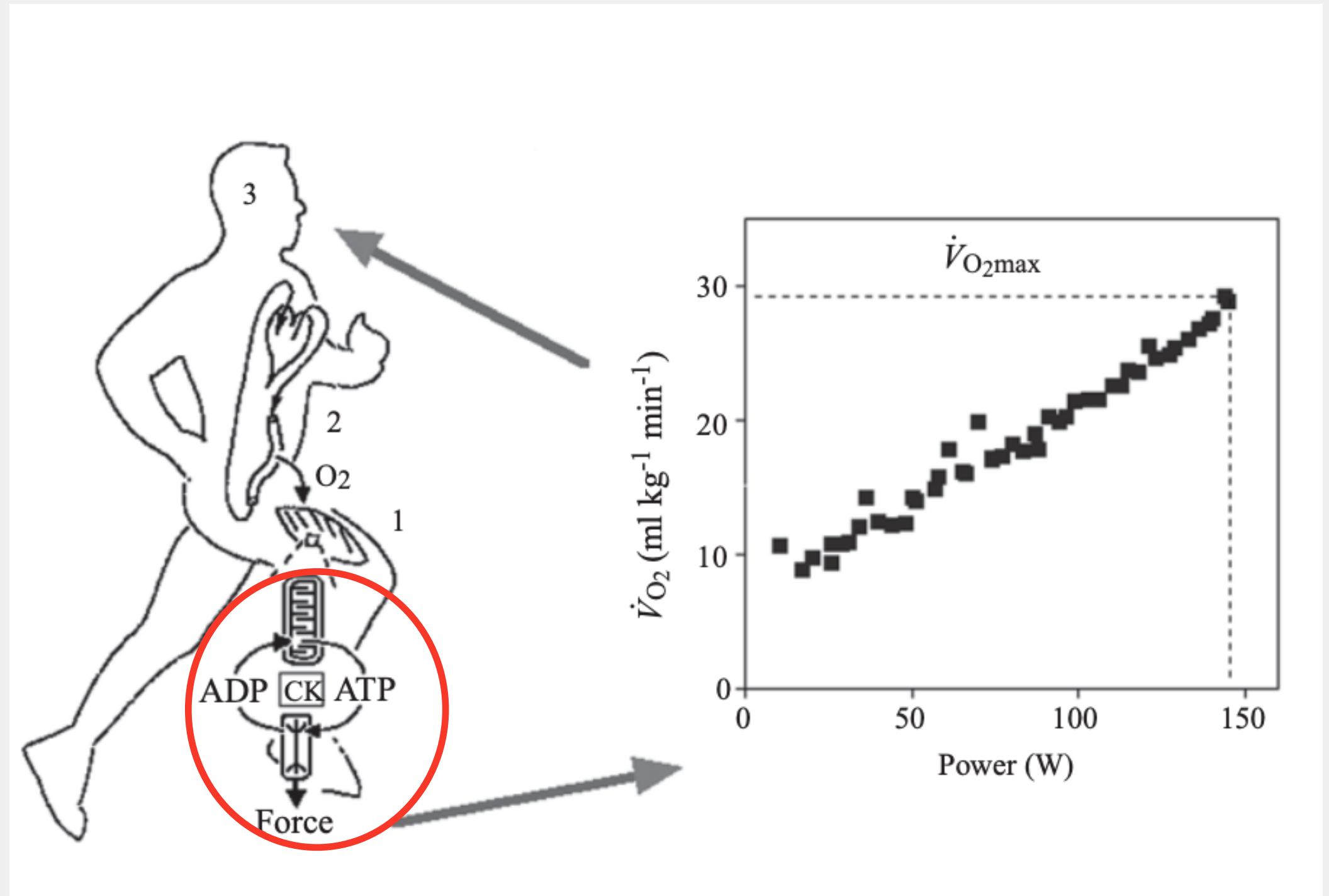
ALTITUDE TRAINING SHOULD BE INDIVIDUALISED FOR THE ATHLETES SPECIFIC NEEDS



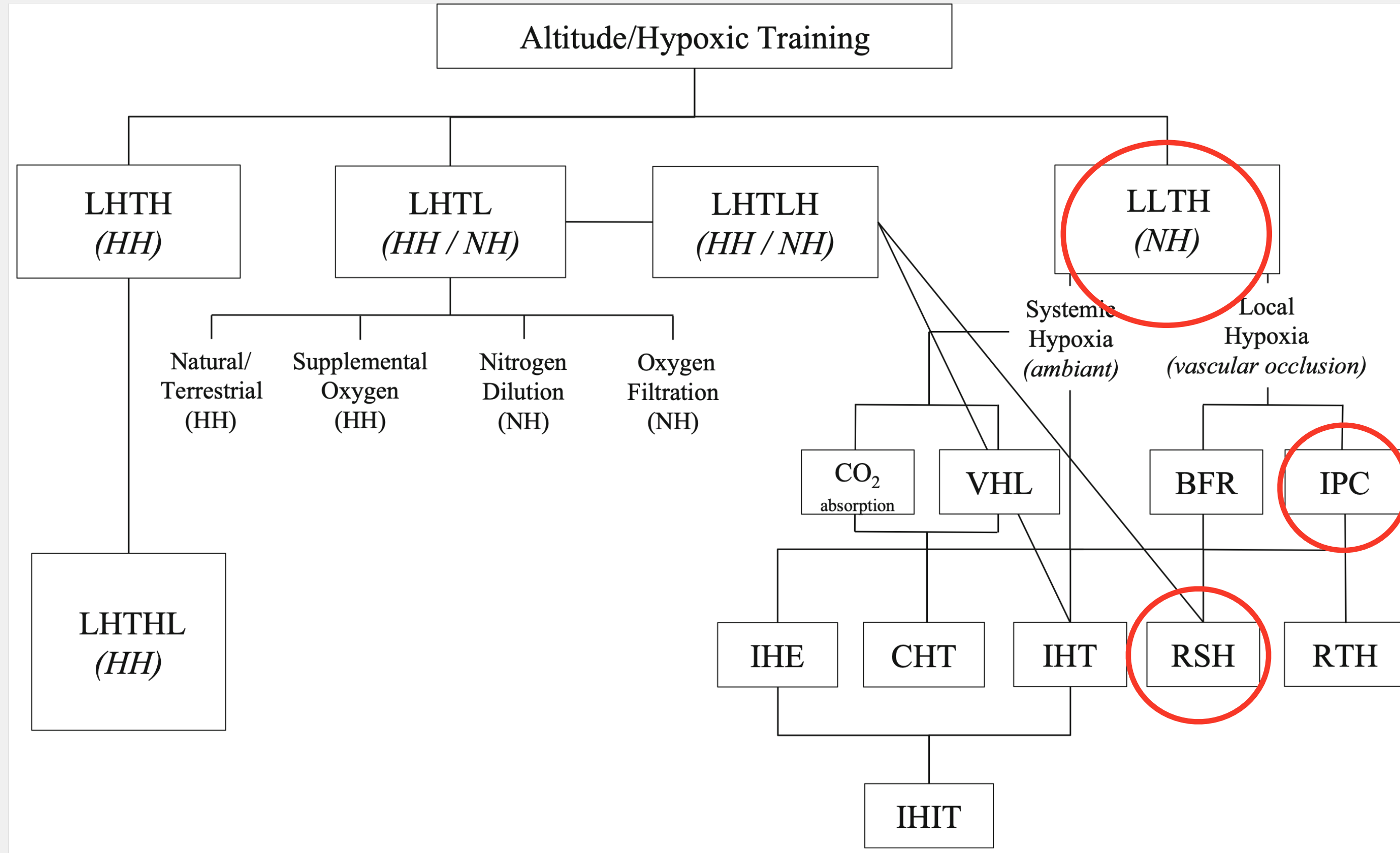
# FACTORS LIMITING AEROBIC PERFORMANCE



- VO<sub>2</sub>max
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[tHb-mass]  
PO<sub>2</sub>
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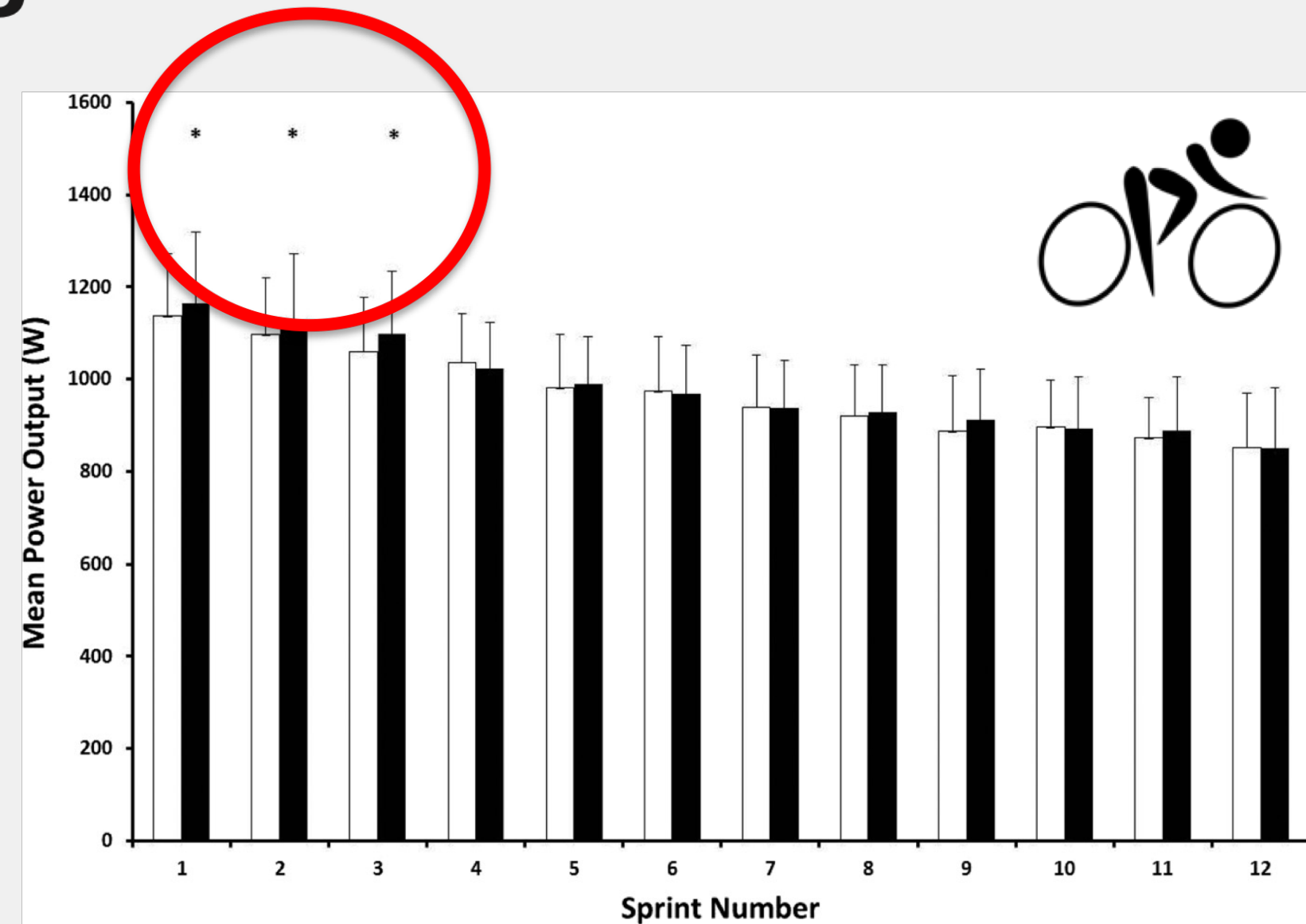


# CURRENT METHODS IN ALTITUDE TRAINING





# The Effect of Ischemic Preconditioning on Repeated Sprint Cycling Performance



Twelve 6-s sprints after four 5-min periods of bilateral limb occlusion at 220 mm

- Improvement of muscle fibre activation
- Improvement of oxygen extraction
- eNos-derived nitric oxide production

