



The Effectiveness of a 30-Week Concurrent Strength and Endurance Training Programme in Preparation for an Ultra-Endurance Handcycling Challenge: A Case Study

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1 **Abstract**

2 **Purpose:** The aim of the following case study was to evaluate the effectiveness of a 30-week
3 concurrent strength and endurance training programme designed to prepare a trained H4 male
4 handcyclist (aged 28 years, bi-lateral, above knee amputee, body mass 65.6 kg), for a 1,407 km ultra-
5 endurance handcycling challenge.

6
7 **Methods:** This observational case study tracked selected physiological measures, training intensity
8 distribution, and total training load over the course of a 30-week concurrent training protocol.
9 Furthermore, the athlete's performance profile during the ultra-endurance challenge was monitored
10 with power output, cadence, speed, and heart rate recorded throughout.

11
12 **Results:** Findings revealed considerable improvements in power output at a fixed blood lactate
13 concentration of $4 \text{ mmol}\cdot\text{l}^{-1}$ (+25.7%), peak aerobic power output (+18.9%), power-to-mass ratio
14 (+18.3%), relative $\text{VO}_{2\text{peak}}$ (+13.9%), gross mechanical efficiency (+4.6%), bench press 1RM
15 (+4.3%), and prone bench pull 1RM (+14.9%). The athlete completed the 1,407 km route in a new
16 handcycling world record time of 89:55 hrs. Average speed was $18.7 \pm 2.1 \text{ km}\cdot\text{hr}^{-1}$; cadence averaged
17 $70.0 \pm 2.6 \text{ rpm}$, whilst average PO was $67 \pm 12 \text{ W}$. In terms of internal load, the athletes average heart
18 rate was $111 \pm 11 \text{ b}\cdot\text{min}^{-1}$.

19
20 **Conclusion:** These findings demonstrate how a long-term concurrent strength and endurance training
21 programme can be used to optimise handcycling performance capabilities in preparation for an ultra-
22 endurance cycling event. Knowledge emerging from this case study provides valuable information
23 that can guide best practice with respect to handcycling training for ultra-endurance events.

24
25
26 **Keywords:** Paralympic Sport; Handbiking; Upper Body Strength; Endurance; Arm Ergometry.

27 **Introduction**

28 Handcycling is a competitive and recreational sport undertaken by individuals who are unable to ride
29 a conventional road bike or tricycle due to a spinal cord injury (SCI) and/or other physical impairment
30 of the lower limbs. Handcycling has been a Paralympic Games event since 2004²⁶ however, despite
31 the sport's increased popularity, a paucity of scientific information exists with respect to the preferred
32 approach by which to develop handcycling performance capabilities. As with many Paralympic
33 sports, handcyclists tend to be relatively heterogeneous in terms of their age, performance level, and
34 physical disability. Therefore, knowledge that stems from applied case studies provides valuable
35 information to help guide best practice within this exciting and liberating Paralympic sport.

36
37 While the majority of trained handcyclists compete in organised road races and time trials, others
38 focus their attention on personal challenges, including organised sportive events and/or ultra-
39 endurance challenges. Within the United Kingdom, the highly respected John O'Groats to Land's
40 End (JOGLE) challenge has a long tradition within the cycling community, representing an
41 alternative to the popular Land's End to John O'Groats (LEJOG) route. The route covers 1,407 km
42 and involves over 11,000 m of ascent. Previously, Abel et al.² reported on an elite H3 male handcyclist
43 who trained for and completed the ultra-long Stykkeprøven cycling race in Norway. The athlete
44 completed the 540 km race in a total time of 38:52 hrs, climbing over 4,200 m whilst maintaining an
45 average speed of 21.6 km·h⁻¹. This case study demonstrated that, through considered and appropriate
46 training, handcyclists can successfully complete ultra-endurance cycling challenges.

47
48 In the context of handcycling performance, power output at a fixed blood lactate concentration of 4
49 mmol·l⁻¹ (PO₄), relative VO_{2peak} (ml·kg⁻¹·min⁻¹), peak aerobic power output (PO_{peak}), power-to-mass
50 ratio (W·kg⁻¹), and gross mechanical efficiency (GME) have all been identified as significant
51 predictors of handcycling performance.^{1,6,12,13,16,17,18} Therefore, the following case study tracked the
52 aforementioned physiological measures prior to, during, and upon completion of a 30-week,

53 concurrent training programme. Furthermore, measures of upper body strength, maximum anaerobic
54 power ($PO_{\max, AO15}$), and anaerobic power reserve (APR) were also monitored. The intensity and
55 duration of a training stimulus fundamentally drives physiological adaptation. Indeed, the monitoring,
56 and quantification of training stimuli is recognised as an important factor in the long-term
57 development of endurance athletes, including handcyclists.²⁹ Consequently, the present study tracked
58 the athlete's training intensity distribution (TID), and total training load (TTL). Finally, this study
59 also communicates the performance profile of the athlete during the ultra-endurance JOGLE cycling
60 challenge.

