Post Workout Recovery Modalities

By: Sean Casey

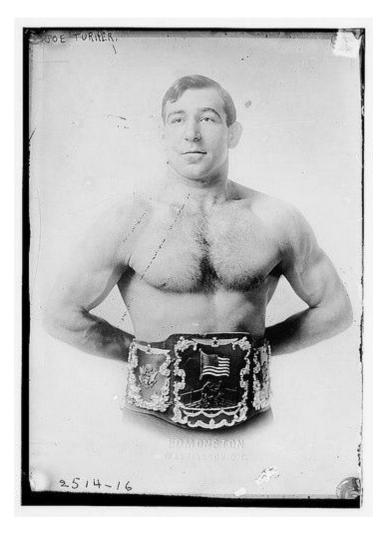


Table of Contents

About the Author	2
Post Workout Recovery Modalities Part Ia: Hydrotherapy	3
Post Workout Recovery Modalities Part Ib: Hydrotherapy	10
Post Workout Recovery Modalities Part II: Compression Gear	21
Testimonial Support for Sean Casey	28

Copyright 2010

About the Author

Sean Casey is a graduate of the University of Wisconsin-Madison with degrees in both Nutritional Science-Dietetics and Kinesiology-Exercise Physiology. Sean graduated with highest academic honors as one of the top students in both the Nutritional Science and Kinesiology departments.

During college, Sean was active with the UW-Badgers Strength and Conditioning Department. He has also spent time at the International Performance Institute in Bradenton, FL where he worked with the USA U-18 National Men's Soccer team. More recently, he has worked with multiple NFL 1st round NFL draft picks and All-Pro NFL athletes at the Athletes Performance in Tempe, AZ. Sean is also active in the field of sports nutrition where he has consulted with a wide variety of organizations including both elite (NFL's Jacksonville Jaguars) and amateur athletic teams.

Currently, Sean Casey is the president of CasePerformance, an organization focused on providing its clients research based physical performance and sports nutrition advice. He can be reached though his website <u>http://www.caseperformance.com/</u>.

Post Workout Recovery Modalities Part Ia: Hydrotherapy

Quick Hit Summary

Water therapy is a common modality to enhance muscle recovery post workout. Sitting in chest high thermoneutral water for 20-30 minutes may accelerate waste removal while increasing blood flow to working muscles. Cold, hot and contrast water temps are also commonly used to assist recovery. The goal of cold water therapy is to reduce inflammation whereas hot water purportedly increases muscle blood flow. Contrast water therapy involves alternating between hot and cold water baths to induce a vaso-pumping effect. Current evidence does not support the theory behind these latter 2 therapies simply because the heat (from the water) is incapable of penetrating more than a couple centimeters into the skin. Thus, there is no stimulus to increase muscle blood flow.

Post Workout Recovery_

For professional sport athletes, there is a fine line between allowing enough time for the human body to recover from an intense workout and getting in enough practice/floor work to prepare for an upcoming contest. Athletes and coaches are always looking to shorten the former in order to allow more of the latter. The same often holds true for recreational athletes. For example, endurance athletes often prepare for distance races/triathlons by training 2x/day. Additionally, many individuals lift weights 4x/week. Regardless of what end of the competitive spectrum you fall on, common sense tells us that a 2nd training session will not be productive if one hasn't recovered from the 1st workout. String together enough non productive training sessions and other than sore muscles, all you have is wasted time.

{One exception does apply to this line of thinking. During an "overreaching" training phase, individuals complete multiple training sessions while still in a fatigued state. In turn, performance will decrease for a short period of time until the gains are "realized" during the subsequent training block. I stress that this is a PLANNED period of decreased training performance vs. the UNPLANNED non-productive training sessions I'm referring to above.}

In past articles (found at www.caseperformance.com), I've stressed the role that nutrition has on athletic performance. As discussed, properly timed nutritional interventions provide the building blocks necessary for growth, enhancing the body's ability to recover from hard workouts. There are numerous other methods, collectively referred to as post workout recovery modalities (**PWRM**), that athletes also utilize with hopes of accelerating this process. These PWRM involve hydrotherapy, compression garments, massage, etc. In this 1st article of my PWRM series, I'd like to focus on the evidence supporting the use of hydrotherapy.

Physiological Factors Influencing Post Workout Recovery_

Before I get too deep into the various PWRM, I'd like to briefly discuss one of the primary nonnutritive factors hypothesized to influence post workout recovery. During the 1970-1980's various studies found lactic acid impaired strength and contraction velocity in samples of isolated muscle tissue¹. {Lactic acid breaks down and forms lactate and an H+ acid ion. Therefore for the remainder of this review, I'll use lactate, lactic acid and acid interchangeably}. **Based off these early findings, many researchers evaluated PWRM on their ability to remove lactate from muscle tissue post workout**. Similarly, coaches and athletes employ post workout techniques aimed at removing lactate from muscular tissue. For instance, our high school track coach used to have us lie on our backs and rest our legs on an elevated surface. The theory was that lactate would "drain" out of our muscle tissue, allowing our legs to be fresher for the following day's workout.

Interestingly, it turns out that **lactic acid may not be the best form of measurement with respect to evaluating the effectiveness of a PWRM**. As pointed out by Cairns SP, it may have a much smaller effect on muscle fatigue than was previously hypothesized¹. Thanks to advances in technology, scientists are now able to study muscle tissue closer to physiological temperatures (old studies were completed at muscle tissue held at cooler temperatures, 50-68°F). As shown by Westerblad et al., acid had little effect on contraction velocity when completed on muscle tissue held at 89°F². On the other hand, a 2006 study by Knuth et al. did indicate that lactic acid decreased muscle contractile power even at warmer temperatures³.

Although the lactate question is still being debated amongst scientist, athletes must ask themselves if the research is even applicable to their post training recovery protocol. Although lactate may induce muscular fatigue, its quickly metabolized within the body (1/2 life: muscle- 9.5 minutes; blood- 15 minutes), and eliminated from our system 90 minutes after an exercise session has been completed⁴⁵. Thus, exercise induced lactic acid from one workout is likely not even present during a subsequent workout.