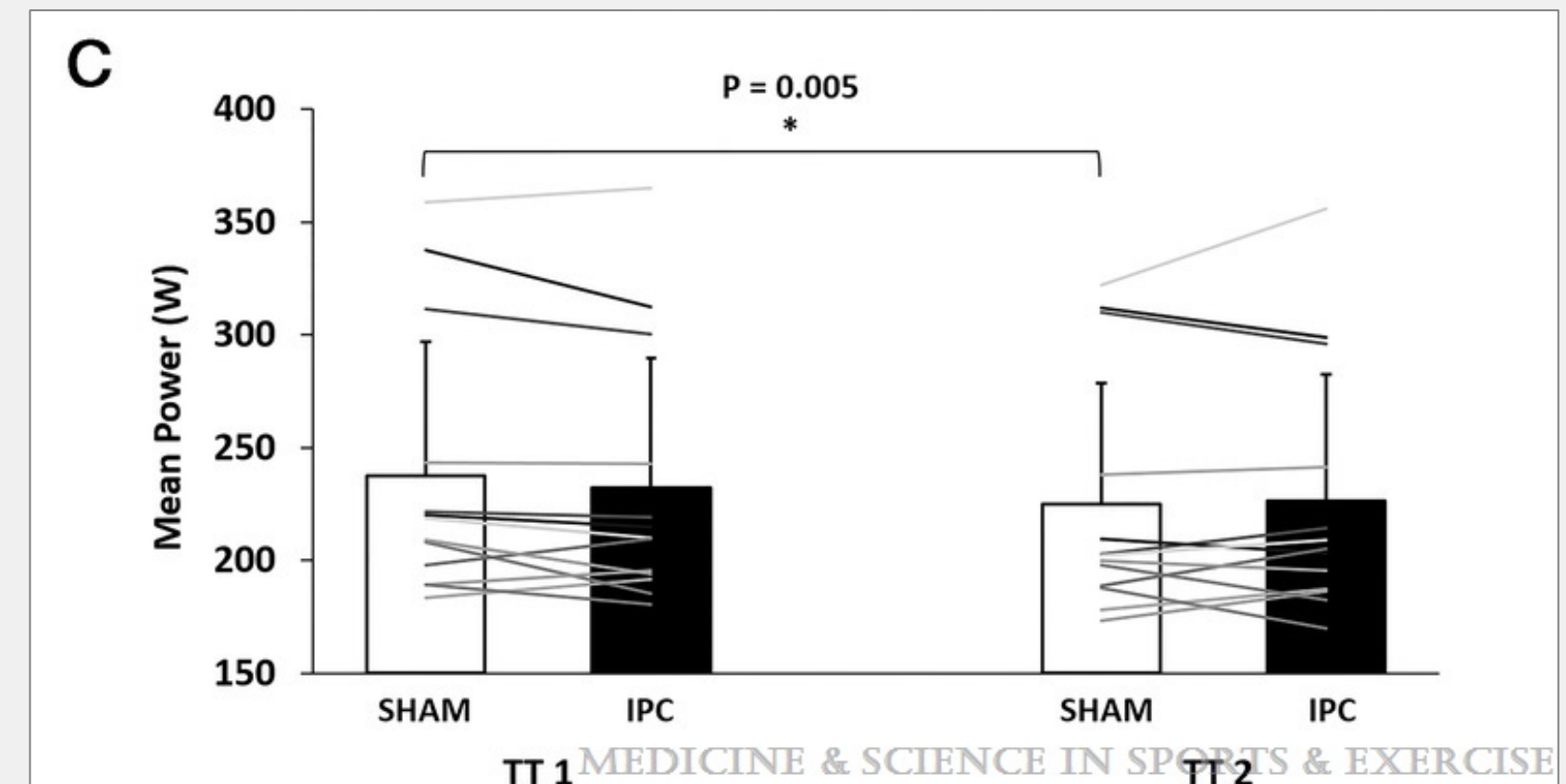