61

62 **Methods**

63

64 **Participant**

65 The focus of this case study is a male handcyclist aged 28 years (bi-lateral, above knee amputee, UCI
66 classification H4, body mass 65.6 kg). The athlete had more than three years of handcycling-specific
67 training and competitive race experience. He also had previous ultra-endurance cycling experience,
68 having completed the 4828 km Race Across America as part of an eight-man relay team in June 2017.
69 He reported no upper body musculoskeletal injuries that could affect his performance prior to the
70 study. All procedures employed were conducted in accordance with the declaration of Helsinki with
71 approval granted by the Research Ethics Committee of Buckinghamshire New University, High
72 Wycombe, United Kingdom. Prior to any testing being completed, the handcyclist provided written
73 informed consent.

74

75 **Design**

76 This 30-week observational study commenced in November 2018 and tracked selected physiological
77 measures, TID, TTL, and the performance profile of a trained handcyclist during a recognised, ultra-
78 endurance cycling challenge. To provide comparative, baseline data, laboratory testing took place on

79 three different occasions during weeks 1, 15 and 30. Testing was completed over two consecutive
80 days: graded exercise test (GTX), and 15-s all-out sprint test (day 1); and 1 repetition maximum
81 (1RM) strength testing (day 2). A period of 24-hours separated testing sessions in order to limit the
82 impact of fatigue. Before testing, the athlete abstained from strenuous exercise and refrained from
83 consuming caffeine and alcohol for at least 48 hours. All testing occurred indoors, under controlled
84 environmental conditions (18° C, 50 – 60% relative humidity). Finally, during the JOGLE PO,
85 cadence, speed, and heart rate parameters were continually monitored.

86

87 **Graded Exercise Test**

88 For all laboratory testing, training, and racing, the participant used his own hand bike (Carbonbike,
89 St. Petersburg, USA). For both the GTX and 15-s all-out sprint tests, the participant's hand bike was
90 fitted to a standard, indoor cycling turbo trainer (Fluid 2, CycleOps, Madison, WI, USA).
91 Measurements of PO were made using an SRM PowerMeter (Schoberer Rad Messtechnik, Julichm,
92 Germany, ±1% accuracy, sample frequency 1000 Hz) installed in the crank. The SRM is an accurate
93 and reliable instrument used to measure PO whilst cycling,²⁰ and was zero-off set prior to use in
94 accordance with the manufacturer's instructions. Power (W) and heart rate (HR) was logged using a
95 commercially available receiver (Garmin Edge 1010, Garmin Ltd, Olathe, KS, USA). In addition to
96 PO and HR, oxygen consumption (VO_2), carbon dioxide production (VCO_2), minute ventilation (VE),
97 and respiratory exchange ratio (RER) were continuously monitored using a calibrated, online gas
98 analysis system (Oxycon Pro, Jeager, Warwick, Warwickshire, UK).

99

100 Following a 10-min warm-up at a self-selected PO, the test protocol started at a work rate of 40 W
101 with subsequent 20 W increments every 5-mins until the required PO could no longer be maintained,
102 or until the participant reached volitional exhaustion. Values of $\text{VO}_{2\text{peak}}$ and PO_{peak} were identified as
103 the highest PO and peak oxygen consumption achieved during the last fully completed 30-s.
104 Throughout the test, the participant was free to adjust his gear ratio and/or crank rate as needed in

105 order to maintain the required power output. Every 5-mins and upon immediate completion of the
106 test, the participant was asked to indicate his global rating of perceived exertion (RPE) using a 6 to
107 20 Borg scale.⁵ All respiratory parameters were calculated for breath-by-breath, subsequently, data
108 were averaged at 1-min intervals at rest and every 30-s during each exercise stage.

109

110 At the end of each stage and at the point of volitional exhaustion, a small sample of capillary blood
111 was collected from an earlobe to measure blood lactate concentration. These data were used to
112 identify visually, fixed blood lactate concentrations of 2 and 4 mmol·l⁻¹. Once collected, capillary
113 blood samples were treated, analysed, and disposed of immediately using a fully automated analyser
114 (Biosen C-line, EKF Diagnostics, Barleben, Germany). Values of GME were calculated as the ratio of
115 external work produced to the amount of energy expended when a fixed blood lactate concentration
116 of 2 mmol·l⁻¹ was reached. This metabolic parameter was selected as it represents a consistent,
117 submaximal exercise intensity during which energy production is predominantly achieved via aerobic
118 metabolic pathways. Metabolic energy expenditure was calculated from associated VO₂ and RER
119 data according to Garby and Astrup.¹⁰ A value of GME was then defined as:

120

121 Equ 1: $GME = ((\text{external work done}/\text{energy expenditure}) \times 100) (\%)$.

122

123 As an approximation of anaerobic threshold, absolute values of PO corresponding to a fixed blood
124 lactate concentration of 4 mmol·l⁻¹ was also identified.

