

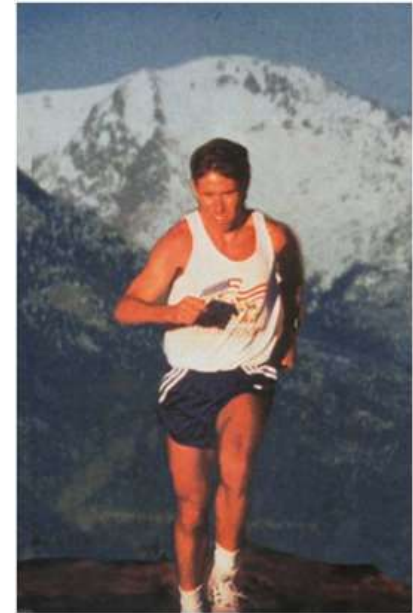
Use of Altitude/Hypoxic Training by Olympic Athletes

ASPC Americas Continental Forum

Coldeportes High Performance Center

Bogota, COL

29 October – 01 November 2014



Randall L. Wilber, PhD, FACSM
Senior Sport Physiologist
United States Olympic Committee

Gracias / Obrigado!

Kamsa hamnida (Korean)
Danke schön (German)
Ameseginalhu (Ethiopia)
Спасибо (Russian)
Arigato (Japanese)
Asante sana(Swahili/Kenyan)
Meitaki Ma'ata (Maori)
Paldies (Latvian)
Fa'afetai (Samoan)
Dziękuję (Polish)
Terima kasih (Malaysian + Indonesian)
Gracias (Spanish)
धन्यवाद (Hindi)
Dank u wel (Dutch)
Merci beaucoup (French)
شكراً جزيلاً (Arabic)
Kiitoksia (Finnish)
ευχαριστώ (Greek)
Благодаря (Bulgarian)
Grazie (Italian)
Obrigado (Portuguese/Brazilian)
Cheers (Australian / New Zealand)
Mahalo (Hawaiian)
Xie xie (Chinese)
Thank you (English)





Felicitaciones!





Baron Pierre de Coubertin
Founder of the Modern Olympic Games

“There is no higher ideal for the human race, than promoting peace through international sport.”





Randall L. Wilber, PhD, FACSM

US Olympic Committee



TRACK/CC COACH (1976-1993)

- Pennsylvania
- Wisconsin
- Florida



SPORT PHYSIOLOGIST (1993-present)

US Olympic Committee

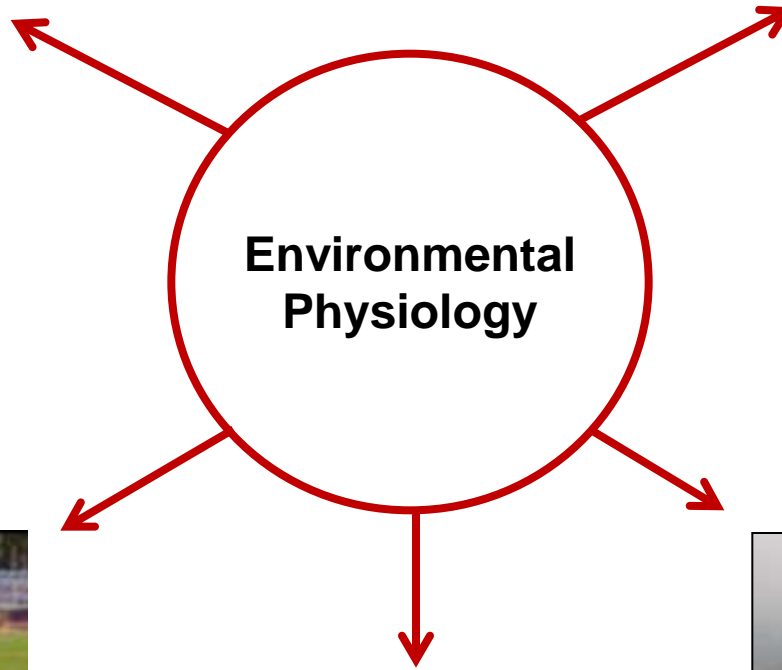
- Salt Lake City 2002
- Athens 2004
- Torino 2006
- Beijing 2008
- Vancouver 2010
- London 2012
- Sochi 2014



US Olympic Training Center

Colorado Springs





**Environmental
Physiology**

Use of Altitude/Hypoxic Training by Olympic Athletes

■ Introduction

■ Altitude Training Models

- LH + TH
- LH + TL
- LL + TH

■ Practical Recommendations

- Preparation Before the Altitude Training Camp
- During the Altitude Training Camp
- Return to Sea Level After the Altitude Training Camp
- Annual Plan for Altitude Training

■ Physiological Benefits

■ Summary & Resources





US Olympic Training Center

Colorado Springs

Pikes Peak (4300m / 14,115ft)

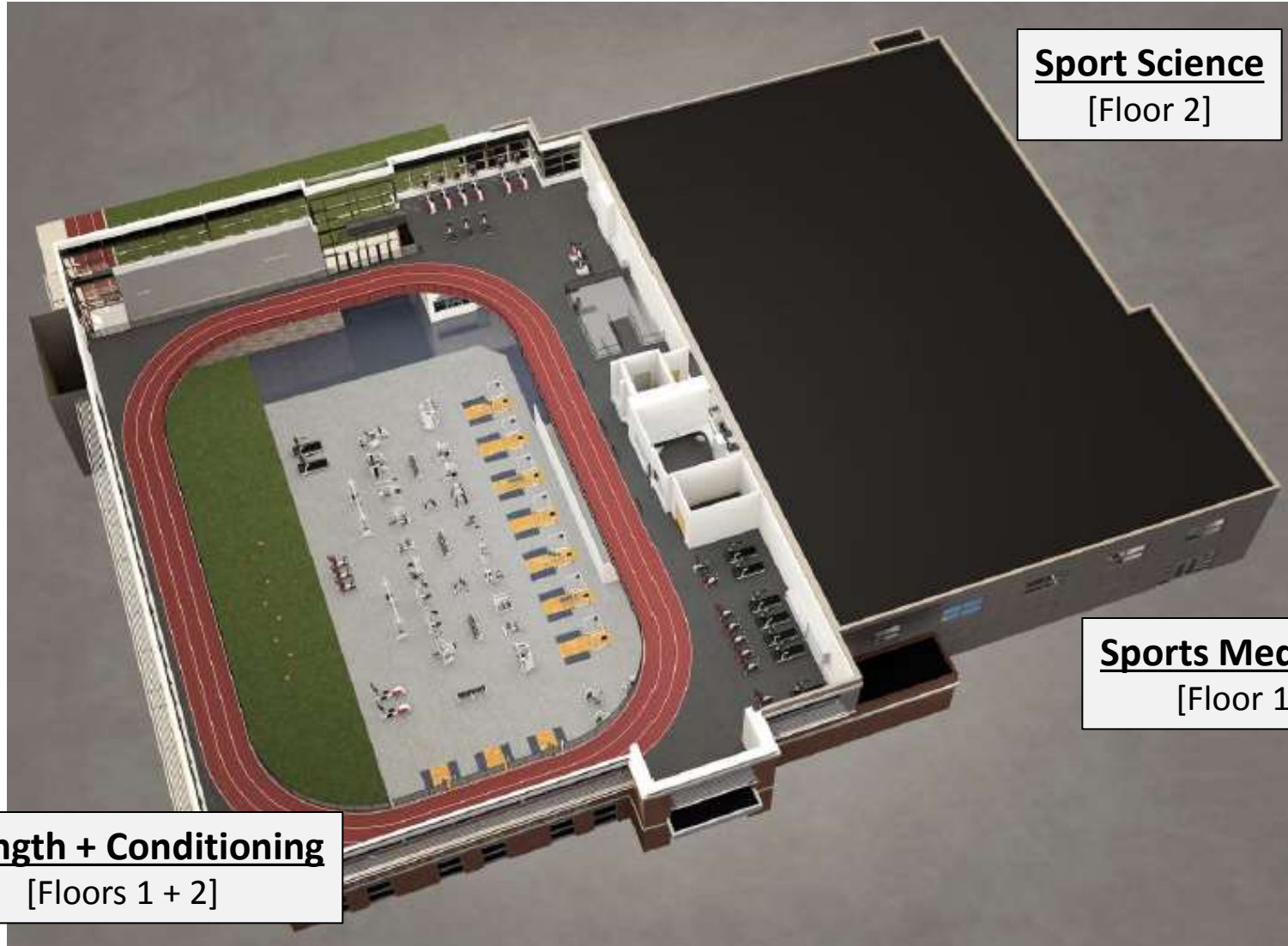


Colorado Springs (1885m / 6180ft)



USOC Sport Science Center of Excellence

Colorado Springs



Sport Science
[Floor 2]

Sports Medicine
[Floor 1]

Strength + Conditioning
[Floors 1 + 2]

USOC Sport Science Center of Excellence

High Altitude Training Center

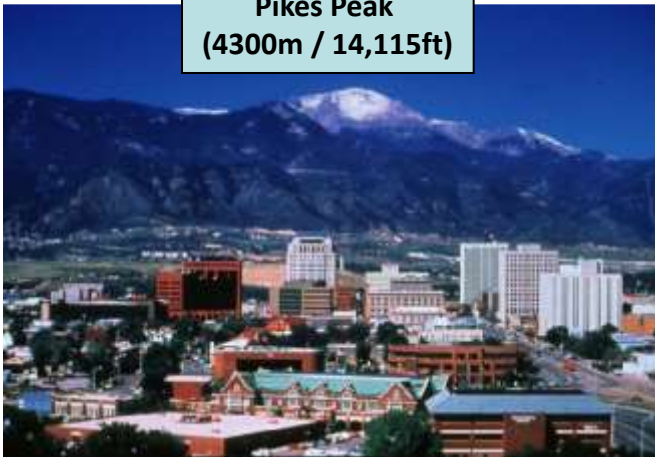


US Olympic Training Center

Colorado Springs 1860 m / 6200 ft



Pikes Peak
(4300m / 14,115ft)



Colorado Springs
(1860+ m / 6200+ ft)

1



US Olympic Training Center
(1860 m / 6200 ft)

US Olympic Training Center

Colorado Springs 1860 m / 6200 ft

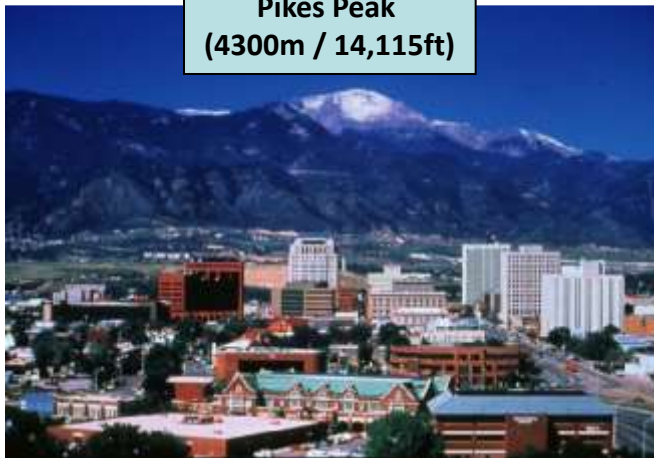


US Air Force Academy

Colorado Springs 2000-2300 m / 6560-7544 ft

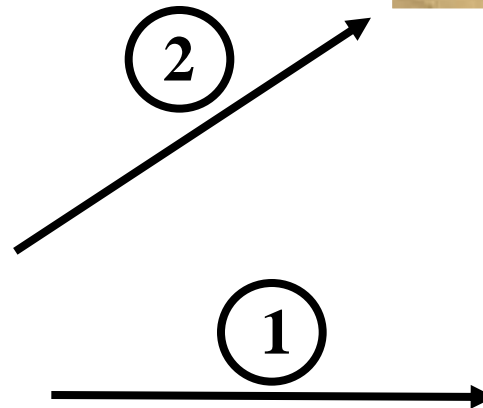


US Air Force Academy
(2000-2300 m / 6560-7544 ft)



Pikes Peak
(4300m / 14,115ft)

Colorado Springs
(1860+ m / 6100+ ft)



US Olympic Training Center
(1860 m / 6100 ft)

US Air Force Academy

Colorado Springs 2000-2300 m / 6560-7544 ft



US Air Force Academy

Colorado Springs 2000-2300 m / 6560-7544 ft



Woodland Park Recreational Area

Woodland Park

2745-2775 m / 9000-9100 ft

Woodland Park

(2745-2775 m / 9000-9100 ft)



US Air Force Academy

(2000-2300 m / 6560-7544 ft)

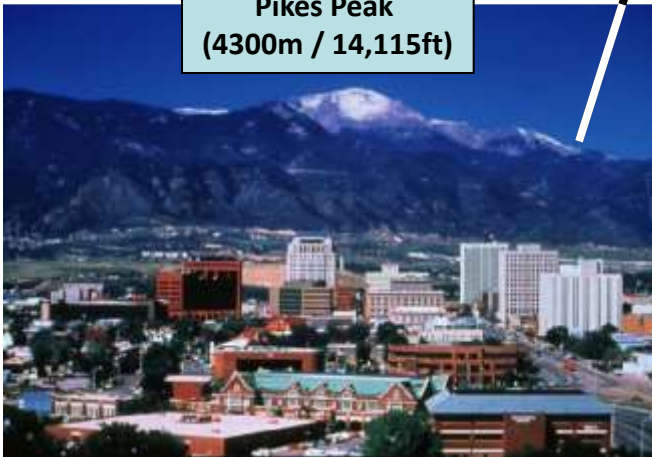


3

2

1

Pikes Peak
(4300m / 14,115ft)



Colorado Springs
(1860+ m / 6100+ ft)



US Olympic Training Center
(1860 m / 6100 ft)

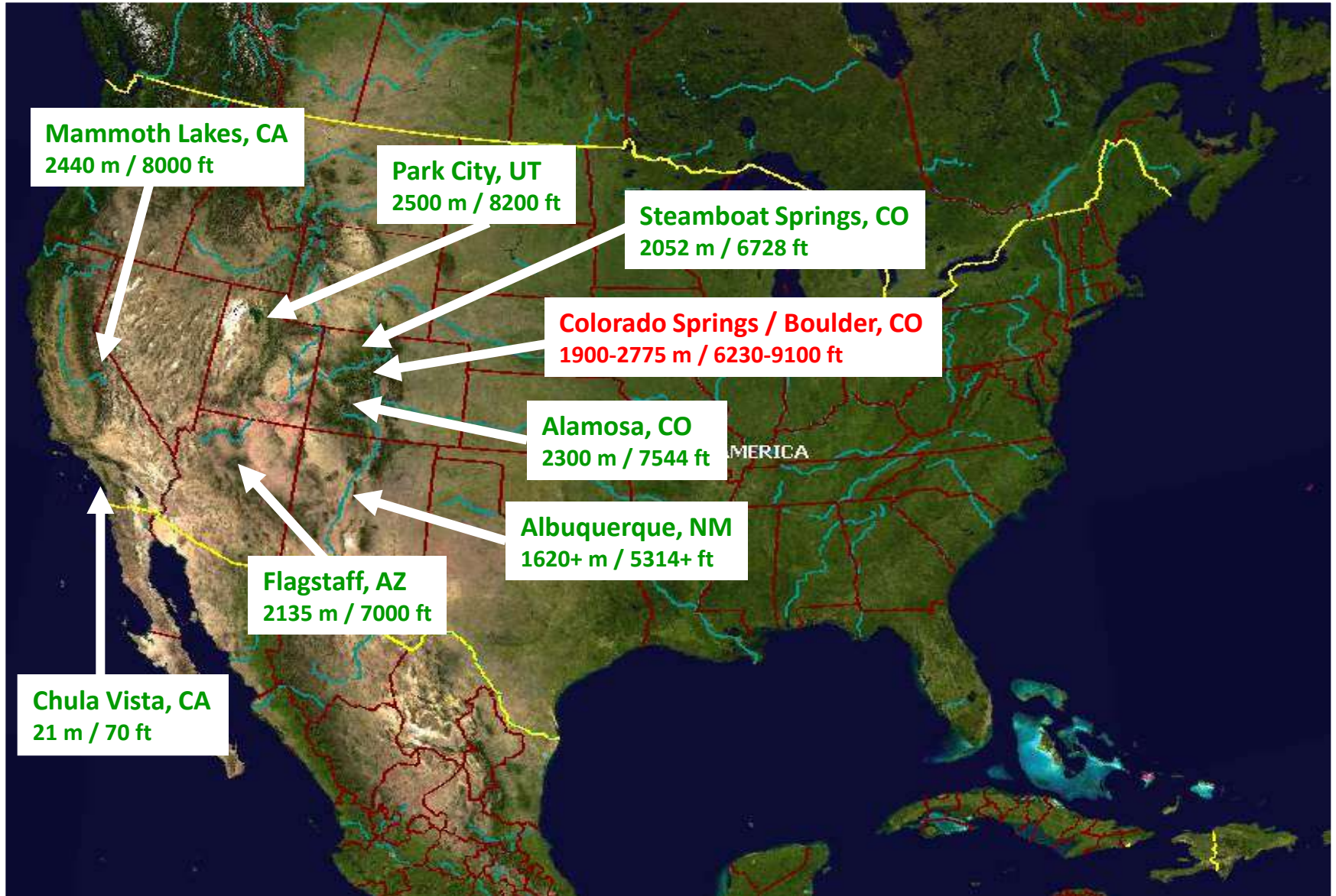
Woodland Park Recreational Area

Woodland Park 2745-2775 m / 9000-9100 ft





Team USA Altitude Training Network



“Altitude” defined



EXTREME/LETHAL Altitude

>7500 m

HIGH Altitude

3000 - 7500 m

MODERATE Altitude

1500 - 3000 m

LOW Altitude

<1500 m

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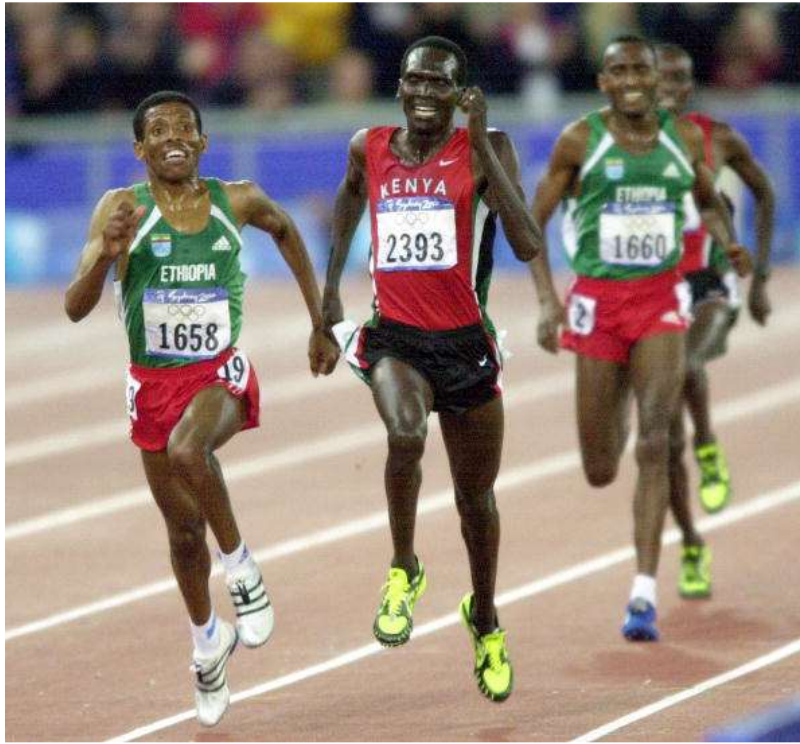
■ Summary & Resources



