

## **Metabolic Conditioning: Field Tests to Determine a Training Velocity**

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*Published in:*  
Strength and Conditioning Journal

*Publication date:*  
2016

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[10.1519/SSC.0000000000000188](https://doi.org/10.1519/SSC.0000000000000188)

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*Citation for published version (APA):*

Clarke, R., Dobson, A., & Hughes, J. (2016). Metabolic Conditioning: Field Tests to Determine a Training Velocity. *Strength and Conditioning Journal*, 38(1), 38-47. <https://doi.org/10.1519/SSC.0000000000000188>

# **METABOLIC CONDITIONING: FIELD TESTS TO DETERMINE A TRAINING VELOCITY**

## **ABSTRACT**

To effectively develop physical parameters, training intensities should be individualized to suit an athlete's current fitness level, for example percentage of 1 repetition maximum in strength and power development. In regards to anaerobic or aerobic conditioning, a velocity prescription can be both accurate and effective in individualizing energy system development. However, there is a sparsity of research available comparing the range of tests capable of determining an appropriate velocity. The following review discusses the optimum way to determine an individual's desired training velocity through field based testing.

## INTRODUCTION

Athletes require a range of highly developed physical abilities such as strength, power, aerobic and anaerobic conditioning (28, 33). For optimal development of these parameters, training intensities should be individualized to suit each athlete's ability. Generalized training prescription where an individual's working intensity is too low, or too high, may cause no adaptation or lead to over-training (38). It is reported that the use of a training velocity can be both accurate and highly effective during aerobic and anaerobic fitness development (13, 16). While information regarding the implementation of a training velocity is widely available (6, 9, 16, 18, 27, 28, 54), there is a sparsity of research available comparing the range of tests capable of determining an appropriate velocity.

Accurate assessment of an individual's aerobic or anaerobic function may be optimal during laboratory conditions. Procedures will often produce a measure that relates to a specific physiological state; for example, velocity at lactate or ventilatory thresholds and velocity at  $\dot{V}O_2\text{max}$  ( $v\dot{V}O_2\text{max}$ ) (11).  $v\dot{V}O_2\text{max}$  is defined as the lowest running velocity that elicits maximal oxygen uptake during a continuous exercise test (12). By considering the test outcome as a velocity, rather than a physiological marker such as  $\dot{V}O_2\text{max}$ , future training can include individualized prescription and within session monitoring. For example, a session prescribed at an intensity of 100%  $\dot{V}O_2\text{max}$  is not easily applied due to the difficulties of measuring the desired work; however, a session prescribed at 100%  $v\dot{V}O_2\text{max}$  has much easier application due to the distance and time prescription. For example, an interval session may be designed with a training intensity of 120%  $v\dot{V}O_2\text{max}$  for 15 seconds work and 15 seconds passive rest, repeated for 5 minutes and 2 sets. While the consideration of lactate thresholds or directly measured  $\dot{V}O_2\text{max}$  may be beneficial, the majority of practitioners may not have access to the facilities, budget, or time required for such testing. However, single procedure field-based tests are available for indirect

determination of a range of physiological states. Due to the ranges in physiological demand during field tests, it is more appropriate to term the velocities produced as maximum running speeds (MRS) rather than  $\dot{V}O_{2max}$ . When comparing tests and their recorded MRS, the protocol utilized determines the overall physiological stress and subsequently the measured physiological state. For example, intermittent tests are likely to have the greatest anaerobic energy contribution and be suited to supramaximal (above  $\dot{V}O_{2max}$ ) training sessions prescription. In comparison, continuous versions may be more aerobic dominant and suited to submaximal (at or below  $\dot{V}O_{2max}$ ) training prescription. The following sections will outline protocols and validity considerations for a range of tests capable of producing a MRS for either submaximal or supramaximal training prescription. Both of these styles of training may be implemented in a range of sports dependent on the goals of a training program and the athlete's strengths and weakness. Traditionally the selection of a field test is based upon the ability to match the physiological stress during competition, however, not all available tests are capable of producing a MRS. Therefore, the following tests will be discussed in relation to their ability to produce a MRS capable of influencing future programming.

## **DETERMINING A RUNNING SPEED FOR SUBMAXIMAL TRAINING**

### **Time/Distance Trials**

The 12-min Cooper Run (23) is a continuous field test where performance is significantly correlated to a treadmill based  $\dot{V}O_{2max}$  (46). The Cooper Run utilizes a linear running protocol where the athlete must 'self-pace' their intensity in order to cover the greatest possible distance (23). A time trial over 5km is also significantly correlated to treadmill based  $\dot{V}O_{2max}$  (50) which supports the use of either a 'time' or 'distance' based protocol. The required duration of a time trial depends on the time

required to elicit maximal aerobic contribution with reduced anaerobic participation. It has been reported that the time required to maximally stress the aerobic system and test  $\dot{V}O_2\text{max}$  is 4m 58s (22), with the average time to exhaustion at  $\dot{V}O_2\text{max}$  ranging from 4-8 min (12, 34). Furthermore, significant correlations are reported between  $\dot{V}O_2\text{max}$ , the average velocity during a 5-min time trial ( $v5\text{TT}$ ) (10) and a 1,500m trial (40). Therefore, the use of a traditional 12-minute Cooper Run may be unnecessary as the same physiological state can be measured with more time efficiency.

While various forms of time trial or distance based tests may produce valid and reliable estimates of  $\dot{V}O_2\text{max}$ , the testing style may require a developed pacing strategy (developed through familiarization) for optimum performance (51). The time trial protocol however, does benefit from being able to be performed with many exercise ergometers where distance can be easily recorded or set. The continuous linear determination of a MRS may be best suited to training styles of a similar nature and subsequently sports such track events and rowing. However, this training style may also be suitable for individuals with low training ages and low aerobic fitness levels. Ease of application to ergometers also provides a wide range of possibilities for contraindicated athletes, which may provide useful for contact sports with high injury prevalence.