PWRM #1: Hydrotherapy (thermoneutral water immersion)



Figure 1 Jumping in a pool post workout does seem like a pretty tempting idea

One of the most popular PWRM is hydrotherapy (hydro means water). Fill a tub up with water, jump in and let the good times roll! The theory behind immersing oneself in water is that it increases hydrostatic pressure on one's body⁶. During exercise, a fluid shift occurs as oxygen and other nutrients are delivered from the circulatory system to the working muscle. Some of this blood/plasma immediately returns to the heart as would be expected. On the other hand, a portion of this fluid "pools" in the spaces surrounding muscle fibers. In the process, waste products, produced by the working muscles, are prevented from being efficiently reabsorbed.

Under resting conditions (ie- no PWRM employed), this fluid is slowly reabsorbed (via the lymphatic system) back into circulation. From here, waste products are broken down and removed from the body. The use of hydrostatic pressure accelerates this process¹². To see this positive fluid shift, it appears that one must immerse themselves in water up to the neck for at least 10-15 minutes⁸. In one study, Johansen et al. observed a 16% increase in plasma volume in 8 men after they sat in chest high water for 30 minutes⁷. It does not appear that sitting longer than 30 minutes has any beneficial effect as studies carried out to 60 minutes still only report increases of ~16% in plasma volume⁹.

Besides removing metabolic waste products, hydrotherapy also increases cardiac output⁶. {For reference, cardiac output is a measurement of the total amount of blood the heart pumps during a given time frame}. As a result, the body's ability to deliver nutrients to muscle tissue (post exercise) may be enhanced. When sitting in water at ~ sternum level height for 15 minutes, Gabrielsen et al observed a 32.6% increased in cardiac output in 9 healthy men¹⁰. Yun et al studied the effects of neck high water immersion in Korean women who were classified as young (mean age- 22.0 years), old (mean age- 54.5 years) and active water divers (mean age-

55.0 years). All groups saw >48% increase in cardiac output after 20 minutes of sitting in the water.

The above mentioned changes associated with water immersion are seen when sitting/standing in thermoneutral water (ie- thermoneutral water immersion-**TWI**). In TWI, the temperature of the water is similar to that of your body temperature. However, more often than not, coaches and trainers recommend their athletes jump in pools containing cold, hot or contrasting water temperatures. Why is this done and is it beneficial? Read on and find out!

Theory Behind Cold Water Immersion

Cold water immersion (**CWI**) is generally accepted to be water temperatures between 50-59°F [6]. Advocates of cold water therapy promote this form of therapy for its **anti-inflammatory benefits** which include reduced blood flow (vasoconstriction). Although inflammation is needed to stimulate muscle growth, excessive inflammation may slow down the recovery process, possibly leading to overtraining syndrome¹². CWI has also been found to **decrease perception of pain**¹³ while increasing subjective measures of recovery¹⁴. On the other hand, drawbacks with CWI include a temporary decrease in heart rate⁶ (which contributes to cardiac output), and muscle contraction power¹⁵.

Theory Behind Hot Water Immersion

Hot water immersion (**HWI**) is generally accepted to be water temperatures between 100-115°F. As one would expect, the use of HWI has effects completely opposite that of CWI. **Proponents claim that it increases the flow of nutrients** to muscle post workout via vasodilatation. Research indicates that the application of heat does increase bloodflow through dermal (skin) tissue¹⁶¹⁷. Additionally, when exposed to HWI, for 20 minutes, it's been shown that intramuscular temperature increases by $2.8^{\circ}C^{19}$. In theory, this would lead to greater muscle blood flow. However, to the best of my knowledge, scientific evidence has not confirmed this increased intramuscular blood flow when exposed to hot water. However, with respect to muscle tissue, **there is a lack of evidence to support the notion that heat penetrates deep enough to affect muscle blood flow**. Bonde-Petersen et al. failed to find any significant increase in muscle blood flow following 20 minutes of HWI (110°F)¹⁷.

Theory Behind Contrast Water Therapy

Contrast water therapy (**CWT**) is a highbred recovery modality that involves alternating between both CWI and HWI. Protocols involve exposing oneself to one extreme temperature (similar to the ones mentioned above) for 30-300 seconds before introducing the opposite extreme temperature⁶. For example, one would jump in a cold water tub for 2 minutes, get out and sit in a hot whirl pool for another 2 minutes. This process could then be repeated 5-6x. **CWT is purported to induce a vaso-pumping effect** (ie- alternating between vasoconstriction during CWI and vasodilatation during HWI) **that accelerates the removal of waste products from muscular tissue**. There is a current **lack of evidence to support the notion that a vasopumping effect** actually occurs^{20,21}.

Applying Theory to Practice_

The aforementioned studies lay the ground work of how hydrotherapy may or may not benefit muscle recovery. However, these studies failed to examine its effects on subsequent exercise performance. In part 1b of this ebook, we'll look at if post workout CWI, HWI and CWT affect subsequent physical performance.

References

¹ Cairns SP. Lactic acid and exercise performance: culprit or friend? Sports Med. 2006;36(4):279-91.

² Westerblad H, Bruton JD, Lännergren J. The effect of intracellular pH on contractile function of intact, single fibres of mouse muscle declines with increasing temperature. J Physiol. 1997 Apr 1;500 (Pt 1):193-204.

³ Knuth ST, Dave H, Peters JR, Fitts RH. Low cell pH depresses peak power in rat skeletal muscle fibres at both 30 degrees C and 15 degrees C: implications for muscle fatigue. J Physiol. 2006 Sep 15;575(Pt 3):887-99. Epub 2006 Jun 29.

⁴ Karlsson J, Saltin B. Oxygen deficit and muscle metabolites in intermittent exercise. Acta Physiol Scand 1971; 82: 115-22.

⁵ Barnett A. Using recovery modalities between training sessions in elite athletes: does it help? Sports Med. 2006;36(9):781-96.

⁶ Wilcock IM, Cronin JB, Hing WA. Physiological response to water immersion: a method for sport recovery? Sports Med. 2006;36(9):747-65.

⁷ Johansen LB, Foldager N, Stadeager C, Kristensen MS, Bie P, Warberg J, Kamegai M, Norsk P. Plasma volume, fluid shifts, and renal responses in humans during 12 h of head-out water immersion. J Appl Physiol. 1992 Aug;73(2):539-44.

⁸ Johansen LB, Jensen TU, Pump B, Norsk P. Contribution of abdomen and legs to central blood volume expansion in humans during immersion. J Appl Physiol. 1997 Sep;83(3):695-9.