ALTITUDE / HYPOXIC TRAINING

```
graph TD; A[ALTITUDE / HYPOXIC TRAINING] --- B[LH + TH];
```

LH + TH



27:18.20



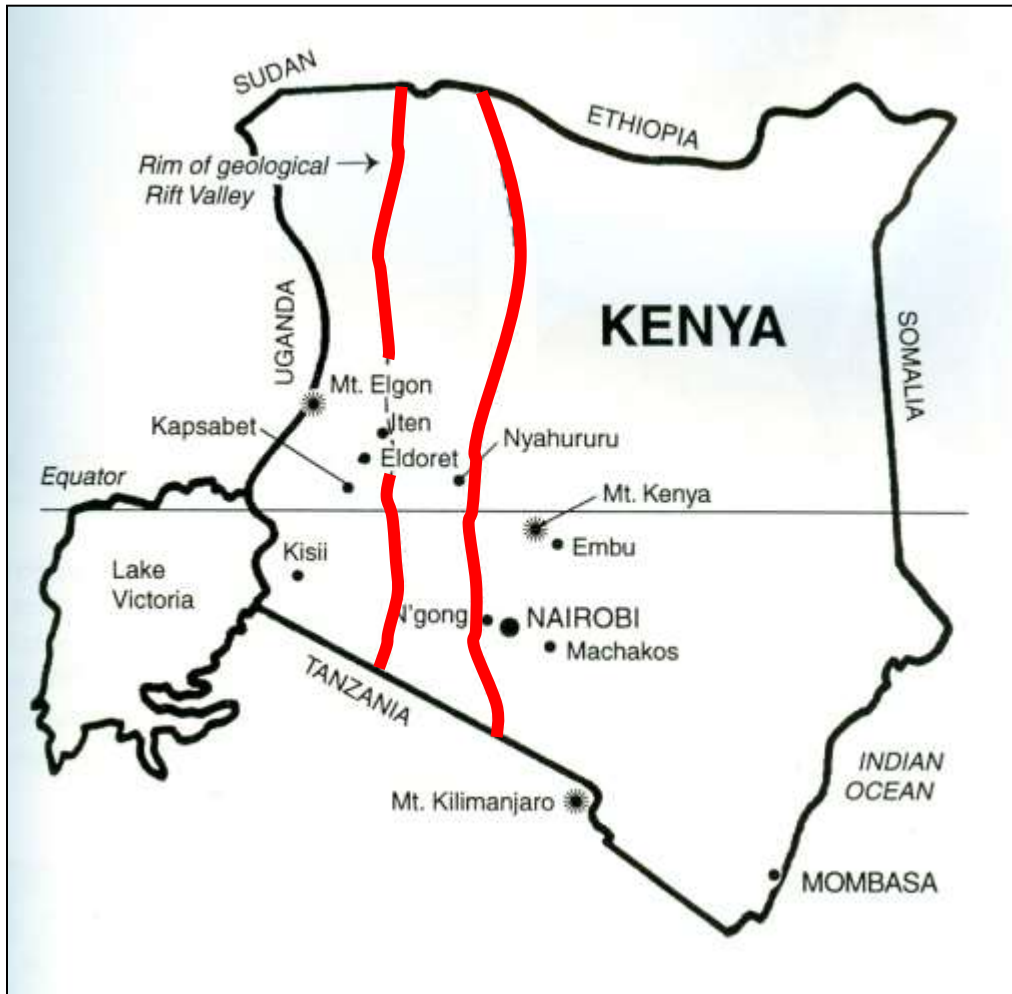
27:18.29

0.005%



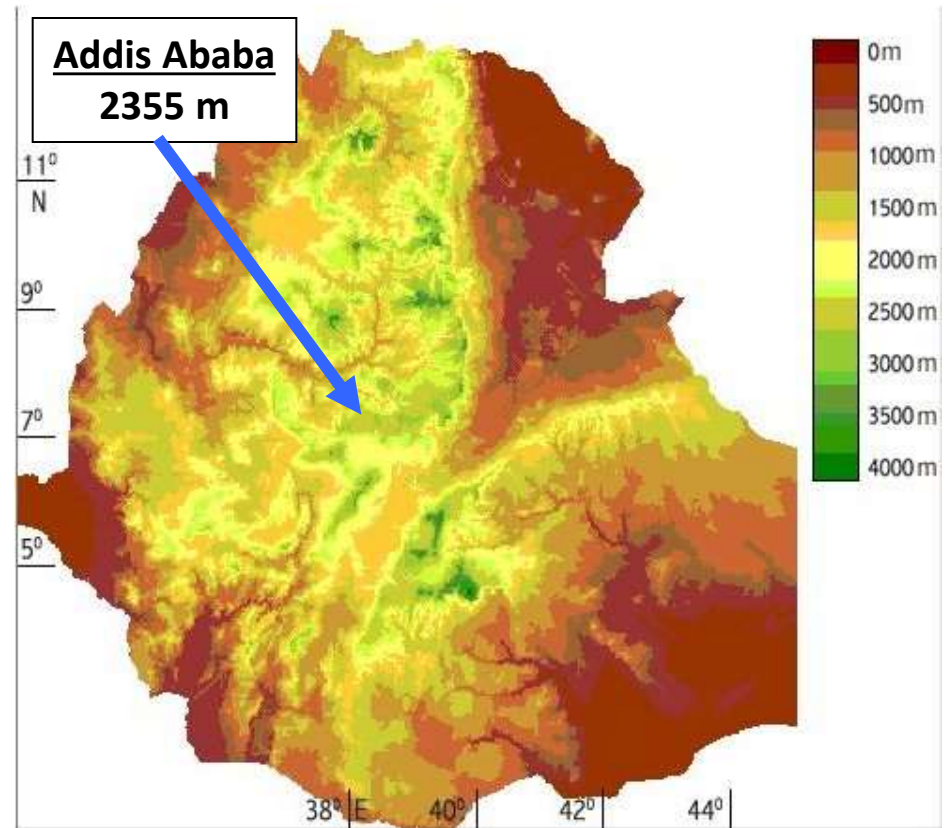
Kenya

Great Rift Valley (2300 m)



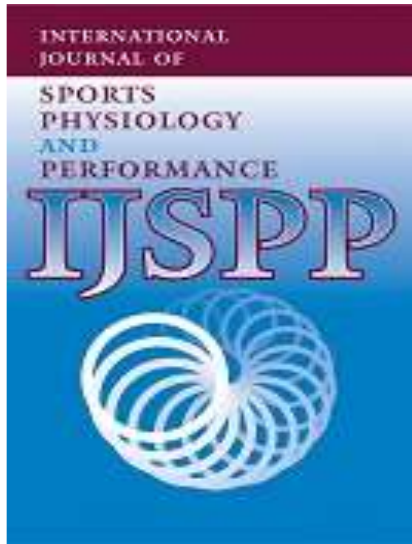
Ethiopia

Great Rift Valley (2300 m)



LH + TH

Kenya and Ethiopia



Kenyan and Ethiopian Distance Runners: What Makes Them So Good?

Randall L. Wilber and Yannis P. Pitsiladis
June 2012

[based on proceedings of 2011 ACSM Annual Meeting]



Kenyan and Ethiopian Distance Runners

Hypothetical Model for Success



Biomechanical & Physiological

Ectomorphic somatotype leading to exceptional biomechanical and metabolic economy.



Kenyan and Ethiopian Distance Runners

Hypothetical Model for Success



Psychological #1

High motivation to succeed for the purpose of improving socio-economic status.



Psychological #2

“Tradition of Excellence”



Kenyan and Ethiopian Distance Runners

Hypothetical Model for Success



Training #1

Consistent aerobic training at young age as main method of transport to/from school.

Training #2

Moderate-volume, high-intensity training at altitude (2000-3000 m)



ALTITUDE / HYPOXIC TRAINING

```
graph TD; A[ALTITUDE / HYPOXIC TRAINING] --> B[LH + TH]; A --> C[LH + TL]; C --> D[ ];
```

The diagram is a hierarchical flowchart. At the top is a yellow rectangular box containing the text "ALTITUDE / HYPOXIC TRAINING". A vertical line descends from the center of this box to a horizontal line. From this horizontal line, two vertical lines branch out downwards to two separate boxes. The left box is white with a black border and contains the text "LH + TH". The right box is light blue with a black border and contains the text "LH + TL". From the bottom center of the "LH + TL" box, a vertical line descends to another horizontal line, which has two short vertical lines extending downwards from its ends, suggesting further sub-classification.

LH + TH

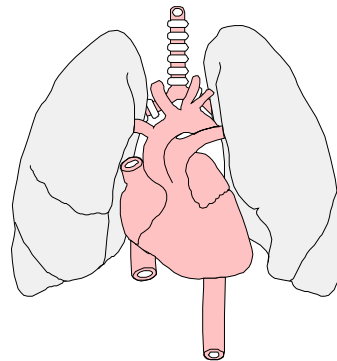
LH + TL

SEA LEVEL



BP
760 mm Hg

O₂
20.93%



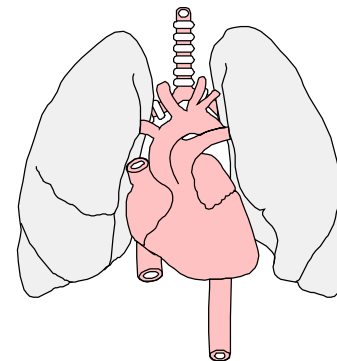
P_iO₂ ~ 150 mm Hg

ALTITUDE



BP
600 mm Hg

O₂
20.93%



P_iO₂ ~ 126 mm Hg



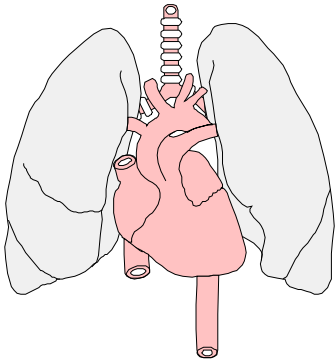
ALTITUDE



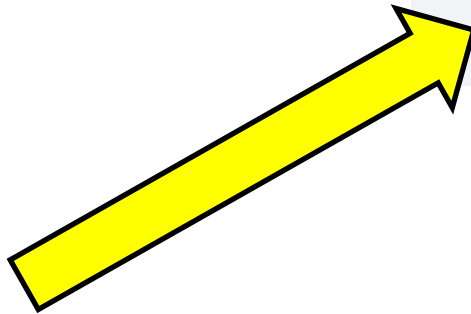
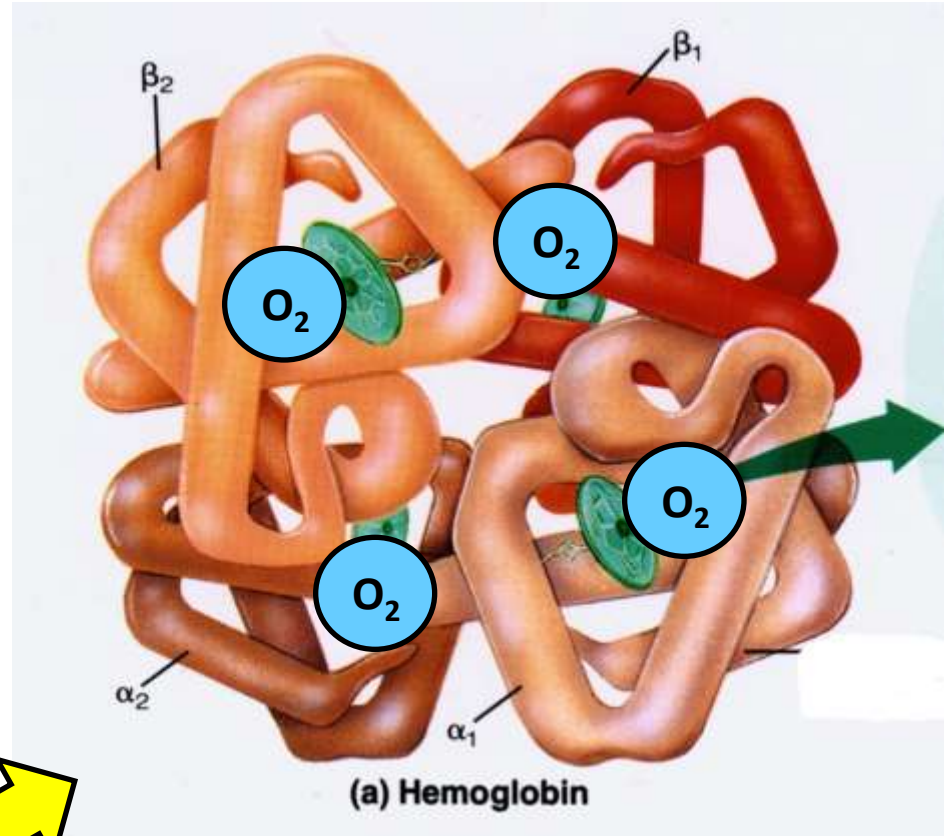
BP
600 mm Hg



