Born to run out of COVID-19: what gives us wings

-
· >
^
\sim

1 2

4	Luca Filipas1,2, Antonio La Torre1,3, Livio Luzi1,2, Roberto Codella1,2*
5	Department of Biomedical Sciences for Health, Università degli Studi di Milano, Milan, Italy
6	2Department of Endocrinology, Nutrition and Metabolic Diseases, IRCCS MultiMedica, Milan, Italy
7	3Italian Athletics Federation, Rome, Italy
8	
9 10	* Correspondence:
11	Roberto Codella, Ph.D.
12	Dipartimento di Scienze Biomediche per la Salute
13	Università degli Studi di Milano
14	Via Fratelli Cervi 93, 20090 Segrate (Milano)
15	Telefono: +39-02-50330356
16	E-mail:roberto.codella@unimi.it
17	

18 Keywords: global health1, physical activity2, Olympics3, endurance running4, metabolism5.

Run out of COVID-19

19 When COVID-19 exacerbates another pandemic: physical inactivity

20 A pandemic called COVID-19 has spread worldwide in the first months of 2020. Several measures

- 21 have been taken by mostly affected countries to contain the virus outbreak, from social distancing to
- closing social and commercial activities. Also, sports dynamics has been dramatically impacted by this

23 pandemic, with training and competitions cancelled and no clear hypotheses on the expected restart 24 dates. The International Olympic Committee even postponed Tokyo 2020 Olympics to 2021, with lots

- of consequences on athlete's preparation and mental focusing. Long-distance runners have seen
- cancelled or postponed all the spring races, included the Major Marathons, and associated economic
- 27 sequalae are real.

28 This pandemic could potentially have a huge impact not only on elite athletes' preparation for the Olympics, but also for global health. In fact, the impossibility to engage in regular activities (e.g., 29 30 school, work, fitness facilities) and utilize community resources (e.g., parks, playgrounds, walking 31 trails) have caused a sharp reduction in the levels of physical activity, and has upended western 32 societies lifestyles. In turn, this may result in a substantially increased risk of developing cardiovascular 33 and metabolic diseases. Indeed, physical activity is associated with reduced risk of mortality and 34 incident cardiovascular and metabolic diseases in all regions of the world, with no indication of a 35 ceiling effect for higher doses. Therefore, the scientific community rated physical activity as a low-36 cost approach to reducing deaths and cardiovascular disease that is applicable globally with potential

37 large impact (1).38

39 **Poor mental health and physical inactivity: two hits from COVID-19**

40 Other factors, such as fear of social contacts and the inability to carry out group activities, could 41 contribute to physical inactivity even once community resources will be reopened. Hence, the

42 prevalence of physical inactivity may rise tragically in the upcoming months, as the social distances

- 43 measures are expected to be extended at least until summer or autumn. To the best of our knowledge, 44 no studies assessed the long-lasting effect of such a pandemic on physical activity behaviors. However,
- 45 previous research has assessed the persisting effect of natural disasters on it. As an example, following
- the 2011 earthquake and tsunami in East Japan, Okazaki and colleagues (2) reported a significant
 decrease in physical activity up to three years following the disaster.
- 47 decrease in physical activity up to three years following the disaster.
 48 The evidence base for the relationship between physical activity and mental wellbeing is well
 49 established (3). A large body of literature has consistently shown that physical activity is positively
- 50 associated with increased mental wellbeing (4,5). In a recent review on psychological impact of
- 51 quarantine periods, Brooks and colleagues compared post-traumatic states such as stress, depression 52 and confusion, with experiencing epidemic outbreaks (6). Therefore, a COVID-19-associated
- reduction in physical activity could impair physiology as well as generate worrying effects atpsychological and psychosocial level (7).
- 55

56 An alternative response to the outbreak

57 Sustained physical inactivity and sedentary behaviors are typically accompanied by poor physical and 58 mental health and increased disease-specific and all-cause mortality risk (8). Even brief periods of

- 59 exposure to these behaviors can be deleterious; for example, a 2-week reduction in daily steps from 60 ~10000 to ~1500 steps led to impaired insulin sensitivity and lipid metabolism, increased visceral fat
- 61 and decreased fat-free mass and cardiovascular fitness in healthy adults (9).
- 62 Despite acknowledging the tremendous impact of COVID-19 emergency, the authors would like to
- 63 highlight potential long-term effects of a sedentary lifestyle that could even cause worse consequences
- 64 than the infection itself. In this regard, the spread out of the COVID-19 has been greater in the high-
- 65 income countries, that have at the same time the highest prevalence of physical inactivity (10). A
- 66 further increase in physical inactivity could have potential drastic effects not only in the onset of

67 cardiovascular and metabolic diseases, but also, in the long-term trends, in sport- performances and results.