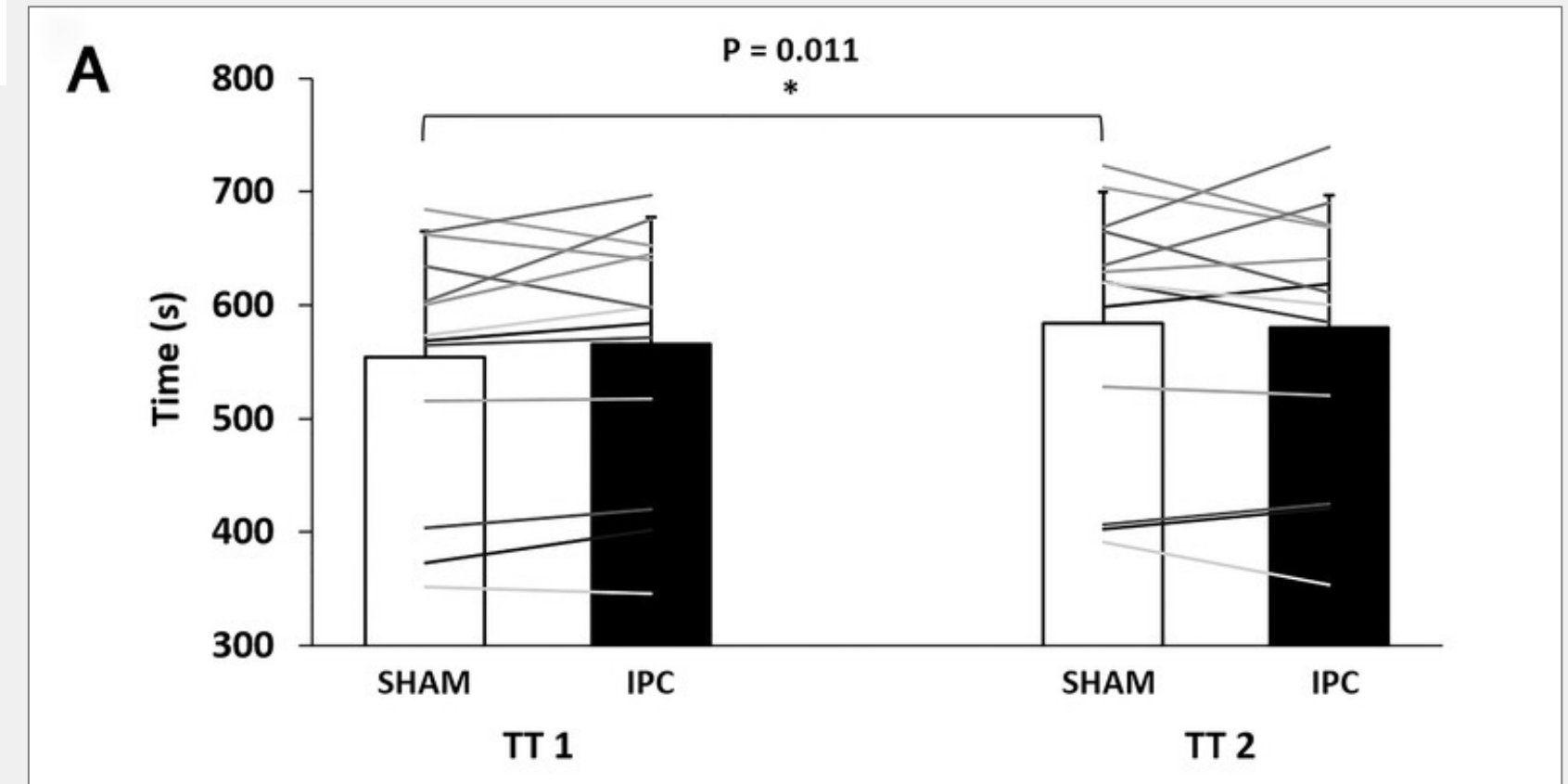