⁹ Gordon CJ, Fogarty AL, Greenleaf JE, Taylor NA, Stocks JM.Direct and indirect methods for determining plasma volume during thermoneutral and cold-water immersion. Eur J Appl Physiol. 2003 Jun;89(5):471-4. Epub 2003 Apr 24.

¹⁰ Gabrielsen A, Pump B, Bie P, Christensen NJ, Warberg J, Norsk P. Atrial distension, haemodilution, and acute control of renin release during water immersion in humans. Acta Physiol Scand. 2002 Feb;174(2):91-9.

¹¹ Yun SH, Choi JK, Park YS. Cardiovascular responses to head-out water immersion in Korean women breath-hold divers. Eur J Appl Physiol. 2004 May;91(5-6):708-11. Epub 2004 Feb 10.

¹² Smith LL. Tissue trauma: the underlying cause of overtraining syndrome? J Strength Cond Res. 2004 Feb;18(1):185-93.

¹³ Ingram J, Dawson B, Goodman C, Wallman K, Beilby J. Effect of water immersion methods on post-exercise recovery from simulated team sport exercise. J Sci Med Sport. 2009 May;12(3):417-21. Epub 2008 Jun 11. ¹⁴ Parouty J, Al Haddad H, Quod M, Leprêtre PM, Ahmaidi S, Buchheit M. Effect of cold water immersion on 100-m sprint performance in well-trained swimmers. Eur J Appl Physiol. 2010 Feb 17. [Epub ahead of print].

¹⁵ Ferretti G, Ishii M, Moia C, Cerretelli P.Effects of temperature on the maximal instantaneous muscle power of humans. Eur J Appl Physiol Occup Physiol. 1992;64(2):112-6.

¹⁶ Myrer JW, Measom G, Durrant E, Fellingham GW. Cold- and Hot-Pack Contrast Therapy: Subcutaneous and Intramuscular Temperature Change. J Athl Train. 1997 Jul;32(3):238-241.

¹⁷ Bonde-Petersen F, Schultz-Pedersen L, Dragsted N. Peripheral and central blood flow in man during cold, thermoneutral, and hot water immersion. Aviat Space Environ Med. 1992 May;63(5):346-50.

¹⁸ Photo by David Hawgood. Accessed July 18, 2010 from <u>http://www.geograph.org.uk/photo/251533</u>

¹⁹ Myrer JW, Draper DO, Durrant E. Contrast therapy and intramuscular temperature in the human leg. J Athl Train. 1994 Dec;29(4):318-22.

²⁰ Myrer JW, Draper DO, Durrant E. Contrast therapy and intramuscular temperature in the human leg. J Athl Train. 1994 Dec;29(4):318-22.

²¹ Myrer JW, Measom G, Durrant E, Fellingham GW. Cold- and Hot-Pack Contrast Therapy: Subcutaneous and Intramuscular Temperature Change. J Athl Train. 1997 Jul;32(3):238-241.

This information is not intended to take the place of medical advice. CasePerformance is not responsible for the outcome of any decision made based off the information presented in this article.

Workout Recovery Modalities Part Ib: Hydrotherapy

Quick Hit Summary

Hydrotherapy is a common method to enhance post workout recovery. Of the four types (cold, hot, contrast, thermoneutral), cold water, followed by thermoneutral or contrast appear to be the best options. However, long periods of cold water immersion will acutely inhibit muscle force capabilities. Thus, I do not recommend cold baths if you need to perform shortly (unless it's a quick dunk, ~2-3 min to cool off). Also I do not recommend the use of hot water immersion. Overall, there is great variation in the research on this subject. Thus, I encourage you to play around with cold water, contrast, and thermoneutral water immersions based off the guidelines presented in this article.

Hydrotherapy_

Post workout recovery modalities (**PWRM**) are commonly employed by both elite and recreational athletes following intense workouts. One of the most common PWRM is hydrotherapy (hydro means water). In the first part of this ebook, we laid the ground work of how cold water immersion (**CWI**), hot water immersion (**HWI**), contrast water therapy (**CWT**), and thermoneutral water immersion (**TWI**) may or may not benefit muscle recovery. If you have not read that article, I highly recommend checking it out before continuing on with this article. Although the studies presented in Part 1a were crucial for our understanding of the physiological processes governing these PWRM, they failed to examine hydrotherapy's effectiveness on ensuing athletic endeavors. Therefore, in this installment, we'll look at how post workout CWI, HWI and CWT affect physical performance.



Figure 1. A quick dunk in the pool doesn't seem like too bad of an idea after an intense workout.

A Quick Caveat

Before I delve too deep in the literature regarding the efficacy of HWI, CWI, or CWT as PWRM, there is one caveat worth discussing. Most studies completed in athletic populations fail to include thermoneutral water. Rather, they tend to compare CWI or CWT to resting conditions. As mentioned in Part Ia, TWI exerts effects on its own via hydrostatic pressure. Furthermore, studies that do include TWI often fail to include passive resting conditions. For example, a study may only compare CWI to TWI. Thus, it can be somewhat challenging to discern if the results of a trial are necessarily due to the water temperature, hydrostatic pressure or a synergistic combination of both factors.

Hot Water Immersion

Current evidence indicates that hot water immersion (**HWI** water temp > 100-115°F) is not the most effective method at accelerating post workout recovery. Vaile et al. found that passive recovery (ie- no PWRM) was just as effective as HWI on physical performance following a 5 days of intense cycling¹. In a 2nd study completed by Vaile et al., researchers examined the effects of HWI on muscle recovery in 11 strength trained males². Each individual participated in 2 intense leg press training sessions which were followed by either 14 minutes of HWI or passive recovery. HWI was **more effective at recovering isometric force recovery** at 24, 48 and 72 hours post workout. However, it was **no more effective than passive recovery at restoring**

dynamic power (measured via weighted squat jump), **pain perception and other markers** of physical recovery.

Cold Water Immersion_

Aerobic Conditions

Cycling

Although results vary from study to study, it appears that 5-15 minutes of cold water immersion (CWI) benefits physical performance, especially if exercising in **hot** conditions (~90-104°F; 40-43% humidity). Vaile et al. observed this in 10 experienced cyclist. In the study, each athlete completed 2 cycling performance trials³. After the first trial, participants took part in either 15 minutes of CWI (full body excluding neck and head) or active recovery (cycling at 40% peak power output). After 15 minutes of following their respective PWRM, individuals rested for another 40 minutes before repeating the performance trials. A week later this same protocol (2 performance trials separated by 60 minutes) was repeated except participants completed the opposite PWRM (ie- those who did CWI now did active recovery). Final results of the study indicated that **CWI was effective at maintaining performance whereas performance decreased by 1.8% following active recovery**. Although this may not seem like a huge drop in performance to the recreational athlete, this can be huge in sporting competitions.