68 69

70 Sociocultural and lifestyle habits could preserve metabolism and lead to Olympic medals

Long-distance athletics could be a mirror of this situation and the dominance of east-African runners 71 at the Olympics and World Championships during the last years provides hints in a global health 72 73 prospective. In the top-50 all-time performances of the track distance events (from 800 m upward), 74 east Africans men and women passed from 11.4 % in 1989 to 61 % in 2019, mostly Kenyans, 75 Ethiopians and, even recently, Ugandans. The dominance in the top 50 middle- and long-distance races 76 reflected a spurt in the number of medals at the Olympics and World Championships (11). On the other 77 side, the increase in middle- and long-distance athletics medals at the Olympics and World 78 Championships by Africans athletes was paralleled by the decrease of Europeans' ones, from 1983 (i.e.

- 79 the first edition of the World Championships) onwards (Figure 1).
- The association between physical performance in long-distance athletics competitions and global 80
- 81 health prospective finds supports in the 2016 report of the World Health Organization (WHO) (10).
- 82 This report showed that the prevalence of insufficient physical activity rises worldwide according to
- the level of income: high income countries had more than doubled this prevalence compared to low 83 84 income countries for both men and women (i.e. 32 % and 42 % of insufficient physical activity in high
- income compared to 13 % and 19% in low income countries, respectively for men and women). 85
- Specifically, if we look at the physical inactivity levels in the east Africa and in particular in Kenya, 86
- official reports show a strong difference between children from urban and rural areas, where successful 87
- 88 Kenyan runners were born and raised (12). The average levels of children's physical activity in some 89 regions of Kenya are well-above the recommended threshold of 60 min of daily moderate-vigorous
- 90 physical activity, with more than 150 min spent in free-living physical activity (13). Conversely, in
- 91 western countries more than 80 % of adolescents do not reach the claimed minimum level. Moreover,
- 92 while 13.1 % of children of urban areas spend more than 11 hours per week playing screen games, 93 instead 62.5 % of the children of rural areas spend no time in these activities (14). Increased
- 94 urbanization in high income countries has resulted in several negative environmental factors such as 95 violence, high-density traffic, low air quality, pollution, lack of parks, sidewalks and sports/recreation
- facilities (15). This may discourage participation in physical activity along with making adults resistant 96 97 to leave children play freely outside. Interestingly, while the levels of physical activity are decreasing 98 among children and adults in high income countries and in urban areas, the bound between
- 99 cardiorespiratory fitness and high levels of physical activity is seemingly reinforced in those emergent 100 countries where fortunate endurance performances are registered (16).
- As this gap is growing further when comparing low- and high-income countries, the next Olympics 101 102 might confirm east Africans as the favorites for medals in long-distance athletics races. Moreover, the
- 103 Olympic races show only a part of the phenomenon as, in these events, the number of athletes for each
- 104 nation is limited to three, thus allowing athletes from other nations to place themselves in prominent
- 105 positions although their overall rank is lower. As an example, in the 2019 men's marathon lists, the
- 106 first athlete not born in east Africa is ranked 34th whereas the first athlete born outside of Africa is 107 ranked 45th.
- 108 Only by changing some modern detrimental habits and putting again physical activity as pivotal in our
- 109 lifestyles, we might be able to revert this negative trend, for which high income countries increase
- 110 exponentially metabolic and cardiovascular diseases while they reduce competitiveness in endurance
- 111 events.
- 112

113 **Concluding remarks**

114 Results and performances are not only "sports outcomes", but also offer an ideal context for

115 understanding deep socio-cultural processes rooted in the development of a country. The lack of a date

- 116 for the next Olympics is certainly a sports problem, but could have a translation in what is around the
- 117 world of sport: the example of athletics long-distance events are a clear indicator of how a healthy
- 118 lifestyle can allow a country to remain at the top of the sport for decades, generating benefits for the
- health system. As early-life high levels of maximum aerobic capacity are linked to protection from
- 120 coronary heart diseases (17), they likewise introduce a sociocultural factor that is determinant, amongst 121 the others, for the success in running competitions. Beyond the extraordinary athletic aptitudes, the
- strong psychological motivation to succeed is the discriminating factor for any-country runners (18).
- 123 On the other hand, watching athletes from your country winning medals in international competitions
- 124 can be a strong incentive to physical activity. In this sense, the Olympics are the fundamental engine
- 125 of a champion emulation process which lays the foundations for a growth of a national sports
- 126 movement and, consequently, an increase in the level of physical activity of the nation (19). Elite sport
- has the potential role to be the psychosocial driving force in pushing the population through a regular practice of physical exercise. We urge public health authorities and community at large not to leave
- sport at the short end of the stick in this emergency, considering the long-term deleterious effects that
- 130 a lack of physical activity could cause at metabolic, cardiovascular, psychological and social levels.
- 131

132 Acknowledgements

This work was supported by Italian Ministry of Health Ricerca Corrente – IRCCS MultiMedica.
 134

135 **Contributors**

- 136 LF, ALT, LL and RC participated in conception and design; LF completed the acquisition of data; LF
- 137 and RC carried out the analysis and interpretation of data; LF and RC participated in drafting of the
- 138 manuscript; LF, ALT, LL and RC critically revised the manuscript. All authors have read and approved
- the final version of the manuscript and agree with the order of presentation of the authors.

