# Cycling for weight loss in an 'altitude simulation chamber'

Submission date	<b>Recruitment status</b> No longer recruiting	<ul><li>Prospectively registered</li></ul>	
05/03/2021		Protocol	
Registration date 25/05/2021	Overall study status Completed	<ul><li>Statistical analysis plan</li></ul>	
		[X] Results	
<b>Last Edited</b> 05/05/2022	<b>Condition category</b> Other	Individual participant data	

#### Plain English summary of protocol

Background and aims

Women willing to lose overweight may do so by reducing their food intake or by enhancing their physical activity but the results of both approaches rely on the nutrients involved. It is hypothesized that cycling under mildly reduced environmental oxygen consumes more body fat than cycling under normal environmental oxygen conditions. Results will be used to optimize oxidation of body fat for weight loss by low-intensity cycling.

#### Who can participate?

Healthy women aged 20 - 40 years, willing to lose overweight by low-intensity cycling.

#### What does the study involve?

Women with overweight perform a 50-min cycling protocol, that encloses phases of rest, cycling at a personalized low intensity and of recovery, in an 'altitude simulation chamber' at two occasions within a period of 2 weeks, in randomized order once under normal (N-Ox: 20.9 %) and once under mildly reduced (R-OX: 17.0 %) normobaric oxygen. O2 consumption and CO2 production of subjects are measured continuously by use of a 'ventilated hood system'. Results inform about the metabolic costs of cycling and the ratio in which these costs are covered by carbohydrates and fat. Moreover, 4 fingertip blood samples are taken to determine glucose and lactate concentrations (mM) to get secondary evidence about the use of carbohydrates and fat during low-intensity cycling in women with overweight.

What are the possible benefits and risk of participating?

Results may help to raise the oxidation of body fat for weight loss by low-intensity cycling. The risk of mildly reduced oxygen (R-Ox: 17 %), comparable with the oxygen level during a long-distance air flight, is commonly well tolerated by healthy subjects.

Where is the study run from?

HAN University of Applied Sciences, Nijmegen, The Netherlands.

When is the study starting and how long is it expected to run for? June 2009 to June 2011

Who is funding the study?
HAN University of Applied Sciences, Nijmegen, The Netherlands
WUR University, Wageningen, The Netherlands
Dutch Ministry of Economic Affairs (PIDON fund) - The Netherlands

Who is the main contact?
Dr. Victor V.A.M. Schreurs (vs@glazenkamp.net)

### Contact information

#### Type(s)

Scientific

#### Contact name

Dr Victor V.A.M. Schreurs

#### **ORCID ID**

http://orcid.org/0000-0002-9324-7816

#### Contact details

Research Group Sports, Nutrition and Life style ISES - HAN University of Applied Sciences P.O. Box 6960
Nijmegen
Netherlands
NL-6503 GL
+31.24.3531507
vs@glazenkamp.net

#### Type(s)

Public

#### Contact name

Dr Victor Schreurs

#### Contact details

Research Group Sports, Nutrition and Life style ISES - HAN University of Applied Sciences P.O. Box 6960 Nijmegen Netherlands NL-6503 GL +31.24.3531507 vs@glazenkamp.net

# Additional identifiers

#### EudraCT/CTIS number

Nil known

#### **IRAS** number

#### ClinicalTrials.gov number

Nil known

#### Secondary identifying numbers

CMO nr: 2009/341; ABR nr: 29211.091.09

## Study information

#### Scientific Title

Comparison of metabolic responses to low intensity cycling under normal and mildly reduced normabaric oxygen in women with overweight

#### Study objectives

Cycling under mildly reduced normobaric oxygen in an 'altitude simulation chamber' might be a feasible way to raise oxidation of body fat for weight loss as far as reduced oxygen conditions enhance metabolic costs of exercise e.g. by an urge to increase the recycling of lactate to glucose (Cori cycle).

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

Approved 23/03/2010, Regional Ethics Committee Arnhem (Radboud UMC, P.O. Box 9101 [internal post 628], NL - 6500 HB Nijmegen - The Netherlands; +31. (0)243613154; commissiemensgebondenonderzoek@radboudumc.nl), ref: CMO nr: 2009/341; ABR nr: 29211.091.09.

#### Study design

Single centre interventional randomized controlled trial

#### Primary study design

Interventional

#### Secondary study design

Randomised cross over trial

#### Study setting(s)

Other

#### Study type(s)

Quality of life

#### Participant information sheet

No participant information sheet available

#### Health condition(s) or problem(s) studied

To raise oxidation of body fat during low intensity cycling in women willing to lose overweight

#### **Interventions**

Participants perform a 50-min protocol, enclosing phases of rest, cycling at a personalized low intensity and recovery, in an 'altitude simulation chamber', at two occasions within a period of 2 weeks, in randomized order once under normal (N-Ox: 20.9%) and once under mildly reduced (R-Ox: 17.0%) normobaric oxygen.