<u>Running</u>

Bailey et al. studied the effects of CWI on physical recovery in 20 males following 90 minutes of intermittent shuttle **running**. Immediately following the exercise bout, participants took part in either 10 minutes of CWI (waist deep) or passive rest. Final results indicated that **CWI attenuated losses in muscle strength 24 and 48 hours post exercise** vs. the control group⁴. The same was true with respect to muscle soreness, with the passive rest condition experiencing more discomfort at each measurement point. A similar beneficial effect on subsequent performance was observed by Yeargin et al. in collegiate distance runners⁵. In this latter study, athletes followed the following process:

90 minute run completed at moderate intensity —> 12 minutes of CWI, ice water immersion (IWI) at 41°F or quiet rest —> 15 minutes of walking, stretching, etc to "loosen" up —> 2 mile time trial

This process was completed on 3 separate occasions, allowing participants to complete the time trial under all recovery techniques⁵. Final results indicated that **CWI led to a 6% faster 2 mile time** vs. quiet rest. Unlike CWI, **IWI did not lead to significantly faster times** that control.

On the flip side of the coin, some studies completed in hot weather have found negative results after cold water immersion. Peiffer et al. had also found that a **longer CWI (20 minutes) decreased force capabilities** of the knee extensor muscles (see Figure 2) for up to 45 minutes post immersion⁶.



Figure 2. Individual muscles of the Quadriceps. The vastus lateralis is the most lateral of the quadriceps muscles highlighted in this picuture. The rectus femoris is middle quadricep muscle and the vastus medialis is the innermost of the muscles. Picture obtained from commons.wikimedia.org/wiki/File:Quadriceps.png.

Anaerobic Conditions

Bike Sprints

Various studies which have examined the effects of CWI on muscle function after anaerobic training. Crowe et al. had 17 active individuals (13 male, 4 female) complete two 30 second bicycle sprint test separated by 1 hour⁷. All individuals completed 10 minutes of active recovery (completed on bike) followed by either quiet rest or a combination of CWI (10 minutes) and quiet rest. Final results indicated that **CWI actually decreased peak power (7.5%) and total work completed (4.3%)** during the 30 second performance trial.

Resistance Training

With respect to **resistance training**, Paddon-Jones and Quigley had 8 resistance trained males complete 64 eccentrically loaded elbow flexions. Following completion, one arm completed a CWI recovery (5 CWI sessions, each 20 minutes in length and separated by 1 hr) or passive recovery. Regardless of the PWRM employed by each arm, **similar decreases in performance** and similar ratings of muscle soreness were observed⁸.

Plyometric Training

There have been 2 studies which have examined the effects of CWI following plyometric (jump/shock) training. Howatson et al found that 12 minutes of **quiet rest was just as effective as CWI** with respect to attenuating muscle soreness and restoring strength in 16 males². Similar results were also observed by Jakeman et al. in 19 physically active females¹⁰.

Training Adaptations

One research paper has examined the influences of CWI on training adaptations in previously untrained individuals. Results obtained by Yamane et al. indicated that CWI, used in conjunction with a 4 week forearm flexor (hand grip muscles) training routine, may attenuate gains made in forearm muscle endurance¹¹. For reference, both forearms were trained; one received CWI while the other served as the control (passive rest). The same research team also examined how CWI would affect training adaptations in legs after a 4-6 week cycling program¹¹. Similar to their first study, CWI (2, 20 minute immersions separated by 30 minutes) was completed on only 1 of the participant's legs. Once again, Yamane et al. noted **a blunted training effect in the limb that received CWI**.

I'm unaware of any paper that has examined the chronic effects of CWI on physical performance in trained individuals.

Summing Up Cold Therapy

As you can see, results vary considerably with respect to CWI and its acute (0-3 days) effects on exercise performance. The discrepancies between results may be best summed up by Vaile et al.³ who said.

"Little or no performance benefit is gained when CWI is used as a recovery intervention between bouts of local muscle exercise. After bouts of eccentric leg extension exercise and eccentric elbow flexion, CWI of the exercising limbs offered no benefit in the recovery of muscle performance or the level of muscular pain compared with control. Moreover, CWI of the lower limbs was shown to have a negative effect on repeated 30-s sprint performance compared with passive recovery. Collectively, these findings suggest that the performance benefit of CWI relies on a full-body cooling protocol, and the benefit is generally limited to high-intensity large-muscle-mass exercise, such as cycling or running, that is maintained for a duration of 15 min or longer."³

Contrast Water Therapy

Contrast water therapy (CWT) involves alternating 3-10 times between hot and cold water immersions. Each immersion lasts ~30-300 seconds before exposure to the opposite extreme temperature¹². CWT studies have mostly been completed under anaerobic conditions.

Resistance Training

Vaile et al. examined the effects of CWT on subsequent physical performance in 13 recreational athletes (9 female, 4 males) following an intense resistance training session¹³. Individuals completed 5 sets of 10 reps on the leg press; all reps were eccentric at 140% of concentric 1RM (rep max). Immediately following each workout, athletes passively rested for 15 minutes or completed lower body CWT (1 minute CWI, 2 minutes HWI; repeat for 15 minutes). When comparing results between both PWRM, Vaile et al. found that CWT significantly **attenuated loss of isometric strength** 24 and 48 hours post recovery. CWT also **reduced thigh volume** (measure of swelling) 48 hours post recovery vs. resting conditions.

Running

Coffey et al. failed to see any beneficial effect of CWT following exhaustive treadmill running¹⁹. In their study, 11 trained males completed an exhaustive treadmill running protocol, followed by 15 minutes of CWI (5 cycles of 60 seconds cold, 120 seconds hot), quiet rest, or active rest (40% peak running speed). After 4 hours of recovery, the treadmill tests were repeated. Regardless of the recovery technique used, Coffey et al. **failed to find any significant difference** in the time taken to cover 400, 1000, or 5000 meters.