O_2
20.93%



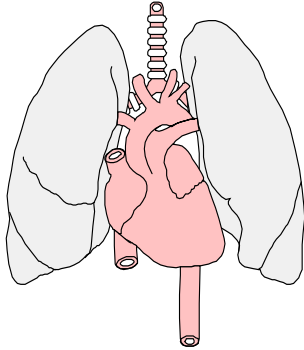
$P_{iO_2} \sim 126$ mm Hg



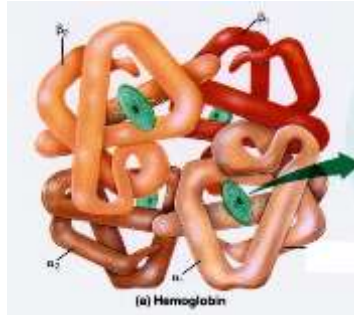


ALTITUDE

↓ P_{iO_2}
↓ P_aO_2



↓ S_aO_2



↓ VO_2 max



↓ **Aerobic Performance**
↓ **Training Capacity**



LH + TL

Theoretical Foundation

LH

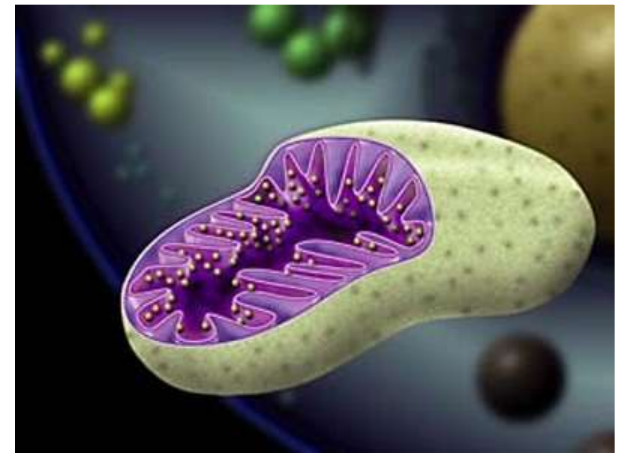
+

TL



HEMATOLOGICAL

PERIPHERAL

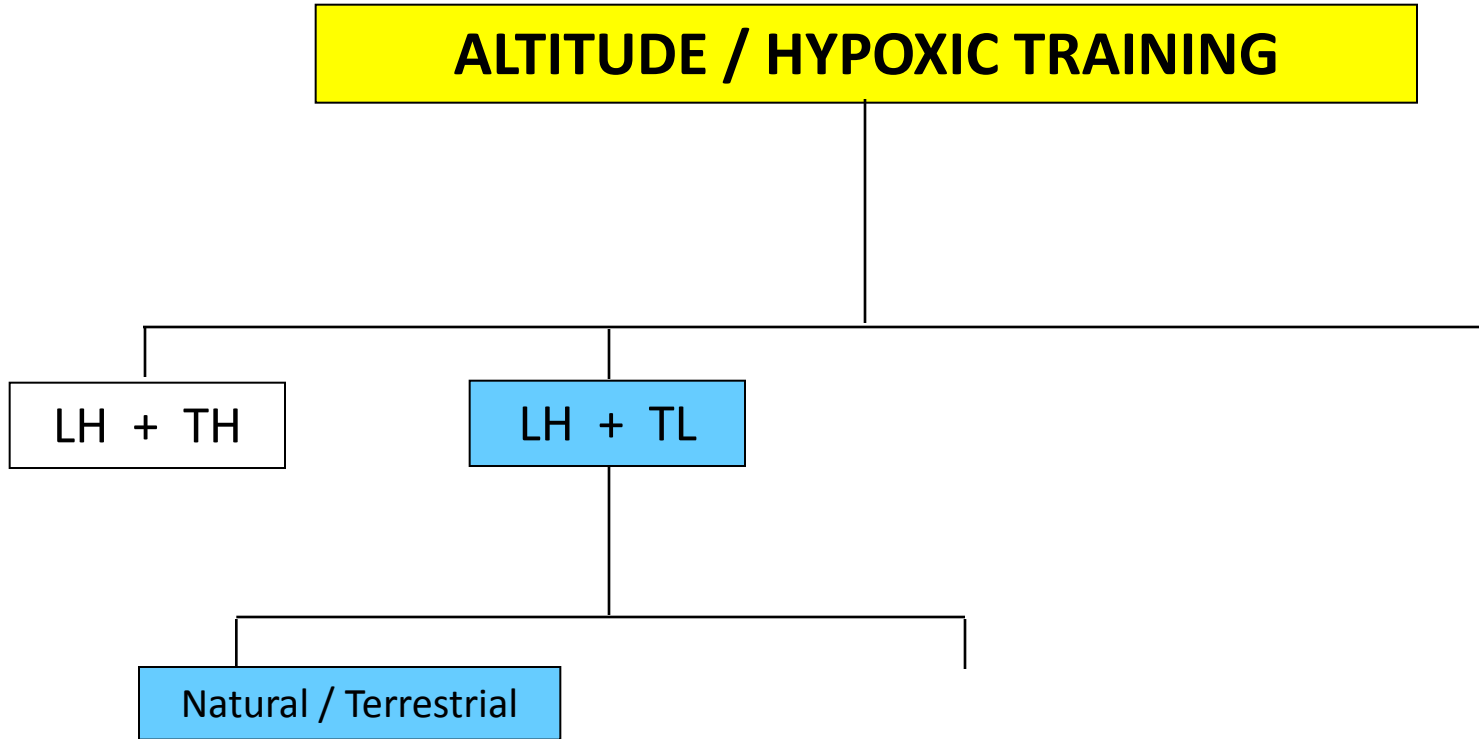


ALTITUDE / HYPOXIC TRAINING

LH + TH

LH + TL

Natural / Terrestrial



LH + TL

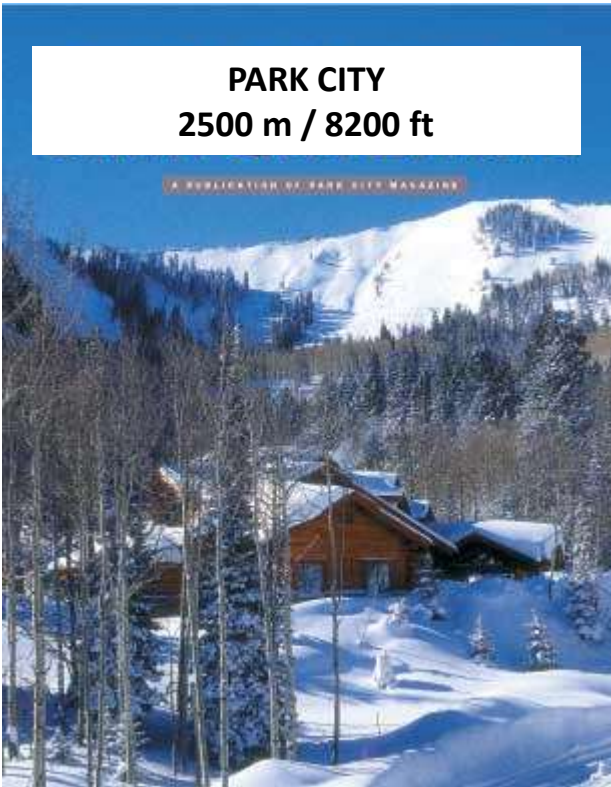
Natural/Terrestrial Hypobaric Hypoxia



LH + TL

Natural/Terrestrial Hypobaric Hypoxia

PARK CITY
2500 m / 8200 ft



UTAH OLYMPIC OVAL
1425 m / 4675 ft



LH + TL

Natural/Terrestrial Hypobaric Hypoxia



3



1



4

WRs 2



3



3



1



1



2



1

LH + TL

Natural/Terrestrial Hypobaric Hypoxia

CAR Sierra Nevada
2320 m / 7610 ft



Granada
738 m / 2421 ft



LH + TL

Natural/Terrestrial Hypobaric Hypoxia



Muottas Muragl
2500 m / 8200 ft



St. Moritz
1800 m / 5900 ft

LH + TL

Natural/Terrestrial Hypobaric Hypoxia

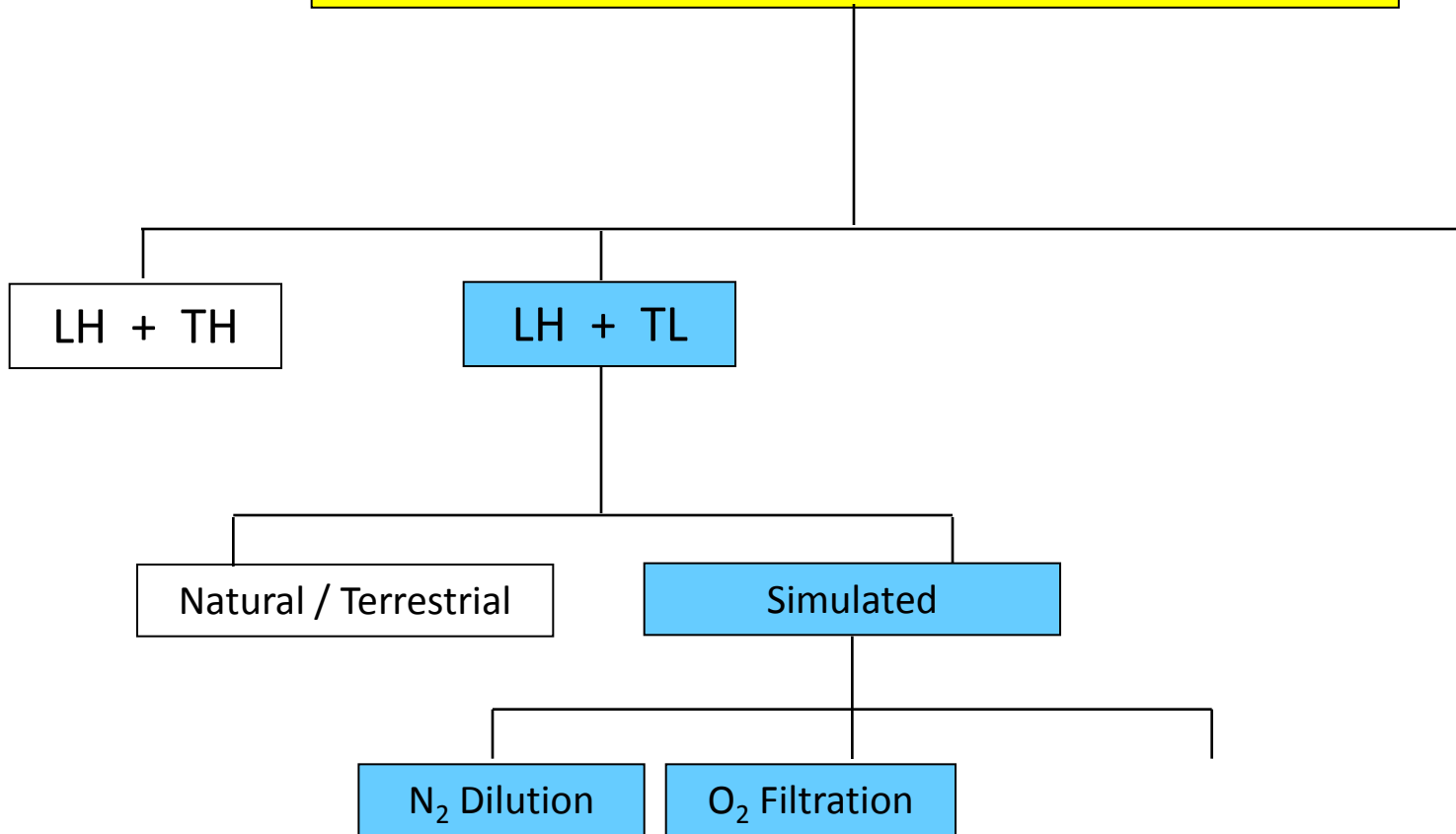


LH + TL

Natural/Terrestrial Hypobaric Hypoxia

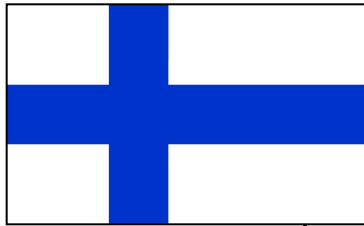


ALTITUDE / HYPOXIC TRAINING



LH + TL

Normobaric Hypoxia via N_2 Dilution



Nitrogen apartment

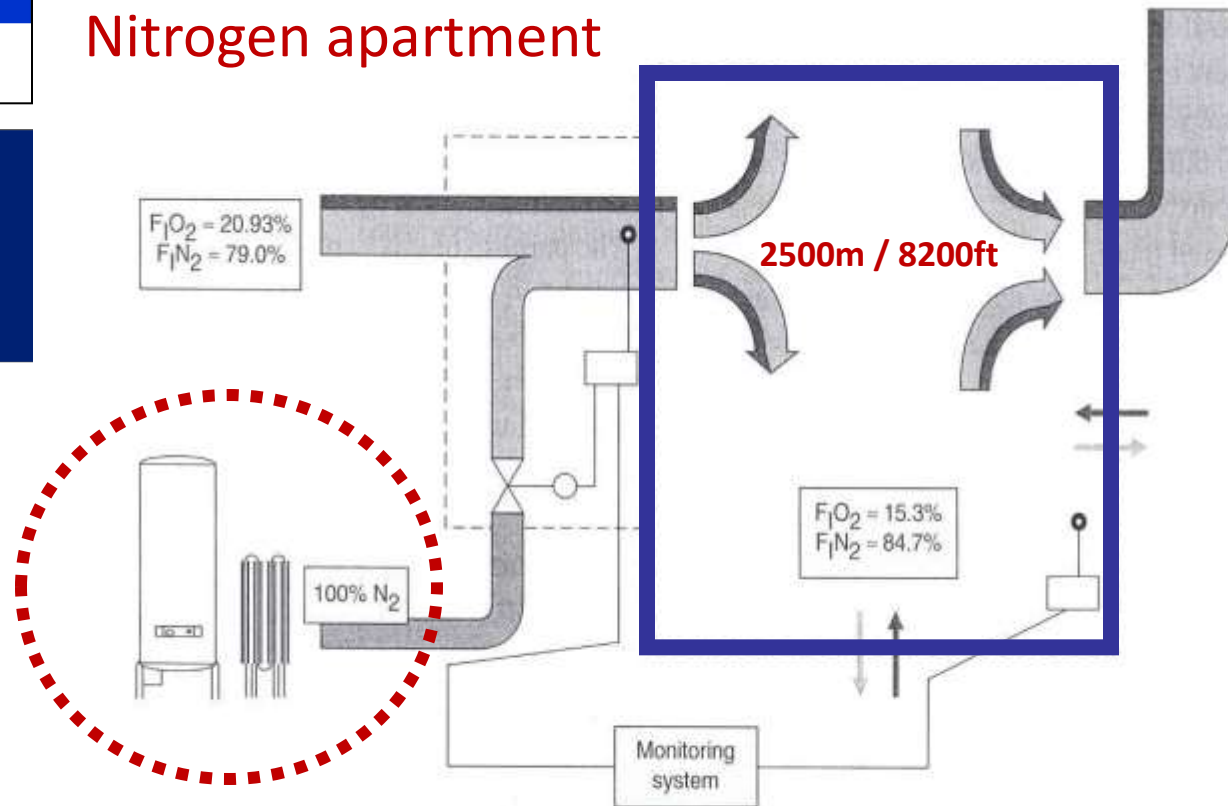


Fig. 1. Schematic representation of a normobaric hypoxic apartment, $F_I N_2$ = fraction of inspired nitrogen; $F_I O_2$ = fraction of inspired oxygen.

LH + TL

Normobaric Hypoxia via O_2 Filtration



LH + TL

Normobaric Hypoxia via O₂ Filtration

NIKE Oregon Project
PORTLAND
52.5 m / 173 ft



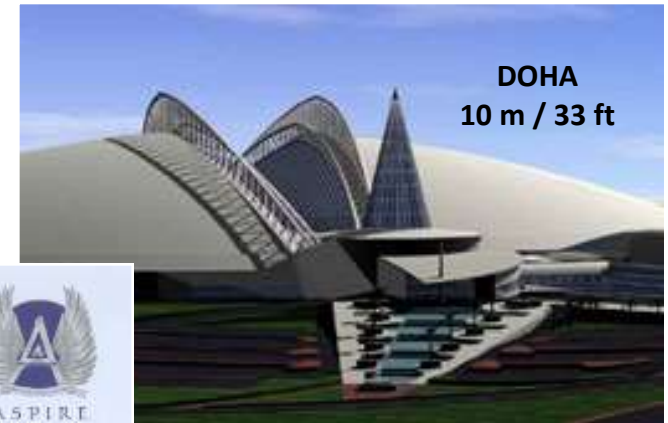
TOKYO
8 m / 26 ft



CHULA VISTA
21 m / 70 ft



BEIJING
44 m / 144 ft



DOHA
10 m / 33 ft

Simulated Altitude

Legal and Ethical Issues

Artificially-Induced Hypoxic Conditions:

“In response to our stakeholders who requested that there be full consideration of hypoxic conditions in the context of the Prohibited List, WADA performed a scientific and ethical review of the matter, and engaged in a thorough consultation with experts and stakeholders. While we do not deem this method appropriate for inclusion on the List at this time, we still wish to express the concern that, in addition to the results varying individually from case to case, use of this method may pose health risks if not properly implemented and under medical supervision.”



Richard Pound
WADA Chairman
September 16, 2006



Simulated Altitude

Legal and Ethical Issues

Decree of the Italian Ministry of Health
13.04.2005. Section 5. Subsection M.1
03 June 2005



... “all hypobaric/hypoxic practices are currently prohibited in Italy” ...



2005 Giro d'Italia
Stage 10
18 May 2005

Simulated Altitude

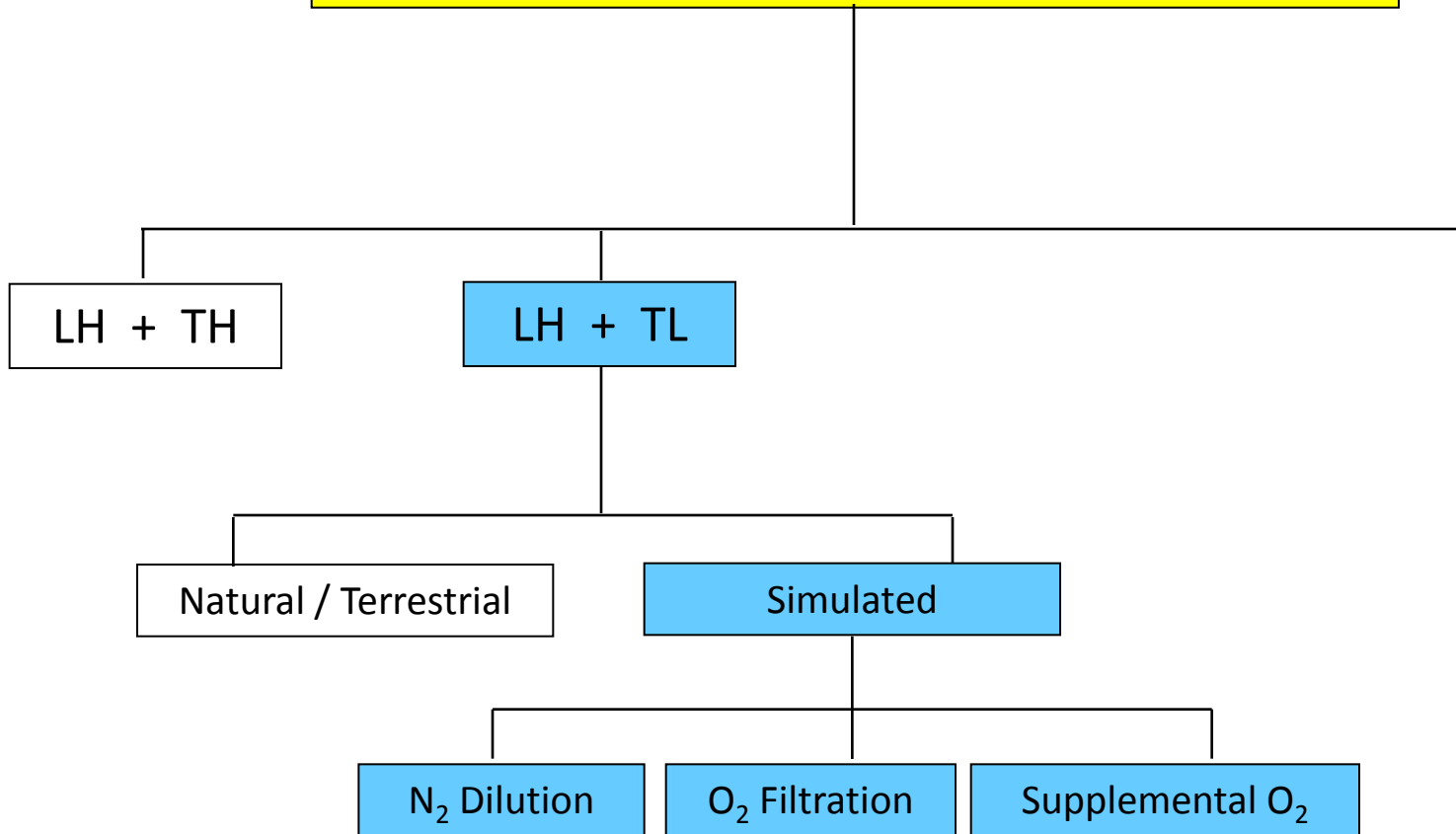
Legal and Ethical Issues



The International Olympic and Paralympic Committees have prohibited the use of simulated altitude devices within the boundaries of the Olympic Village since the 2000 Sydney Olympics, and this mandate is expected to apply to all future summer and winter Olympic Games.



ALTITUDE / HYPOXIC TRAINING

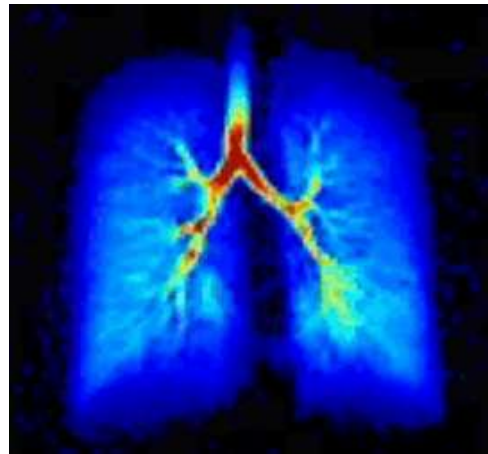




Colorado Springs (1860 m / 6200 ft)

BP
610 mm Hg

O_2
20.93%



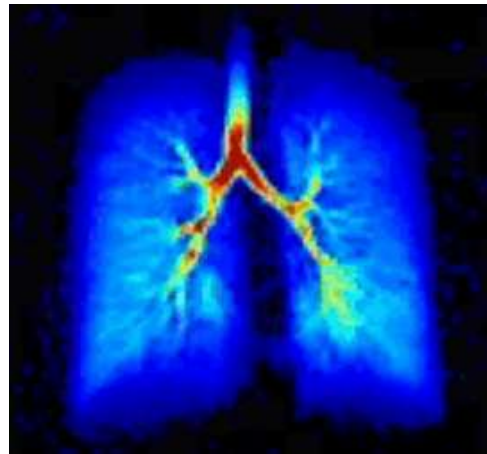
$P_1O_2 \sim 128$ mm Hg



**Colorado Springs
(1860 m / 6200 ft)**

**BP
610 mm Hg**

**O_2
20.93%**

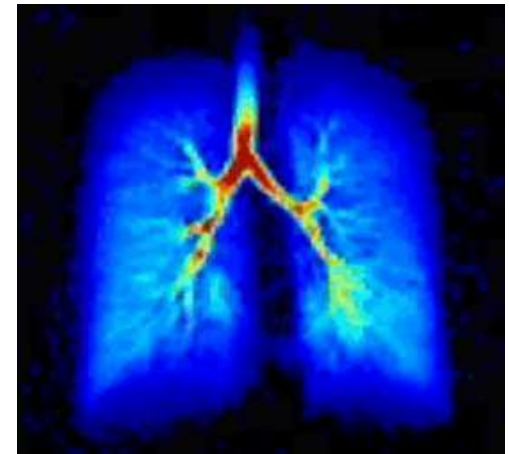


$P_iO_2 \sim 128$ mm Hg

**Colorado Springs
(supplemental O_2)**

**BP
610 mm Hg**

**O_2
26.47%**

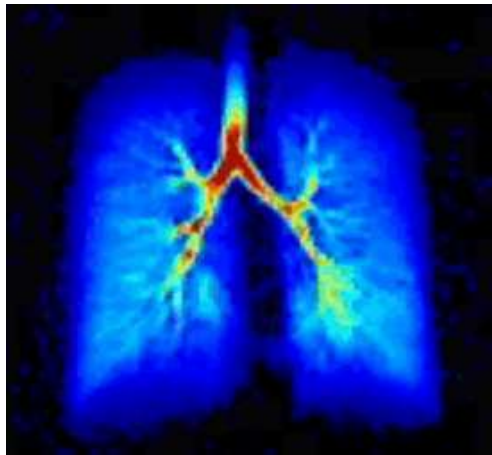


$P_iO_2 \sim 150$ mm Hg

Sea level

BP
760 mm Hg

O₂
20.93%

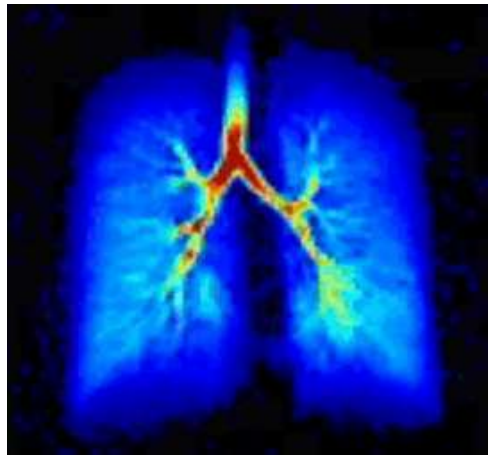


P_iO₂ ~ 150 mm Hg

Colorado Springs
(1860 m / 6200 ft)

BP
610 mm Hg

O₂
20.93%

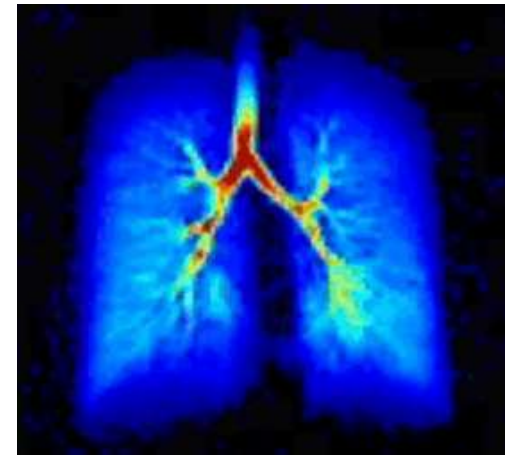


P_iO₂ ~ 128 mm Hg

Colorado Springs
(supplemental O₂)

BP
610 mm Hg

O₂
26.47%



P_iO₂ ~ 150 mm Hg





2010 PROHIBITED LIST

M1. ENHANCEMENT OF OXYGEN TRANSFER

The following are prohibited:

- 1) Blood doping, including the use of autologous, homologous or heterologous blood or red blood cell products of any origin.
- 2) Artificially enhancing the uptake, transport or delivery of oxygen, including but not limited to perfluorochemicals, efaproxiral (RSR13) and modified haemoglobin products (e.g., haemoglobin-based blood substitutes, microencapsulated haemoglobin products), excluding supplemental oxygen.

US Olympic Training Center: Colorado Springs

Athlete Performance Laboratory

1860 m / 6200 ft



Supplemental O₂ Training (LH + TLO₂)

USOC Sport Science Center of Excellence

High Altitude Training Center



LH + TL

Hypobaric Normoxia via Supplemental O₂ (LH + TLO₂)



UTAH OLYMPIC OVAL
1425 m / 4675 ft

Photo credit: Dr. Andy Subudhi

LH + TL

Hypobaric Normoxia via Supplemental O₂ (LH + TLO₂)



SOLDIER HOLLOW, UT

1685 – 1750 m

5528 – 5742 ft



LH + TL

Hypobaric Normoxia via Supplemental O₂ (LH + TLO₂)



Effect of F₁O₂ on Physiological Responses and Cycling Performance at Moderate Altitude

RANDALL L. WILBER¹, PAIGE L. HOLM¹, DAVID M. MORRIS¹,
GEORGE M. DALLAM², and SAMUEL D. CALLAN³

¹Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO; ²Department of Exercise Science, Health Promotion and Recreation, Colorado State University-Pueblo, Pueblo, CO; and ³Sport Science Department, USA Cycling, Colorado Springs, CO



Effect of F₁O₂ on Oxidative Stress during Interval Training at Moderate Altitude

RANDALL L. WILBER¹, PAIGE L. HOLM², DAVID M. MORRIS¹, GEORGE M. DALLAM²,
ANDREW W. SUBUDHI³, DENNIS M. MURRAY⁴, and SAMUEL D. CALLAN⁵

¹Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO; ²Department of Exercise Science, Health Promotion and Recreation, Colorado State University-Pueblo, Pueblo, CO; ³The Orthopedic Specialty Hospital, Salt Lake City, UT; ⁴Oxis Research, Portland, OR; and ⁵Sport Science Department, USA Cycling, Colorado Springs, CO



Application of Altitude/Hypoxic Training by Elite Athletes

RANDALL L. WILBER

Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO



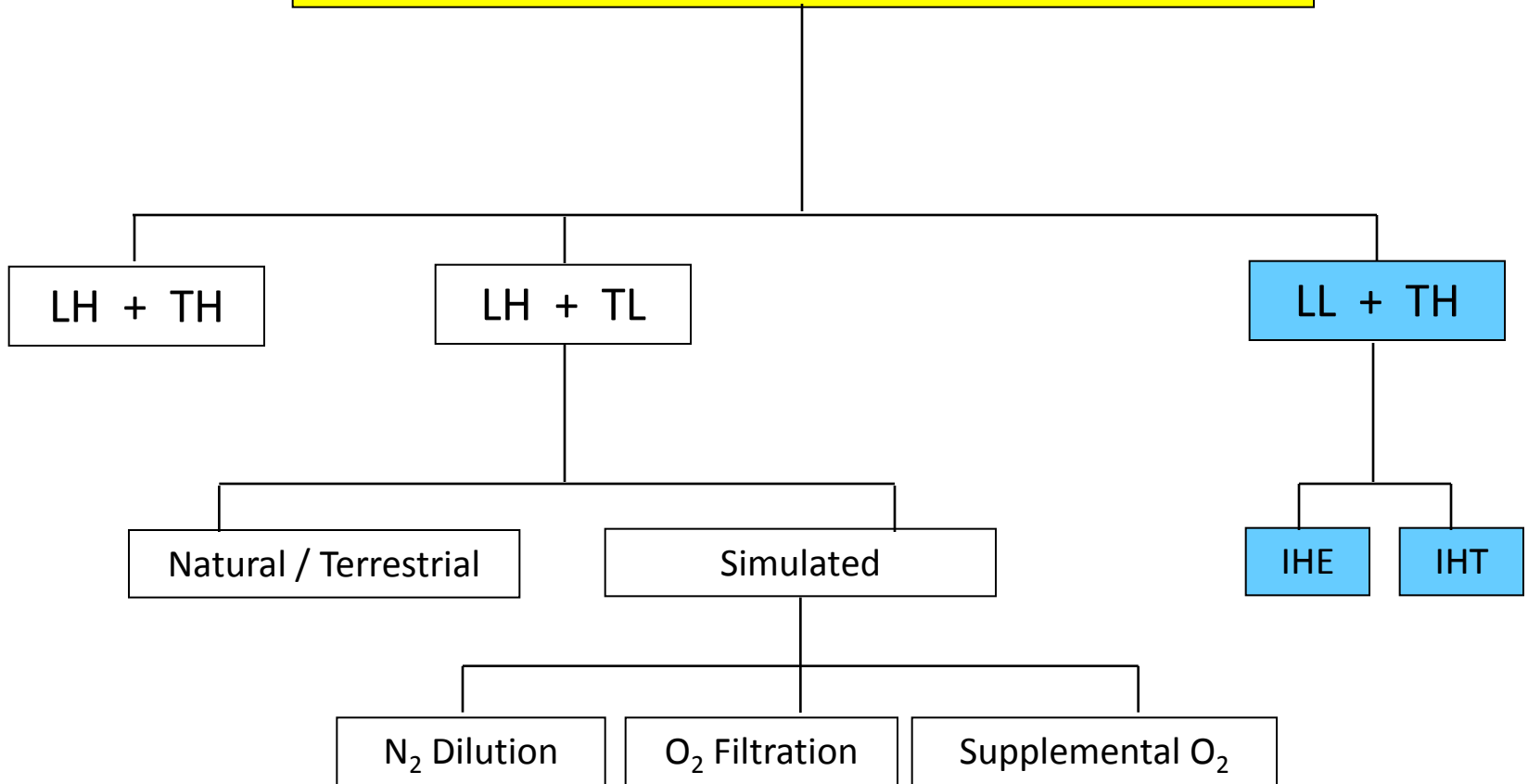
Effect of Hypoxic "Dose" on Physiological Responses and Sea-Level Performance

