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**A comparative study of the performance, cognitive and psychological characteristics of elite
athletes**

For a doctoral (Ph.D.) thesis

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INTRODUCTION

In today's fast-paced world, technological innovations and different measuring instruments have appeared in sports science. These allow, among other things, the design of training methods, thus significantly increasing their effectiveness. Digitization, continuous data monitoring, cloud storage, and the possibility of retrieving data, are advantages for users in any sport. In addition to measuring the objective stimulus of exercise, the measurement of the subjective impact can also be of significant help to both the athletes involved in the process and the professional team working with them.

Players in team sports face high levels of challenge. Primarily from a physiological point of view (circulatory and respiratory), from the active support system (i.e. the muscular system), and the metabolic support systems. Therefore, it is generally accepted professional evidence to load players individually, at group and team levels, based on an appropriate periodization of their activities, allowing them to achieve adaptation (Bompa & Buzzichelli., 2015).

For some athletes, excessively long and/or intense training, multiple major competitions with short repetitions, short time and poorly planned recovery lead to increased fatigue and underperformance. The coaching response to underperformance is often to increase training rather than rest. Intense interval training, in which a hard training period of 1-6 minutes is repeated several times with short rest periods, is most likely to induce an over-exertion syndrome (Derman et al., 1997). There may be sudden increases in training volume, and prolonged, difficult, monotonous exercise, often compounded by some other physical or psychological effect. However, hard the training, most athletes recover fully after two weeks of adequate rest. The cyclical nature (periodization) of most training programs allows for this recovery, so that strenuous training work achieves its goal (Fry et al., 1992). If poorly planned, fatigue eventually becomes so severe that recovery does not occur despite two weeks of relative rest. At this stage, a diagnosis of overwork syndrome can be made.

The training activities performed by the athlete involve an external load, yet the physiological adaptation mentioned above is due to the internal load, mainly in the form of biochemical stress. The effects induced by mechanical loading - on the musculoskeletal system and its constituent tissues (e.g. cartilage, bone, muscle, and tendon) - require specific attention.

As a consequence of mechanical stress, structural and functional adaptation of the skeletal muscles takes place. In simple terms, the main focus of physiological load adaptation is on the quantitative and qualitative characteristics of oxygen consumption. The "response" to

biomechanical loading is understood to be the skeletal and joint system of the body, where the main focus is on maintaining the quality of mechanical properties.

OBJECTIVES

The aim was to present the advantages and disadvantages of objective (measured telemetrically) and subjective (individually estimated) measures of fatigue in professional athletes (men's and women's basketball and football players).

In addition, I aimed to study the anthropometric, body composition, and cardiovascular characteristics of the above-mentioned competitive athletes under laboratory conditions. I observed the physiological responses of the athletes to musculoskeletal and mechanical stress in training situations (five training sessions with different contents and purposes).

Finally, my aim was to find out how far the results measured in the laboratory and on the field (in game situations) differ or coincide. I also aimed to investigate how the measured and estimated fatigue results relate to each other, and to what extent they provide reliable information for players and coaches. An important variable I will address is the research question of how well coaches can estimate players' current fatigue levels and how much they rely on objective data.

HIPOTHESES

1. Among the three muscle tissues (smooth, striated, cardiac), the relative mass of striated muscle varies most in adulthood, with a large amount of it located in the lower limb (Mészáros & Mohácsi, 1983). I assume that athletes must have different conformation for the two sports to be performed effectively. Despite or in combination with these, I hypothesize that the sport-specific averages of muscle mass per body mass (M%) are more favorable among footballers than among basketball players, regardless of gender.

2. The rule changes of May 2000 changed the tactical and physical requirements of basketball (Ben Abdelkrim et al., 2007). In contrast, football has seen less drastic rule changes, and more technical innovations (VAR), but the physical characteristics of the players have an impact on the intensity of the game. The movement structure, spatiality, and rules of the two sports differ significantly. Nevertheless, both locomotor and mechanical loading elements play a significant

role in both sports. I hypothesize that the frequency of movements in smaller spaces is higher than those in larger spaces for both sexes/men and women.

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3. Female soccer players have average VO₂max values of 49-57 ml/kg/min (Datson et al., 2014) while men have values between 48-63 ml/kg/min (Maamer et al., Female and male basketball players have mean VO₂max values ranging from 44.0-54.0 and 50-60 ml/kg/min, respectively (Ziv & Lidor, 2009). Although values vary between posts, the aerobic capacity of defenders is generally higher than that of centers (Sallet et al., 2005). Both team sports place significant circulatory and respiratory demands on the athletes studied. It is true, however, that while basketball takes place in smaller spaces and for shorter time periods, the continuous substitution during the game places more permissive demands on the players. Based on these findings, I believe that football players should have a numerically greater aerobic capacity, regardless of gender.