# Ischemic Preconditioning Maintains Performance on Two 5-km Time Trials in Hypoxia

DA MOTA, GUSTAVO R.<sup>1,2</sup>; WILLIS, SARAH J.<sup>2</sup>; SOBRAL, NELSON DOS SANTOS<sup>2</sup>; BORRANI, FABIO<sup>2</sup>; BILLAUT, FRANÇOIS<sup>3</sup>; MILLET, GRÉGOIRE P.<sup>2</sup>

Ergogenic mechanism: increased blood volume and greater oxygen extraction during the TT in IPC

IPC helps to maintain the performance of a second TT similar to the first one





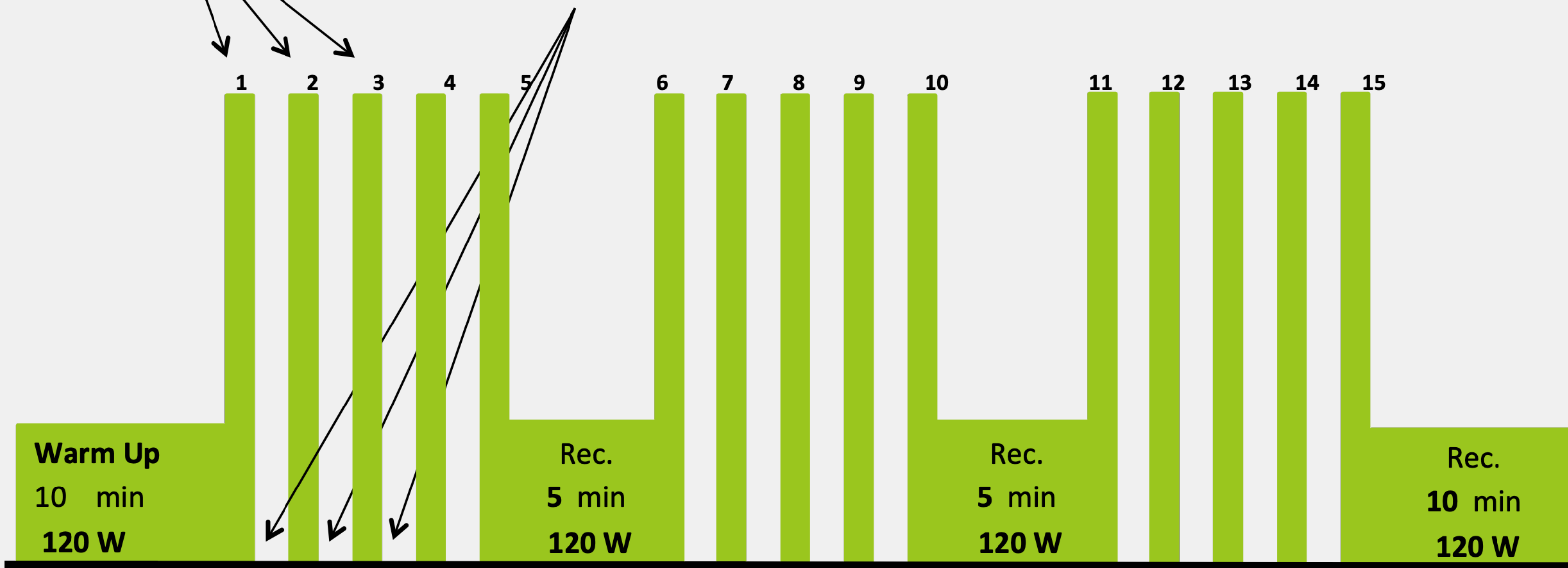
# REPEATED SPRINTS IN HYPOXIA (RSH)