Comparative Studies

Cold vs. Thermoneutral Water Immersions

Various studies have compared the effects of various hydrotherapy techniques within the same study. Sellwood et al. examined the effects of CWI vs. TWI on muscle recovery following a bout of eccentric leg extensions in 40 untrained participants (11 males; 29 females)¹⁴. Both post exercise immersion protocols involved standing in water set to a height equal to the anterior superior iliac spine (think top of hip) for 1 minute, stepping out of the pool for 1 minute, and then repeating the process 2 more times. Final results indicated that **CWI was no more effective than TWI on most pain or performance measurements** (isometric strength, single leg hops). A similar lack of differences between TWI and CWI (1 minute in, 1 minute out; repeat 5x) on performance measurements were found by Rowsell et al. in high-performance junior male soccer players over the course of a 4-day simulated soccer tournament¹⁵.

Cold Water Immersion vs. Contrast Water Therapy vs. Passive Rest

The effects of CWI, CWT and passive rest following both a **simulated game** (four 20 minute circuits using athletic movements), as well as an exhaustive shuttle run, were measured by Ingram et al. in 11 team sport athletes (all males)¹⁶. Immediately and then again 24 hours post exercise, athletes completed 1 of the following PWRM for 15 minutes:

(Water level for both water protocols was at belly button)

- Passive rest
- CWI
- CWT (3 cycles of 2 minutes cold, 2 minutes hot)

Prior to exercising, and again 48 hours post workout, athletes completed a repeated sprint test (running). Additionally, Ingram et al. recorded isometric strength of the lower limb muscles¹⁶. **Superior results were seen when using CWI.** Following the passive and CWT recovery techniques, individuals saw significant decreases in performance (~1.0%). In contrast athletes did not experience any significant decline between pre and post sprint performance when using CWI as the PWRM. Furthermore, muscle soreness ratings were also significantly lower for the CWI vs. passive or CWT conditions 24 hours post exercise.

Cold Water Immersion vs. Contrast Water Therapy vs. Hot Water Immersion vs. Passive Rest

Vaile et al. carried out an interesting study in which they looked at the effects of CWI, HWI, CWT and passive rest in 38 strength trained males following a **resistance training** session (leg presses, similar protocol as described earlier¹³)². At 0, 24, 48 and 72 hours post exercise, athletes completed the following recovery methods:

• Passive rest – 14 minutes (all participated)

Hydrotherapy – 14 minutes (individuals completed 1 of the following 3; water level set just below neck).

- HWI
- CWI
- CWT (7 cycles of 1 minute cold, 1 minute hot)

Compared to passive rest, all 3 hydrotherapy techniques were effective at reducing isometric squat strength losses. However, **CWI and CWT were more effective at reducing edema** formation than HWI. Additionally, **CWI and CWT were found to restore dynamic squat jump performance (measurement of power) faster** than passive recovery. In contrast, HWI was no more effective than passive recovery with respect to restoring dynamic squat jump performance.

Applying Hydrotherapy to Your Program_

As you can see, the research is across the map with regards to the effectiveness of post workout hydrotherapies. There are a few generalities that can be formed though:

- The guidelines made by Vaile et al.³ regarding CWI are applicable to CWT as well (in my opinion).
- HWI is the least effective of the hydrotherapy techniques.
- TWI may be just as effective as CWI.
- CWI should be completed close to the conclusion of exercise for best effects. Delays seem to reduce effect. Also, don't expect to have strong muscle strength immediately after getting out (although pain is reduced). It may take 45+ minutes post immersion before this strength is restored.
- Whichever technique you use, immerse your full body (excluding head/neck) for 15 minutes to see a positive fluid shifts. (Please read Part <u>Ia</u>).

Personally I like to go 3-5 minutes of CWI followed by another 5-15 minutes immersed in cool water (Think temperature of swimming pool water on hot day... not cold, but cool enough to make you feel comfortable despite outside temp). I don't ever go more than 5-8 minutes of CWI just because I'm paranoid about excessively blunting the inflammatory response. Acute inflammation appears to kick off the anabolic response in muscle tissue¹⁷. Thus, I primarily use CWI because I get an analgesic effect during this time period and it helps to me to feel more rejuvenated for my next workout. Then I follow it up with TWI because it helps "accelerate" the inflammatory effect vs. the blunting effect seen with CWI.

I know what you're probably thinking right now... what the heck does accelerating the inflammatory response mean? When the body gets cold (ie- CWI or applying ice packs to skin) the metabolic processes governing the inflammatory process shuts down¹⁸. In contrast, water closer in temp to TWI accelerates inflammation by pushing excess fluid away from your muscles and back through the circulatory system (see part 1a of article)¹². Additionally, hydrostatic pressure increases cardiac output, possibly enhancing flow of nutrients to muscle tissue.

Bottom Line

In conclusion, the rules governing hydrotherapy are not exactly set in stone. What works well for me may not be the best method for you. Thus, based off the guidelines I mentioned during this

article, I encourage everyone to play around with various methods and see what works best for you.

Good Luck!

References

¹ Vaile J, Halson S, Gill N, Dawson B. Effect of hydrotherapy on recovery from fatigue. Int J Sports Med. 2008 Jul;29(7):539-44. Epub 2007 Nov 30.

² Vaile J, Halson S, Gill N, Dawson B. Effect of hydrotherapy on the signs and symptoms of delayed onset muscle soreness. Eur J Appl Physiol. 2008 Mar;102(4):447-55. Epub 2007 Nov 3.

³ Vaile J, O'Hagan C, Stefanovic B, Walker M, Gill N, Askew CD. Effect of cold water immersion on repeated cycling performance and limb blood flow. Br J Sports Med. 2010 Mar 16. [Epub ahead of print].

⁴ Bailey DM, Erith SJ, Griffin PJ, Dowson A, Brewer DS, Gant N, Williams C.Influence of coldwater immersion on indices of muscle damage following prolonged intermittent shuttle running. J Sports Sci. 2007 Sep;25(11):1163-70.

⁵ Yeargin SW, Casa DJ, McClung JM, Knight JC, Healey JC, Goss PJ, Harvard WR, Hipp GR. Body cooling between two bouts of exercise in the heat enhances subsequent performance. J Strength Cond Res. 2006 May;20(2):383-9.

⁶ Peiffer JJ, Abbiss CR, Nosaka K, Peake JM, Laursen PB.Effect of cold water immersion after exercise in the heat on muscle function, body temperatures, and vessel diameter. J Sci Med Sport. 2009 Jan;12(1):91-6. Epub 2008 Feb 20.