140 **Conflict of interests**

- 141 The authors declare that the research was conducted in the absence of any commercial or financial
- 142 relationships that could be construed as a potential conflict of interest.

143 Data availability

- 144 There are no data in this work.
- 145

146 **References**

- Lear SA, Hu W, Rangarajan S, et al. The effect of physical activity on mortality and cardiovascular disease in 130 000 people from 17 high-income, middle-income, and lowincome countries: the PURE study. Lancet 2017;390(10113):2643-54.
- Okazaki K, Suzuki K, Sakamoto Y, Sasaki K. Physical activity and sedentary behavior among children and adolescents living in an area affected by the 2011 Great East Japan earthquake and tsunami for 3 years. Prev Med Rep 2015;2:720-24.
- Mason P, Kearns A. Physical activity and mental wellbeing in deprived neighbourhoods. Ment Health Phys Act 2013;6(2):111-17.
- Bize R, Johnson JA, Plotnikoff RC. Physical activity level and health-related quality of life in the general adult population: a systematic review. Prev Med 2007;45(6):401-15.
- 157
 5. Cerin E, Leslie E, Sugiyama T, et al. Associations of multiple physical activity domains with 158
 5. Cerin E, Leslie E, Sugiyama T, et al. Associations of multiple physical activity domains with mental well-being. Ment Health Phys Act 2009;2(2):55-64.
- Brooks SK, Webster RK, Smith LE, et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. Lancet 2020;395(10227):912-20.
- 161
 7. Harris MA. The relationship between physical inactivity and mental wellbeing: findings from
 a gamification-based community-wide physical activity intervention. Health Psychol Open
 2018;5(1):2055102917753853.

- Booth FW, Roberts CK, Thyfault JP, Ruegsegger GN, Toedebusch RG. Role of inactivity in chronic diseases: evolutionary insight and pathophysiological mechanisms. Physiol. Rev 2017;97:1351-1402.
- 167
 9. Krogh-Madsen R, Thyfault JP, Broholm C, et al. A 2-wk reduction of ambulatory activity
 168 attenuates peripheral insulin sensitivity. J Appl Physiol 2010;108:1034-40.
- 169 10. WHO Global Health Observatory data. Prevalence of insufficient physical activity.
 170 http://www.who.int/gho/ncd/risk_factors/physical_activity/en/ (accessed Feb 27, 2020).
- 171 11. Tucker R, Onywera VO, Santos-Concejero. Analysis of the Kenyan distance-running
 172 phenomenon. Int J Sports Physiol Perform 2015;10(3):285-91.
- 173 12. Onywera VO, Muthuri SK, Hayker S, et al. Results from Kenya's 2016 report card on physical
 174 activity for children and youth. J Phys Act Health 2016;13 Suppl 2:S195-S200.
- 175 13. Ojiambo R, Gibson AR, Konstabel K, et al. Free-living physical activity and energy
 176 expenditure of rural children and adolescents in the Nandi region of Kenya. Ann Hum Biol
 177 2013;40(4):318-23.
- 178 14. Onywera VO, Adamo KB, Sheel AW, et al. Emerging evidence of the physical activity
 179 transition in Kenya. J Phys Act Health 2012;9(4):554-62.
- 180
 15. Manferdelli G, La Torre A, Codella R. Outdoor physical activity bears multiple benefits to
 181
 health and society. J Sports Med Phys Fitness 2019;59(5):868-79.
- 182 16. Santos-Lozano A, Lucia A, Ruilope L, Pitsiladis YP. Born to run: our future depends on it.
 183 Lancet 2017;390(10095):635-36.
- 184 17. Batty GD, Lee IM. Physical activity and coronary heart disease. BMJ 2004;328(7448):108990.
- 18. Wilber RL, Pitsiladis YP. Kenyan and Ethiopian distance runners: what makes them so good?. Int J Sports Physiol Perform 2012;7(2):92-102.
- 188
 19. Thomas CE, Chambers TP, Main LC, Gastin PB. Factors influencing the early development of 189 world-class Caribbean track and field athletes: a qualitative investigation. J Sports Sci Med 190 2019;18(4):758-71.
- 191

192 Figure caption

- 193 Figure 1. Medals in middle- and long- distance events of athletics at the Olympics and World
- 194 Championships from 1983 to 2019. Country are grouped in macro-areas (i.e. Africa, America, Asia, 195 Australia and Europa)
- 195 Australia and Europa).