125

126 **15-s All-out Sprint Test**

127 Following his GTX, the participant recovered for one hour prior to completing a 15-s, all-out sprint
128 protocol to assess anaerobic performance. The participant was requested to complete a 10-min warm
129 up at a self-selected PO. Prior to commencement of the test protocol the participant was asked to
130 adopt his highest gear ratio (52/12). Once the participant acknowledged that he was ready, the all-out

131 sprint test commenced. Throughout this test, the participant was verbally encouraged to exert
132 maximum, physical effort with the highest PO subsequently recorded. The participant's APR was
133 established using the following equation:

134

$$135 \text{ Equ 2: APR (W)} = PO_{\text{max,AO15}} - PO_{\text{peak}} \cdot^{28}$$

136

137 **Maximal Upper Body Strength Testing**

138 In order to evaluate upper body strength, maximal and relative values of bench press and prone bench
139 pull 1RM were determined. Strength testing was conducted on a specifically designed, IPC Para-
140 powerlifting bench (Eleiko, Halmstad, Sweden)) and a prone-pull bench (Pullum Sports, Leighton
141 Buzzard, England) using a 20 kg Olympic barbell and 450 mm diameter barbell plates (25, 20, 15
142 and 10 kg), 200 mm diameter barbell plates (2.5, 2.0, 1.5, 1.0 and 0.5 kg), two safety locks and two
143 Velcro securing straps. Both bench press and prone bench pull 1RM testing was conducted in line
144 with the protocols proposed by Haff and Triplett.¹¹

145

146 **Training Programme**

147 Based upon a conjugated block periodisation model, a 30-week concurrent strength and endurance
148 training programme was completed.^{14,17} The programme was divided into two consecutive phases.
149 Phase one (P1) consisted of 15-weeks of accumulated training, focused upon the development of
150 aerobic capacity, GME, and upper body work capacity. Phase two (P2) was 12-weeks in length and
151 represented the transmutation phase of the programme, whereby an increased focus was placed upon
152 the development of anaerobic threshold and maximal upper body strength. Finally, phase three (P3),
153 was planned to be 3-weeks in length and represented the realisation phase of the protocol. This phase
154 consisted of a gradual tapering of TTL in order to reduce the impact of chronic fatigue and optimise
155 physical preparedness for the JOGLE. Each phase was roughly split into 4-week mesocycles, which

156 in turn were split into 3-weeks of accumulated TTL, followed by a recovery period in the fourth week
157 whereby the TTL was reduced by 50%. Table 1 provides an overview of a typical training week.

158

159 *****Insert Table 1 Here*****

160

161 Training intensity was based on the conceptual 3-zone TID model proposed by Seiler²⁴ whereby, the
162 PO identified at a given blood lactate level was used to guide training intensity. Based upon this
163 model Zone 1 (Z1) was defined as low intensity training at a PO associated with a blood lactate
164 concentration of $<2 \text{ mmol}\cdot\text{l}^{-1}$; Zone 2 (Z2) was defined as moderate intensity training, performed at
165 a PO between blood lactate concentrations of $2 \text{ mmol}\cdot\text{l}^{-1}$ and $4 \text{ mmol}\cdot\text{l}^{-1}$; Zone 3 (Z3) was defined as
166 high intensity training, performed at a PO that resulted in a blood lactate concentration of greater than
167 $4 \text{ mmol}\cdot\text{l}^{-1}$. Training volume was regulated using time whilst TTL was quantified using the TSS
168 method which was calculated using the following formula: $\text{TSS} = ((\text{time} \times \text{normalised power} \times$
169 $\text{intensity factor}) / (\text{PO}_4 \times 3600)) \times 100$.³ Finally, upper body strength training loads were determined
170 via the use of repetition zones matched with appropriate volume and recovery parameters in order to
171 elicit the desired, adaptive response (*e.g.*, work capacity, maximal strength).^{21,22,23}

172

173 **Statistical Analysis**

174 All data were calculated and presented as mean ($\pm SD$) and were analysed using Microsoft Excel
175 (Seattle, USA).

176

177 *****Insert Table 2 Here*****

178

179

180

181

182 Results

183 Findings revealed that the 30-week concurrent training programme resulted in considerable
184 improvements in PO_4 (+25.7%), PO_{peak} (+18.9%), power-to-mass ratio (+18.3%), relative VO_{2peak}
185 (+13.9%), GME (+4.6%), Bench Press 1RM (+4.3%), and Prone Bench Pull 1RM (+14.9%).
186 However, decrements in $PO_{max,AOI15}$ (-8.2%) and APR (-18%) were observed. These changes are
187 summarized in Table 2, while Figure 1 shows the improvements observed in blood lactate profile
188 over the duration of the 30-week training intervention.

189

190 The athlete completed the 1,407 km route in a total time of 89:55 hrs with a net cycling time of 74:38
191 hrs. During the course of the JOGLE the athlete took a net rest time of 15:17 hrs which was broken
192 down into 10 breaks lasting from 15 mins to 5 hrs. The total elevation gain over the course was 11,097
193 m. Average speed was 18.7 ± 2.1 km·hr⁻¹; cadence averaged 70.0 ± 2.6 rpm, whilst average PO was
194 67 ± 12 W, which represented an average PO_{peak} percentage of 30.5%. In terms of internal load, the
195 athletes average heart rate was 111 ± 11 b·min⁻¹; all event data are summarised in Table 3.

196

197 ***** Insert Figure 1 Here*****

198

199 ***** Insert Table 3 Here*****

200

201 ***** Insert Figure 2 Here*****

202

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207

208 Discussion

209 The aim of the present study was to investigate the effectiveness of a 30-week concurrent strength
210 and endurance training programme developed for a trained, H4 male handcyclist preparing for the
211 1,407 km JOGLE cycling challenge. In addition, this study monitored selected performance
212 parameters during the JOGLE, quantifying and recording PO, cadence, speed, and heart rate
213 throughout.