### **The University of Montreal Track Test**

The University of Montreal Track Test (UMTT) is a reliable and valid field test used to determine  $\dot{V}O_2\text{max}$  (41). The velocity achieved in the UMTT ( $v\text{UMTT}$ ) provides an estimated  $\dot{V}O_2\text{max}$  as accurately as a laboratory based treadmill measurement (40). The high level of accuracy in determining  $\dot{V}O_2\text{max}$  may be aided by the pre-recorded incremental velocity, removing variation caused by self-pacing. However, although

highly accurate, it is also reported that  $\dot{V}O_2\text{max}$  directly measured in a laboratory is likely to be slightly lower (1.2%;  $0.07\text{m}\cdot\text{s}^{-1}$ ) than  $v\text{UMTT}$  (12, 40). It is possible the testing protocols (table 2) may cause this discrepancy, as each stage during the UMTT lasts 2-minutes (8, 29) in comparison, to treadmill based  $\dot{V}O_2\text{max}$  protocols, where stages may last up to 4 minutes and include inclination (30). The UMTT protocol may also allow a slight increase in the contribution of the anaerobic energy system due to test completion and MRS being calculated once full exhaustion and drop out has occurred (41). The test has previously been used in sports such as soccer (29) although the test may be suitable for all sports reliant on aerobic endurance which may utilize a continuous linear training style.

### **The 20m Shuttle Run Test**

The 20m shuttle run test (20SRT) (43) is a continuous, incremental velocity shuttle test designed to predict  $\dot{V}O_2\text{max}$  (43). The 20SRT has repeatedly been utilized by sports such as squash (52) and soccer (3) as well as with recreationally active children and adults (42, 49). The initial protocol utilizing 2 min stages was (43) was adapted to utilize 1 min stages due to the time taken to reach  $\dot{V}O_2\text{max}$  (42). This protocol was subsequently re-validated to again predict laboratory measured  $\dot{V}O_2\text{max}$  in both children and adults (42, 49) while continuing to show reliability across multiple trials (3). Since the initial adaptation in protocol, it seems that this version has become more commonly utilized due to its selection in a range of studies (47, 49, 52).

During the 20SRT, MRS is determined from the final stage ( $v20\text{SRT}$ ), although variation may exist between individuals whom finish on the same stage as each stage contains multiple shuttles. However, it has been reported that validity did not

change when test performance was considered final velocity rather than total distance covered (46). The 20SRT often under predicts an individual's  $\dot{V}O_{2\max}$  (8), particularly in trained athletes. This may be due to the 20m shuttle demand resulting in an increasingly disturbed running rhythm at higher velocities, hindering full aerobic contribution. Shuttle speeds are lower compared to linear ones due to the time required decelerating and re-accelerating (2, 43). Due to the discrepancy found between shuttle and linear testing, the v20SRT must be converted for use with linear training styles using a previously developed regression equation (7). As this conversion would still act as an estimate, the 20m protocol may not be suited to athletes with high fitness levels and it may be concluded this test is a poor choice for session individualization regardless of sport.

Table 1: Test protocols for submaximal training prescription

Test	Style	Protocol	Starting Speed	Velocity Increments	Final Velocity Determination
Time Trial	Linear	Continuous Linear Running. As fast or as far as possible	Self-Paced		Average velocity of test: distance (m) / time (s)
UMTT (41)	Linear and Incremental	Markers are placed around a running track at 50m intervals  Pre-recorded beeps control participants speeds  The end of the test occurs when the individual is more than 5m behind a marker on two consecutive stages	8km·hr <sup>-1</sup>	1km·hr <sup>-1</sup> every 2 minutes.	Velocity of the last completed stage
20SRT (43)	Shuttle-based and Incremental	Participants complete a 20m shuttle  Speeds controlled by a pre-recorded beep  The end of the test is concluded when a subject is unable to match the pace set by the recording and was more than 3m short of the shuttle line on three consecutive attempts	8km·hr <sup>-1</sup>	1km·hr <sup>-1</sup> every 2-minutes (43)  0.5km·hr <sup>-1</sup> every 1-minute (42)	Velocity of final stage reached

## DETERMINING A RUNNING SPEED FOR SUPRAMAXIMAL TRAINING

### Anaerobic Speed Reserve

The anaerobic speed reserve is considered to be the difference between an individual's maximal sprinting speed and their  $\dot{V}O_{2\max}$  (13, 20, 24). Having a higher anaerobic speed reserve decreases the relative intensity (percentage of anaerobic speed reserve) of exercise above  $\dot{V}O_{2\max}$ , lowering anaerobic energy contribution and peripheral fatigue (20, 53). For comparison and sporting examples, see athlete A vs athlete B in table 2. Supporting this, time to exhaustion at intensities above  $\dot{V}O_{2\max}$  are shown to have a stronger relationship with the anaerobic speed reserve than with  $\dot{V}O_{2\max}$  (13), as anaerobic speed reserve takes individual anaerobic work capacity into account.

However, during repeated performance at intensities close to maximal sprinting speed, a larger anaerobic speed reserve (if due to a lower  $\dot{V}O_{2\max}$ ) would be considered a negative aspect of performance. For example, it has been reported that an increased anaerobic speed reserve is positively correlated to fatigue index during repeated sprint cycling (45). Likely due to a lower  $\dot{V}O_{2\max}$  meaning aerobic energy production is unable to sufficiently support the recovery process between efforts causing a rapid onset of fatigue. For comparison and sporting examples, see athlete C vs athlete D in table 2. It has also been reported that anaerobic speed reserve alone is unable to predict improvements in mean repeated-sprint time (19), due to the independent change of  $\dot{V}O_{2\max}$  and maximal sprinting speed and their effect on the anaerobic speed reserve calculation. Therefore, although training individualized by  $\dot{V}O_{2\max}$  plus a percentage of anaerobic speed reserve may be useful for anaerobic fitness development; anaerobic speed reserve scores must not be compared between individuals or considered in relation to performance without  $\dot{V}O_{2\max}$  and maximal sprinting speed being analyzed independently.



