

Heart Rate as an Isolated Fitness Indicator: is it time to eradicate Age and Gender Considerations in the Burn Injury Patient Demographic?

The Steady State Cycle Test

Danika Jurat¹ drjurat@gmail.com

Introduction:

This pilot, cross-sectional, observational study seeks to validate a steady state cycle test (SSCT) in a healthy adult population through comparison of maximum heart rate (HR) attained, percentage increase of HR and subsequent time to recovery (baseline HR) to maximum aerobic capacity (VO₂ max) calculated from the Astrand-Rhyming Cycle Ergometer Test (ARCET)^{1,2}. If the SSCT is validated, it is for secondary trial in the burn injury patient demographic.

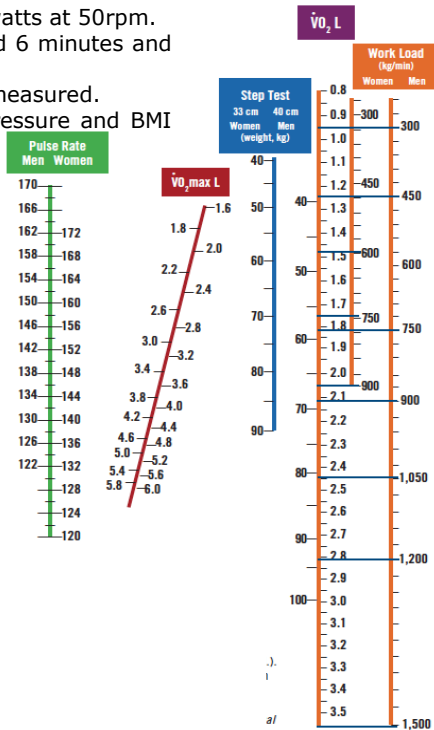
The Test:

- Cycling for 6 minutes at 75 watts at 50rpm.
- Heart rate measured at 5 and 6 minutes and averaged.
- Time to recovery heart rate measured.
- Baseline heart rate, blood pressure and BMI recorded.

The Comparator

ARCET:

6 minutes of cycling at intensity (selected by gender and conditioning) to achieve a heart rate between 120-170bpm to calculate maximum aerobic capacity (VO₂ max)^{3,4} using the pictured nomogram⁵.



VO ₂ MAX CORRECTION FACTORS	
Age	Correction Factor
15	1.10
25	1.00
35	0.87
40	0.83
45	0.78
50	0.75
55	0.71
60	0.68
65	0.65

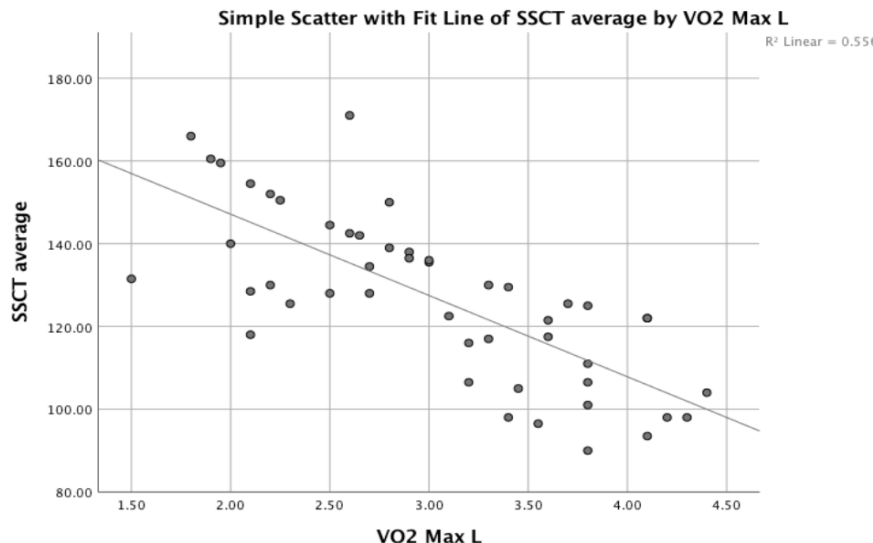
Thankyous:

Ethics approved by South Metropolitan Health Service Human Research Ethics Committee. Testing undertaken at the (1) State Burns Unit of Western Australia, Fiona Stanley Hospital.

Preliminary Results:

N= 51/74 complete

VO ₂ Max Relationships	Correlation	Effect Size	Coefficient	P-value
SSCT Maximum HR	-0.746	0.556	-0.028	0.000**
% Increase HR	-0.314	0.099	-0.871	0.030*
Time to Recovery	-0.439	0.193	-0.165	0.004*
Significant*, Highly significant**				



Why the SSCT?

- Minimal submaximal effort required.
- Similar to peri-operative status quo physiotherapy.
- Easily administered.
- Easy to interpret.
- Easy to understand.

Planned Result:

To create an easy to interpret table/graph to attribute a fitness score to participants following completion of the SSCT, utilizing their maximum HR, HR percentage increase and subsequent time to recovery to correlate to an approximate VO₂ max figure.

Conclusion:

Preliminary results show the SSCT's maximum HR and percentage increase in HR have strong correlation and are a good predictor of VO₂ max in the healthy population.

References:

1. Coolbaugh CL, Anderson IB, Wilson MD. Evaluation of an Exercise Field Test Using Heart Rate Monitors to Assess Cardiorespiratory Fitness and Heart Rate Recovery in an Asymptomatic Population. PLoS ONE. 2014. 9(5): 1-7
2. Bunn JA, Eschbar LC. Assessment of the Relationship between Cardiovascular Fitness and Heart Rate Recovery. American College of Sports Medicine. 2014. 3062
3. Smeets RJ, Van Soest M. The usability of a modified Åstrand bicycle test to assess the aerobic capacity in patients with musculoskeletal pain and healthy controls, Disability and Rehabilitation, 2009; 31:24, 1988-1995,
4. Cink RE, Thomas TR. Validity of the Astrand-Rhyming nomogram for predicting maximal oxygen intake. Br J Sports Med. 1981 Sep; 15(3):182-5
5. American College of Sports Medicine. Cycle Ergometer Testing. In: ACSM's Guidelines for Exercise Testing and Prescription. 9th ed. 2014. p. 1-2