214

215 Previously Abel et al,² reported on the training regime of an elite, H3 male handcyclist preparing for
216 a 540 km ultra-endurance cycling event. The authors reported that the athlete completed over 6,000
217 km of training which was organised into mesocycles of 3-weeks of accumulated training followed by
218 a 1-week recovery period. Training intensity was defined as a percentage of PO achieved at a blood
219 lactate threshold of 4 mmol·l⁻¹ and a variety of different training sessions were utilised including
220 recovery, extensive endurance, and interval training. No detailed information on the TTL and TID
221 was reported; however, the athlete demonstrated an improvement in PO₄ of 63.8% whilst relative
222 VO_{2peak} increased by 14.6 %. More recently Zeller et al,²⁹ analysed the TID and TLL of an elite, H5
223 female Paralympic handcyclist over 45 weeks of training using a concurrent training intervention.
224 The athlete completed 194 handcycling training sessions covering a total distance of 10,190 km. In
225 addition, 34 strength training sessions were completed during the first 21 weeks of the training
226 programme. Using the 3-zone intensity scale as proposed by Seiler²⁴, Zeller et al,²⁹ reported a TID of
227 71.6% (Z1), 15.2% (Z2), and 13.1% (Z3) with the athlete demonstrating a 20% improvement in PO₄
228 and a 11% improvement in PO_{peak}.

229

230 In the present study the athlete completed 112 handcycling training sessions covering 6,073 km. In
231 addition, 56 strength training sessions were completed during the 30-week training period. The TID
232 according to the 3-zone intensity scale was 91% (Z1), 8.2% (Z2) and 0.8% (Z3) (Figure 4). In order
233 to quantify TTL, session and weekly TSS was recorded. Despite being commonly used as a measure

234 of TTL by able-bodied cyclists²⁷, to the best of the authors' knowledge, only one other study has
235 reported TSS in handcyclists.⁷ TSS is a composite number that takes into account the duration and
236 relative PO of a training session to arrive at a single estimate of overall training load and physiological
237 stress.³ Average weekly TSS reported was 459.8 ± 267.2 which equated to an average session TSS
238 of 114.9. Values of weekly training volume and TSS over the duration of the 30-week training
239 protocol are shown in Figure 2. Overall, the present study observed a 25.7% improvement in PO_4 and
240 an 18.6% increase in PO_{peak} . These improvements are broadly similar to those observed by Zeller et
241 al,²⁹ however, it should be noted that the present study was 15-weeks shorter and that the average
242 weekly training distance was less (202.43 vs. 226.44 km per week). Values of TID differed as a larger
243 overall volume of training was spent in Z1 (91 vs. 71.6%), and the total number of strength training
244 sessions completed was considerably greater (56 vs. 34). However, these discrepancies are easily
245 explained by differences in the distinct training objectives of our H4 handcyclist who was preparing
246 for an ultra-endurance challenge whereas the H5 athlete reported by Zeller et al.²⁹ was preparing for
247 shorter distance, higher intensity competitive road races and time trials.

248

249 ***** Insert Figure 3 Here*****

250

251 Several authors have suggested that a TID of 80% Z1 and 20% Z2/3 may result in the optimal
252 development of endurance performance.^{24,25} This model has been described as polarized training
253 whereby an emphasis is placed upon a large volume of low intensity training.⁴ Findings of the present
254 study support the use of a polarized approach for the development of ultra-endurance handcycling
255 performance as a significant improvement in most physiological measures was observed. However,
256 it must be noted that decrements in $PO_{max, AO15}$ and APR were seen. This was most likely due to the
257 relatively low amount of moderate and high intensity training completed during the 30-week training
258 programme.

259

260 ****Insert Figure 4 Here****

261

262 Over the duration of the training programme the athlete completed 56 upper body strength training
263 sessions. Upper body horizontal pulling and pushing strength has recently been shown to have a
264 significant relationship with handcycling performance capabilities.¹⁹ Furthermore, concurrent
265 strength and endurance training has been shown to enhance body composition, VO_{2peak} , PO_{peak} , GME,
266 and anaerobic capacity in several upper body dominant endurance sports.^{8,9,17} Indeed, Nevin et al,¹⁷
267 demonstrated that 8 weeks of concurrent training, based upon a conjugated block periodisation model,
268 resulted in greater improvements in handcycling performance capabilities, compared to endurance
269 training alone. Findings of the present study support the use of concurrent training for handcyclists
270 as considerable improvements were observed in both key physiological markers and upper body
271 strength measures. However, it must be noted, that due to unforeseen circumstances, the athlete did
272 not complete as high a proportion of Z2 training during phase 2 as originally planned. Furthermore,
273 the athlete was unable to apply a 3-week tapering period. As such only a 1-week taper was performed.
274 This may have resulted in the athlete experiencing a degree of fatigue prior to the start of the JOGLE,
275 an unwanted characteristic that future projects should avoid.

276

277 The athlete successfully achieved his objective and set a new handcycling world record time for the
278 1,407 km route of 89:55 hrs. The athlete maintained an average PO of 67 ± 12 W and an average
279 speed of 18.7 ± 2.1 km·hr⁻¹. Abel et al,² reported an average PO of 82.4 ± 12.2 W and speed of 21.6
280 ± 3.1 km·hr⁻¹. However, in comparison to the data reported by Abel et al,² the JOGLE was 867 km
281 longer. The JOGLE route also had 7,707 m more of ascent and the athlete rode for an additional 51:05
282 h. Therefore, cumulative physical and cognitive fatigue undoubtedly influenced our athlete's
283 performance. Indeed, this can be seen in Figure 2 where the athlete's average PO and heart rate
284 progressively decreased until stage 10, when a subsequent spike of improvement was demonstrated

285 during the final stages of the challenge. During the JOGLE, the athlete reported considerable fatigue
286 and discomfort specifically in his wrists and shoulders.