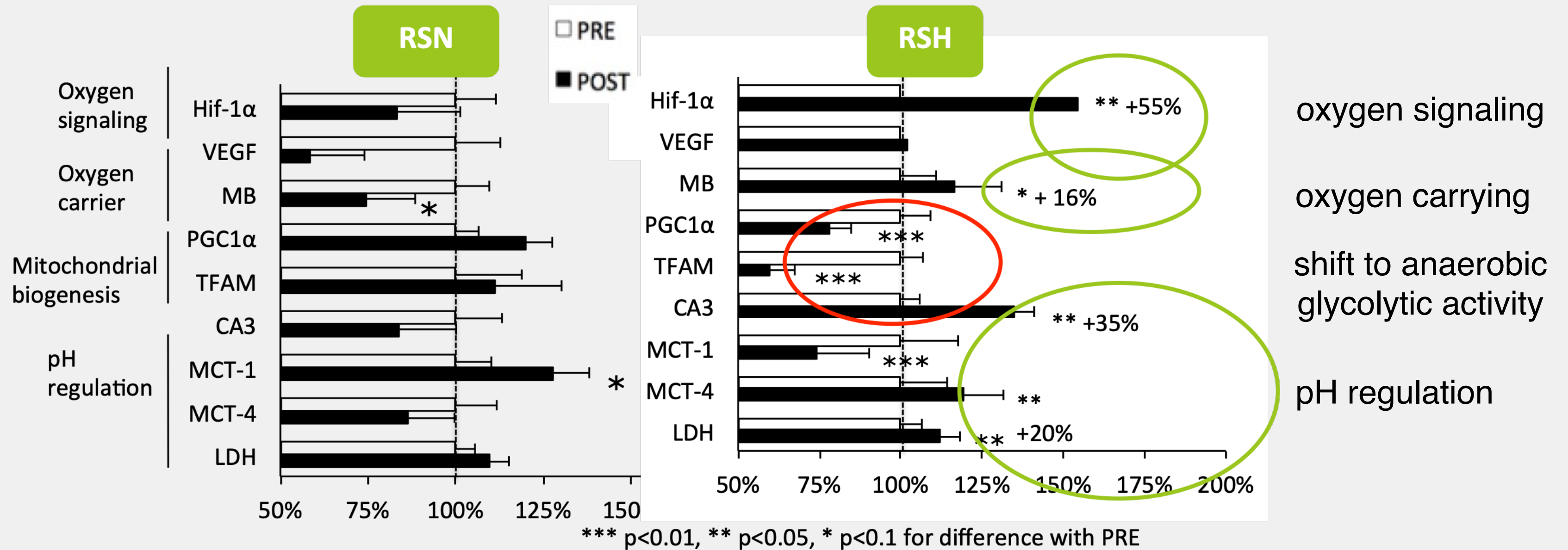
- Normobaric hypoxia, blind
- Two groups:
  - Control group (altitude = 485 m, FiO<sub>2</sub> = 20.9%)
  - Cyclists (altitude = 3000 m, FiO<sub>2</sub> = 14.7%)
- 4 weeks of training (8 sessions; 3 x 5 max sprints)