4. The previously mentioned high level of knowledge of physical parameters and motor skills is of paramount importance in both basketball (Svilar et al., 2018; Ramos-Campo et al., 2017) and football (Mohr et al., 2005; Svensson & Drust, 2005). The time spent in different heart rate zones is important information about the quality of training load and the current fitness status of players. I hypothesize that players who spend significantly more time in heart rate zones 4 and 5 report higher levels of subjective fatigue than those who spend less time in the indicated zones.

5. I assume that the relative distance covered and the number of sprints are independent of sport and gender, but that there is an interaction between them.

6. The estimation of the coaches' fatigue during training visits and the players' fatigue results are important information for coaches and players, crucially also for the motivation to train. I assume that the fatigue estimated by coaches is more accurate than that estimated by players.

7. The team coach has the biggest role in planning the training load. When planning the workload, it is important that the coach has accurate objective (measured) data to guide the training load. I assume that coaches plan training workloads in a conscious and differentiated way.

METHODS, SUBJECTS

The study measured players from sports clubs in Western Transdanubia, where a total of 87 athletes participated in the study, distributed by gender and age group. When quantifying the overall analysis, we can talk about 2 sports (basketball, football) and a total of 8 teams. Nb1 (k) is a female first division basketball team (n=12 26.75±5.64years, 180.13±7.9cm, 75.04±8.35kg, 32.89±4.36percent isomic, 28.22±3.93percent fat, 49.59±4.05 liters/min VO₂max). The U20 (k) is a basketball team from the Nb1/A boys group (n=12, 18.58±0.79yrs, 190.7±5.76cm, 79.91±8.25kg, 47.33±1.46 isomers, 13.1±6.1fat%, 55.88±5.21liter/min VO₂max). Group E (k), a women's university basketball team with non-professional contracted players, but with daily training and participation in university and national championships (n=9, 19.22±1.56yrs, 170.33±7.52cm, 68.03±11.89kg, 42.66±3.48 muscle percentage, 23.44±6.42 fat percentage, 43.02±4.36 liters/min VO₂max). The NB1 (l) is a female football team (n=13, 19.77±2.71years, 168.12±5.29cm, 60.51±7.71kg, 34.33±2.38 muscle percentage, 24.43±5.65fat percentage, 45.82±5.4 litres/min VO₂max). NB2 (l) is a men's football team in the second division (n=15, 25.13±6.69yrs, 180.97±8.67cm, 76.99±9.01kg, 41.27±1.41 muscle percentage, 15.6±3.8 fat percentage, 55±6.17 litres/min VO₂max).

Each person gave written consent to be included before taking part in the study. The study has been approved by the ELTE Ethics Committee KEB 2019/315 and all athletes have signed the consent form to participate in the study. All data were collected between 01.12.2019 and 08.09.2022. In total, data from 36 training sessions were recorded.

RESULTS

Of all the studied (n=45) males, basketball players are younger (18.5±0.8) than football players (25±6.5); (p<0.001). Basketball players are significantly taller (TMK =190.7±5.8) than football players (TML =180.9±8.7); (p<0.001). Body mass averages are only numerically different in favor of basketball players. Relative muscle mass was significantly greater in the basketball players group (M%K =47.1±2.5) than in the football players group (M%L =41.2±1.4); (p<0.001). Relative body fat averages (F%) showed no professionally significant difference between the two groups. Among the circulatory and respiratory characteristics recorded during laboratory exercise testing, there was a significant difference in resting heart rate (NYPK =52±5.1 - NYPL =68±13) and anaerobic refractive index heart rate averages (ATPK =181±3.4

- ATPL =162±11.4); (p<0.001). Among all females (n=42) studied, the ages of basketball and football players did not differ significantly. Basketball players are significantly taller (TMK =175.8±9.1) and have a higher body mass than their football peers. Significant differences were found between the lowest heart rate measured before exercise NYPK=57±5.7 - NYPL =61±5.5 (beats×min⁻¹); p<0.01 and the anaerobic breakpoint heart rate averages ATPK =173±12.3 - ATPL =160±11 (beats×min⁻¹) p<0.000. Among all subjects (n=87), the ages of basketball and football players were not significantly different. Basketball players are significantly taller (TMK =185.29±8.9) (p<0.001) and have a higher body mass (TSK =78.29±8.6); (p<0.001). Significant differences were found in basketball players in terms of muscle percentage (M%=43.9±3.6) and fat percentage (F%=13.96±5.1), as well as relative aerobic capacity (rVO₂MAX =55.39±5.7); (p<0.001). The research involved five training sessions, over a week, on consecutive days of the week. Regardless of the sport, measurements were documented at the end of the competition period. Therefore, the recorded item counts are the number of cases: (number of training sessions × number of athletes participating), separated by gender and sport. Significant differences were found between the distance covered during training (TDk =3936.9±827.4 - TDl =2990.7±1418.2) in the men's group; p<0.001 and the maximum speed averages (MSk =23.4±3.2 - MSl =21±6.6); p<0.001 in favor of the basketball players. Professionally significant differences were found in the two highest speed zones (4-5), both in favor of basketball players.

