



Lecture 51:

Post – Exercise Exhaustion

Post – Exercise Proteinuria

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Post – Exercise Exhaustion:

- Severe muscle weakness and exhaustion after a competition or a training session - which is inconsistent with intensity and volume of competition or training - is called **post – exercise exhaustion (PEE)**.

It is characterized by:

- **severe exhaustion after exercise or competition.**
- **lack of energy**
- **decreased muscular tonicity.**
- **muscle cramps especially in the calves.**
- **lack of interest in doing other chores.**
- **loss of interest in next training session.**
- **muscle soreness.**

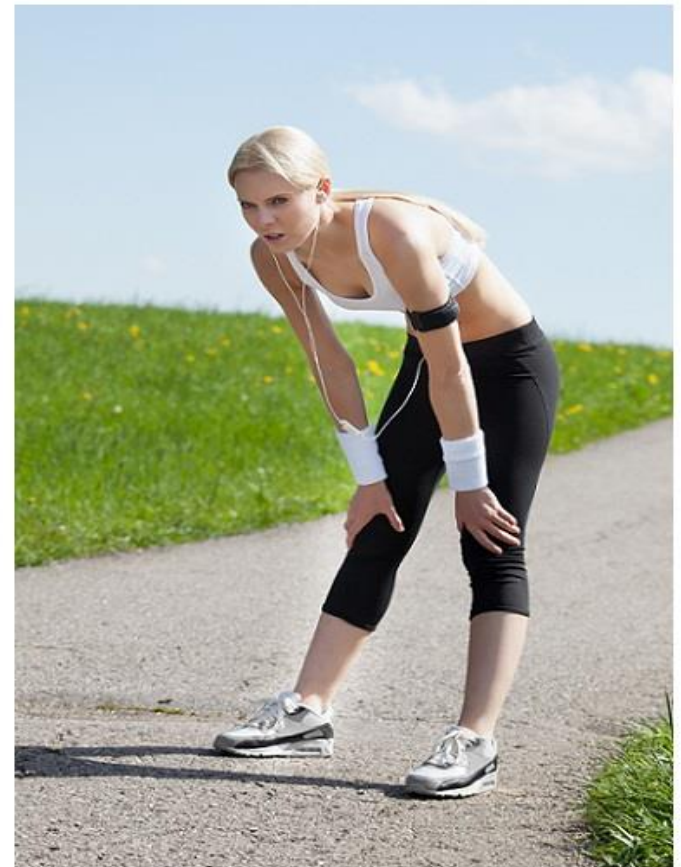


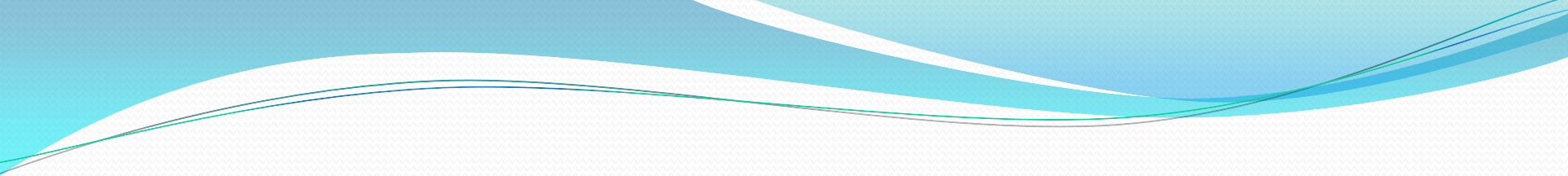
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Potential causes of PEE:

- **1) Decreased potassium level in the muscles.**
- **2) Rhabdomyolysis followed by a sudden increase in potassium level.**
- **3) Overtraining syndrome.**
- **4) L – Carnitine deficiency.**
- **5) Magnesium deficiency.**

Potential risk factors for developing PEE:

- **1)** Newly joined members of a fitness clubs (new Gym-goers).
- **2)** Vegans and vegetarians.
- **3)** Elite athletes who train hard to get ready for a competition.
- **4)** Those who suffer from a chronic diarrhea.
- **5)** Those who inadequately recuperate from their previous training sessions or competition.
- **6)** Caffeine consumers: caffeine depletes potassium from the body.