⁷ Crowe MJ, O'Connor D, Rudd D.Cold water recovery reduces anaerobic performance. Int J Sports Med. 2007 Dec;28(12):994-8. Epub 2007 May 29.

⁸ Paddon-Jones DJ, Quigley BM.Effect of cryotherapy on muscle soreness and strength following eccentric exercise. Int J Sports Med. 1997 Nov;18(8):588-93.

⁹ Howatson G, Goodall S, van Someren KA. The influence of cold water immersions on adaptation following a single bout of damaging exercise. Eur J Appl Physiol. 2009 Mar;105(4):615-21. Epub 2008 Nov 26.

¹⁰ Jakeman JR, Macrae R, Eston R. A single 10-min bout of cold-water immersion therapy after strenuous plyometric exercise has no beneficial effect on recovery from the symptoms of exercise-induced muscle damage. Ergonomics. 2009 Apr;52(4):456-60.

¹¹ Yamane M, Teruya H, Nakano M, Ogai R, Ohnishi N, Kosaka M. Post-exercise leg and forearm flexor muscle cooling in humans attenuates endurance and resistance training effects on muscle performance and on circulatory adaptation. Eur J Appl Physiol. 2006 Mar;96(5):572-80.

¹² Wilcock IM, Cronin JB, Hing WA. Physiological response to water immersion: a method for sport recovery? Sports Med. 2006;36(9):747-65.

¹³ Vaile JM, Gill ND, Blazevich AJ. The effect of contrast water therapy on symptoms of delayed onset muscle soreness. J Strength Cond Res. 2007 Aug;21(3):697-702.

¹⁴ Sellwood KL, Brukner P, Williams D, Nicol A, Hinman R. Ice-water immersion and delayedonset muscle soreness: a randomised controlled trial. Br J Sports Med. 2007 Jun;41(6):392-7. Epub 2007 Jan 29.

¹⁵ Rowsell GJ, Coutts AJ, Reaburn P, Hill-Haas S. Effects of cold-water immersion on physical performance between successive matches in high-performance junior male soccer players. J Sports Sci. 2009 Apr;27(6):565-73.

¹⁶ Ingram J, Dawson B, Goodman C, Wallman K, Beilby J. Effect of water immersion methods on post-exercise recovery from simulated team sport exercise. J Sci Med Sport. 2009 May;12(3):417-21. Epub 2008 Jun 11.

¹⁷ Tidball JG, Villalta SA. Regulatory interactions between muscle and the immune system during muscle regeneration. Am J Physiol Regul Integr Comp Physiol. 2010 Mar 10. [Epub ahead of print].

¹⁸ Nemet D, Meckel Y, Bar-Sela S, Zaldivar F, Cooper DM, Eliakim A. Effect of local cold-pack application on systemic anabolic and inflammatory response to sprint-interval training: a prospective comparative trial. Eur J Appl Physiol. 2009 Nov;107(4):411-7. Epub 2009 Aug 4.

¹⁹ Coffey V, Leveritt M, Gill N.J Effect of recovery modality on 4-hour repeated treadmill running performance and changes in physiological variables.Sci Med Sport. 2004 Mar;7(1):1-10.

Photo on page 11 was taken by Leozaza. Accessed July 17, 2010 from http://www.flickr.com/photos/leozaza/294207536/

This information is not intended to take the place of medical advice. CasePerformance is not responsible for the outcome of any decision made based off the information presented in this article.

Post Workout Recovery Modalities Part II: Compression Gear

Quick Hit Summary

The use of compression gear has long been used by sports medicine professionals as a means to limit inflammation post injury. Within the past few years, the use of compression gear, as a post workout modality, has increased in popularity. For the most part, the use of compression gear does not seem to enhance muscle recovery. One may experience a decreased perception of muscle pain while wearing CG. However attenuation of post workout muscle soreness does not appear to enhance subsequent athletic performance. On the other hand muscle soreness is a common symptom of overtraining syndrome. Thus, wearing compression gear may reduce the risk of becoming "stale." However, more research must be completed in this area.

Compression Gear

In the first part of this ebook, I focused on the potential benefits of Hydrotherapy (Hydrotherapy Part Ia, Hydrotherapy Part Ib). The next post workout recovery modality (**PWRM**) that I'd like to discuss is compression gear. As its name implies, compression gear (**CG**) consists of tight fitting undergarments.

Compression therapy has long been used in sports as a treatment modality for soft tissue injuries (sprained ankles, etc). In fact, its part of the famous RICE protocol (rest, ice, *compression*, elevation) prescribed by athletic trainers following an acute injury. Similar to hydrotherapy, CG creates an external pressure on one's body, reducing edema and possibly assisting the removal of metabolic waste products. Although individuals in the sports medicine field have used this modality for years, the use of CG as a PWRM is a relatively new idea for many athletes. However, this is beginning to change as sports apparel corporations (Adidas®, Under Armour®, SkinsTM) have began marketing their respective CG. However, before we rush to the local sporting goods store and purchase an outfit, let's look at the evidence surrounding this PWRM.

Recovery Following Resistance Training



Figure 1 An individual wearing compression gear

To my knowledge, Kraemer et al. was the first research group to study the use of CG in healthy individuals (ie- no clinical orthopedic injuries such as sprains, etc)². In the study, they induced muscle damage in 20 untrained females by having them complete 2 sets of 50 **arm curls**. Upon completion, 10 individuals wore a compressive sleeve over their bicep and elbow joint for 5 consecutive days. By day 3 those wearing the CG had significantly less pain, greater range of motion and enhanced recovery of muscle force vs. those in the control group.

The effect of CG on muscle recovery following a **full body resistance training** protocol has also been examined. Kraemer et al. examined the effects of a full body CG on recovery in 20 highly trained athletes (11 male, 9 female) following 2 heavy resistance training sessions³. The resistance protocol involved both upper and lower body lifts (Squat, RDL, Bench Press, Bent Over Row, etc). Following each training session, individuals wore regular clothing or full body CG (RechargeTM) for 24 hours. At the conclusion of this recovery period, various physiological and psychological outcomes were assessed. Results of the study can be seen in **Table 1 (page 23).** For reference, CG was removed prior to testing.

Table 1 Effects of wearing CG vs. normal clothes following an intense resistance training session. For each outcome, an "increase", "decrease: or "same" will be noted for both sexes. These designations are for wearing CG with respect to normal clothing For example, a decrease in the muscle soreness category designates that CG decreased muscle soreness vs. normal clothes.