Table 2: The relationship between the anaerobic speed reserve and performance[]

Athlete	$v\text{Vo}_2\text{max}$	Maximal Sprinting Speed	Anaerobic Speed Reserve	Exercise Intensity	Physiological Response	Example Sporting Application
A	$6\text{m}\cdot\text{s}^{-1}$	$11\text{m}\cdot\text{s}^{-1}$	$5\text{m}\cdot\text{s}^{-1}$	$8\text{m}\cdot\text{s}^{-1}$	Lower anaerobic energy contribution due to a higher anaerobic speed reserve compared to athlete B. Therefore greater time to exhaustion, less fatigue and improved performance.	Compared to athlete B, this profile may be of benefit during continuous exercise with intensities just above $v\text{Vo}_2\text{max}$ . For example, a scrum half in Rugby or a Centre Midfielder in Soccer.
B	$6\text{m}\cdot\text{s}^{-1}$	$9\text{m}\cdot\text{s}^{-1}$	$3\text{m}\cdot\text{s}^{-1}$	$8\text{m}\cdot\text{s}^{-1}$	Greater anaerobic energy contribution compared to athlete A. Therefore faster time to exhaustion, greater fatigue and lower levels of performance.	
C	$5\text{m}\cdot\text{s}^{-1}$	$10\text{m}\cdot\text{s}^{-1}$	$5\text{m}\cdot\text{s}^{-1}$	$9\text{m}\cdot\text{s}^{-1}$	Lower anaerobic energy contribution due to a smaller anaerobic speed reserve compared to athlete D. Therefore greater time to exhaustion, less fatigue and improved performance.	Compared to athlete D, this profile may be of greater benefit during maximal exercise. For example, a winger in Rugby or Soccer.
D	$4\text{m}\cdot\text{s}^{-1}$	$10\text{m}\cdot\text{s}^{-1}$	$6\text{m}\cdot\text{s}^{-1}$	$9\text{m}\cdot\text{s}^{-1}$	Greater anaerobic energy contribution compared to athlete C. Therefore faster time to exhaustion, greater fatigue and lower levels of performance.	

## Yo-Yo Intermittent Recovery Tests

The Yo-Yo Intermittent Recovery tests (YYIRT) have been designed to evaluate team sport player's ability to repeatedly perform and recover between intermittent exercise (4) (protocol available in table 3). The test is designed with a 'Level 1' (YYIRT1) and a 'Level 2' (YYIRT2) suitable for individuals with lower and higher fitness levels respectively (4). Two versions of a Yo-Yo Intermittent Endurance test are also available; however, due to a scarcity of research these testing variations have not been further discussed.

The YYIRT1 has been shown to be repeatable across multiple trials (36), with the

total distance covered significantly correlated to  $\dot{V}O_2\text{max}$  (29, 36, 48). However, large inter-individual differences are also observed, for example, participants with very similar  $\dot{V}O_2\text{max}$  showed a difference in completed distance of 640m (36). Therefore the estimation of  $\dot{V}O_2\text{max}$  from YYIRT1 performance lacks accuracy. This variations in performance is likely due to the contribution of the anaerobic energy system and the intra-set recovery period during the shuttle-based protocol (5). Supporting this, blood lactate ( $\text{La}^+$ ) accumulation has been found to be higher during YYIRT1 than during a treadmill based  $\dot{V}O_2\text{max}$  (36). Subsequently, the physiological state reached is considered supramaximal of  $\dot{V}O_2\text{max}$ . Irrespective of the inclusion of a 10 sec rest period, the protocol still suffers from an increasingly disturbed running rhythm at higher velocities associated with a 20m shuttle distance (32). This is reported to result in varied test performances between individuals with different fitness levels (36). The YYIRT2 remains repeatable (31, 37), but utilizes a higher starting speed to allow for a shorter test completion time and greater suitability for highly trained athletes (4). This results in an increased contribution of the anaerobic energy system (5), supported by the tests lower relationship with  $\dot{V}O_2\text{max}$  (31, 37).

Establishing a MRS for these tests has been completed by utilizing the speed reached on the final completed stage (21) or a previously developed equation (39) utilized alongside the YYIRT1 (29). The use of velocity at the final stage may suffer from the same issues discussed within the 20SRT where athletes reach the same stage but complete a different number of shuttles. In contrast, the mentioned equation may provide a near perfect relationship between distance covered and MRS as completed shuttles is considered (39). While the use of the Yo-Yo based tests to determine a MRS may be questionable, the tests are commonly utilized during intermittent team sports such as football due to its greater sensitivity in detecting changes in performance compared to  $\dot{V}O_2\text{max}$  (35).

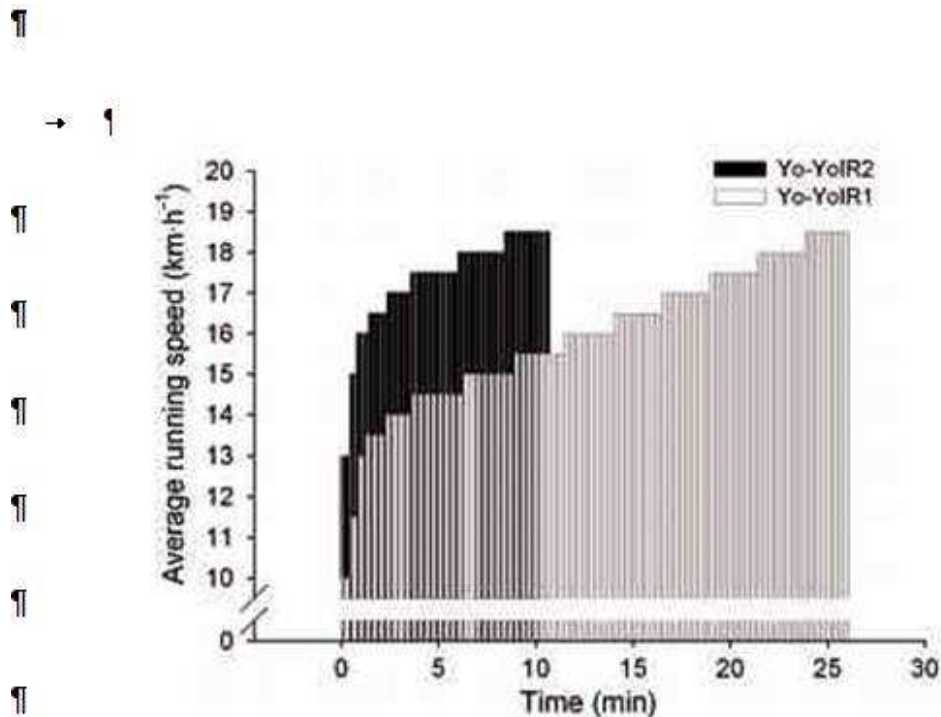


Figure 1: Schematic representation of velocity progressions for the YYIRT Level 1 and Level 2 (48).