RANDALL L. WILBER¹, JAMES STRAY-GUNDERSEN², and BENJAMIN D. LEVINE³

¹Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO; ²Department of Health, University of Utah, Salt Lake City, UT; and ³Institute for Exercise and Environmental Medicine, Presbyterian Hospital of Dallas, University of Texas Southwestern Medical Center, Dallas, TX



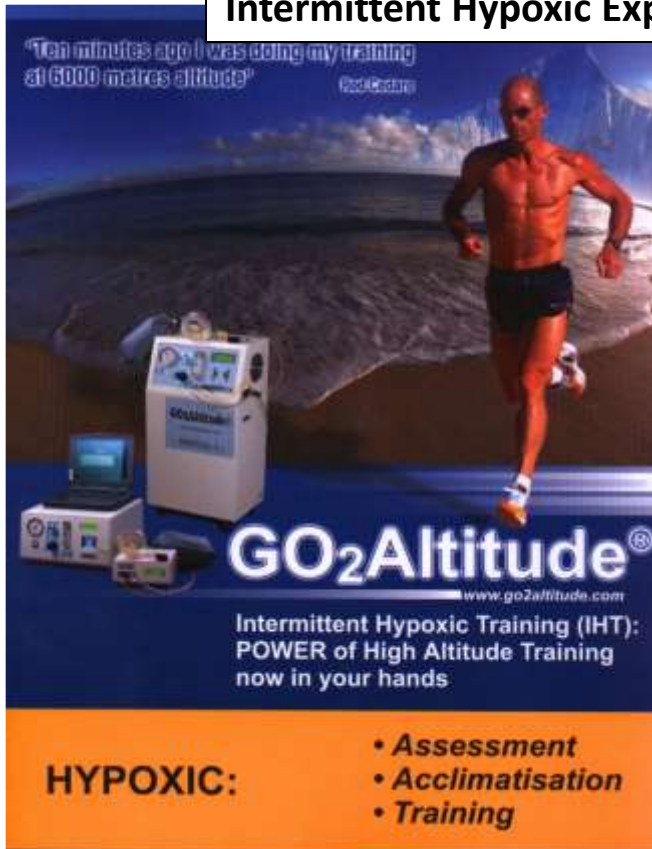
ALTITUDE / HYPOXIC TRAINING



LL + TH

Intermittent Hypoxic Exposure (IHE) / Training (IHT)

Intermittent Hypoxic Exposure (IHE)



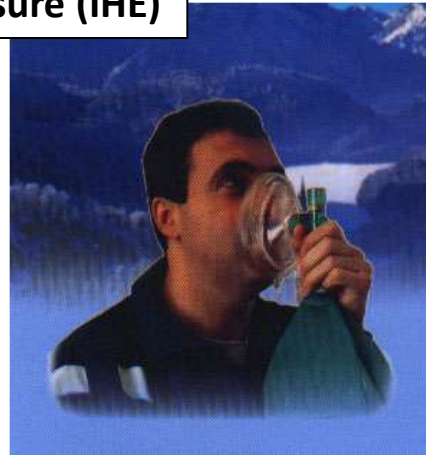
"Ten minutes ago I was doing my training at 6000 metres altitude"

GO₂Altitude®
www.go2altitude.com

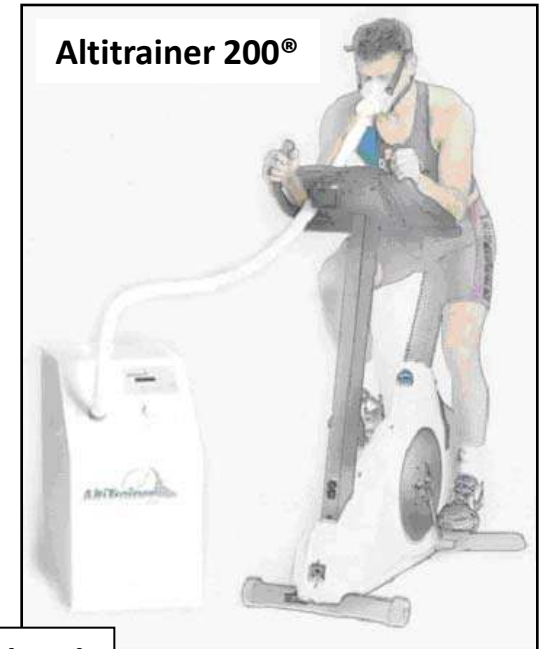
Intermittent Hypoxic Training (IHT):
POWER of High Altitude Training
now in your hands

HYPOXIC:

- Assessment
- Acclimatisation
- Training



Altitrainer 200®



Intermittent Hypoxic Training (IHT)

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- LH + TH
- LH + TL
- LL + TH



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- Annual Plan for Altitude Training

■ Physiological Benefits

■ Summary & Resources





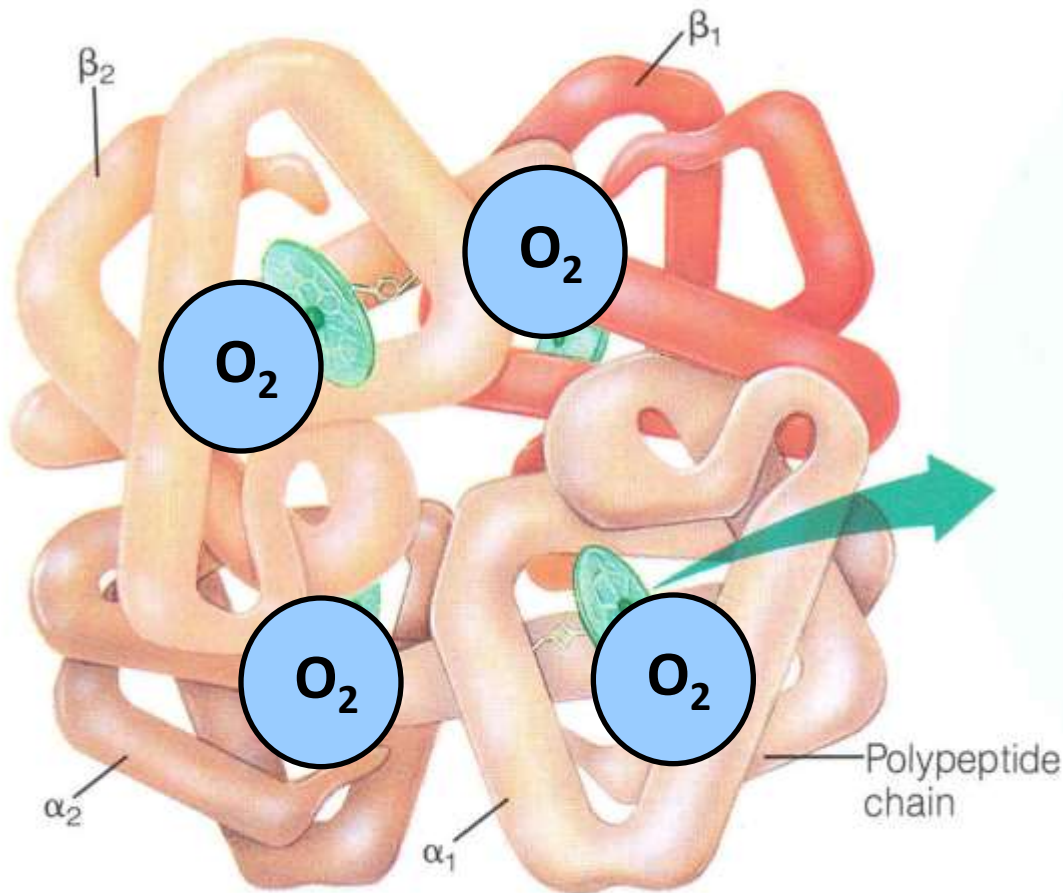
BEFORE Altitude Training Camp

Altitude Training

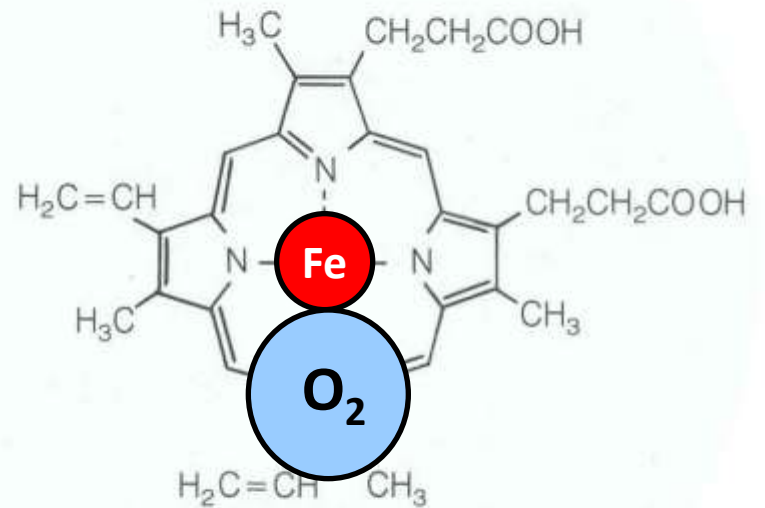
Contraindications



- Poor level of fitness
- Bacterial or viral infection
- Fe-depleted
- Fe-deficient non-anemia
- Fe-deficient anemia
- Sickle-cell trait or anemia
- Medications that might affect the kidneys and EPO response
- Medications that might exacerbate diuresis
- Chronic sleep disorders



(a) Hemoglobin



(b) Iron-containing heme group

IRON SUPPLEMENTATION



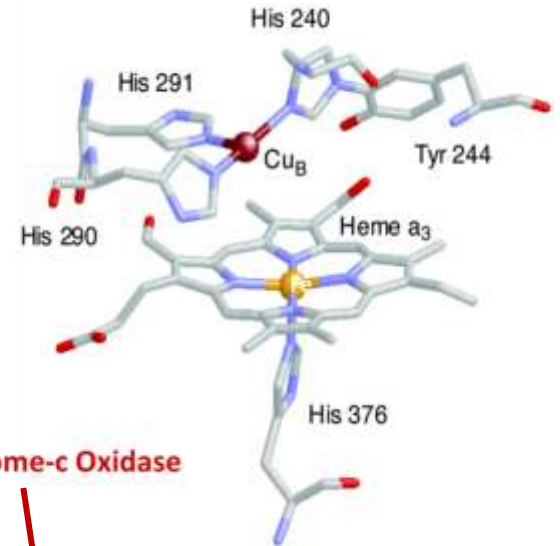
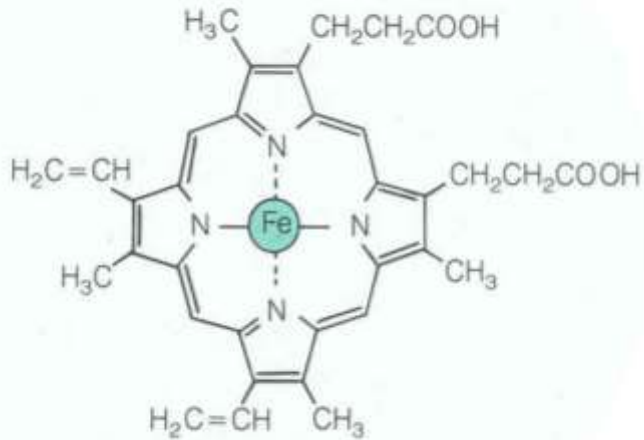
Ferrous sulfate

If serum Ferritin is low:

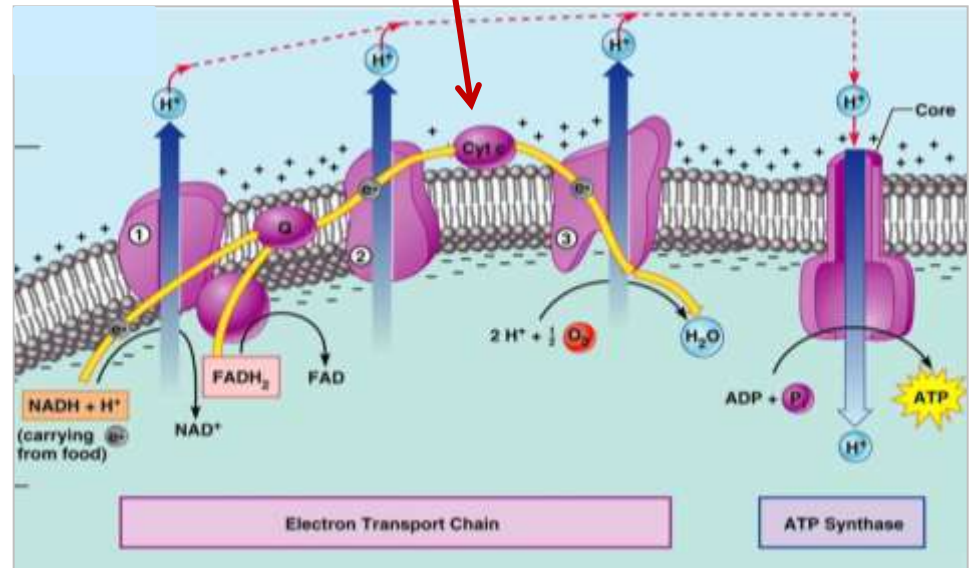
- Attention to “heme Fe” in diet.
- Moderate Fe supplementation
 - 120-130 mg “elemental Fe” divided into 2 doses
 - taken with Vitamin C
 - taken 30 min before or 60 min after meals to increase absorption and decrease GI distress
 - taken daily

IRON SUPPLEMENTATION

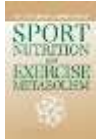
Hemoglobin



Cytochrome-c Oxidase

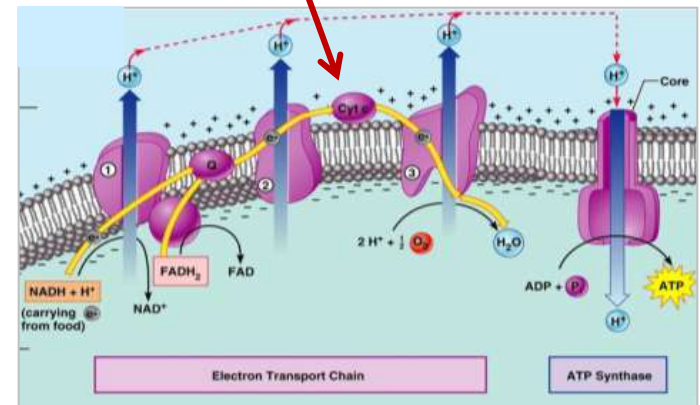
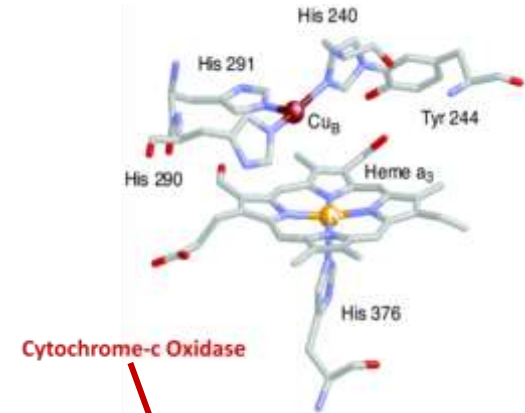
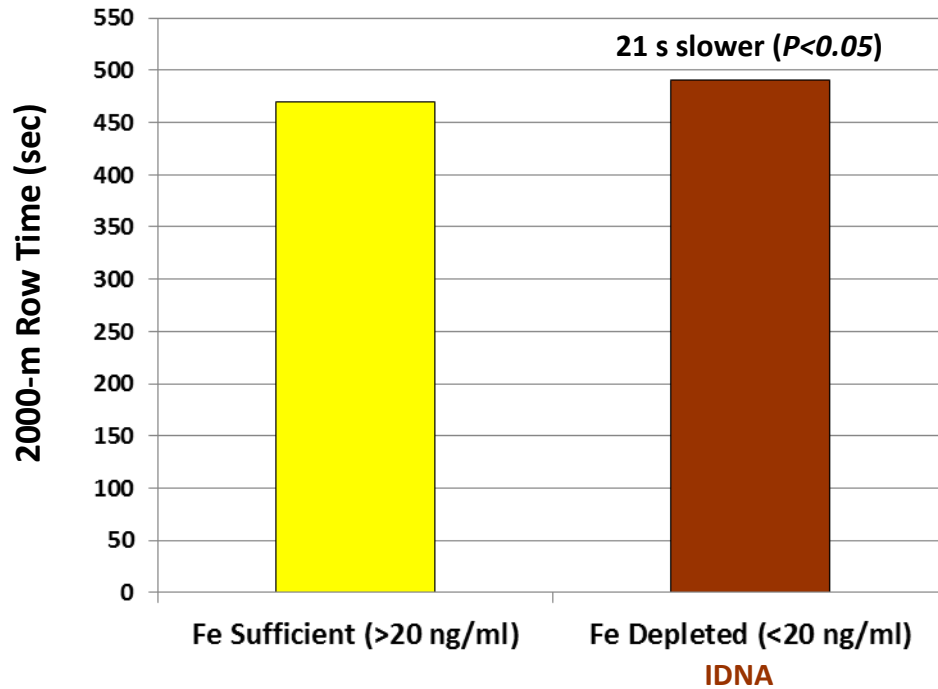


Impact of Iron Depletion Without Anemia on Performance in Trained Endurance Athletes at the Beginning of a Training Season: A Study of Female Collegiate Rowers



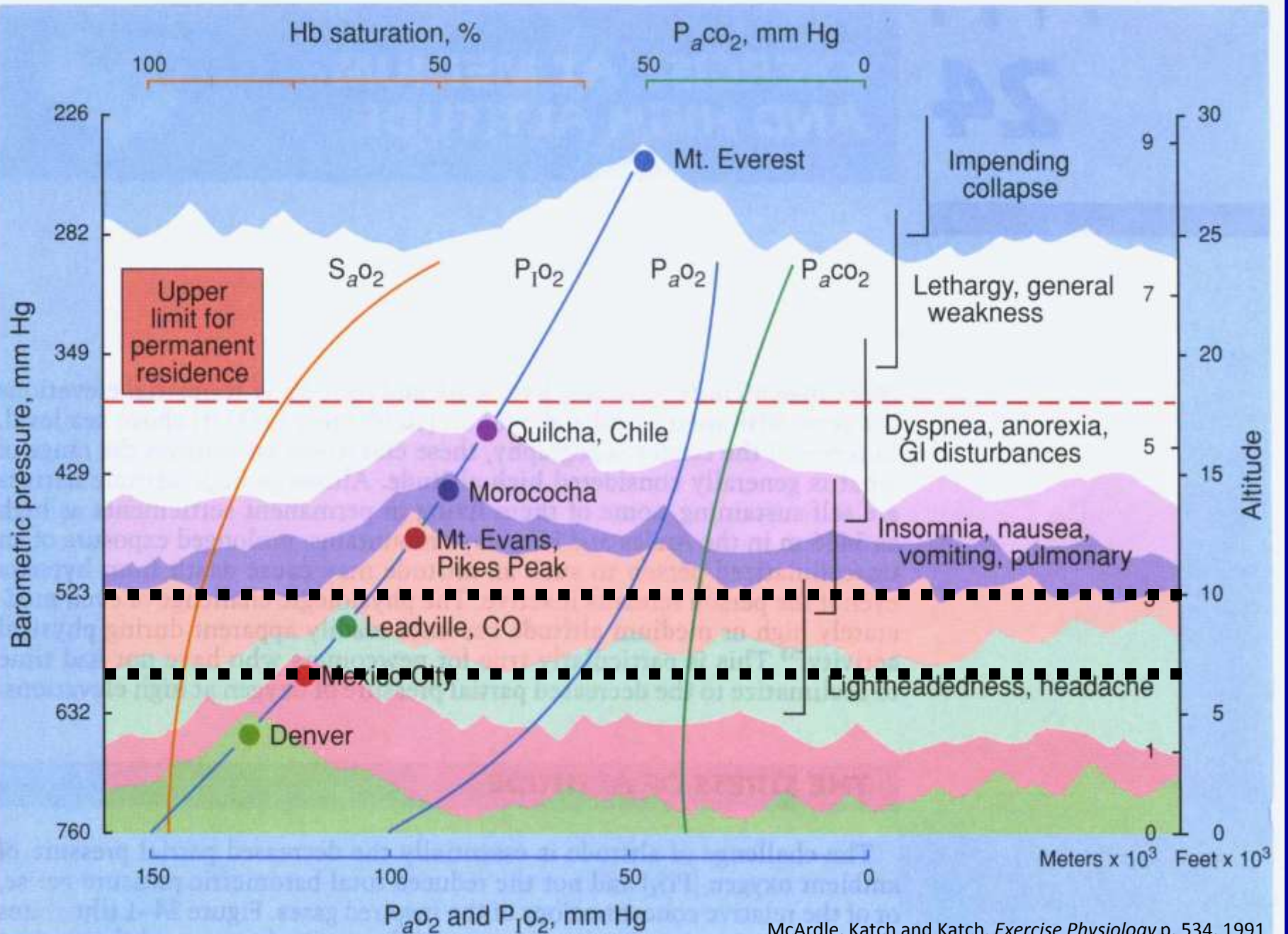
Diane M. DellaValle and Jere D. Haas

International Journal of Sport Nutrition and Exercise Metabolism, 2011, 21, 501-506



