

Endurance Sports: In it for the long haul - Frankly Speaking EP 45

Transcript Details

This is a transcript of an episode from the podcast series "Frankly Speaking" accessible at Pri-Med.com. Additional media formats for this podcast are available by visiting http://www.pri-med.com/online-education/Podcast/endurance-sports-frankly-speaking-ep-45#sm.0003hik4s15f1e3apk71lyr6q3sxw

Dr. Frank Domino:

Phil is here today for his annual physical. He is 55 years old and has a history of hypertension that is well controlled. He's classified as overweight based upon his BMI and he wants some advice today as he's planning on competing in a triathlon next year. Phil has been sedentary for most of the last 25 years, but in his college days, he was an avid hockey player and athlete. Recently, he has done some running, swimming, and biking at a local gym and he feels he wants to train for this triathlon because it will help decrease his stress and remind him of the athlete he once was. Joining me today is Jill Terrien, Assistant Professor and Director of the Nurse Practitioner Programs at the University of Massachusetts Medical School, Graduate School of Nursing. Welcome to the show, Jill.

Jill Terrien:

Thank you, Frank.

Dr. Frank Domino:

So Phil sounds like an interesting guy. What can you tell us from the medical literature about triathlon training, especially in older adults?

Jill Terrien:

So what I found is a recent article that just came out that looked at basically a series of cases over



the last 30 years, and really they looked at participants in triathlons. And what they found is that, overall there were 135 related deaths and cardiac arrests; 90 of the 135 deaths actually occurred were 85% male gender, and they occurred mainly in the swim portion, which if you look at a typical triathlon, swim is usually done first. So I found that interesting especially when thinking about Phil. And the biggest risk was middle and older-aged men and first-time participants. So these are things that as primary care provider, when a patient comes in, and not being an endurance athlete yourself or a triathlon participant, they're asking for advice and you're hoping to help them stay safe. So, basically, these events are not without risk depending on who the patient is.

Dr. Frank Domino:

So it's interesting because you mentioned there were 135 deaths and that was out of nine million participants, so the death rate was fairly uncommon, but nonetheless, this is death from something that is probably preventable in people who have been exercising and working out a great deal. Why did you bring this paper forward? What's going on with this ultra endurance training and triathlon participation?

Jill Terrien:

Well, what they've seen from this data is that there is an uptick in people participating in all types of endurance activities. And the main thing here is that they're not without risk, and that when we look at the data from this actual case series, those deaths, you're right, it's not a high number, if you look at it in the incidents. What they could call out of it was that it was first-time participants, and also occurred in middle to older-aged men, so anybody basically over the age of 45 to 50, and it occurred at the beginning of the race, the swim portion. So I think what that does is it gives us as providers information to possibly counsel our patients, but it also tells people that are running various endurance activities that maybe they could increase their safety measures if they know this information upfront.

Dr. Frank Domino:

So that raises my next question: What should we be telling Phil? What can he do in the



preparation for this event to lower his risk for an adverse outcome?

Jill Terrien:

So, overall, I think that Phil as your patient, you know his profile, so you wanna look at his personal risk factors. First of all, it's great that he has an interest in wanting to increase his activity 'cause overall, if you're looking at decreasing stress at work which he has stated, and also if he's going to be doing these kinds of activities on a regular basis, his BMI should be going down; all good for his risk profile. So I think probably bringing to him an awareness of what we know in the literature right now and asking what has he been doing, how long has this been going on, and has he had any adverse effects from it. If you think about going from a sedentary lifestyle to something like an endurance sport, it can have effects on your musculoskeletal system. You wanna make sure that his nutrition and hydration is proper. He does have a history of hypertension, it is well controlled, but again, monitoring him. 'Cause if he does decrease his BMI overall, he might have a chance of coming off of his blood pressure medicine so that his blood pressure doesn't go too low.

So those are the kinds of things I would think about. I'd wanna know how he is training, and then, besides his personal risk, you wanna know about his family history. Are there any sudden deaths from cardiac events? What is his risk profile for his family history?

Dr. Frank Domino:

Okay. Well, I do think this study sheds a great deal of light on the risk of death. Any thoughts about both physical injury and other physiologic damage? I can think of a variety of patients who go into this training and develop shin splints, stress fractures, even bloody diarrhea. Any thoughts on what we should be counseling our patients about how to prevent those things and what we can do if they do happen?

Jill Terrien:

Sure. Well, first of all, it's increasing over time. It's listening to their bodies, and it's getting the proper nutrition. Now, I think that in Phil's case, he is 55, so warm up and cool down is very, very





important. Warm the muscles up and not to over exert. So for instance, let's just say Phil has been going on a running program and now today as part of his training, he's gone... He doesn't like the running part. Maybe he says to you, "Running is my most unfavorite part of this event I'm planning for, so I kinda skimp on my running. But today on my plan, I have to run two and a half hours."

Dr. Frank Domino:

Wow.

Jill Terrien:

And if he runs for two and a half hours, how is he doing it? So I would say, again, you have to increase over time and go by a plan. Some of these endurance sports, they have trainers. You could look them up and do your own research on them. That's nothing I could advise him on other than to say you need the proper nutrition and proper hydration to make sure that you can have optimal performance and decrease your risk of injury. So it's all about balance and doing this over time.

Dr. Frank Domino:

I really appreciate what you're bringing forward here today, Jill. I do worry a great deal about these folks. I worry about how well they ultimately take care of their body and their mind. You mentioned nutrition. I know a number of my patients have taken a variety of over-the-counter dietary supplements in the hope that it's going to help them be stronger, faster. They also have a habit of possibly overusing or misusing non-steroidal anti-inflammatory agents, both when they ache and even beforehand to try to prevent some of the discomfort. So I strongly agree appropriate nutrition, appropriate training, working with someone who knows what they're doing and sticking to a plan makes good sense. Any thoughts about sleep or other things?

Jill Terrien:

Oh absolutely. I think about sleep, restful sleep, as important to recovery in muscle and bone health, right? So I do hear what you're saying about the non-steroidal anti-inflammatories. You

TRANSCRIPT



know, less is better. And if Phil is going to have a lot of pain, something's wrong, he needs to back off. And so that's where I really wanna stress that people need to listen to their body. They are adults, they can make their own choices, but not being an endurance athlete myself, I would have to get a little bit of knowledge. I might even send Phil to a nutritionist that may specialize in people that do participate in endurance sports. I worry about protein intake and of course hydration, so vitally important. So I know that these are rigorous on athletes' bodies. But I wanna also be positive with Phil and that this is really great that he wants to basically reclaim what he had earlier in life, but when you're three decades older, there is a reality check, right?

Dr. Frank Domino:

Yeah.

Jill Terrien:

And I hate to be the bearer of bad news, but I also have to be upfront with him that this is a risk.

Dr. Frank Domino:

Right. Well, thank you, Jill. This is terrific information.

Jill Terrien:

Thank you, Frank.

Dr. Frank Domino:

Practice pointer: With gaining popularity, triathlons and other ultra endurance sports are becoming more common in our practice. While the risk of death is small in these athletes, care should be made to discuss with them proper nutrition, hydration status, and possibly working with someone who has expertise in training for these type of events. Join us next time when we'll be discussing the role of azithromycin as a preventative agent in patients with persistent asthma.