287

288 **Practical Applications**

289 Based upon the observations of the present study it is recommended that handcyclists and coaches
290 preparing for ultra-endurance cycling events consider adopting a concurrent strength and endurance
291 training programme based upon a conjugated block periodisation model. In terms of TID, it is
292 recommended that a polarised approach based upon a 90% Z1, 8% Z2, and 2% Z3 distribution be
293 adopted. If preparing for shorter duration, more intense road-races and individual TTs, one should
294 likely place a greater emphasis upon moderate and high-intensity training in order to develop
295 $PO_{\max, AO15}$ and APR. In this context, a training TID of 70% Z1, 20% Z2, and 10% Z3 is
296 recommended.²⁹ Finally, the use of TSS as a measure of TTL may also be prudent for handcyclists
297 and warrants further scientific enquiry.

298

299 **Conclusion**

300 In conclusion, this case study demonstrates that with appropriate testing, training, and monitoring,
301 effective preparation for a handcycling, ultra-endurance challenge can be achieved. However, it must
302 be borne in mind that training adaptations are subject to highly variable inter-individual responses.
303 This is especially prevalent in disability sport where athletes can display a heterogeneous mix of
304 disabilities, leading to variations in functional capacity and performance potential. Despite this,
305 findings of the present study are in agreement with the existing literature, and suggest that a
306 concurrent strength and endurance training protocol, based upon a conjugated block periodisation
307 model incorporating a polarized TID, can be used to develop handcycling performance capabilities
308 in preparation for ultra-endurance cycling events.

309

310

311 **Declaration of Interest**

312 There is no conflict of interest to declare for the present article.

313

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For Peer Review

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Table 1. Examples of a typical training week in each training phase (P1 accumulation, P2 transmutation, and P3 realisation)

Training Phase	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
P1	24:00 Z1 05:00 Z2 01:00 Z3 x 2	Strength Training Horizontal Push/Pull 7 x 4	Z1 120:00	Strength Training Vertical Push/Pull 7 x 4	24:00 Z1 05:00 Z2 01:00 Z3 x 2	120:00 Z1	Rest
P2	05:00 Z2 05:00 Z1 x 6	Strength Training Horizontal Push/Pull 4 x 5	240:00 Z1	Strength Training Vertical Push/Pull 4 x 5	14:00 Z1 05:00 Z2 01:00 Z3 x 3	240:00 Z1	Rest
P3	240:00 Z1	Rest	230:00 Z1	Rest	220:00 Z1	Rest	Rest

Table 2. Physiological and strength testing data

Date	November 2018	February 2019	June 2019
Body Mass (kg)	65.6	64.4	65.8
Peak Heart Rate ($\text{b}\cdot\text{min}^{-1}$)	184	182	186
Relative $\text{VO}_{2\text{peak}}$ ($\text{ml}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$)	46.7	51.5	53.2
PO_{peak} (W)	185	200	220
Power-to-Mass Ratio ($\text{W}\cdot\text{kg}^{-1}$)	2.8	3.1	3.3
GME (%)	15.3	15.6	16.0
PO_4 (W)	140	145	176
$\text{PO}_{\text{max},\text{AO15}}$ (W)	695	559	638
APR (W)	510	359	418
Bench Press 1RM (kg)	115.0	118.0	120.0
Relative Bench Press Strength ($\text{kg}\cdot\text{kg}^{-1}$ body mass)	1.75	1.83	1.82
Prone Bench Pull 1RM (kg)	87.0	90.0	100.0
Relative Prone Bench Pull Strength ($\text{kg}\cdot\text{kg}^{-1}$ body mass)	1.33	1.40	1.52