Outcome	Men	Women
Muscle Soreness	decrease	decreased
Muscle Swelling	decrease	decrease
Resting Fatigue	decrease	decrease
Vitality	increase	increase
Bench Press Throw Power	increase	increase
Countermovement Vertical Jump Performance	same	same
Squat Jump	same	same
Quality of Sleep	same	same

On one hand, the bench press throw was the only physical performance measurement that improved with CG vs. normal clothes. On the other hand, wearing full body CG did improve most psycho-physiological outcomes when measured 24 hours post workout. Kraemer et al. also noted that wearing full body CG did not affect sleep quality.

Recovery Following Plyometric/Intermittent Sprint Training

Davies et al. had 11 trained athletes (7 female, 4 male) complete 2 plyometric training sessions (Depth Jumps - See **Figure 2** for protocol), separated from each other by 1 week⁴. Following each session, athletes wore complete lower body CG or regular clothing for 48 hours. After 2 days of wearing each clothing type, Davies et al. measured sprint speed (5, 10, 20m), 5-0-5 agility testing, countermovement jump height and perceived muscle soreness. When comparing post workout scores to those obtained prior to 1st session (ie- baseline scores), **regular clothing proved just as effective as CG**. In other words, CG did not enhance the body's ability to recover from the plyometric workout. **One partial exception to this rule was observed for muscle soreness**. Significant increases were noted 48 hours post workout while wearing regular clothing. This effect was not observed following the CG trial. For reference, all baseline measurements were obtained 1 week prior to the first plyometric session.



Figure 2 Depth Jumps were completed off a ~ 24 inch box. 5 sets of 20 reps were completed. Depth Jumps consist of stepping off a box and immediately going into a vertical jump upon hitting the ground⁴.

Duffield et al. examined if CG would improve physical recovery following **simulated team game** (STG) activities in 14 **rugby** athletes¹. The STG involved 4, 15 minute high intensity circuits which replicated movements seen during simulated team games. Sprints ($5\times20m$ sprints) and power tests (See **Figure 3**) were completed between quarters to assess the impact that CG had on physical performance. In its entirety, the training session lasted 80 minutes. Complete lower body CG was worn both during the activity as well as 15 hours afterwords. A day later, the STG was repeated to assess recovery measures. This same 2 day procedure was repeated 2 weeks later to allow all individuals to perform with and without the CG.



Figure 3 Power tests were completed on single man scrum machines which replicate the starting position in rugby matches.

Despite the apparent intensity of the training sessions, Duffield et al. failed to find decreases in power or sprint performance at any point during the 2 day testing period (ie- baseline vs. post 2nd quarter on 1st day vs. post game on 2nd day)¹. This held true regardless of if the athletes were wearing CG or not. Although physical performance test results were equivocal,**a decreased perception of muscle soreness was noted** after wearing CG.

Comparative Studies

To my knowledge, only 2 studies have compared the effectiveness of CG to other PWRM. Gill et al. measured the effects of creatine kinase levels, a marker of muscle damage, in 23 elite **rugby** athletes⁶. Each athlete completed the following **post game** recovery protocols:

- Passive recovery
- Active recovery (7 minutes of stationary bike riding at 80-100 rpm)
- Contrast water therapy (3 cycles of 1 minute cold, 2 minutes hot; body immersed to top of pelvis)
- Complete lower body CG (12 hours)

Final results indicated that CG was more effective than passive recovery at restoring creatine kinase to baseline levels⁶. However, **CG was no more effective than active recovery or contrast water therapy (CWT)**. For reference, measurements were obtained 36 and 84 hours post game. There is one potential limitation with the study that may have influenced results. Following the passive recovery, athletes took part in a "post match function" whereas they completed their "normal post game routine" following the other 3 recovery sessions. Gill et al. failed to specify if these are the same procedures or not. Although you could say I'm being nit-

picky on that distinction, authors are generally very consistent with their language in scientific journal articles.

In a 2nd comparative study, French et al studied the efficacy of CG and CWT as post workout recovery modalities (**PWRM**) in 26 trained male athletes following a **Smith machine squatting session** (6 sets of 10 reps. Each set also included an eccentric based 11th rep)⁷. Following each session, individuals completed 1 of the following 3 recovery protocols:

- Passive recovery
- Contrast water therapy (4 cold immersions (1 minute), 3 hot immersions (3 minutes); completed while sitting upright in tub)
- Complete lower body CG (12 hours)

Prior to the training session baseline values were obtained for countermovement jump power, agility (M-test), 10 meter sprint, and 30 meter sprint⁷. These tests were repeated 48 hours following the exercise session. Counter movement jump power was the only performance measure that decreased 48 hours post exercise; **all groups were equally affected**. In order to assess muscle damage, pre and post exercise creatine kinase levels were also assessed. 24 hours post workout, **all groups experienced similar rises in creatine kinase**. This conflicts with results obtained by Kraemer et al. who found that CG significantly attenuated rises in creatine kinase when compared to passive rest³. However, those in Kraemer et al.'s study wore full body compression gear for 24 hours.

Other Notes

One clear benefit of CG is decreased perception of muscle soreness. This was noted in almost all of the studies reviewed for this article. This may have important long term affects in high trained athletes. Increased perception of muscle soreness is a common sign of overtraining syndrome⁸. Thus, decreasing post workout muscle soreness, via CG, may be a viable method to prevent athletes from becoming "stale".

I must point out that more studies are required before one can fully assess the efficacy of CG as a PWRM. As I've mentioned in previous articles, it takes a collection of studies, not a single study, to prove/disprove the effectiveness of a given treatment.

Bottom Line

Outside of two studies completed by Kraemer et al.²³, the use of compression gear (CG) as a post workout recovery modality (PWRM) is not supported by the current scientific literature. A few key differences present in Kraemer et al.'s studies may possibly explain these contradictory results. For example, in their study involving upper and lower body resistance training, athletes wore full body CG for 24 hours³. In contrast, other experimental protocols noted in the literature

often wore complete lower body CG for a 12-15 hours. Thus, CG may need to be worn for 24 hours and cover the entire body to exert positive effects. Before we blindly accept that full body CG improves physical performance, its important to remember that Kraemer et al.'s research revealed that full body CG only enhanced upper body power. Lower body power, assessed via squat jumps and countermovement jumps, did not differ between recovery protocols³.