### The 30-15 Intermittent Fitness Test

The 30-15 intermittent fitness test (30-15IFT) was designed (15, 16) in order to provide reliable estimations of sports specific fitness for athletes involved with multi-directional, intermittent team sports such as Soccer, Rugby and Handball (14). The final velocity reached (vIFT) is significantly correlated to  $\dot{V}O_2\max$ , counter-movement jump height and 10m sprint speed (16). The intermittent, time based protocol was designed with 30s work as this allows enough time for cardiorespiratory kinetics to adapt to the exercise intensity (25) and sufficient oxygen consumption to occur (44). Furthermore, 15s recovery may allow for sufficient but incomplete restoration of energy substrates such as phosphocreatine (26). The 40m shuttle distance is thought to aid in reducing blood lactate levels compared to the more common 20m shuttles (36). Protocol characteristics such as these are all thought to help contribute to a supramaximal MRS (16).

Due to the influence of change of direction ability on shuttle speeds, a value of 0.7 sec is subtracted from the running period for each change of direction (16). For example, a speed of  $11.5 \text{ km} \cdot \text{hr}^{-1}$  would mean linearly covering 96m in 30 sec, although when utilizing a 40 m shuttle requiring 2 x direction changes ( $2 \times 0.7 \text{ sec}$ ), running distances is reduced to 91.6 m ( $11.5 \text{ km} \cdot \text{hr}^{-1}$  in 28.6 sec) (16). This conversion helps the 30-15IFT provide a valid and reliable measure of multidirectional sprint performance (16). The provided vIFT also enables players with different physiological profiles to achieve a similar level of cardiorespiratory demand during training (16). Making the test highly suitable for individualizing supramaximal conditioning in multidirectional intermittent sports such as Soccer, Basketball and Rugby (16).

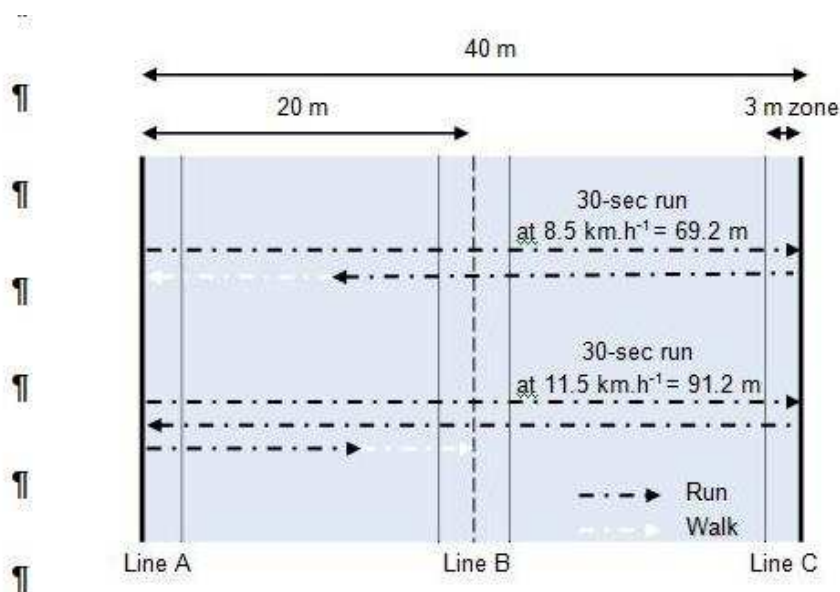


Figure 2: A testing area prepared for the 30-15IFT with two example shuttle stages (16).

Table 3: Test protocols for supramaximal training prescription¶

Test <sup>α</sup>	Protocol <sup>α</sup>	Starting Speed <sup>α</sup>	Velocity Increments <sup>α</sup>	Shuttle Distance <sup>α</sup>	Recovery Time <sup>α</sup>	Final Velocity Determination <sup>α</sup>
YYIRTL1¶ (5) <sup>α</sup>	Participants complete 2 x 20m shuttles followed by 2 x 5m active rest during allocated recovery time.¶  Pre-recorded tape required <sup>α</sup>	10km·hr <sup>-1</sup> <sup>α</sup>	See figure 1.¶  <sup>α</sup>	20m <sup>α</sup>	10s <sup>α</sup>	Either the velocity reached at the final completed stage or through use of equation 1. <sup>α</sup>
YYIRTL2-¶ (5) <sup>α</sup>		13km·hr <sup>-1</sup> <sup>α</sup>				
30-15IFT- (16)¶ <sup>α</sup>	30s shuttle within a 40m area (with a midline at 20m) Each line has a 3m zone (either side of the midline) See figure 2.¶  Shuttles followed by a 15s active rest period when the participants walk in a forward direction to the nearest line.¶  A pre-recorded tape is needed to signify the time required to reach each line followed by a beep representing the end of a 30s stage. <sup>α</sup>	8km·hr <sup>-1</sup> <sup>α</sup>	Increasing by 0.5km·hr <sup>-1</sup> after each 45 second stage <sup>α</sup>	40m <sup>α</sup>	15s <sup>α</sup>	V <sub>FT</sub> is established when the individual is unable to reach the 3m zone of the correct line after 3 consecutive shuttles <sup>α</sup>