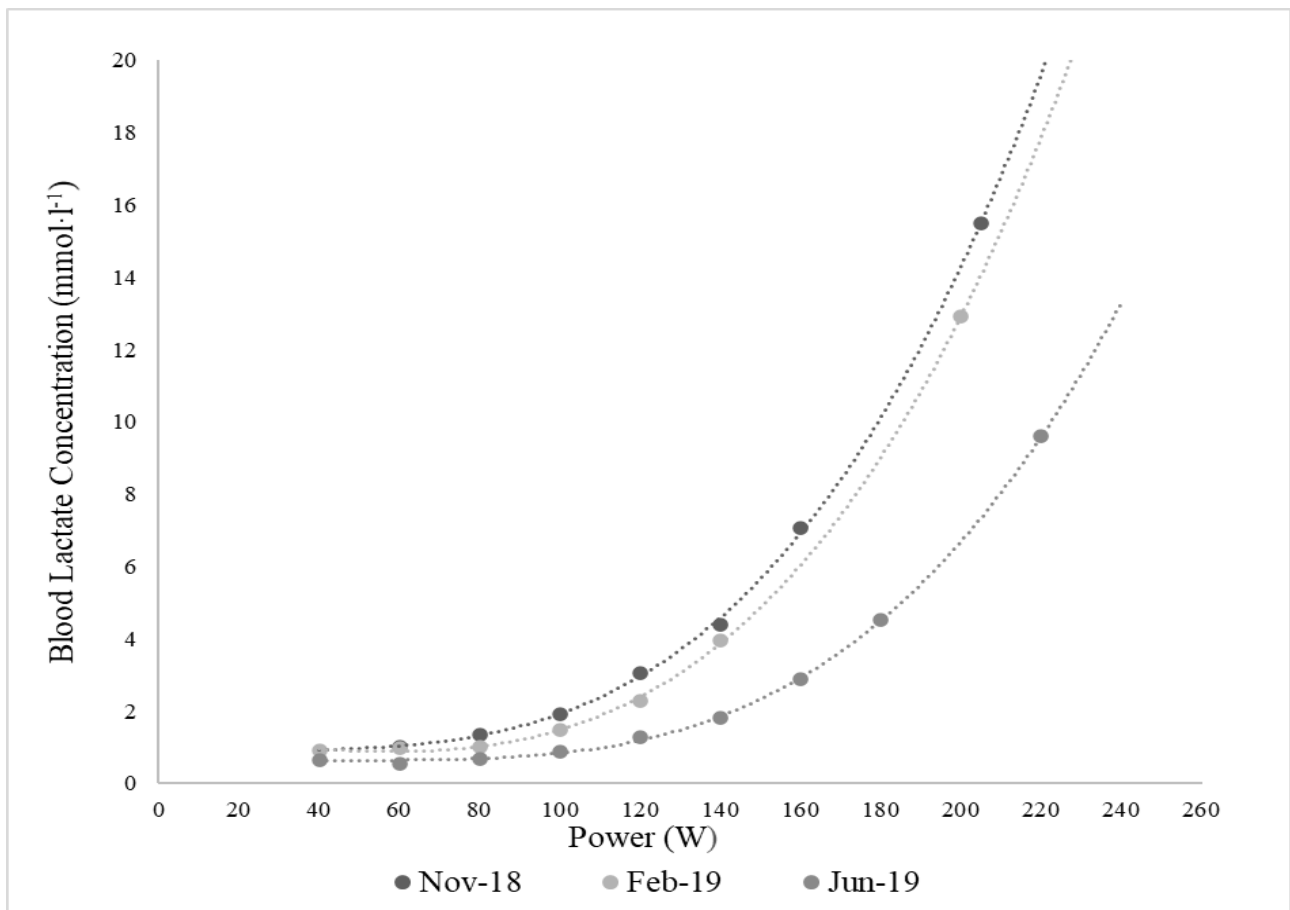


Figure 1. Blood lactate profiles obtained from a graded exercise test performed to volitional exhaustion

Table 3. Net Race Data

Stage	Net Stage Time (hr:mm:ss)	Net Cycling Time (hr:mm:ss)	Distance Covered (km)	Elevation Gain (m)	Average Speed (km·hr ⁻¹)	Average Cadence (rpm)	Power Output (W)	Heart Rate (b·min ⁻¹)
1	09:31:18	09:31:18	190.21	1750	20.0	75	96	137
2	08:33:17	18:04:35	177.03	1202	20.7	72	79	121
3	03:13:26	21:18:01	58.10	579	18.0	70	67	111
4	07:56:34	29:14:35	151.42	1211	19.1	73	67	111
5	06:01:18	35:15:53	94.62	1001	15.7	69	59	108
6	01:40:11	36:56:04	31.97	259	19.1	70	66	105
7	01:39:39	38:35:43	34.74	162	20.9	69	57	112
8	09:20:52	47:56:35	154.48	1139	16.5	68	54	100
9	10:13:25	58:10:00	160.85	1421	15.7	66	54	96
10	00:23:04	58:33:04	8.04	57	20.9	67	62	115
11	09:00:56	67:34:00	151.19	1646	16.8	68	67	103
12	07:04:07	74:38:07	148.89	1480	21.1	71	75	111