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- **7)** High doses of vitamin B₁₂ and folic acid.
 - **8)** Laxative abuse.
 - **9)** Licorice ingestion.
 - **10)** Medical conditions:
 - - hypokalemic periodic paralysis.
 - - Cushing's syndrome.
 - - anorexia nervosa.
 - - hyperaldosteronism.
 - - congenital adrenal hyperplasia.

- **11) Medications:**
- **a) Insulin**
- **b) Diuretics.**
- **c) Antibiotics (penicillin, nafcillin, oxacillin, carbenicillin, and ticarcillin).**
- **d) Theophylline.**
- **e) Alpha – Blockers.**
- **f) Thyroid hormones.**



Nutritional Supports:

- **a) Water:** drink 2 – 3 liters a day and keep the body fully hydrated.
- **b) Have sufficient complex carbohydrate** before training.
- **c) Consume foods high in potassium:** sweet potato, banana, dried apricots, and spinach.

- **d) Avoid having caffeine** before exercise.
- **e) Magnesium:** 200 – 400 mg daily.
- **f) L – Carnitine:** 2000 – 4000 mg daily.
- **g) Potassium:** 250 – 500 mg daily. **Caution:** if you are on medications for high blood pressure, dialysis, or suffering from kidney diseases, you should consume potassium under the supervision of your doctor.

- **h) BCAA (branched-chain amino acid):** 3 grams 30 minutes before training, 3 grams during training, and 5 grams within 30 minutes after training.
- **i) Calcium:** 1000 mg a day.
- **j) Pyruvate:** 5 – 10 grams a day.
- **k) Adaptogens:** take two of them as per your choice and availability.
- **l) A high – quality Multivitamins-Multimineral.**

Post – Exercise Proteinuria:

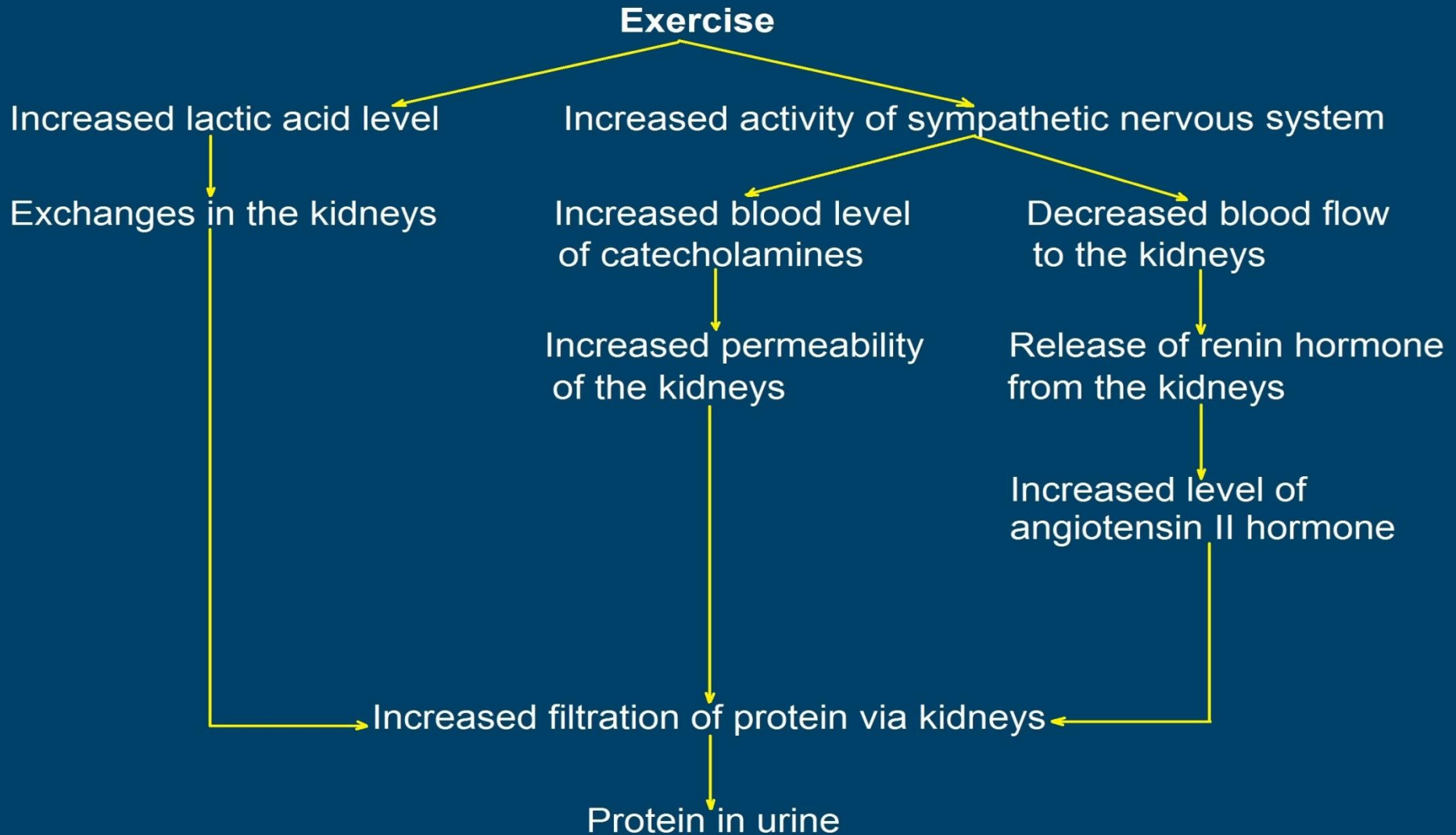
- A healthy person usually excretes up to **150 mg** of protein per day through urine.
- The appearance of excess protein in urine especially after a strenuous training session is a common concern of many athletes and gym – goers.
- Post – exercise proteinuria (PEP) is generally a **benign** and **transient condition** that lasts 24 to 48 hours.