Table 4: Test reliability and reported relationship with  $v\dot{V}O_2\text{max}/\dot{V}O_2\text{max}$

Test	Relationship with $v\dot{V}O_2\text{max}/\dot{V}O_2\text{max}$	Reliability	Participants
Time Trial	5min Time Trial ( $r = 0.94$ ; $P < 0.001$ ) (10)		N = 48 men ( $27.9 \pm 6.9$ yrs; $\dot{V}O_2\text{max}$ $55.6 \pm 8.2$ ml.kg.min <sup>-1</sup> )
UMTT	$v\text{UMTT}$ compared to $v\dot{V}O_2\text{max}$ ( $r = 0.97$ , SEE = 1.92ml.kg.min <sup>-1</sup> ) (40)  $\dot{V}O_2\text{max}$ predicted via UMTT compared to direct treadmill based measurement ( $r = 0.96$ , SEE = 2.81ml.kg.min <sup>-1</sup> ) (41)	$r = 0.97$ , SEE = .55 mets -. Similar results regardless of age or performance level (41)	N = 9 male and 1 female (mean $\dot{V}O_2\text{max}$ $61.4 \pm 10.9$ and $61.5 \pm 10.6$ ml.kg.min <sup>-1</sup> for treadmill and UMTT respectively) (41)  N = 32 Highly trained runners (mean $\dot{V}O_2\text{max}$ $70.1 \pm 5.5$ ml.kg.min <sup>-1</sup> ) (40)
20SRT	20SRT distance covered compared to $\dot{V}O_2\text{max}$ ( $r = 0.71$ ; SEE 5.9ml.kg.min <sup>-1</sup> ; $r = 0.90$ ; SEE 4.7ml.kg.min <sup>-1</sup> ) for children and adults respectively (42)  $v20\text{SRT}$ compared to $\dot{V}O_2\text{max}$ ( $r=0.90$ , $p<0.05$ ) (49)	$r = 0.97$ ; $p < 0.01$ ; CV = 2.2% (3)	N = 188 children (8 – 19yrs) and N = 77 adults (18-50 yrs) (42)  N = 36 physically active men and 38 physically active women, ( $\dot{V}O_2\text{max}$ men $58.5 \pm 7.0$ ml.kg.min <sup>-1</sup> , women $47.4 \pm 6.1$ ml.kg.min <sup>-1</sup> ) (49)  N = 12 male soccer players, ( $\dot{V}O_2\text{max}$ $54.6 \pm 4.2$ ml.kg.min <sup>-1</sup> ) (3)
YYIRTL1	Distance covered compared to $\dot{V}O_2\text{max}$ ( $r = 0.74$ , $P < 0.05$ ; $r = 0.71$ , $P < 0.05$ ; $r = 0.61$ , $P < 0.05$ ) (29, 36, 48). High inter-individual differences found within groups.	$R = 0.98$ ; CV = 4.9% (36)  ICC = 0.78, CV = 7.3% (31)	N = 13 professional ( $\dot{V}O_2\text{max}$ $58.5 \pm 3.8$ ml.kg.min <sup>-1</sup> ) and 12 amateur ( $\dot{V}O_2\text{max}$ $56.3 \pm 4.3$ ml.kg.min <sup>-1</sup> ) soccer players (48)  N = 13 male subjects (36)  N = 14 amateur male soccer players ( $\dot{V}O_2\text{max}$ $60.1 \pm 6.5$ ml.kg.min <sup>-1</sup> ) (29)
YYIRTL2	Distance compared to $\dot{V}O_2\text{max}$ ( $r = 0.56$ , $P < 0.05$ ) (37)	ICC = 0.93, CV = 7.1% (31)  CV = 9.6% (37).	N = 24 junior soccer players ( $17 \pm 1$ years) (31)  N = 13 healthy males and N = 119 male elite soccer players (37)
30-15IFT	$v\text{IFT}$ compared to $\dot{V}O_2\text{max}$ ( $r = 0.68$ , $p < 0.05$ ) (16)  Significantly higher than $v\dot{V}O_2\text{max}$ ( $18.2 \pm 1.6$ vs. $14.1 \pm 0.9$ km/h <sup>-1</sup> respectively; $p < 0.001$ ) (16)	ICC = 0.96 (14)	N = 59 youth athletes ( $16.2 \pm 2.3$ years, $\dot{V}O_2\text{max}$ $45.8 \pm 5.8$ ml.kg.min <sup>-1</sup> ) (16)

## INTER-TEST COMPARISON

As previously stated, intermittent tests are likely to have the greatest anaerobic energy contribution compared to continuous versions and are therefore more suited to supramaximal training intensities. Supramaximal tests (such as the 30-15IFT and YYIRT) unsurprisingly produce very different velocities as final MRS could be any proportion of the anaerobic speed reserve (above  $v\dot{V}O_2\text{max}$ ). For example, the  $v\text{IFT}$

is consistently 20-25% faster than  $\dot{V}O_2\text{max}$  (17) and approximately 15-25% higher than the vUMTT (17). Significantly higher blood lactate concentrations are also found during the 30-15IFT compared to the UMTT supporting a greater amount of anaerobic energy production (17). This relationship however, depends on the specific protocol utilized and can also be affected by individual fitness levels. For example, no significant difference is reported between YYIRTL1 performance,  $\dot{V}O_2\text{max}$  (21) or vUMTT (29). However, when an individual's MRS was higher than  $16.3\text{km}\cdot\text{hr}^{-1}$  the vUMTT was frequently higher than that achieved in the vYYIRT1 (29). Concluding that the vUMTT and the vYYIRT1 are more suited for athletes with a greater and lower  $\dot{V}O_2\text{max}$  levels respectively (29). This variation in performance is likely due to aspects discussed earlier such as increasing running rhythm disruption during 20m shuttle distances and a short or non-existent rest period resulting in a lack of phosphocreatine (PCr) resynthesis or lactate clearance (26). It may be these issues which contribute to the v20SRT being lower than that found in the 12-min Cooper run (46) and the vUMTT (1).