**10 s max sprint**

**20 s passive recovery**



# MOLECULAR ADAPTATIONS



oxygen signaling

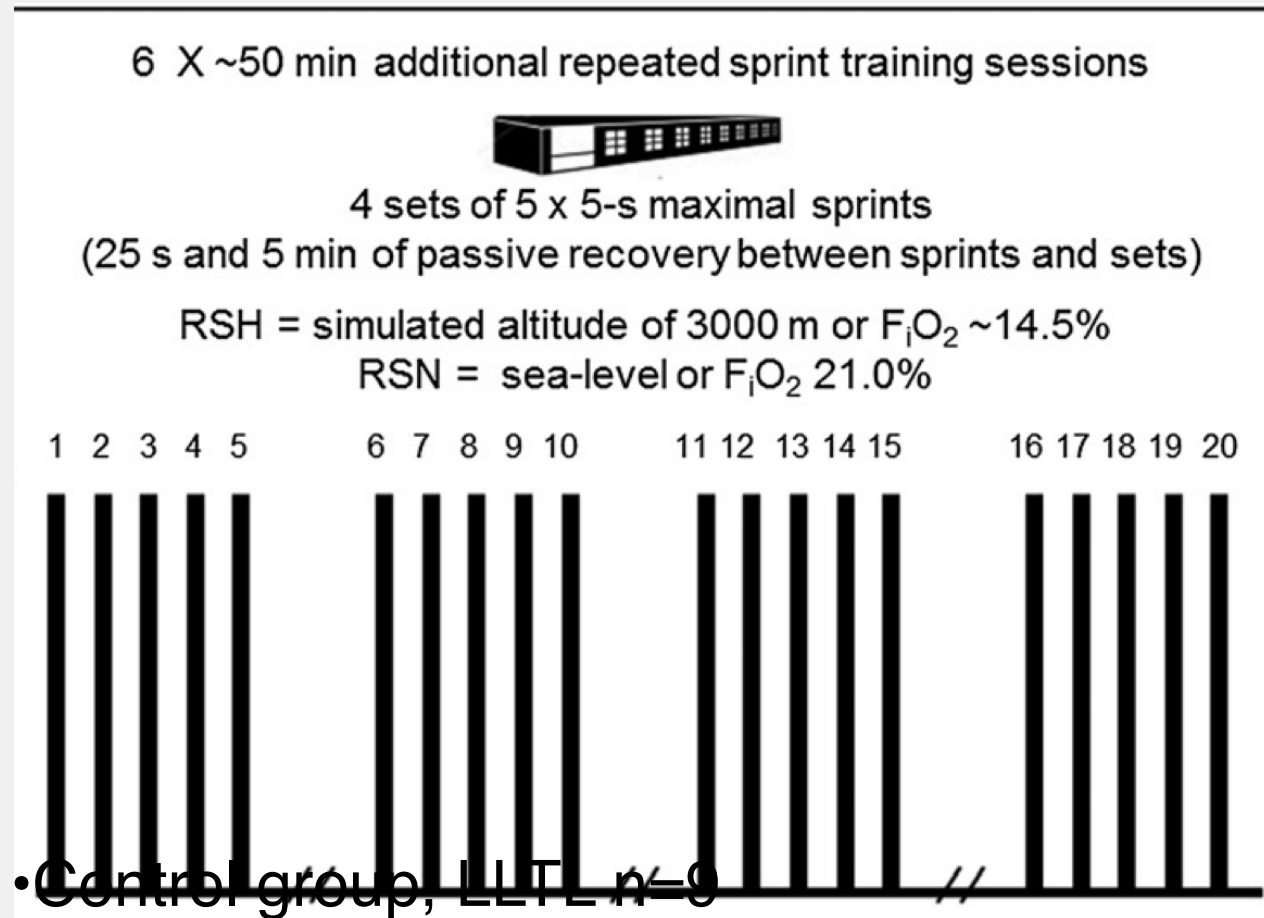
oxygen carrying

shift to anaerobic glycolytic activity

pH regulation

- **Fast-twitch fibers are better utilized**
- **Increase blood flow perfusion**
- **Improvement of anaerobic glycolytic activity**

# COMBINATION OF LHTL AND RSH



• Control group, LLTL n=9 //

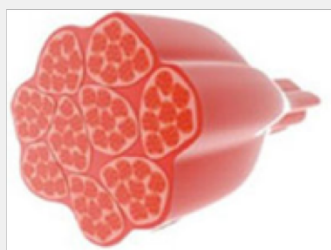
• Group LHTL + RSN n=12

• Group LHTL + RSH n=12

•  $\geq 14$  days, altitude 2500 – 3000 m ( $F_{iO_2}$ )