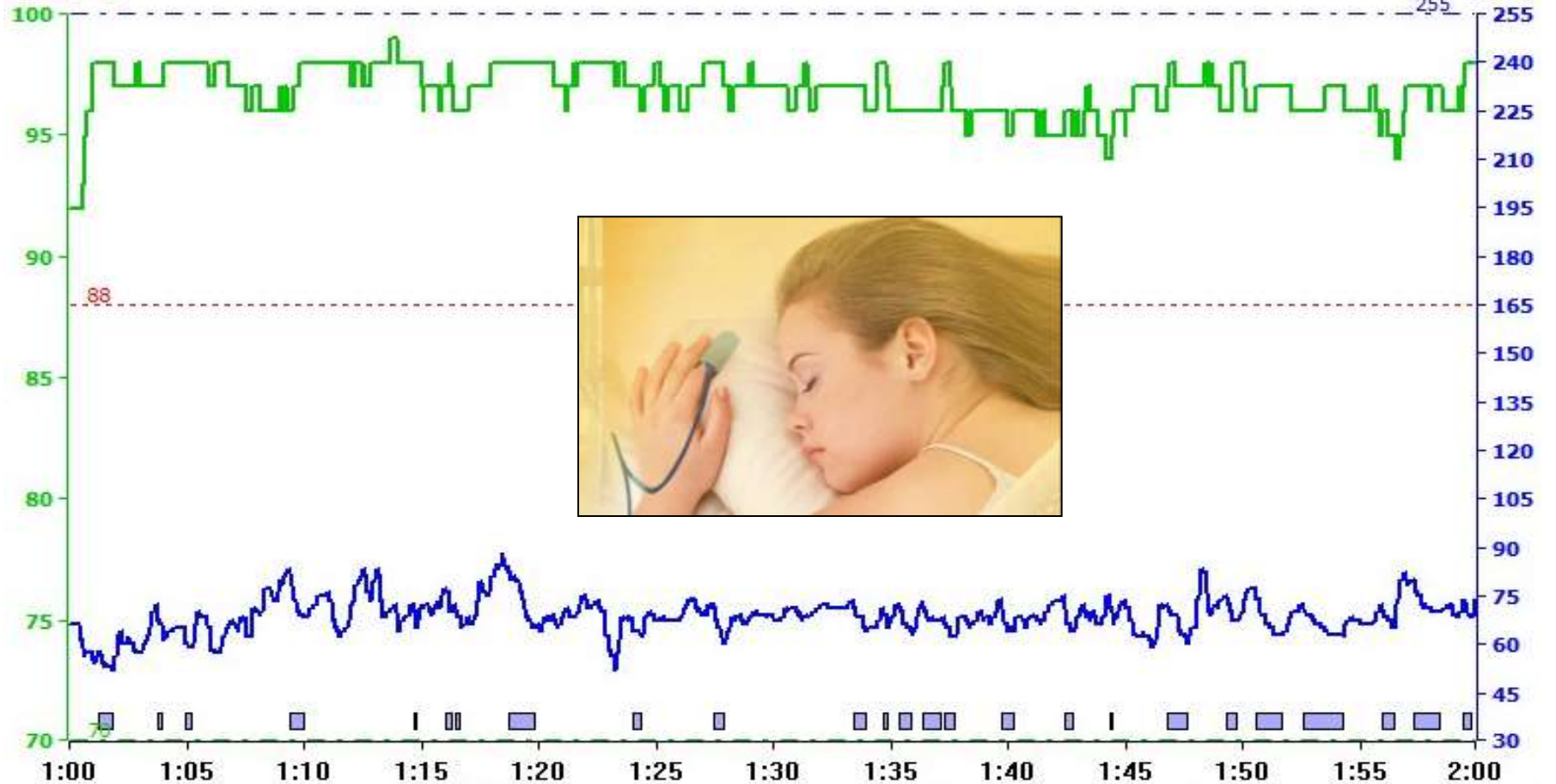


DURING Altitude Training Camp



SpO2 (%)

Pulse (bpm)



1:00 1:05 1:10 1:15 1:20 1:25 1:30 1:35 1:40 1:45 1:50 1:55 2:00

File Data: TEST

1 10 60 M << < > >>

NAME

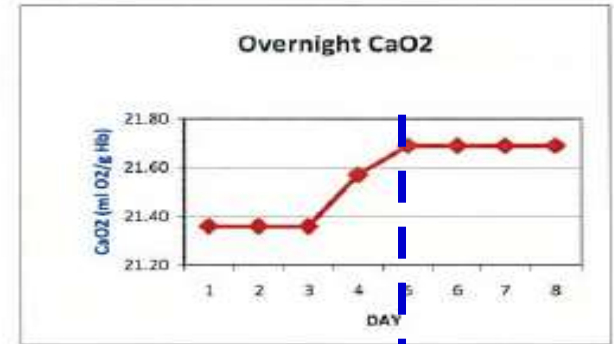
USA Biathlon
Altitude Training Camp
Antholz, ITALY (1644 m / 5392 ft)
July 29 to August 7, 2010



Day	HR	SpO2	CaO2	Glucose	USG
F 7/30/10	48	93.5	21.36	82	1.028
SAT 7/31/10	48	93.5	21.36	82	1.027
SUN 8/1/10	47	93.5	21.36	83	1.028
M 8/2/10	42	95.0	21.57	84	1.020
TU 8/3/10	41	95.5	21.69	92	1.018
W 8/4/10	41	95.5	21.69	91	1.019
TH 8/5/10	41	95.5	21.69	91	1.020
F 8/6/10	41	95.5	21.69	92	1.019

Normal=65-99

Hydration Status	USG
Serious DH	> 1.030
Significant DH	1.020 - 1.030
Minimal DH	1.010 - 1.020
Well hydrated	< 1.010

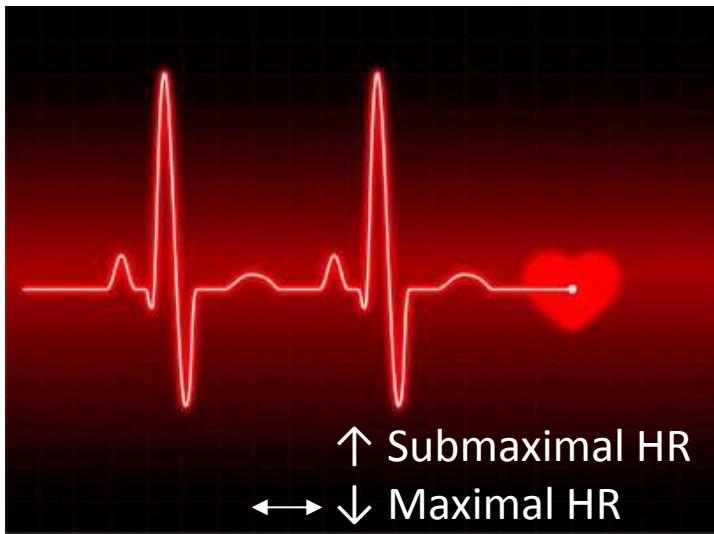


ACCLIMATIZATION = Day 5

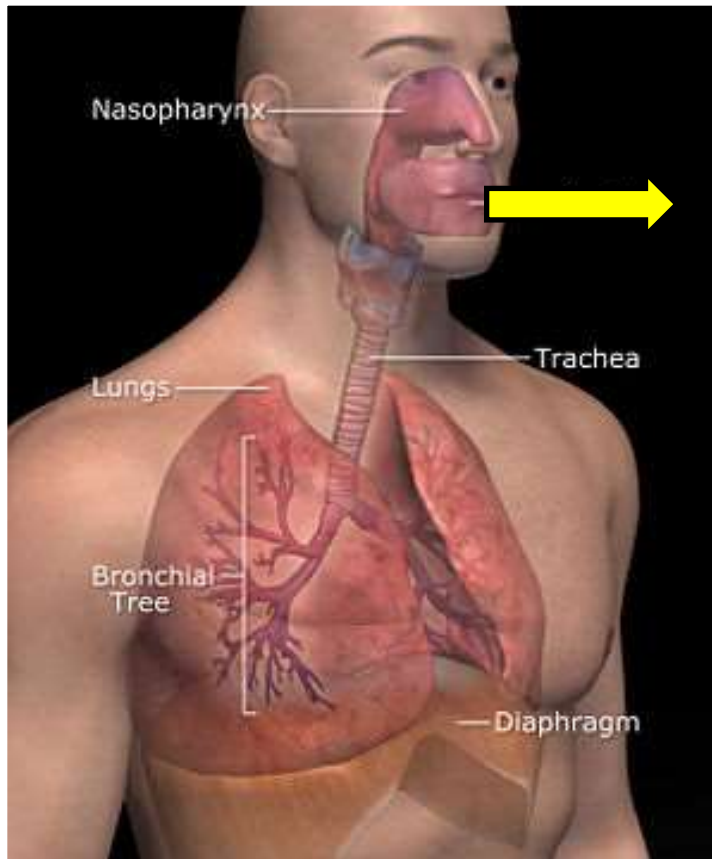
TRAINING PROGRESSION

Base model: combination between hypoxic training and normoxic training in the preparatory training period

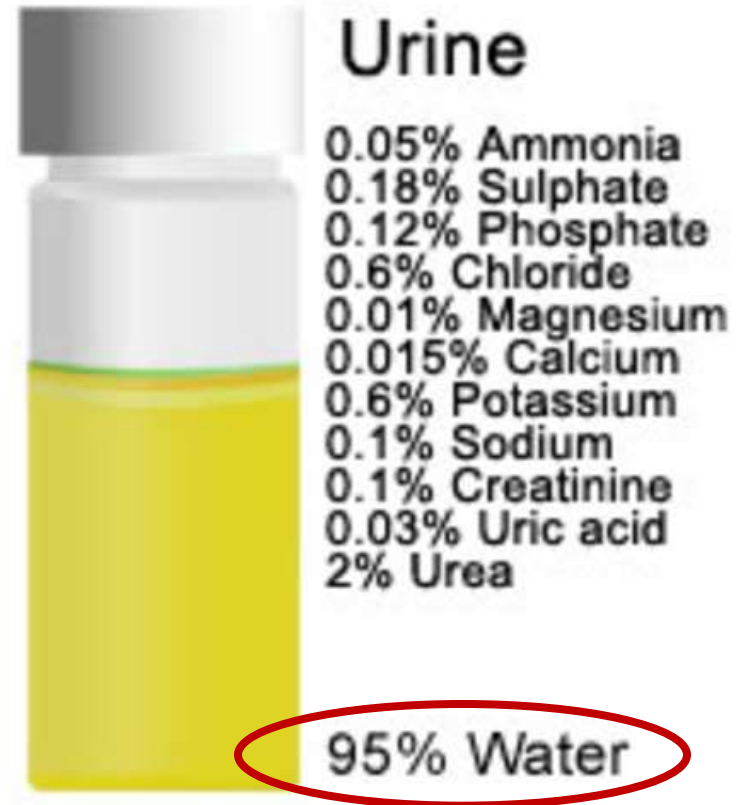
ALTITUDE									
SEA LEVEL									
Training load	Very high								
	High								
	Medium								
	Low								
	Very low								
Training Int		Int \leq VT ₁ strength training	Int \leq VT ₁ Int \leq VT ₂ strength training	Int \leq VT ₁ Int \leq VT ₂ Int \leq MAP strength training					
Days		7	7	7	7	7	7	7	7



DEHYDRATION



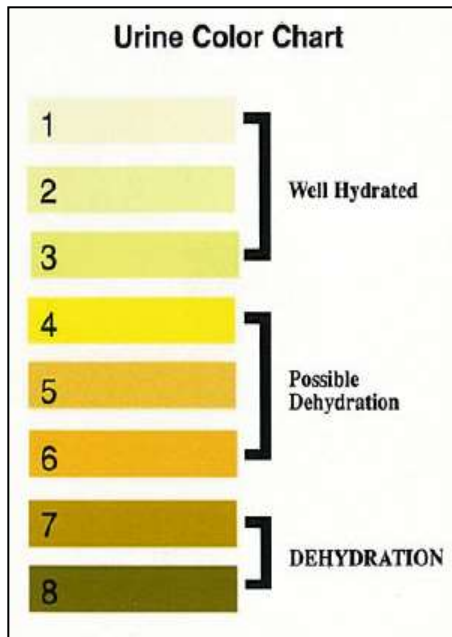
Respiratory H₂O loss



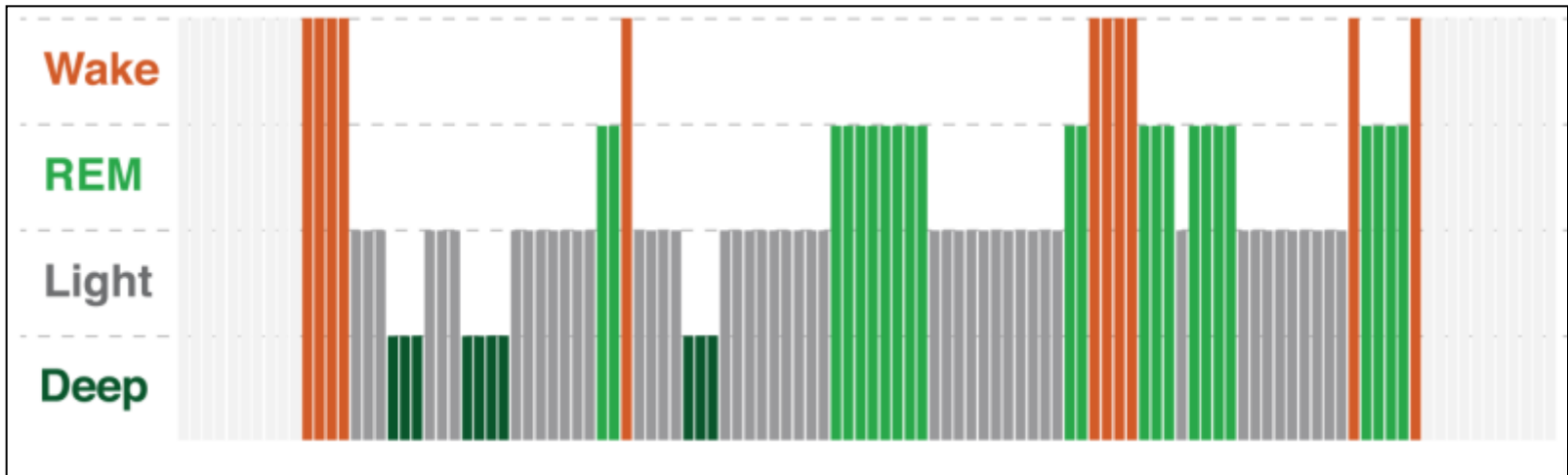
Urinary H₂O loss

Monitor dehydration

- Post-WO total body weight (TBW)
- Drink 10-12 oz fluid for every pound lost
- Check post-WO urine color and/or urine specific gravity (USG)



Hydration Status	USG
Well hydrated	< 1.010
Minimal dehydration	1.010 – 1.020
Significant dehydration	1.020 – 1.030
Serious dehydration	> 1.030





Training Questionnaire



NAME _____

DATE _____

LOCATION _____

IN THE LAST 24 HOURS . . . HAVE YOU EXPERIENCED:

- HEADACHE**
- No headache
 - Light headache
 - Painful headache
 - Severe, incapacitating headache

- GASTROINTESTINAL**
- No GI problems
 - Poor appetite or nausea
 - Moderate nausea or vomiting
 - Severe nausea and vomiting

- FATIGUE**
- Not tired or weak
 - Light fatigue/weakness
 - Moderate fatigue/weakness
 - Severe fatigue/weakness

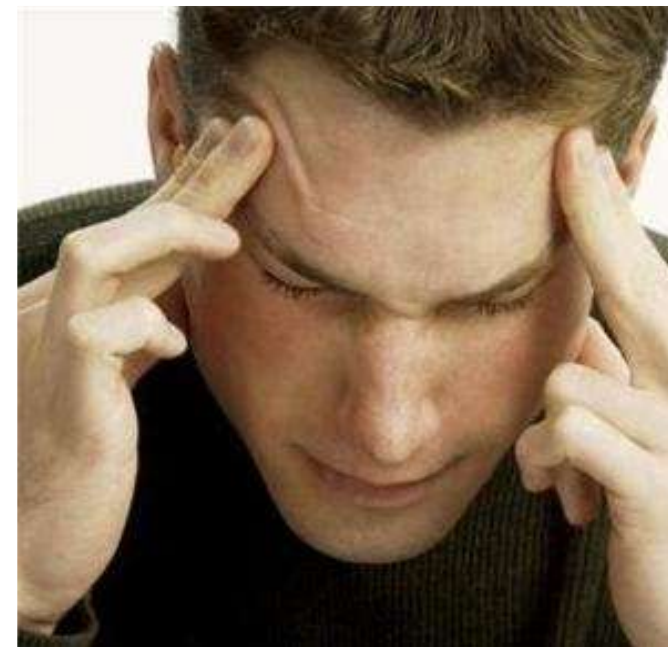
- SLEEP**
- Slept well as usual
 - Did not sleep as well as usual
 - Poor night's sleep . . . woke many times
 - Could not sleep at all

- ILLNESS**
- No illness
 - Minor illness, but it has not significantly limited my training/racing
 - Illness that has forced me to take 2-3 days off [list illness here _____]
 - Illness that has forced me to take >3 days off [list illness here _____]

- INJURY**
- No injury
 - Minor injury, but it has not significantly limited my training/racing
 - Injury that has forced me to take 2-3 days off [list injury here _____]
 - Injury that has forced me to take >3 days off [list injury here _____]

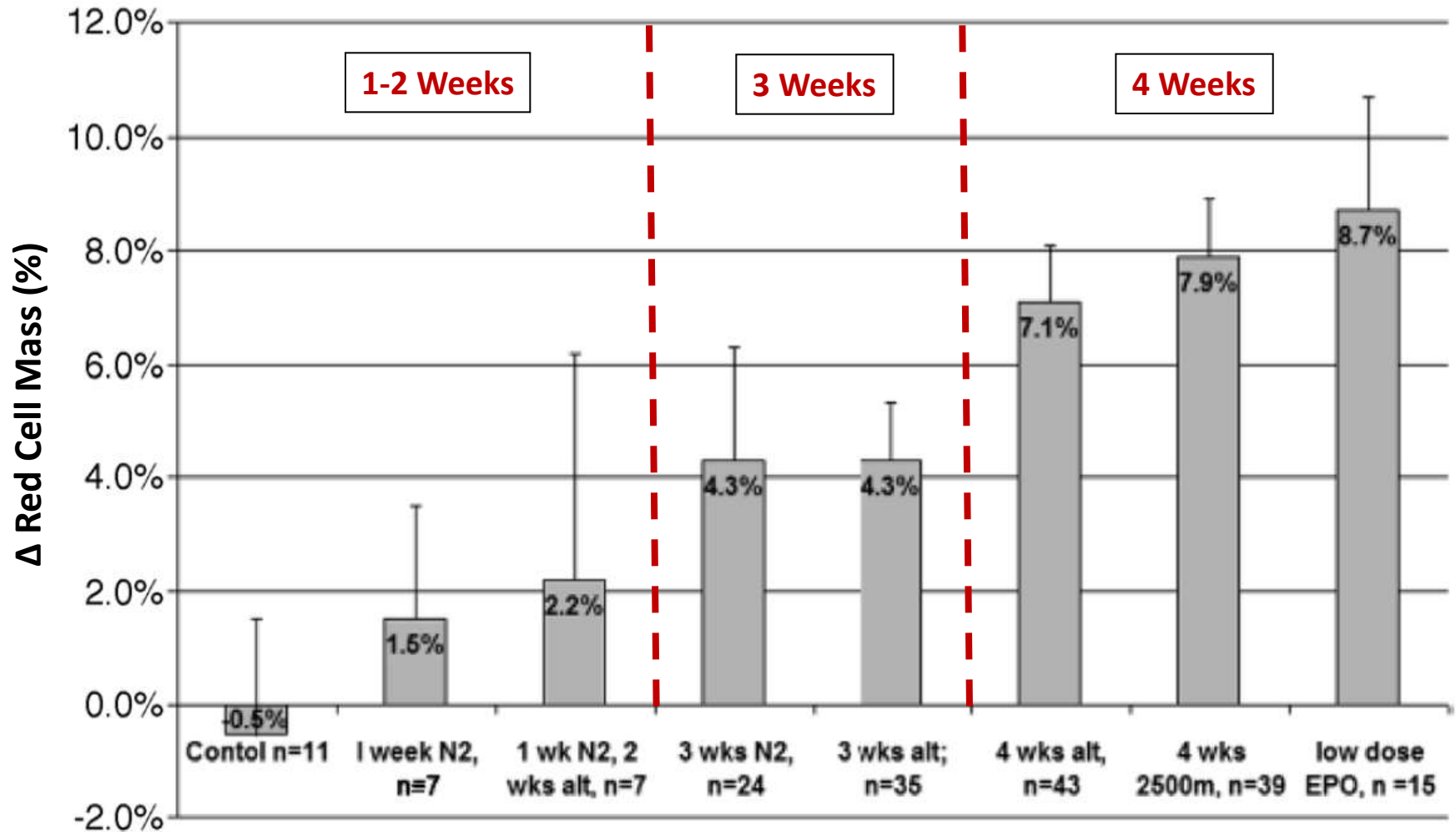
- IS THE CURRENT TRAINING LOAD**
- Too Hard
 - Just Right
 - Too Easy