When comparing the velocities produced during submaximal, aerobic dominant tests such as a 5min Time Trial and UMTT, less variation is present due to the protocols attempting to represent a similar physiological demand. For example, the UMTT is strongly correlated to the results found during the 12min Cooper run (41), the v5TT and a treadmill based  $\dot{V}O_2\text{max}$  test (10). However, when analyzing scores in more detail, the vUMTT was  $1.1\text{km}\cdot\text{hr}^{-1}$  faster than the v5TT and approximately  $1.4\text{km}\cdot\text{hr}^{-1}$  faster than the treadmill  $\dot{V}O_2\text{max}$  (10). Interestingly, individuals with greater anaerobic speed reserve present greater differences between vUMTT and  $\dot{V}O_2\text{max}$  (41). This variation may be due to the 'sprint finish' method used in incremental tests that utilize the final reached velocity as a MRS as those with a greater anaerobic speed reserve may have a greater 'burst' of speed during the final stage.

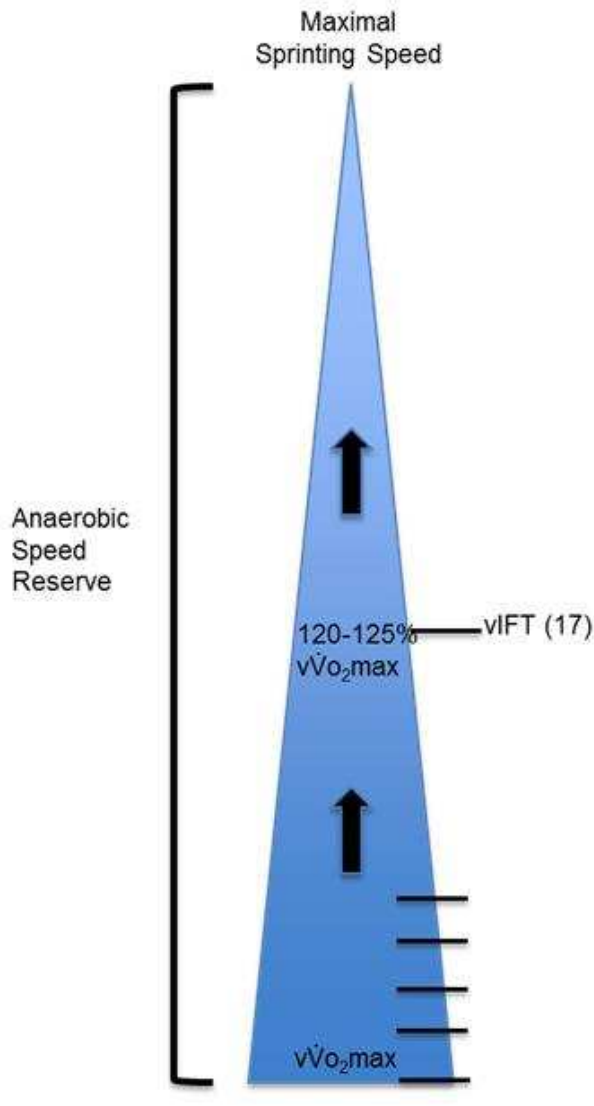


Figure 3: Approximate intensity range utilized for various field-based tests. Adapted with permission from (17)¶

## CONCLUSIONS AND PRACTICAL RECOMENDATIONS

When selecting a test to support training prescription, it is important to consider desired training style, sporting application and logistical testing characteristics. Firstly, the desired training style should be established based upon sport, individual training age and periodization. Tests should then be compared based upon their ability to produce a reliable MRS and their validity in measuring a desired physiological state (table 4). Subsequently, shuttle tests such as the 20SRT and the



YYIRT's may be the least suited to training individualization. This is due to a lack of reliable MRS determination and high variations in inter-athlete physiological demand. Therefore individualizing supramaximal, multidirectional and intermittent training should be completed using the 30-15IFT due to its greater programming accuracy (16, 18). This is most likely to be suited to team sports such as Handball, Basketball, Rugby and Soccer.

In order to individualize linear, submaximal, continuous training such as that used in track based running or as preparation for supramaximal training; a test must be selected based upon its aerobic dominant protocol and relationship to  $\dot{V}O_2\text{max}$ . Therefore, dependent upon the logistical constraints of testing procedures (such as space requirements) either a Time Trial or the UMTT should be utilized. These tests are associated with easy velocity determination and are suitable for athletes of various fitness levels. Furthermore, the use of a 5min Time Trial (or distance of similar duration) allows the most time efficient testing and the use of various ergometers for greater conditioning variation. If the option of a supramaximal, linear training style is desired, accuracy may improve via the use of a percentage of anaerobic speed reserve, which requires the initial determination of  $\dot{V}O_2\text{max}$  (via a continuous linear method) and maximal sprinting speed.

Table 5: Recommended tests for training individualization

Training Intensity	Training Style	Recommended Test	Considerations	Example Sporting Application
Submaximal	Linear	5min Time Trial	Familiarization may be required due to the influence of a pacing strategy Space requirements	For use with continuous sports such as distance running and rowing. Also suitable for other sporting athletes with low levels of aerobic fitness whom may utilize continuous or interval based submaximal linear training.
		University of Montreal Track Test	Space requirements	
Supramaximal	Linear	5min Time Trial and the Anaerobic Speed Reserve	Space requirements Maximal Sprinting Speed must be established	For use with sports that require intermittent high anaerobic energy production. For example, wingers in Rugby and Soccer and shorter track running events.
	Shuttle	30-15 Intermittent Fitness Test	Pre-recorded tape	For use with multidirectional, intermittent team sports such as Handball, Basketball, Soccer and Rugby.

## **FIGURE/TABLE LEGEND**

Figure 1: Schematic representation of velocity progressions for the YYIRT Level 1 and Level 2 (48).

Figure 2: A testing area prepared for the 30-15IFT with two example shuttle stages (16).