In conclusion, the current scientific literature to support the use of CG as a PWRM is weak. One may experience a decreased perception of muscle pain while wearing CG. Unfortunately attenuation of post workout muscle soreness does not appear to enhance subsequent athletic performance.

I have no financial or other interest in any of the companies mentioned in this article

Adidas is a registered trademark for the Adidas Corporation

Under Armour's Recharge™ compression suit is a trademark or registered trademark of Under Armour® organization.

Skins[™] is a trademark of SKINS USA, LLC

References

¹ Duffield R, Edge J, Merrells R, Hawke E, Barnes M, Simcock D, Gill N. The effects of compression garments on intermittent exercise performance and recovery on consecutive days. Int J Sports Physiol Perform. 2008 Dec;3(4):454-68.

² Kraemer WJ, Bush JA, Wickham RB, et al. Influence of compression therapy on symptoms following soft tissue injury from maximal eccentric exercise. J Orthop Sports Phys Ther 2001;31:282–90.

³ Kraemer WJ, Flanagan SD, Comstock BA, Fragala MS, Earp JE, Dunn-Lewis C, Ho JY, Thomas GA, Solomon-Hill G, Penwell ZR, Powell MD, Wolf MR, Volek JS, Denegar CR, Maresh CM.Effects of a whole body compression garment on markers of recovery after a heavy resistance workout in men and women. J Strength Cond Res. 2010 Mar;24(3):804-14.

⁴ Davies V, Thompson KG, Cooper SM. The effects of compression garments on recovery. J Strength Cond Res. 2009 Sep;23(6):1786-94.

⁵ Duffield R, Cannon J, King M. The effects of compression garments on recovery of muscle performance following high-intensity sprint and plyometric exercise. J Sci Med Sport. 2010 Jan;13(1):136-40. Epub 2009 Jan 7.

⁶ Gill ND, Beaven CM, Cook C. Effectiveness of post-match recovery strategies in rugby players. Br J Sports Med. 2006 Mar;40(3):260-3.

⁷ French DN, Thompson KG, Garland SW, Barnes CA, Portas MD, Hood PE, Wilkes G. The effects of contrast bathing and compression therapy on muscular performance. Med Sci Sports Exerc. 2008 Jul;40(7):1297-306.

⁸ Hawley CJ, Schoene RB. Overtraining syndrome: a guide to diagnosis, treatment, and prevention. Phys Sportsmed. 2003 Jun;31(6):25-31.

This information is not intended to take the place of medical advice. CasePerformance is not responsible for the outcome of any decision made based off the information presented in this article.

Testimonial Support for Sean Casey

From his peers...

"Not only is Sean a great nutritionist, but he's an excellent strength coach. I've coached athletes with him on multiple occasions. The most impressive attributes I've seen in him is his integrity, work ethic, ability to work with athletes and desire to be the best coach possible."

- <u>Luke Richesson</u>. Head NFL Strength Coach for Jacksonville Jaguars.

"Sean Casey is one of the great up and coming minds in the human performance field. Between his diverse academic background, training experiences and thirst for knowledge, Sean elevates himself above the pack. His writings are extremely well researched yet easy to understand; a great resource for both the competitive and recreational athlete."

- <u>Dr. Jamie Cooper</u>, PhD, Assistant Professor and Instructor for graduate courses in Nutrition, Exercise, and Sport at Texas Tech University. Marathon and Triathlon Competitor.

"Whenever I need to bounce nutrition/supplement ideas off someone, I always turn to Sean Casey. I know that anything Sean tells me is backed by multiple scientific studies. It's a true pleasure working with him."

- <u>Anita Nall-Richesson</u>. Director of Nutrition - Jacksonville Jaguars. 3 time Olympic Medalist. Former world record holder in 200 Breaststroke. Creator of PhenomaNALL Nutrition.

"Sean was a positive influence on our student-athletes and the Strength and Conditioning Department at UW-Madison. He is a bright, innovative thinker and always looking for ways to improve the performance of the clients he works with, regardless of their starting skill level."

- <u>Scott Hettenbach</u>. MS- Exercise Science & Sport Administration, Assistant Director of Strength and Conditioning at University of Wisconsin- Madison. Head Strength Coach for Badger Men's Basketball team.

"This web site was created by Sean Casey, an individual who has dedicated himself to improving your knowledge of exercise science. His commitment to offering up-to-date information to his clients and non clients alike comes as no surprise to me. Having known Sean for over ten years, I can vouch for his personal character and work ethic in everything he does. As you begin to read his blogs on nutrition and training you will find a well thought out, research based analysis of each topic. His opinions are supported by scientific research, not anecdotal evidence. I recommend his articles to any individual wanting to learn about the science of exercise for the first time or someone trying to update their knowledge."

- <u>Chris Rotzenberg</u>, MS Human Performance, Collegiate Cross Country/Track and Field Coach

From his clients...

"I had the fortunate opportunity to work with Sean Casey at the Athlete's Performance Institute. While coaching, Sean demonstrated a strong work ethic and a desire for perfection. Sean's knowledge of multiple training methods helped prepare me for that season. His greatest concern was making his athletes better each day. Sean Casey is a rising star in the fitness industry."

- Brady Quinn. NFL Quarterback - Denver Broncos.

"A few years ago I contacted the University of Wisconsin-Madison for nutrition and weight loss info for both myself and the high school wrestling team that I coach. I was informed that Sean Casey was the guy I wanted and I quickly saw why... Sean explained to us how the food we ate affected our performance on the wrestling mat. With Sean's help, my wrestling team and I stopped dwelling over weight loss and began to concentrate on how to properly fuel our systems. The emphasis of Sean's dietary program was not centered around food restriction; rather it was focused on incorporating healthier food choices to help us attain our specific weights. Additionally, he taught us how to read food labels when evaluating our food options.

Throughout my lifetime, I have tried many different ways to lose weight and have always failed. To date, I am please to say that I personally have lost weight and our wrestlers have much less to worry about during the season. I truly doubt that we would have learned everything we did and feel so good about reaching our goals without Sean's help. Sean is the utmost professional with a great understanding of his clients needs. I am thrilled to be able to say that I worked with him."

Sincerely yours,

Matthew Poster. High School Wrestling Coach. Owner / Lead Motivator of Get Fit Staying Fit