Chronic Changes in Serum IL-6 and TNF-α Following 12 Weeks of Concurrent Resistance and Aerobic Exercise are Dependent on Exercise Mode and May Affect Adaptation

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ABSTRACT

PURPOSE: To examine physiological responses to concurrent resistance and land treadmill training (RT-LTM) compared to concurrent resistance and aquatic treadmill training (RT-ATM) and the chronic effect of each on serum TNF- α and IL-6 (cytokines associated with chronic inflammation, CVD, and skeletal muscle metabolism). METHODS: Twenty-six untrained subjects (M: n=13, 98.6±17.1kg, 182.2±6.2cm, 34±11yrs, F: n=13, 78.9±14.0kg, 165.1±5.1cm, 38±11yrs) were screened to assess VO_{2max}, body composition (DEXA), and strength (Lifts: leg press, chest press, leg curl, lat pull, leg ext, triceps push-down, biceps curl). Subjects were then randomized into 2 groups: RT-LTM (M=6, F=7), RT-ATM (M=7, F=6). Each performed progressive RT (2/wk, $3 \ge 12 \otimes 60\% \rightarrow 80\%$ 1RM) for 12 wks. Both groups also performed 12 wks of aerobic LTM or ATM ($60 \rightarrow 85\% VO_{2max}$) respectively. ATM or LTM occurred immediately following RT sessions and in isolation on a 3rd day during the wk. Kcal/session: Wk 1-6 = $250 \rightarrow 500$ kcal/session, Wk 6-12 = 500 kcal/session. Blood samples were obtained in the rested state (>72h after last exercise bout) before and after training. Serum TNF- α and IL-6 was analyzed using a multiplex assay kit (Luminex®, Millipore®). A 2x2 Mixed Model ANOVA w/ repeated measures was used to examine absolute and relative changes in the independent variables listed in the table. RESULTS:

INDEP. VAR.	Lean Mass (kg)	Fat Mass (kg)	%Body Fat (%)	VO_{2max} (ml/kg/min)	Total Strength (lbs)	IL-6 (pg/dl)	TNF-α (pg/dl)				
	BASELINE MEASUREMENTS										
RT- LTM	49.9 ± 3.7	35.9 ± 3.1	42.1 ± 2.5	29.9 ± 2.0	1457.4 ± 135.1	4.6 ± 1.6	7.1 ± 1.9				
RT- ATM	53.1 ± 4.0	31.1 ± 2.8	37.0 ± 2.3	32.1 ± 1.6	1552.8 ± 145.9	4.6 ± 1.5	7.9 ± 1.5				
	POST TRAINING MEASUREMENTS										
RT- LTM	51.0 ± 4.7 [†]	34.1 ± 2.7 [†]	40.1 ± 3.6 [†]	$35.8 \pm 2.9^{\dagger}$	1843.4 ± 201.1 [†]	$7.1 \pm 1.6^{+}$	6.8 ± 0.5				
RT- ATM	55.8 ± 4.6 [†]	30.3 ± 3.1	35.6 ± 2.4 [†]	$35.8 \pm 2.3^{\dagger}$	2193.6 ± 251.3 [†]	5.1 ± 2.7	$6.6 \pm 1.0^{\dagger}$				
	% Δ = Calculated From Each Individual Subjects Change From Baseline										

RT- I TM	2.6% ± 1 4 ^{†,a}	-6.5% ± 2.4 ^{†,a}	-5.8% ± 1.8 ^{†,a}	14.1% ± 2.3 ^{†,a}	21.3% ± 1.1 ^{†,a}	125.9% ± 36.6 ^{†,a}	-1.8% ± 6 0ª
RT-	4.2% ± 0.9 ^{†,b}	-2.1% ±	-4.1% ±	4.5% ±	27.1% ± 1 7 ^{†,b}	28.1% ± 34.7 ^b	-13.0% ±
711111	0.0	1.0	1.0	0.0	1.7	04.7	0.7

Values are means \pm SE. $\&\Delta =$ Individual change from baseline. Like letters = not significantly different between groups, \dagger =Significant change from baseline within group ($\alpha \le 0.05$).

CONCLUSION: Chronic RT-LTM and RT-ATM training elicit different effects on markers of chronic inflammation which may be related to differing health and fitness outcomes observed between our groups.