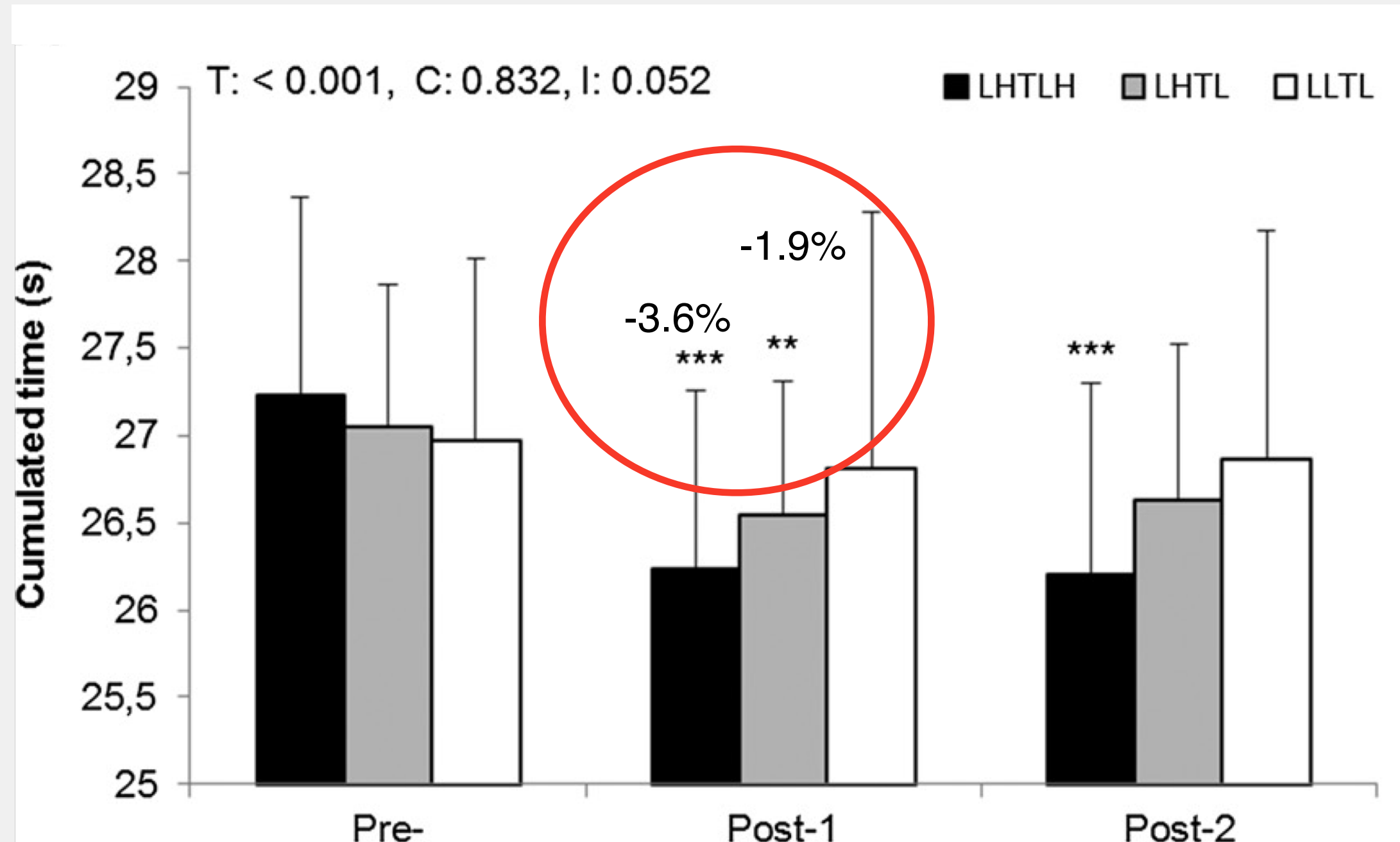


LHTL



RSH

=





# TAKE HOME COACHING TIPS

Altitude training needs to be **tailored to each athlete's needs**

The altitude training method should be **connected with the coaching goals**

Advances in technology allow **increased access to hypoxic training**





Irina

Zelenkova.

Supporting those who dream big

# THANK YOU FOR YOUR ATTENTION

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dr.irinazelenkova