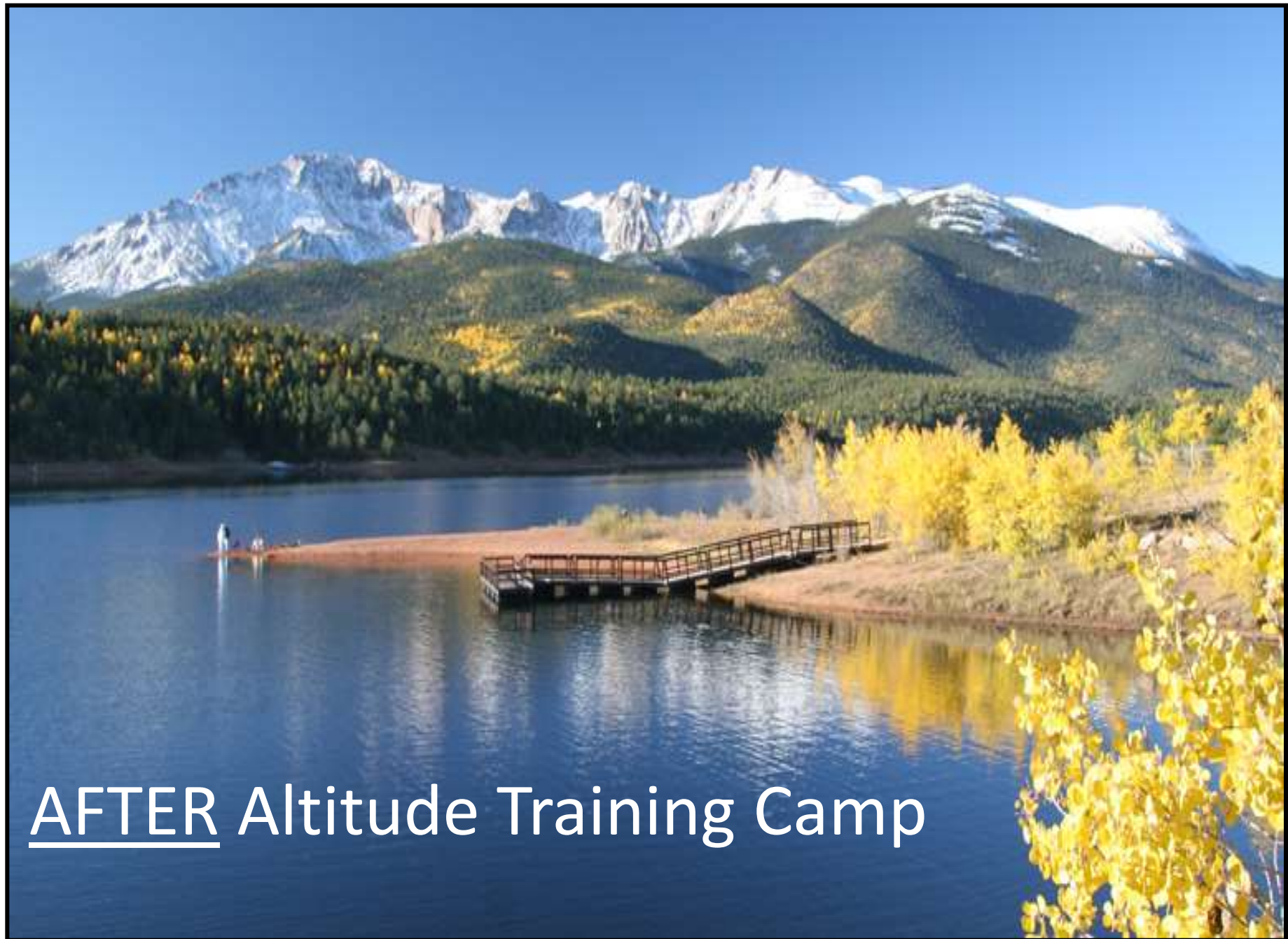
COMMENTS [Please list any specific aches, pains or injuries. Please list any other comments]:



Effective "Dose"

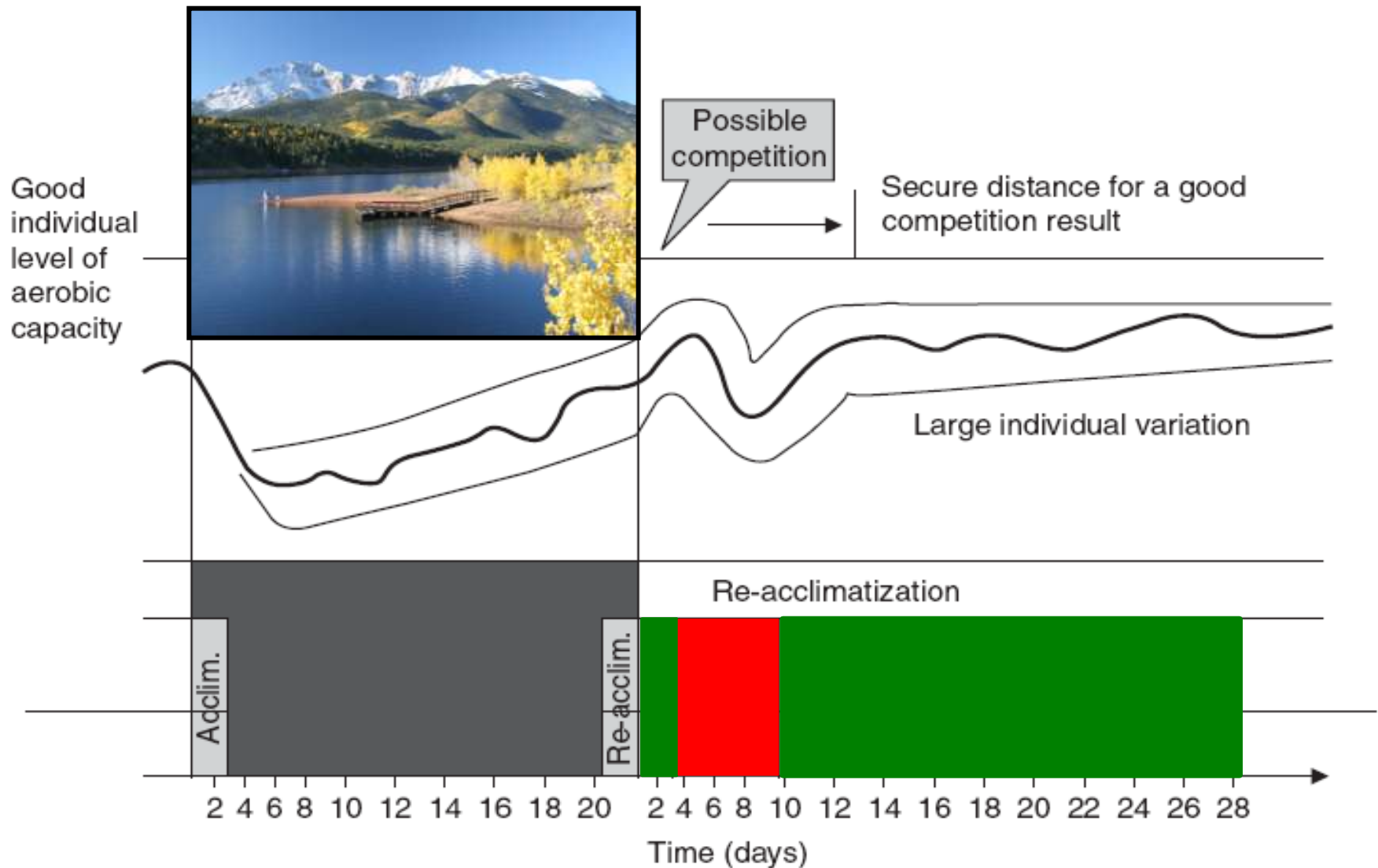
Weeks



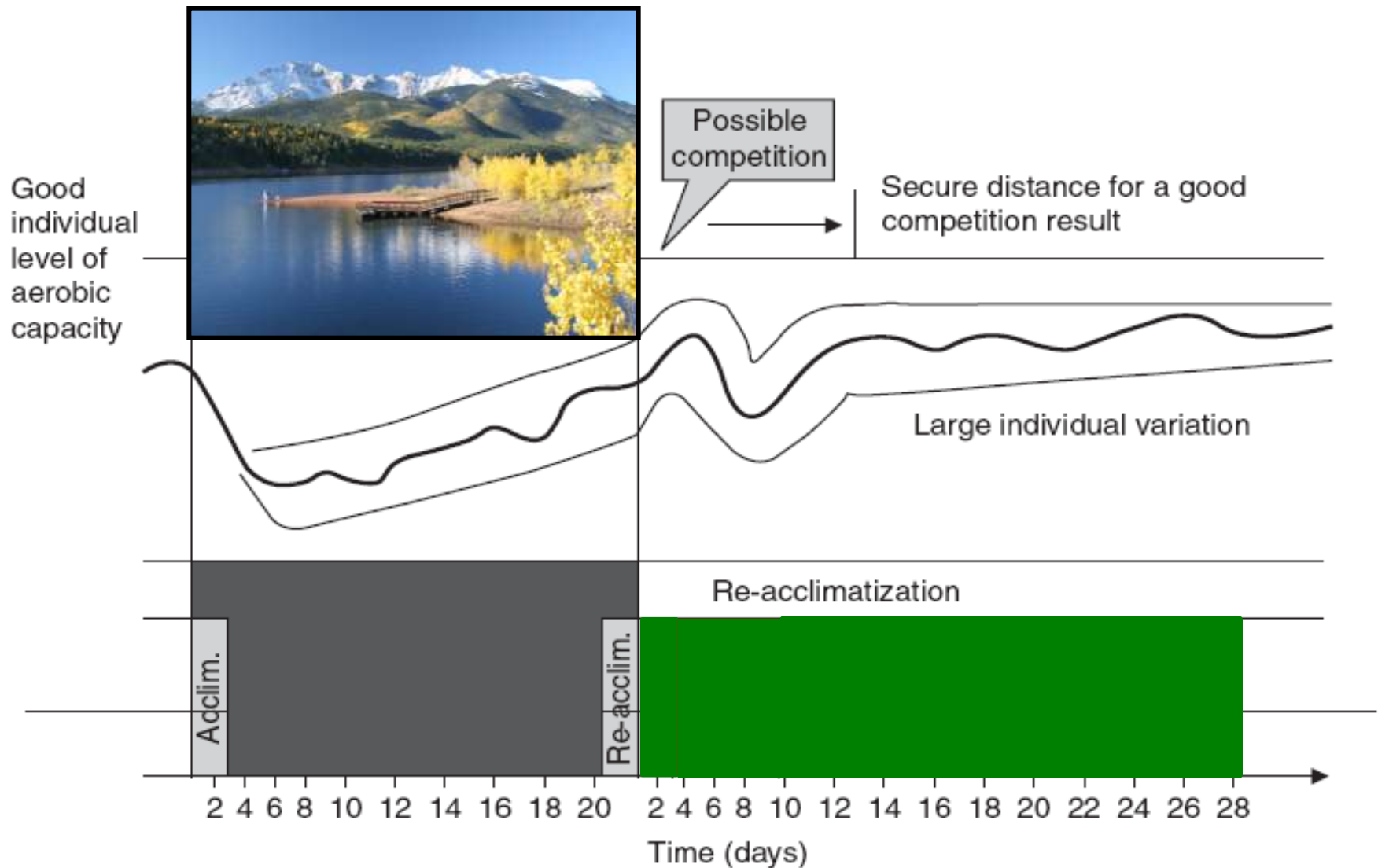


AFTER Altitude Training Camp

Return to Sea Level



Return to Sea Level





Annual Plan for Altitude Training

US Olympic Training Center

Colorado Springs 1860 m / 6200 ft



US OLYMPIC TRAINING CENTER
Aquatics Complex



MICHAEL PHELPS

Beijing 2008
8 Gold medals
22 Olympic medals

MISSY FRANKLIN

London 2012
4 Gold medals



ALLISON SCHMITT

London 2012
3 Gold medals

Use of Altitude/Hypoxic Training by Olympic Athletes

■ Introduction

■ Altitude Training Models

- LH + TH
- LH + TL
- LL + TH

■ Practical Recommendations

- Preparation Before the Altitude Training Camp
- During the Altitude Training Camp
- Return to Sea Level After the Altitude Training Camp
- Annual Plan for Altitude Training

➔ ■ Physiological Benefits

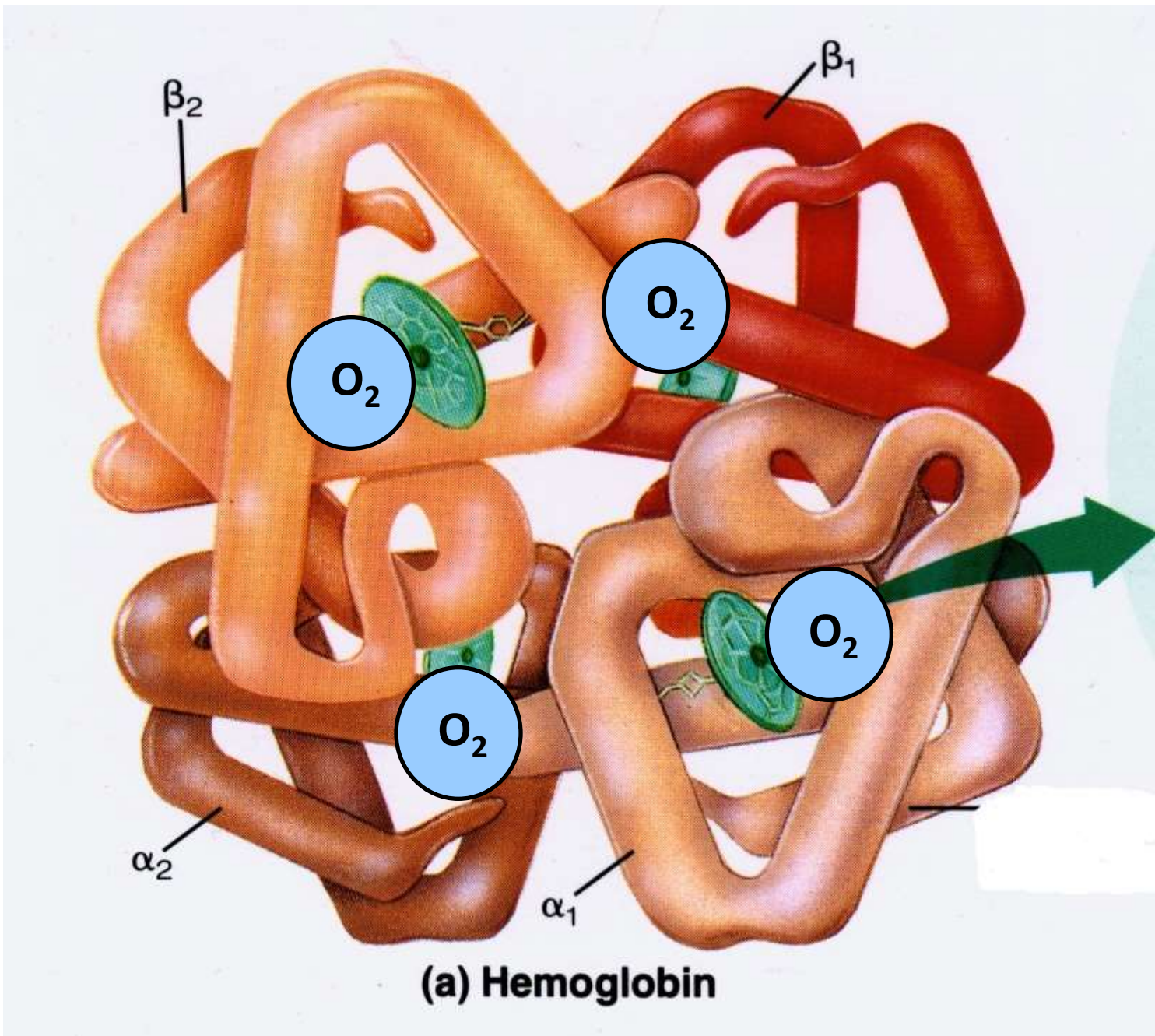
■ Summary & Resources



Physiological Benefits



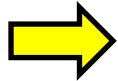
RBC



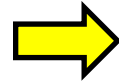
(a) Hemoglobin



Altitude Training



RBC ↑



VO₂ max

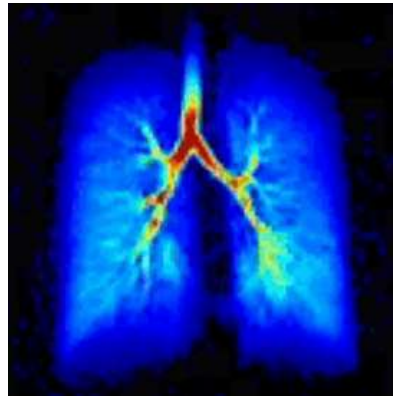


SL Performance

Physiological Benefits



RBC



Hypoxic Ventilatory Response (HVR)

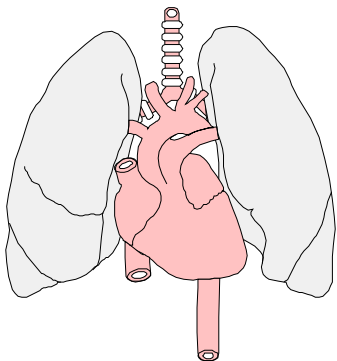
ALTITUDE



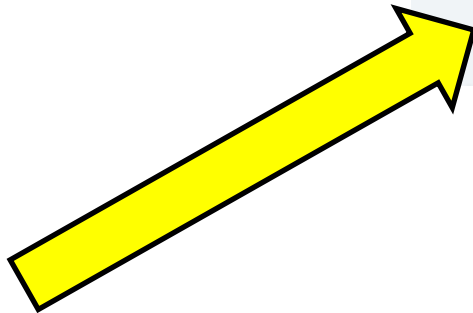
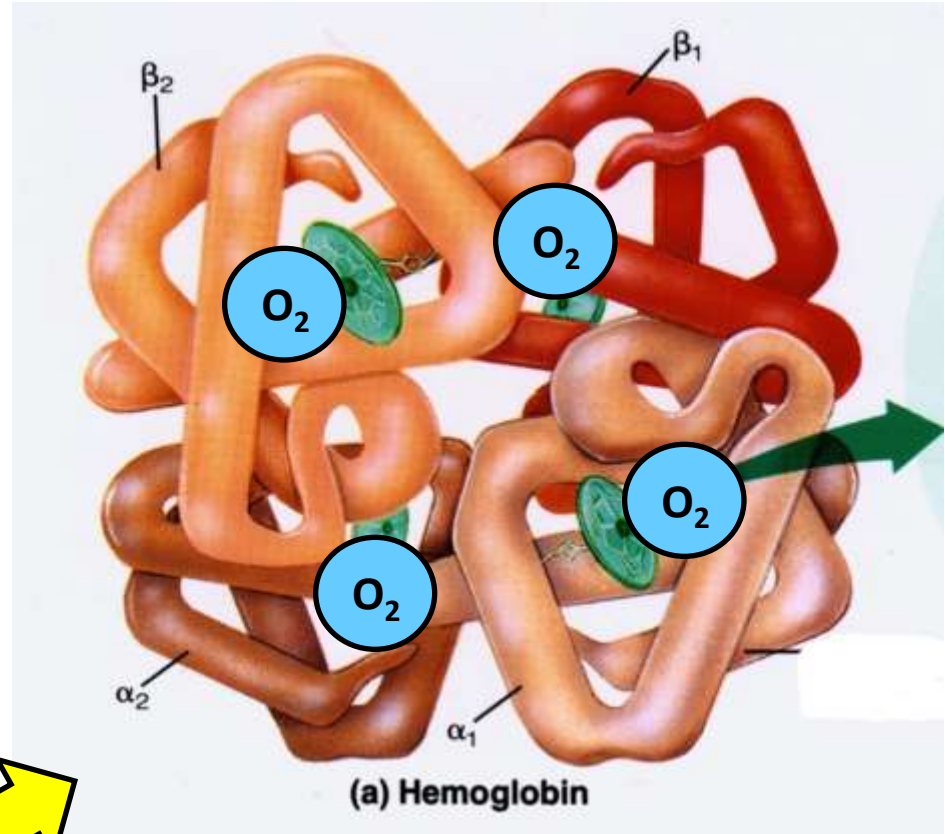
BP
600 mm Hg