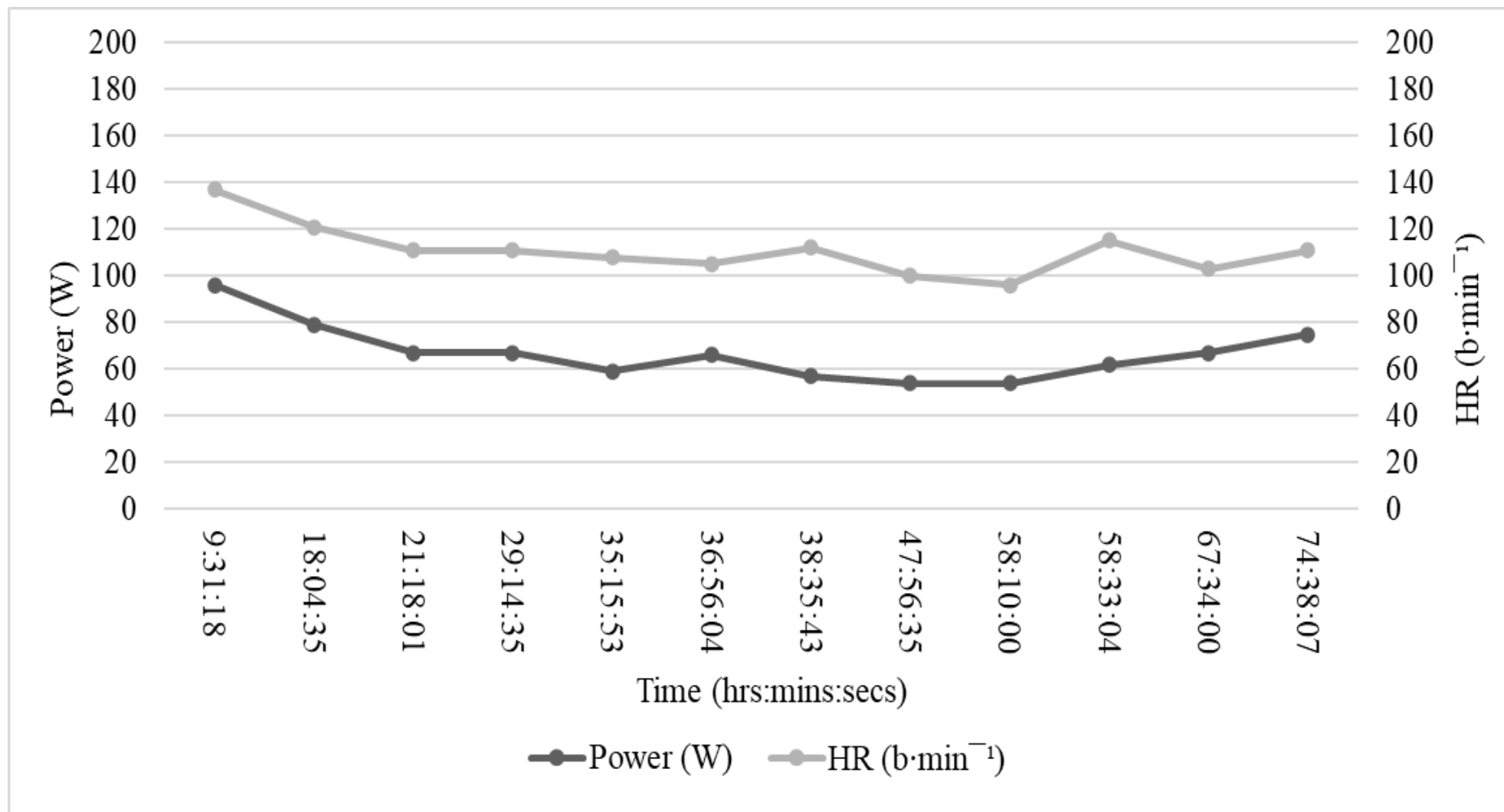


Figure 2. Net cycling time, power output, and heart rate during the JOGLE

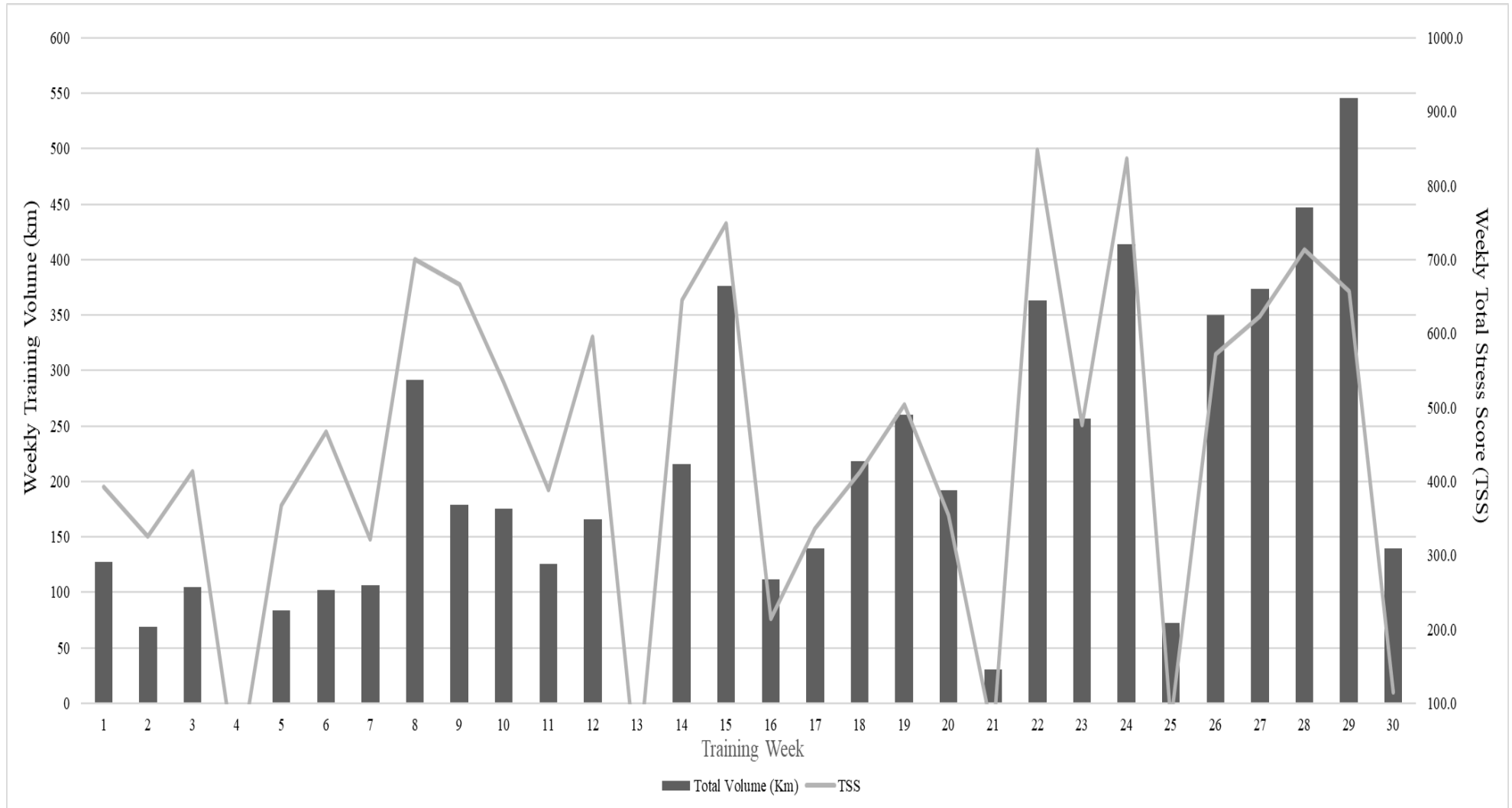