Within the chamber  $(2.4 \times 3.8 \times 2.7 \text{m}; 25 \text{m}^3)$  an upright bike ergometer combines with a "ventilated hood system" for open-circuit respiratory gas exchange of cyclists.

The 20 participants were listed in alphabetical order of initials and randomised by their odd (N- $Ox \sim R-Ox$ ) or even (R-Ox  $\sim N-Ox$ ) position.

#### Intervention Type

Other

#### Primary outcome measure

Measured during periods of rest, cycling and recovery:

- 1. O2 consumption (VO2: mL O2/min)
- 2. CO2 production (VCO2: mL CO2/min)

derived from differences in content of O2 and CO2 measured between air samples drawn from the inlet (ambient air in the chamber) and outlet (ambient air modified by respiration) of a 'ventilated hood'. Both sample lines are analyzed simultaneously by a dual channel Servomex 4100 gas analyzer (Servomex, Zoetermeer, The Netherlands). Each channel accommodates a paramagnetic O2 transducer serially connected to an infrared CO2 transducer. Differences in content of O2 and CO2 between sample lines caused by respiration, down to 0.01%, are measured accurately during ventilation of the hood with 250 L of ambient air per min. To this purpose the entire analogue output range of the transducers (20 mA, being converted to 10 mV) is calibrated for a linear measuring range of only 1.00%. VO2 and VCO2 measured at the same timeoptimize accuracy of 'real-time' changes in metabolism regarding metabolic costs (~VO2) and substrate use (~ VCO2/ VO2) before, during and after cycling. Mean values of data collected at 20 sec intervals during 5 min are calculated for 4 phases within the cycling protocol: Rest (5-10 min), Initial cycling (22-27 min), Final cycling (35-40 min) and Recovery (40-45 min))

#### Secondary outcome measures

- 1. Blood oxygen saturation (SaO2: %) measured using pulse oximeter
- 2. Heart rate (HR: min-1) monitored by reflectance finger pulse-oxymetry using the PulseOx 7500 (SPO Medical, Simi Valley CA, USA)
- 3. Glucose (mM) measured using a single sample of 10  $\mu$ L fingertip capillary blood using a Biosen C-line analyzer (EKF Diagnostics, Sopachem, Ochten, The Netherlands)
- 4. Lactate (mM) measured using a single sample of 10  $\mu$ L fingertip capillary blood using a Biosen C-line analyzer (EKF Diagnostics, Sopachem, Ochten, The Netherlands)
- 5. Rate of perceived exertion (RPE value: Borg scale: 6 20)

All secondary outcome measures are collected at min 6, 26, 39 and 46 and assumed to represent the 4 phases of the cycling protocol mentioned under primary outcome measures

#### Overall study start date

01/06/2009

#### Completion date

01/06/2011

# **Eligibility**

#### Key inclusion criteria

- 1. Women willing to lose overweight by low intensity exercise
- 2. Low active
- 3. 20 40 years of age

#### Participant type(s)

Healthy volunteer

#### Age group

Adult

#### Sex

Female

#### Target number of participants

20

#### Total final enrolment

20

#### Key exclusion criteria

- 1. Anemia
- 2. Type 1 or type 2 diabetes
- 3. Hypertension
- 4. Heart disease

#### Date of first enrolment

01/04/2010

#### Date of final enrolment

01/06/2010

#### Locations

#### Countries of recruitment

Netherlands

# Study participating centre HAN University of Applied Sciences

Kapittelweg 33 Nijmegen Netherlands NL - 6525 EN

# Sponsor information

#### Organisation

HAN University of Applied Sciences

#### Sponsor details

Kapittelweg 33 Nijmegen Netherlands NL - 6525 EN +31.24.3531507 Ellen.Schravendeel@han.nl

#### Sponsor type

University/education

#### Website

http://www.han.nl/international/english

#### **ROR**

https://ror.org/0500gea42

# Funder(s)

#### Funder type

Other

#### **Funder Name**

Investigator initiated and funded

#### **Funder Name**

Wageningen University and Research Centre

#### Alternative Name(s)

Wageningen UR, WUR

#### **Funding Body Type**

Private sector organisation

#### **Funding Body Subtype**

Universities (academic only)

#### Location

#### Funder Name

PIDON Fund (Dutch Ministry of Economic Affairs)

#### **Results and Publications**

#### Publication and dissemination plan

Planned publication in a high impact peer-reviewed journal.

#### Intention to publish date

01/07/2021

#### Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request. Raw data prepared for publication are stored at Wageningen University and will be made available after publication for a period of 2 years upon reasonable requests for inspection or research purposes.

#### IPD sharing plan summary

Available on request

#### **Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		12/04/2022	05/05/2022	Yes	No