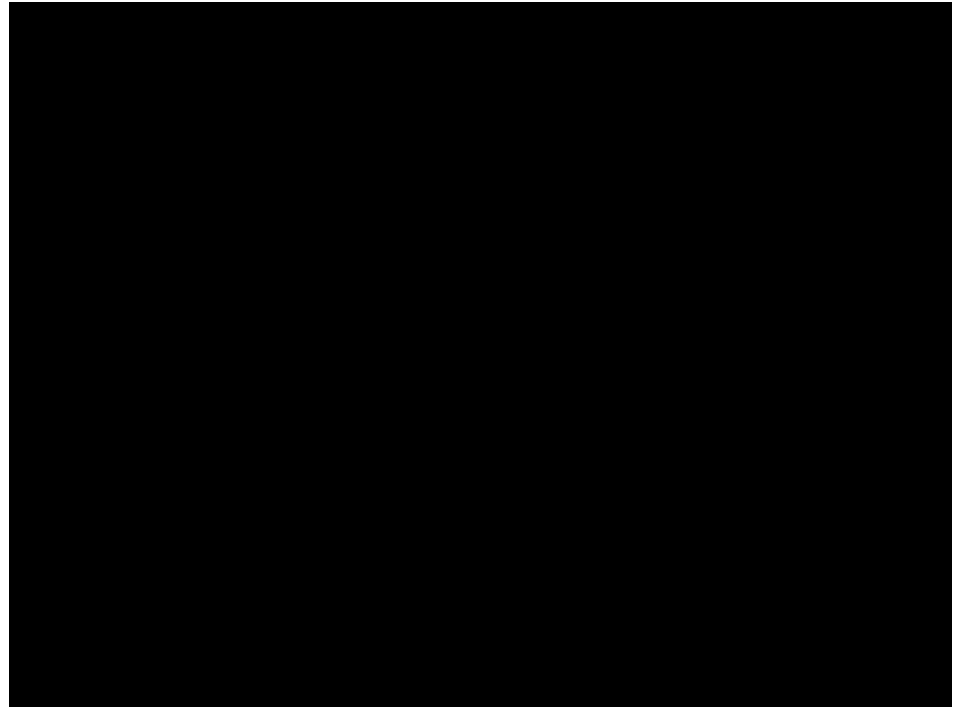
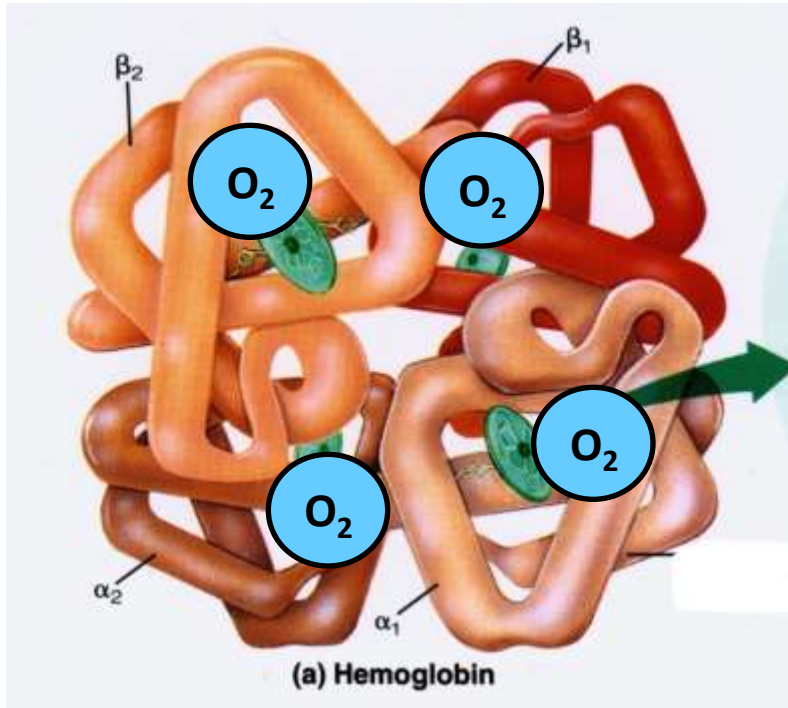
O_2
20.93%



$P_{iO_2} \sim 126$ mm Hg

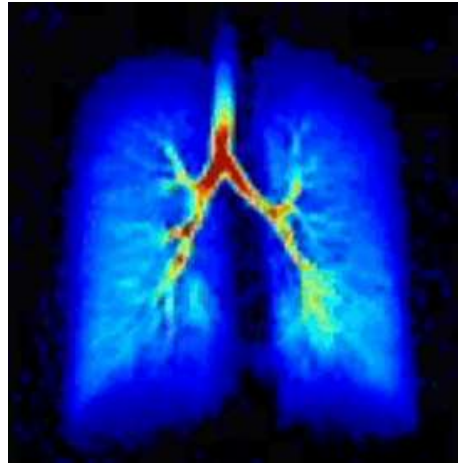
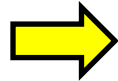


HYPOXIC VENTILATORY RESPONSE

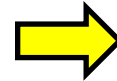




Altitude Training



Hypoxic Ventilatory Response (HVR)



VO₂ max

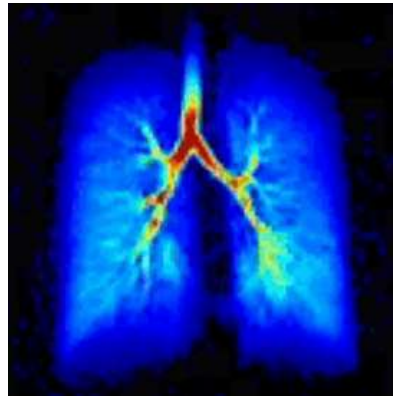


SL Performance

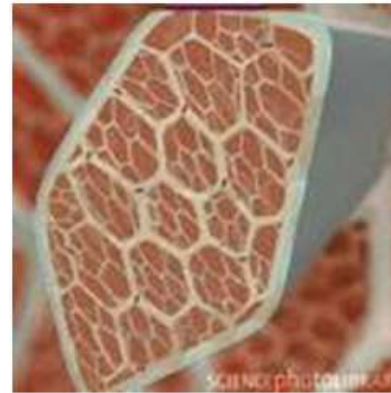
Physiological Benefits



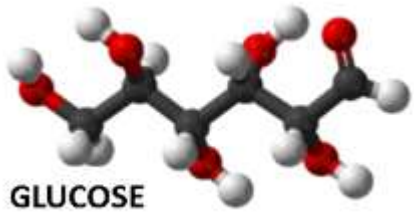
RBC



Hypoxic Ventilatory Response (HVR)



Skeletal mm. Buffering Capacity



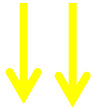
PFK

2 Pyruvic acid



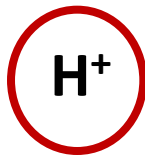
NO O₂

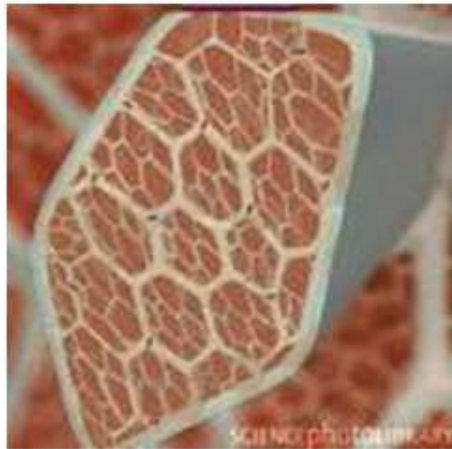
2 Lactic acid + 2 ATP



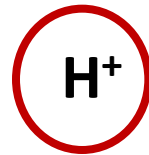
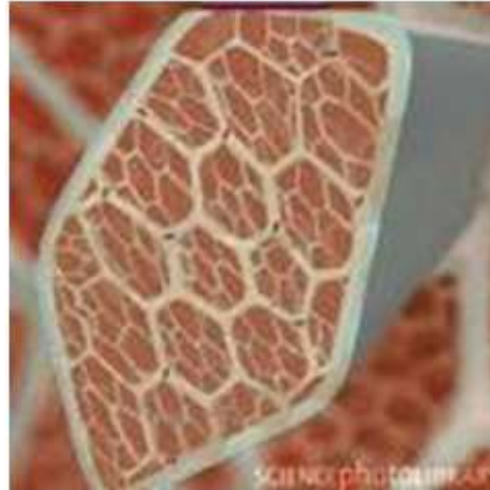
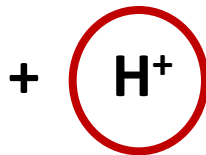
LACTATE

+





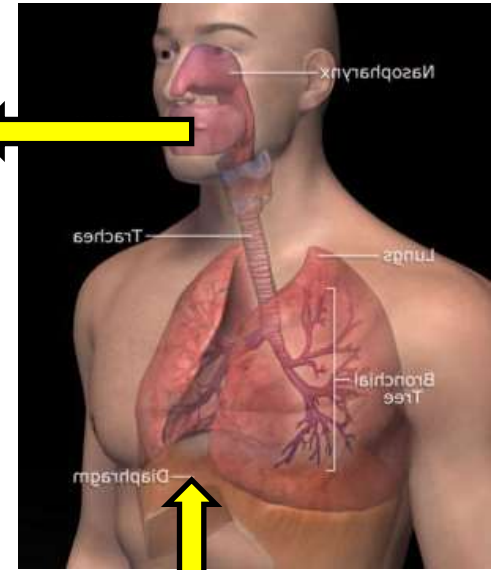
$C_3H_5O_8^-$
LACTATE



+

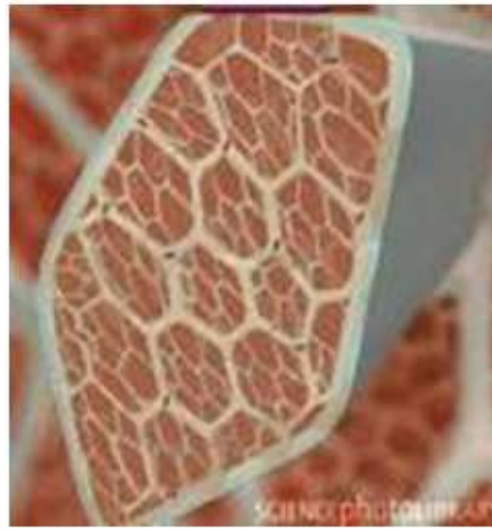
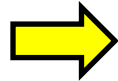


BICARBONATE
BUFFER

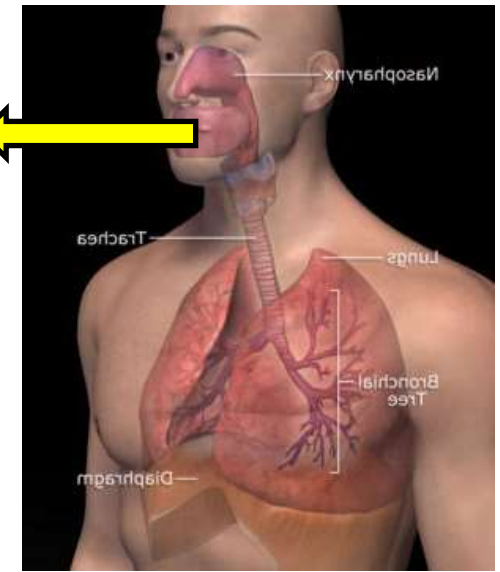
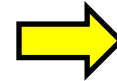




Altitude Training



**Skeletal mm.
Buffering Capacity ↑**

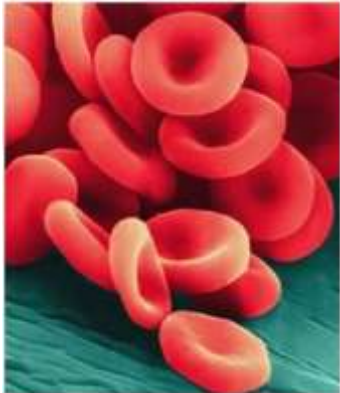


H⁺ Removal

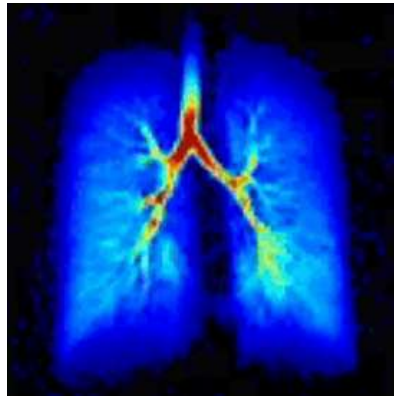


SL Performance

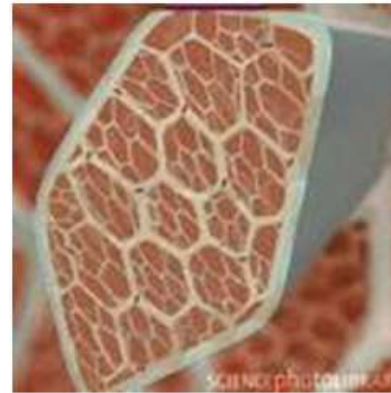
Physiological Benefits



RBC



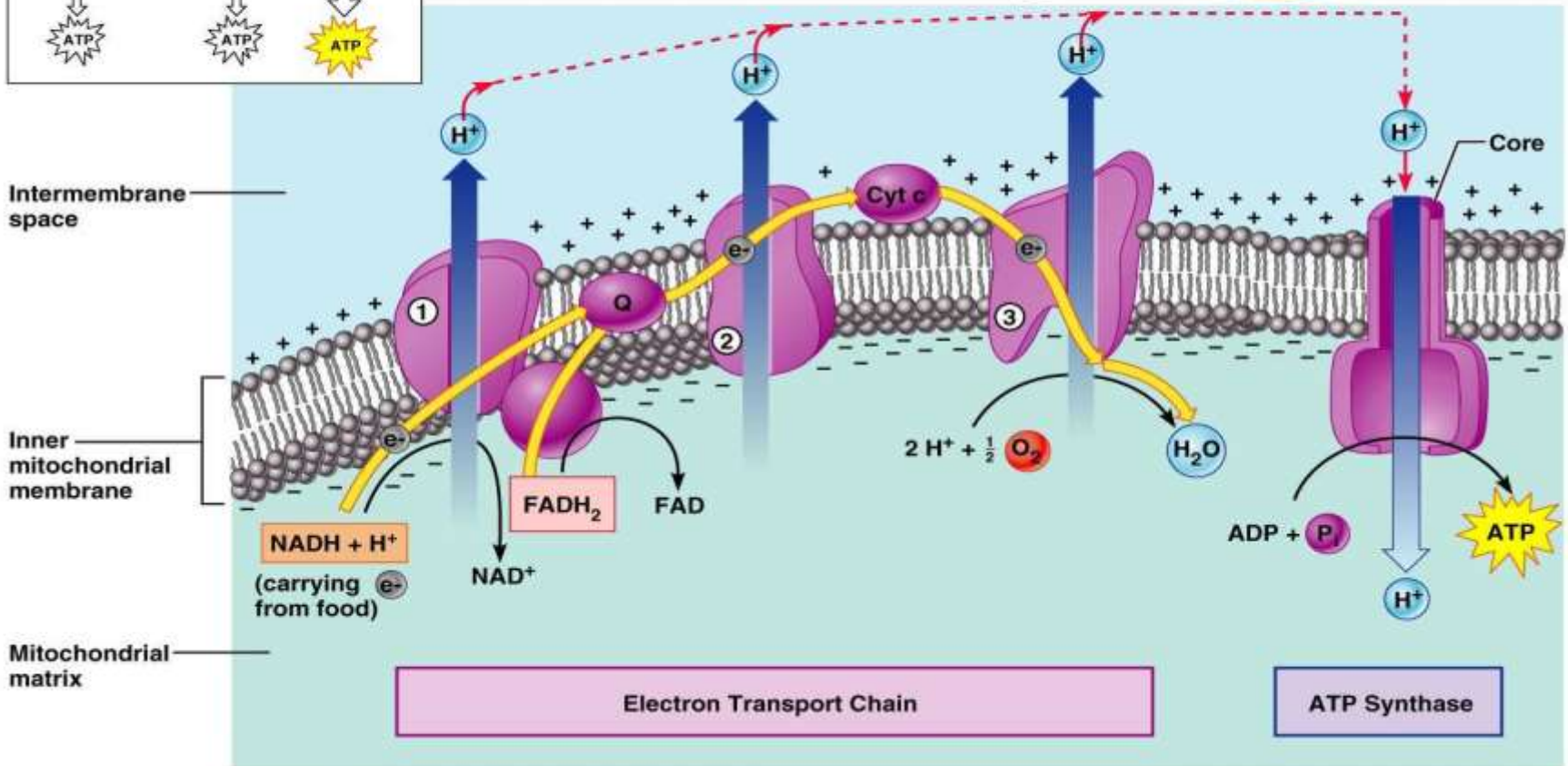
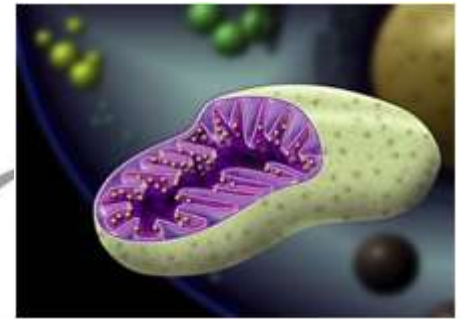
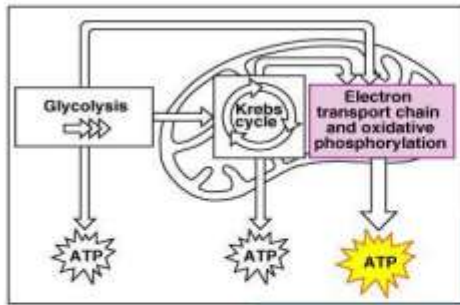
Hypoxic Ventilatory Response (HVR)



Skeletal mm. Buffering Capacity

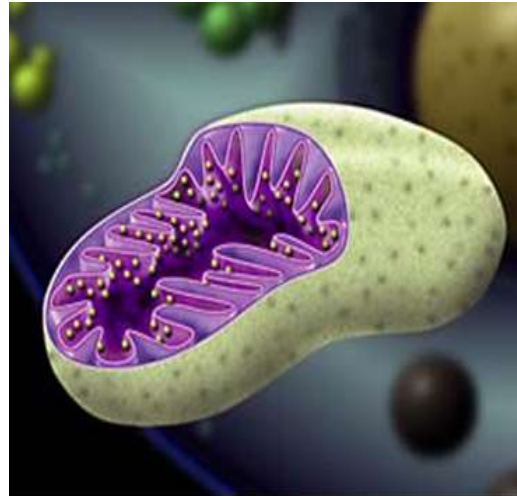
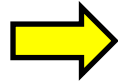


Exercise Economy

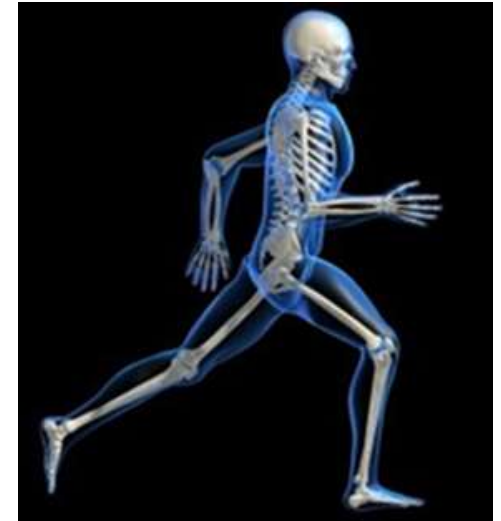
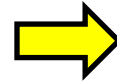