As far as the total training load per sport (TLS) is concerned, basketball players score approximately ~60 points higher than football players. This is also true for all mechanical attributes (accelerate-decelerate), I mean, except for high-speed accelerations, men's basketball players performed twice as well on several attributes as their football counterparts.

SUMMARY

45 male and 42 female basketball and football players were included in the study. Training loads were followed during the last third of the competitive season. Based on these data, 337 case numbers were examined with 190 for women and 147 for men based on the combined results of the five teams.

We also tested the players in a stress-physiology laboratory, where we measured body composition components (M%, F%), and observed circulatory and metabolic characteristics (NYP, MP, rVO₂max, ATP), using a "vita maxima" loading protocol. Our first hypothesis is that for the two sports to be performed effectively, the athletes must have different physiological

characteristics. Despite or in combination with these hypotheses, we hypothesized that the sport-specific averages of muscle mass per body mass (M%) would be more favorable among football players than among basketball players, regardless of gender. As for the differences in body composition between gender and sport, we were not surprised by the differences in height and body mass. Basketball players were taller and heavier than football players, regardless of gender. We found a significant difference in terms of muscle mass in favor of basketball players, so more body mass was associated with more muscle mass. This is further confirmed by the fact that relative fat mass in all sports, regardless of gender, can be considered optimal for the already critical performance sport. Based on these results, our first hypothesis is supported by the measured data **(H1)**.

The movement structure, spatiality, and rules of basketball and football differ significantly. Locomotor and mechanical parameters play a prominent role in both. It has been assumed that the frequency of movements in smaller spaces is higher than in larger spaces for both sexes/men and women. The training load was assessed using the GPS-based "Polar Team Pro" telemetric instrument. Several locomotor (1) and mechanical (2) characteristics were recorded. When comparing by sport in the men's group, we found significant differences in all categories of (1) distance covered (TD), maximum speed (Max. Sp.), average heart rate, distance covered in speed zones 4, 5 (D_{Sp.4-5}), and (2) accelerations and decelerations in favor of the basketball players. In the women's group, basketball players scored significantly higher than football players in all characteristics except relative distance traveled (TD/min) and maximum heart rate (MP). This therefore means that the hypothesis is confirmed **(H2)**.

In both sports, training/match play places significant circulatory and respiratory demands on the athletes studied. However, while basketball is played in a smaller space and for shorter periods, and its system of rules allows for more substitution opportunities during a match, it places less demanding requirements on the players. Based on this, it is assumed that football players should also have a higher aerobic capacity numerically, regardless of gender. The mean values of relative aerobic capacity (rVO_{2max}) and anaerobic refractive index heart rate (ATP), which are measures of the performance of the circulatory system, do not differ between sports, in either sex. It should be noted, however, that the values lie within a wide range, which raises the issue of differential load dosing during exercise planning. Thus, our hypothesis is not confirmed **(H3)**.

The time spent in different heart rate zones is an important piece of information about the quality of training load and the current fitness status of players. We hypothesize that those who spend significantly more time in zones 4 and 5 will report higher levels of subjective fatigue

than those who spend less time in the indicated zones. Training Load Score (TLS), measured with Polar Team Pro, and fatigue estimated from PAAS, showed a moderately strong significant relationship in the unisex group of footballers ($r=0.497$); ($p<0.001$). A significant relationship was found between the mean heart rate of the footballers and the estimated fatigue means ($r=0.58$); ($p<0.001$). Heart rate means ranged between significant extremes (100-170 beats \times min $^{-1}$). For maximum heart rate (HRmax) averages, a weak significant relationship was found with subjective fatigue in both sports ($r_{HRmaxk}=0.332$); ($p<0.028$), ($r_{HRmaxl}=0.328$); ($p<0.032$). Considering the time spent in the two highest-intensity zones, a weak significant relationship was found only in zone four ($r=0.357$); ($p<0.019$), in the group of football players. Our hypothesis was partially confirmed **(H4)**.

It was assumed that the relative distance covered and the number of sprints were independent of sport and gender, but that there was a relationship between them. For mean heart rate (HRavg), we found a significant interaction of Gender \times Sport with a main effect of Gender and Sport. Similar characteristics can be said for heart rate zones three [(HRzone(3))] and four [(HRzone(4))]. In the speed zones two [(Speedzone(2))] and four [(Speedzone(4))], we found a significant interaction of No \times Sport with the main effect of No and Sport. We can therefore say that, regardless of sport and gender, the amount of distance covered is necessary for effective performance, and the speed zones in which athletes cover this distance are also very important. The hypothesis is confirmed **(H5)**.