Figure 3: Approximate intensity range utilized for various field based tests. Adapted with permission from (17)

Table 1: Test protocols for submaximal training prescription

Table 2: The relationship between the anaerobic speed reserve and performance

Table 3: Test protocols for supramaximal training prescription

Table 4: Test reliability and reported relationship with  $\dot{V}O_2\max$ /  $\dot{V}O_2\max$

Table 5: Recommended tests for training individualization

## References

1. Ahmaidi S, Collomp K, Caillaud C, and Préfaut C. Maximal and functional aerobic capacity as assessed by two graduated field methods in comparison to laboratory exercise testing in moderately trained subjects. *Int J Sports Med* 13: 243-248, 1992.
2. Ahmaidi S, Collomp K, and Préfaut C. The effect of shuttle test protocol and the resulting lactacidaemia on maximal velocity and maximal oxygen uptake during the shuttle exercise test. *Eur J Appl Physiol Occup Physiol* 65: 475-479, 1992.
3. Aziz AR, Yau FTH, and Chuan TK. The 20m multistage shuttle run test: reliability, sensitivity and its performance correlates in trained soccer players. *Asian J of Exer Sports Sci* 2: 1-7, 2005.
4. Bangsbo J. *Fitness training in football: a scientific approach*. August Krogh Inst., University of Copenhagen, 1994.
5. Bangsbo J, Iaia FM, and Krusturup P. The Yo-Yo intermittent recovery test. *Sports Med* 38: 37-51, 2008.
6. Baquet G, Berthoin S, Gerbeaux M, and Van Praagh E. High-intensity aerobic training during a 10 week one-hour physical education cycle: effects on physical fitness of adolescents aged 11 to 16. *Int J Sports Med* 22: 295-300, 2001.
7. Berthoin S, Gerbeaux M, Guerrin F, Lensele-Corbeil G, and Vandendorpe F. Estimation de la VMA. *Sci Sports* 7: 85-91, 1992.
8. Berthoin S, Gerbeaux M, Turpin E, Guerrin F, Lensele - Corbeil G, and Vandendorpe F. Comparison of two field tests to estimate maximum aerobic speed. *J Sports Sci* 12: 355-362, 1994.
9. Berthoin S, Manteca F, Gerbeaux M, and Lensele-Corbeil G. Effect of a 12-week training programme on Maximal Aerobic Speed (MAS) and running time to exhaustion at 100% of MAS for students aged 14 to 17 years. *J Sports Med Phys Fitness* 35: 251-256, 1995.
10. Berthon P, Fellmann N, Bedu M, Beaune B, Dabonneville M, Coudert J, and Chamoux A. A 5-min running field test as a measurement of maximal aerobic velocity. *Eur J Appl Physiol Occup Physiol* 75: 233-238, 1997.
11. Billat LV. Interval training for performance: a scientific and empirical practice: special recommendations for middle-and long-distance running. Part I: aerobic interval training. *Sports Med* 31: 13-31, 2001.
12. Billat LV and Koralsztejn J. Significance of the velocity at VO<sub>2</sub>max and time to exhaustion at this velocity. *Sports Med* 22: 90-108, 1996.
13. Blondel N, Berthoin S, Billat V, and Lensele G. Relationship between run times to exhaustion at 90, 100, 120, and 140% of vVO<sub>2</sub>max and velocity expressed relatively to critical velocity and maximal velocity. *Int J Sports Med* 22: 27-33, 2001.
14. Buchheit M. The 30-15 Intermittent Fitness Test: a new intermittent running field test for intermittent sport players-Part 1. *Approches Handball* 87: 27-34, 2005.
15. Buchheit M. Illustration of interval-training prescription on the basis of an appropriate intermittent maximal running speed-the 30-15 intermittent fitness test—part 2. *Approches Handball* 88: 36-46, 2005.

16. Buchheit M. The 30-15 intermittent fitness test: accuracy for individualizing interval training of young intermittent sport players. *J Strength Cond Res* 22: 365-374, 2008.
17. Buchheit M, Al Haddad H, Millet GP, Lepretre PM, Newton M, and Ahmaidi S. Cardiorespiratory and cardiac autonomic responses to 30-15 intermittent fitness test in team sport players. *J Strength Cond Res* 23: 93-100, 2009.
18. Buchheit M and Laursen PB. High-intensity interval training, solutions to the programming puzzle. *Sports Med* 43: 313-338, 2013.
19. Buchheit M and Mendez-Villanueva A. Changes in repeated-sprint performance in relation to change in locomotor profile in highly-trained young soccer players. *J Sports Sci* 32: 1-9, 2014.
20. Bundle MW, Hoyt RW, and Weyand PG. High-speed running performance: a new approach to assessment and prediction. *J App Physiol* 95: 1955-1962, 2003.
21. Castagna C, Impellizzeri F, Chamari K, Carlomagno D, and Rampini E. Aerobic fitness and yo-yo continuous and intermittent test performances in soccer players: a correlation study. *J Strength Cond Res* 20: 320-325, 2006.
22. Chamoux A, Berthon P, and Laubignat J. Determination of maximum aerobic velocity by a five minute test with reference to running world records. A theoretical approach. *Arch Physiol Biochem* 104: 207-211, 1996.
23. Cooper K. A means of assessing maximal oxygen intake: correlation between field and treadmill testing. *J Am Heart Ass* 203: 135-138, 1968.
24. Dardouri W, Selmi MA, Sassi RH, Gharbi Z, Rebhi A, Yahmed MH, and Moalla W. Relationship between repeated sprint performance and both aerobic and anaerobic fitness. *J Hum Kinet* 40: 139-148, 2014.
25. Davies C, Di Prampero P, and Cerretelli P. Kinetics of cardiac output and respiratory gas exchange during exercise and recovery. *J Appl Physiol* 32: 618-625, 1972.
26. Dawson B, Goodman C, Lawrence S, Preen D, Polglaze T, Fitzsimons M, and Fournier P. Muscle phosphocreatine repletion following single and repeated short sprint efforts. *Scand J Med Sci Sports* 7: 206-213, 1997.
27. Denadai BS, Ortiz MJ, Greco CC, and de Mello MT. Interval training at 95% and 100% of the velocity at V O<sub>2</sub> max: effects on aerobic physiological indexes and running performance. *App Phys, Nutri Metab* 31: 737-743, 2006.
28. Dupont G, Akakpo K, and Berthoin S. The effect of in-season, high-intensity interval training in soccer players. *J Strength Cond Res* 18: 584-589, 2004.
29. Dupont G, Defontaine M, Bosquet L, Blondel N, Moalla W, and Berthoin S. Yo-Yo intermittent recovery test versus the Universite de Montreal Track Test: relation with a high-intensity intermittent exercise. *J Sci Med Sport* 13: 146-150, 2010.
30. Eston R, Eston RG, and Reilly T. *Kinanthropometry and Exercise Physiology Laboratory Manual: Anthropometry*. Taylor & Francis, 2009.
31. Fanchini M, Castagna C, Coutts AJ, Schena F, McCall A, and Impellizzeri FM. Are the Yo-Yo intermittent recovery test levels 1 and 2 both useful?