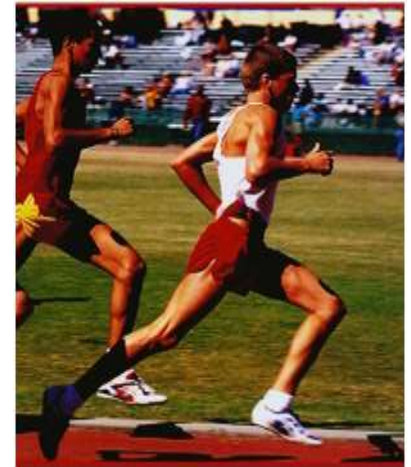
Altitude Training



Mitochondrial Efficiency



Exercise Economy



SL Performance

HYPOXIA

NORMOXIA

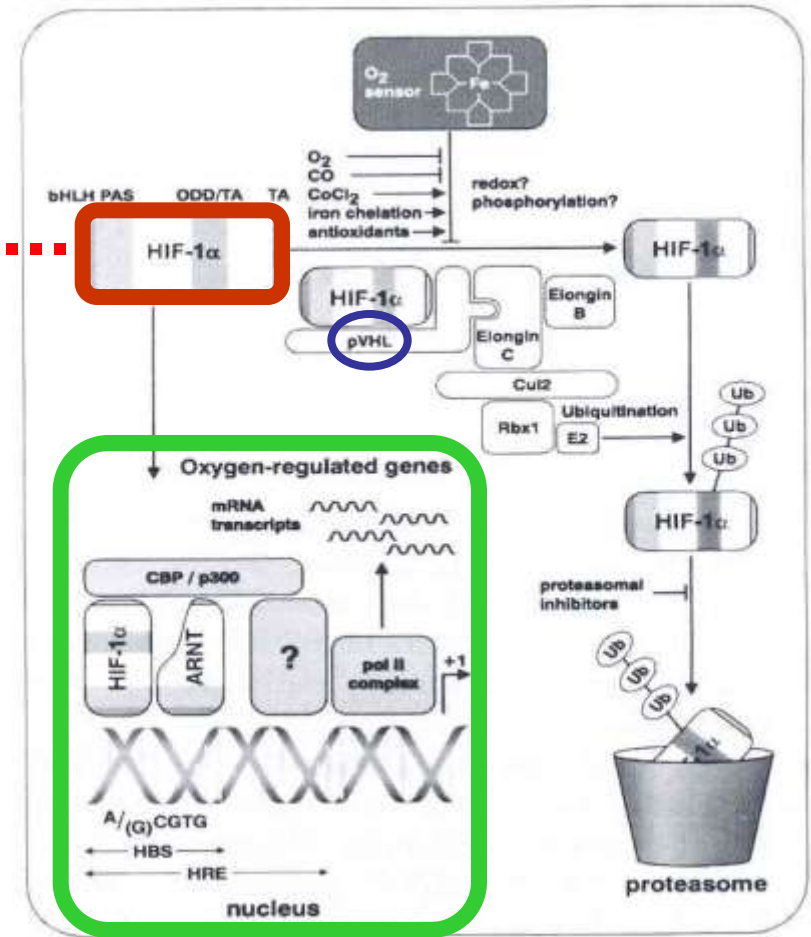


FIG. 5. Schematic representation of the regulation of HIF-1 complex-mediated gene transcription by hypoxia (Wenger et al., 1999)

Use of Altitude/Hypoxic Training by Olympic Athletes

■ Introduction

■ Altitude Training Models

- LH + TH
- LH + TL
- LL + TH

■ Practical Recommendations

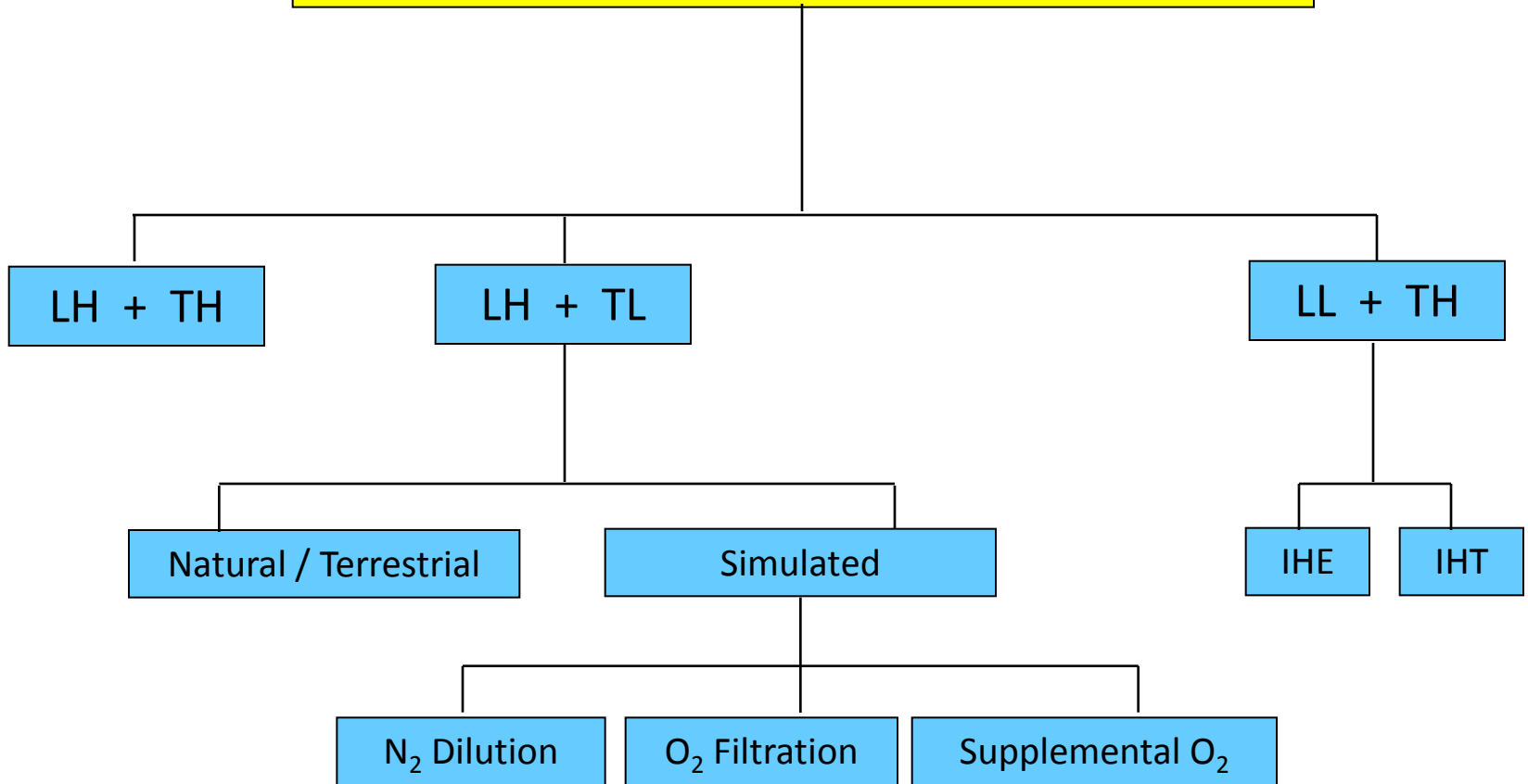
- Preparation Before the Altitude Training Camp
- During the Altitude Training Camp
- Return to Sea Level After the Altitude Training Camp
- Annual Plan for Altitude Training

■ Physiological Benefits

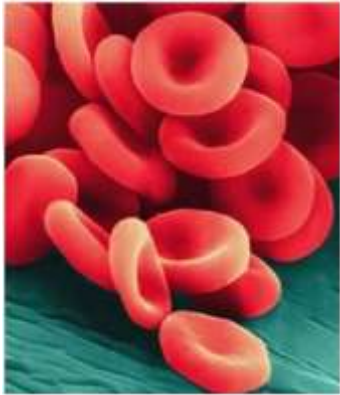
➔ ■ Summary & Resources



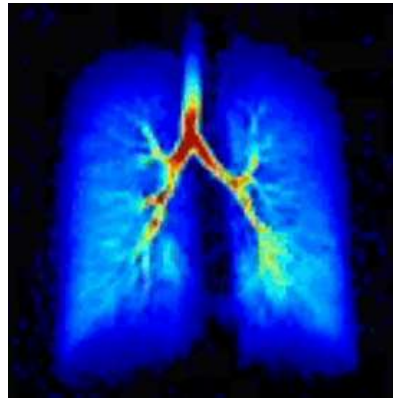
ALTITUDE / HYPOXIC TRAINING



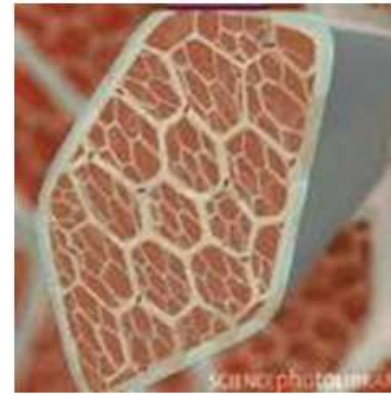
Physiological Benefits



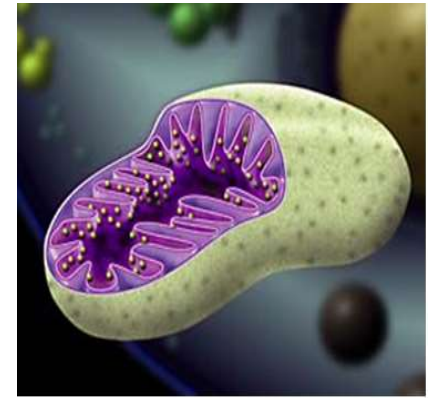
RBC



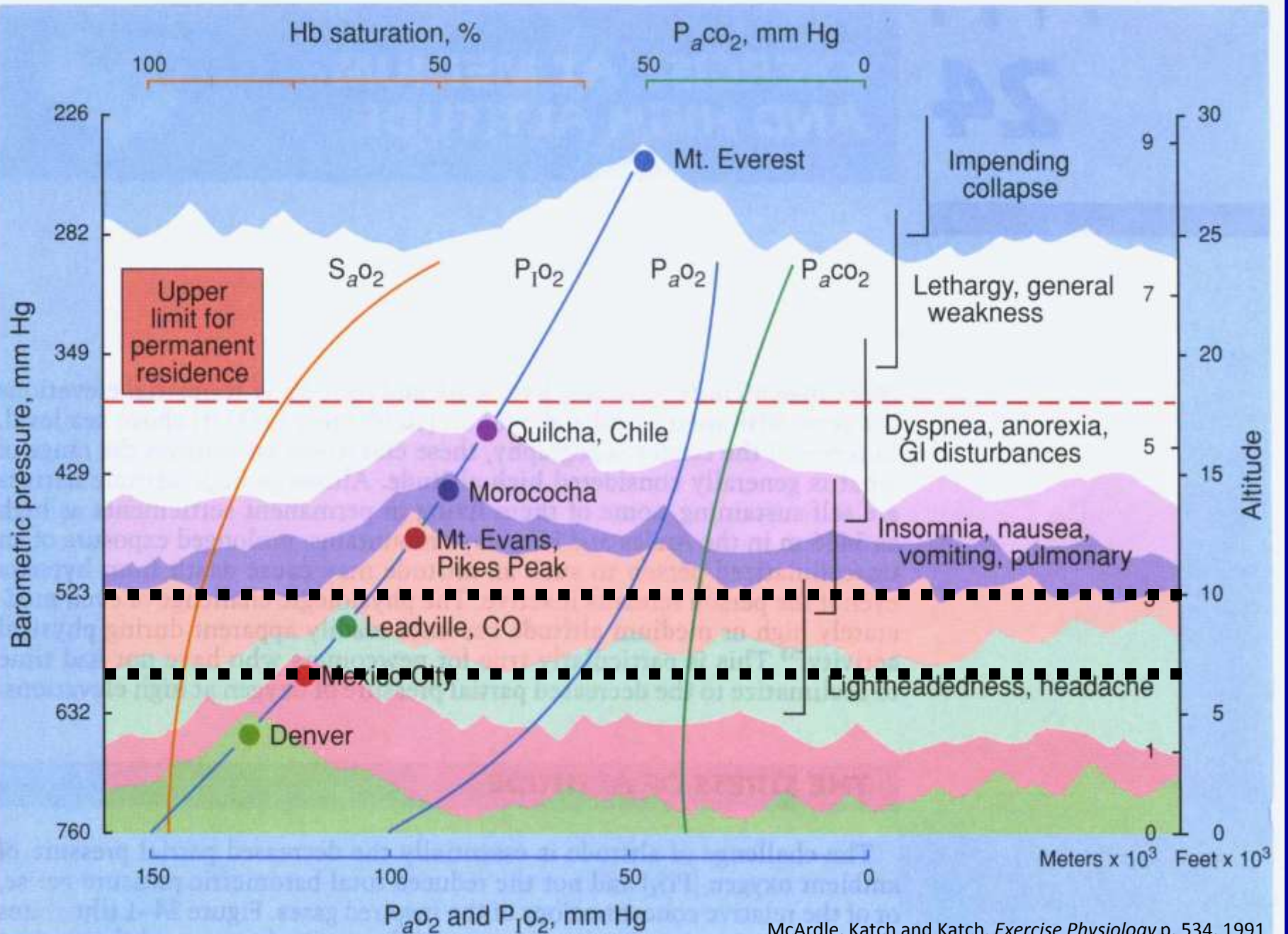
Hypoxic Ventilatory Response (HVR)



Skeletal mm. Buffering Capacity

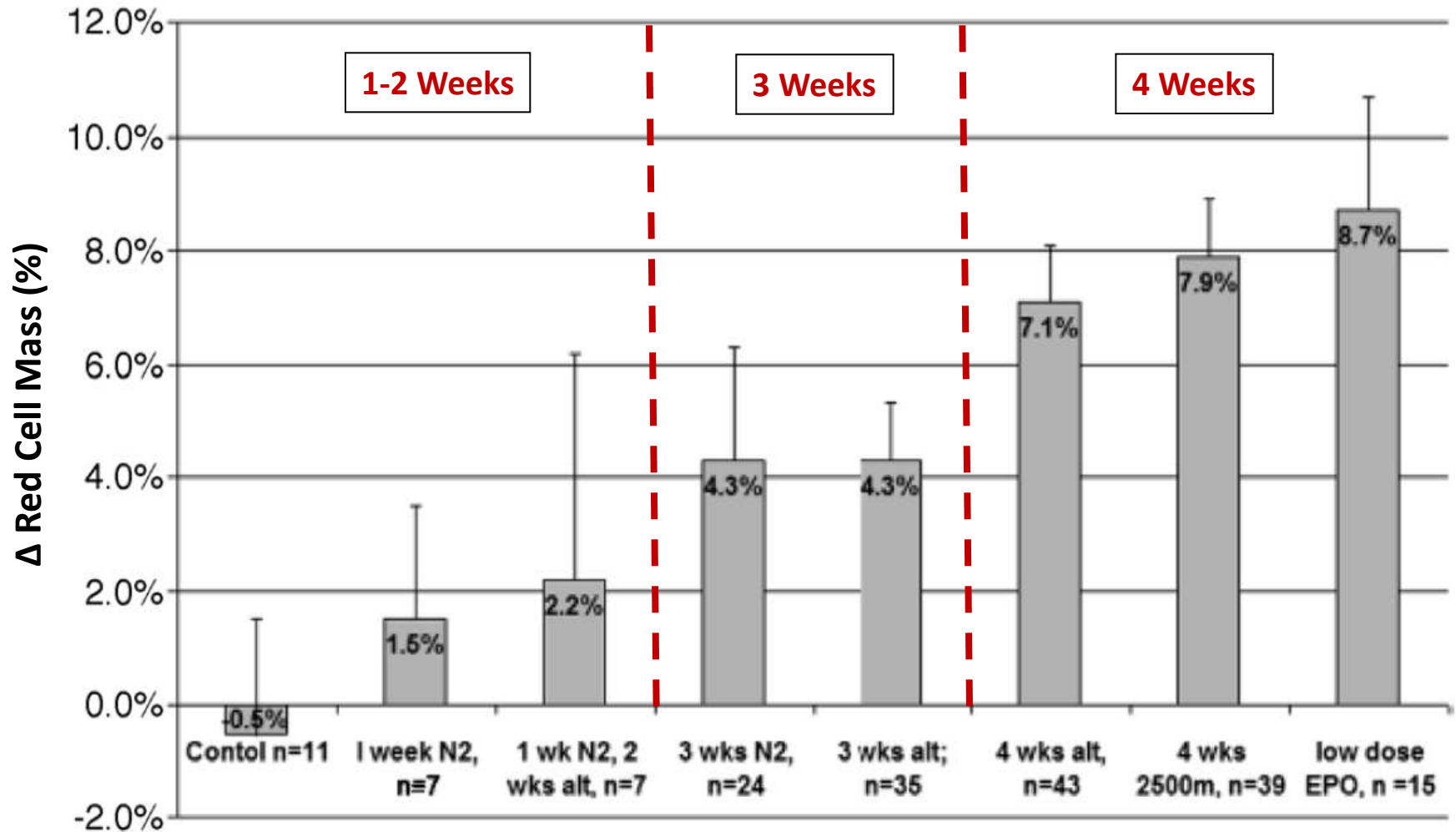


Mitochondrial Efficiency

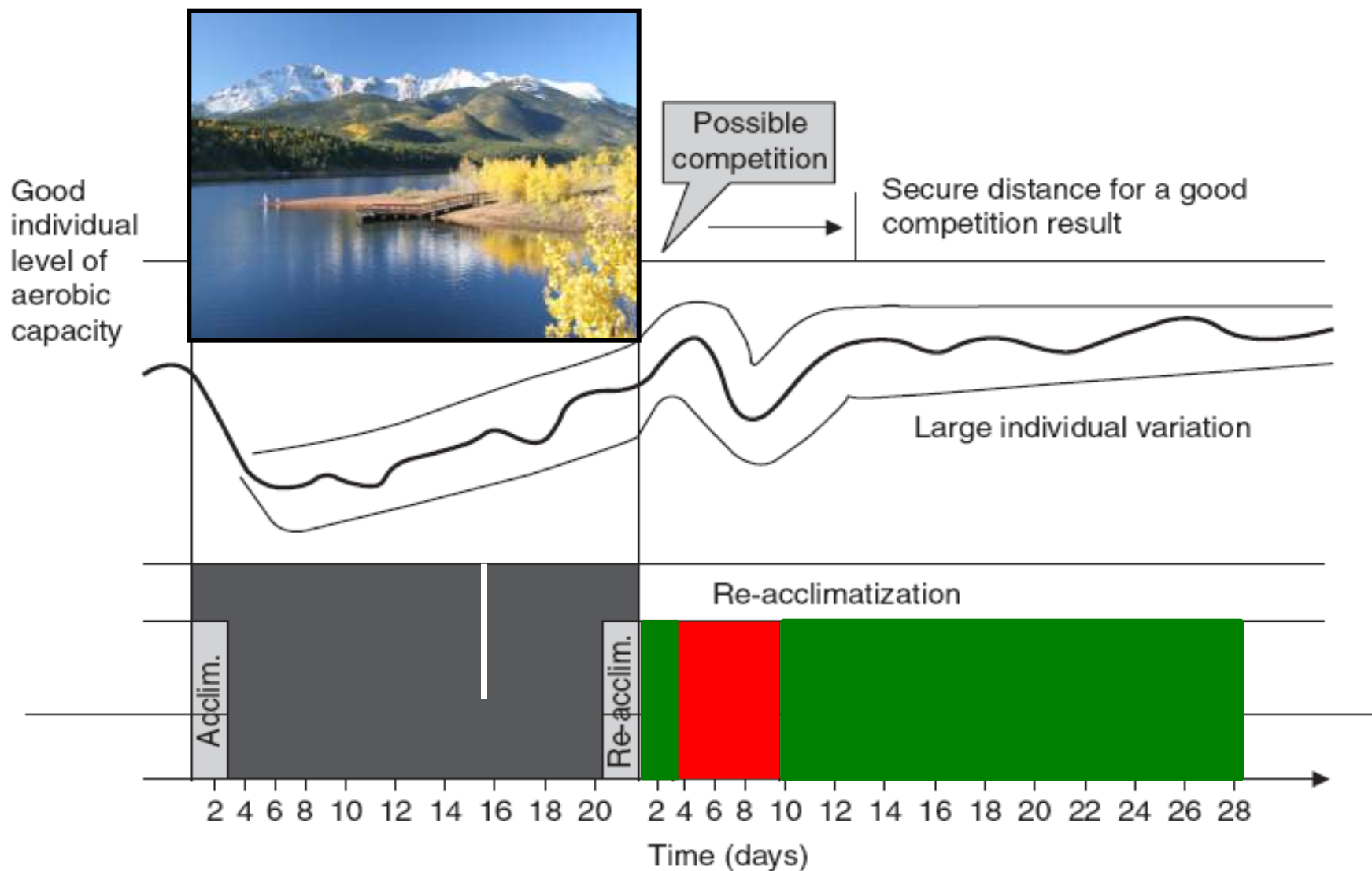


Effective "Dose"

Weeks



Return to Sea Level





Application of Altitude/Hypoxic Training by Elite Athletes

RANDALL L. WILBER

Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO

MSSE, 39: 1610-1624, 2007

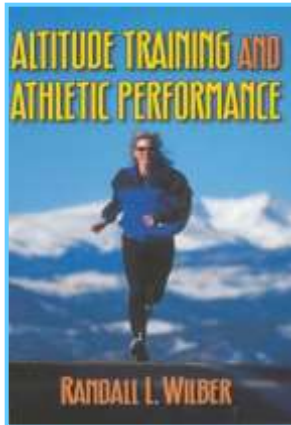


Effect of Hypoxic “Dose” on Physiological Responses and Sea-Level Performance

RANDALL L. WILBER¹, JAMES STRAY-GUNDERSEN², and BENJAMIN D. LEVINE³

¹*Athlete Performance Laboratory, United States Olympic Committee, Colorado Springs, CO;* ²*Department of Health, University of Utah, Salt Lake City, UT;* and ³*Institute for Exercise and Environmental Medicine, Presbyterian Hospital of Dallas, University of Texas Southwestern Medical Center, Dallas, TX*

MSSE, 39: 1590-1599, 2007



Altitude Training and Athletic Performance

www.humankinetics.com



Gracias!

RANDALL L. WILBER, Ph.D., FACSM
Senior Sport Physiologist
USOC Athlete Performance Lab

United States Olympic Committee
1 Olympic Plaza
Colorado Springs, CO 80909

+1 719-866-4528 [office]

+1 719-632-9282 [fax]

randy.wilber@usoc.org
www.teamusa.org