Coaches' fatigue estimation during training visits and players' fatigue estimation during training visits provide important information for coaches and players, crucially also for motivation for training work. We assumed that the fatigue estimated by coaches is more accurate than that estimated by players. Based on the training data, we observed a strong relationship between coaches' fatigue ratings and the Training Load index (TL), while we found a moderate relationship between athletes' fatigue ratings (the PAAS fatigue scale) and TL. Finally, a moderate correlation was found between TL and PAAS fatigue scores. Thus, we conclude that this hypothesis is confirmed **(H6)**.

The team coach has the biggest role in load planning. When planning the training load, the coach must have accurate measured data. We assumed that coaches plan training workload in a conscious and differentiated way. Our results demonstrate that there is some consistency between objective assessment of TL and coaches' estimates. Although ($r = 0.5$) is considered a lower bound for strong association in the social sciences (Cohen, 1988), it is important to see that it explains only 25% of the total variance (coefficient of determination). In other words, the difference between the two estimates of fatigue is significant. More strikingly, the coaches

showed significant differences in their accuracy in our study. For three of the eight coaches, fatigue estimates were essentially independent of TL, while for the remaining five we found strong correlations. Thus, the three coaches mentioned above, predominantly make decisions based on subjective signals when planning loads (sweating, respiratory rate). However, these signals only partially reflect the acute physiological state of the player. Based on these, our hypothesis was partially confirmed (**H7**).

In addition, other factors (e.g., general team condition, coaches' expectations, training duration, and intensity) may distort and/or confound the individual assessment of athletes. Coaches with a non-significant correlation between player fatigue and TL estimation may be dominantly influenced by the latter factors and thus more prone to ignore player-specific factors. Taking into account the fact that objective TL estimation has its limitations (McLaren et al., 2018), we conclude that coaches' assessment and objective TL should be integrated to more accurately estimate players' acute fatigue (Haddad et al., 2017; Impellizzeri et al., 2020). Regular feedback of objective TL values is also necessary to improve coaches' estimation in many cases. The moderate correlation (coefficient of determination = 0.203) between objective TL and players' self-assessment clearly indicates a well-documented discrepancy between objective and perceived aspects of physical and cognitive performance (Köteles & Babulka, 2014; Schwarz & Buchel, 2015; Köteles et al., 2018) across different interoceptive modalities.

For players, the perception of fatigue relies mostly on information from different interoceptive (homeostatic) modalities, including current muscle metabolic status, heart rate, respiration, and pain (Craig, 2006). The integration of behavioral cues (self-observation) cannot be excluded. This information is integrated and evaluated in the light of bottom-up factors such as expectations, previous experience, and knowledge about training (e.g. fatigue in previous exercises, length of training) (Lind et al., 2009; Brick et al., 2014). In other words, top-down information plays a role in the perception of the actual state, often leading to a discrepancy between the experiential aspect of fatigue and the actual physiological state.

If both coaches' and players' ratings are included in the regression analysis, approximately 33% of the total variance in TL could be explained. This proportion is significantly higher than the coefficients on the determinants of the two correlations, supporting the idea that tracking athletes' perceived fatigue can significantly improve coaches' knowledge of players' physiological status (Halson, 2014; Schumann et al., 2017).

We found a moderate correlation between players' and coaches' subjective ratings, indicating that players' self-ratings may provide important information beyond coaches' perceptions. Interestingly, no significant differences were found between coaches in the magnitude of this

agreement. In terms of RPE, several previous studies have reported no significant differences between athletes' and coaches' perceptions; other studies have reported a lack of agreement (Rabelo et al., 2016, Barnes, 2017). Typically, the pre-season or preparation period can be a critical period, which may also raise several issues in terms of load tolerance. It is important to note, however, that the period we observed was the period of the championship, which is the stage of level maintenance in terms of successful matches.

Thus, complex monitoring of player fatigue is particularly important during this period to avoid long-term negative consequences such as overuse or injuries.

In evaluating the present results, it should be kept in mind that the Polar TL index is a complex objective estimate of actual TL, not fatigue. Thus, although TL is a determinant of fatigue at the end of exercise (in theory, it is the most important determinant of fatigue), a perfect fit between the two should not be expected. In addition, the objective measure of physiological status (Polar TL) used in this study is only an estimate of actual TL and is not the "gold standard" for measuring it. Furthermore, the players and coaches involved in this study were not representative of the population. Last but not least, the present results can only be generalized to team sports requiring frequent accelerations, decelerations, changes of direction, etc. This complex pattern of physical activity makes it particularly difficult to calculate/estimate TL, potentially contributing to dissociation between player perception and any form of external assessment.

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