- Reliability, responsiveness and interchangeability in young soccer players. *J Sports Sci* 32: 1950-1957, 2014.
32. Haydar B, Al Haddad H, Ahmaidi S, and Buchheit M. Assessing inter-effort recovery and change of direction ability with the 30-15 Intermittent Fitness Test. *J Sports Sci Med* 10: 346-354, 2011.
  33. Helgerud J, Engen LC, Wisloff U, and Hoff J. Aerobic endurance training improves soccer performance. *Med Sci Sports Exerc* 33: 1925-1931, 2001.
  34. Hill DW and Rowell AL. Significance of time to exhaustion during exercise at the velocity associated with VO<sub>2</sub>max. *Eur J Appl Physiol Occup Physiol* 72: 383-386, 1996.
  35. Krstrup P and Bangsbo J. Physiological demands of top-class soccer refereeing in relation to physical capacity: effect of intense intermittent exercise training. *J Sports Sci* 19: 881-891, 2001.
  36. Krstrup P, Mohr M, Amstrup T, Rysgaard T, Johansen J, Steensberg A, Pedersen P, and Bangsbo J. The yo-yo intermittent recovery test: physiological response, reliability, and validity. *Med Sci Sports Exerc* 35: 697-705, 2003.
  37. Krstrup P, Mohr M, Nybo L, Majgaard Jensen J, Jung Neilson J, and Bangsbo J. The Yo-Yo IR2 Test: Physiological Response, Reliability, and Application to Elite Soccer. *Med Sci Sports Exerc* 38: 1666-1673, 2006.
  38. Kuipers H and Keizer H. Overtraining in elite athletes. Review and directions for the future. *Sports Med* 6: 79-92, 1988.
  39. Kuipers H, Verstappen F, Keizer H, Geurten P, and Van Kranenburg G. Variability of aerobic performance in the laboratory and its physiologic correlates. *Int J Sports Med* 6: 197-201, 1985.
  40. Lacour J, Padilla-Magunacelaya S, Chatard J, Arsac L, and Barthelemy J. Assessment of running velocity at maximal oxygen uptake. *Eur J Appl Physiol Occup Physiol* 62: 77-82, 1991.
  41. Leger L and Boucher R. An indirect continuous running multistage field test: the Universite de Montreal track test. *Can J Appl Sport Sci* 5: 77-84, 1980.
  42. Leger L, Mercier D, Gadoury C, and Lambert J. The multistage 20 metre shuttle run test for aerobic fitness. *J Sports Sci* 6: 93-101, 1988.
  43. Leger LA and Lambert J. A maximal multistage 20-m shuttle run test to predict VO<sub>2</sub> max. *Eur J Appl Physiol Occup Physiol* 49: 1-12, 1982.
  44. McCully K, Iotti S, Kendrick K, Wang Z, Posner J, Leigh Jr J, and Chance B. Simultaneous in vivo measurements of HbO<sub>2</sub> saturation and PCr kinetics after exercise in normal humans. *J Appl Physiol* 77: 5-10, 1994.
  45. Mendez-Villanueva A, Hamer P, and Bishop D. Fatigue in repeated-sprint exercise is related to muscle power factors and reduced neuromuscular activity. *Euro J Appl Physiol* 103: 411-419, 2008.
  46. O'Gorman D, Hunter A, McDonnacha C, and Kirwan JP. Validity of field tests for evaluating endurance capacity in competitive and international-level sports participants. *J Strength Cond Res* 14: 62-67, 2000.
  47. Paliczka V, Nichols A, and Boreham C. A multi-stage shuttle run as a predictor of running performance and maximal oxygen uptake in adults. *Br J Sports Med* 21: 163-165, 1987.
  48. Rampinini E, Sassi A, Azzalin A, Castagna C, Menaspà P, Carlomagno D, and Impellizzeri FM. Physiological determinants of Yo-Yo intermittent

- recovery tests in male soccer players. *Euro J Appl Physiol* 108: 401-409, 2010.
49. Ramsbottom R, Brewer J, and Williams C. A progressive shuttle run test to estimate maximal oxygen uptake. *Br J Sports Med* 22: 141-144, 1988.
  50. Ramsbottom R, Nute M, and Williams C. Determinants of five kilometre running performance in active men and women. *Br J Sports Med* 21: 9-13, 1987.
  51. Shephard RJ. Tests of maximum oxygen intake a critical review. *Sports Med* 1: 99-124, 1984.
  52. St Clair Gibson A, Broomhead S, Lambert M, and Hawley J. Prediction of maximal oxygen uptake from a 20-m shuttle run as measured directly in runners and squash players. *J Sports Sci* 16: 331-335, 1998.
  53. Weyand PG and Bundle MW. Energetics of high-speed running: integrating classical theory and contemporary observations. *Am J Physiol-Regul, Integr Compar Physiol* 288: 956-965, 2005.
  54. Wong P-l, Chaouachi A, Chamari K, Dellal A, and Wisloff U. Effect of preseason concurrent muscular strength and high-intensity interval training in professional soccer players. *J Strength Cond Res* 24: 653-660, 2010.