- Post – exercise proteinuria is commonly seen among athletes involved in **aerobic sports**, such as runners, soccer players, cyclists, and swimmers.
- It is usually the result of the **intensity of exercise rather than the duration.**



- PEP is usually biphasic:
- The **first phase** of increased protein secretion is **within 30 minutes after exercise**. It is due to hemodynamic changes and saturation of renal tubules that lead to proteinuria.
- The **second phase** is about **24 hours after exercise** and results from oxidative stress on renal glomeruli.
- PEP is considered a **functional proteinuria** and the exact mechanism is unknown. However, few theories have been suggested.

Pathogenesis of Post - Exercise Proteinuria



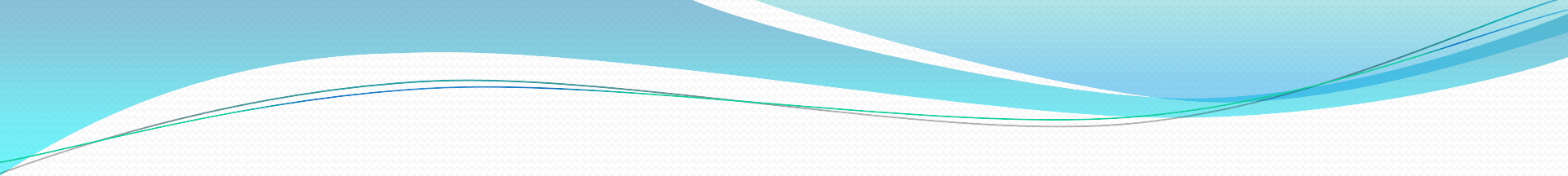
Potential risk factors for PEP:

- a) Obesity.
- b) Acromegaly.
- c) Diabetes.
- d) Amyloidosis.
- e) Congestive heart failure.
- f) Fever.
- g) High blood pressure.

Management of PEP:

PEP lasting more than 48 hours requires a medical attention.

- The following athletic and nutritional advices may help with PEP:
- a) Reduce intensity of your exercise.
- b) Keep your body fully hydrated and drink 2 – 3 liters a day.
- c) Decrease your protein intake.
- d) Avoid alcohol and caffeine.

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- **e)** Follow an alkaline diet.
 - **f)** Increase taking lime, lemon, citrus fruits, and vinegar.
 - According to few studies, not only does not **creatine supplementation** increase PEP, but also may decrease it by reducing lactic acid buildup.

Homework:

- 1) Describe the risk factors potentiating post – exercise exhaustion.
- 2) Describe your approach to post – exercise proteinuria.