Figure 3. Total cycling training load over the 30-week training protocol.

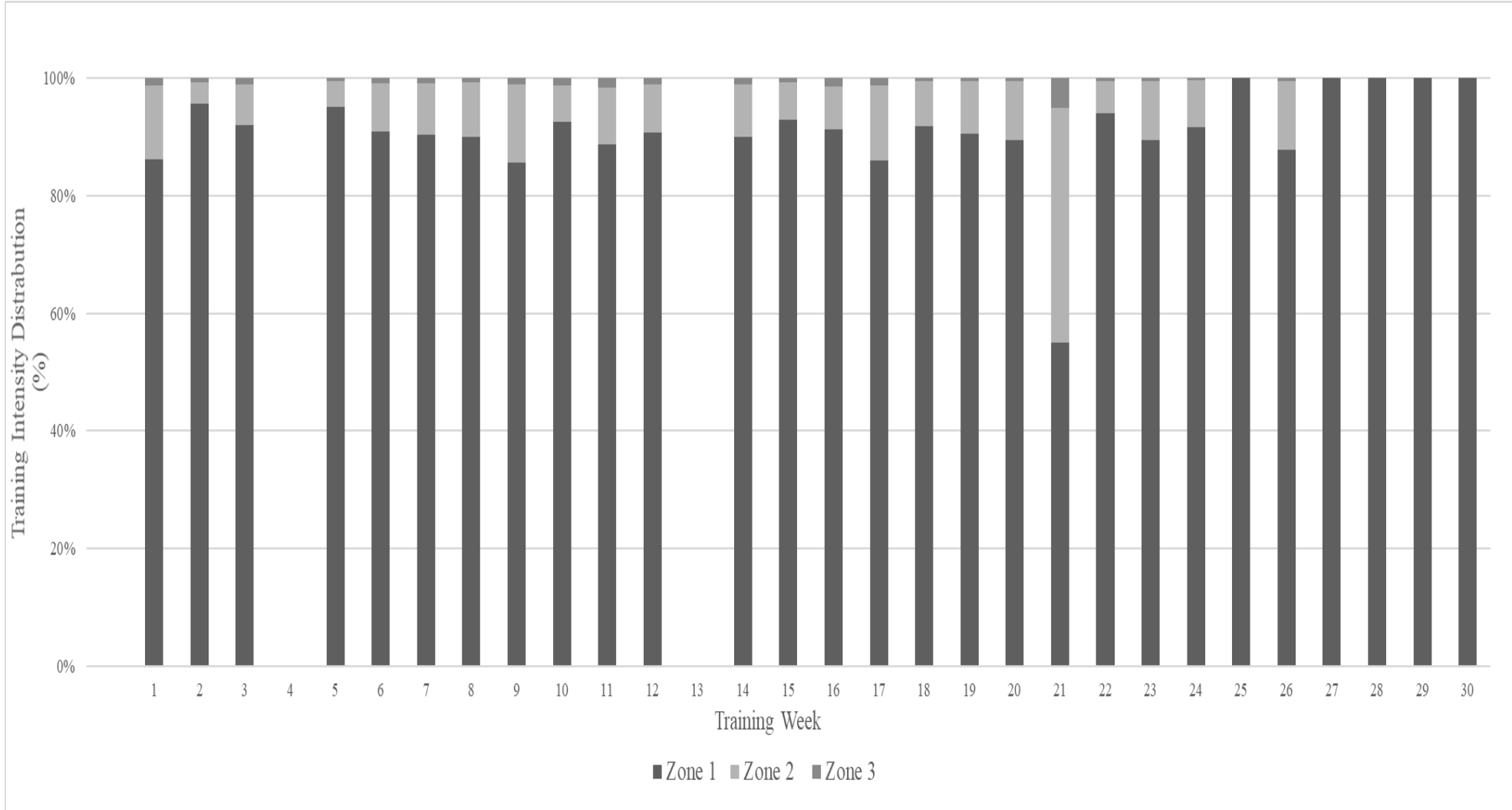


Figure 4. 3-Zone model training intensity distribution

For Peer Review