



# Orthostatic hypotension among elite wheelchair athletes

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# Objectives:

- 1) Outline current paralympic classification of wheelchair rugby athletes
- 2) Present cardiovascular responses in wheelchair rugby athletes
- 3) Outline future directions for the integration of autonomic assessments into paralympic athlete classification

# Athletic Training/Performance

## **Q1. What does our body do when we start to exercise?**

- Increased heart rate
- Increased blood pressure
- Increased peripheral blood flow (musculature!)
- Increased respiration

**These changes occur to fuel our body to keep up with the high physical demands of exercise!**

# Athletic Training/Performance

## Q2. What is different for people with SCI?

- Resting BP is usually low
- Persistent orthostatic hypotension
- Post-exercise induced hypotension
- Poor response in heart rate
- Episodes of uncontrolled autonomic dysreflexia

**These result in decreased athletic performance and could encourage some unusual techniques used by wheel chair athletes (i.e. Boosting) to compensate for the abnormal cardiovascular control!**



# The Paralympic Games

## Summer Games

- Wheelchair Rugby
- Wheelchair Basketball
- Wheelchair Fencing
- Wheelchair Tennis
- Boccia
- Football
- Goalball
- Archery
- Cycling
- Equestrian
- Volleyball

## Winter Games



ing



# Wheelchair Rugby Classification

- Bench Test (ball handling ability)
- Functional Trunk Test (trunk stability)
- Functional Movement Tests (maneuvering ability)
- On-Court Evaluation

## Rugby Classes Profile:

- 1<sup>st</sup> class – 0.5
- 2<sup>nd</sup> class – 1.0
- 3<sup>rd</sup> class – 1.5
- 4<sup>th</sup> class – 2.0
- 5<sup>th</sup> class – 2.5
- 6<sup>th</sup> class – 3.0
- 7<sup>th</sup> class – 3.5

Total players on the court: **4**

Total score allowed: **8.0**



## • What do we know about SCI patients?

- Episodes of autonomic dysreflexia
- Resting hypotension
- Orthostatic hypotension
- Post-prandial hypotension
- Post-exercise induced hypotension
- Arrhythmias
- Poor heart rate response during exercise

(Clayden, Hall, Eng, Krassioukov, 2005)

# The Paralympics

**Current classification of wheelchair athletes does not take into account autonomic functions -**

***placing some athletes at a distinct advantage or disadvantage in comparison to others, especially those with SCI.***

## Study Objectives and Design:

- **Objective:** To develop a validated system for functional autonomic assessment of wheelchair Paralympic athletes
  - In consideration of “fair play” and safety.
- Research Design: prospective, cross-sectional study
- Research participants:
  - male and female wheelchair athletes,
  - Ages 18-45

# Subjects:

- Paralympians from five international rugby teams
- Total number: **25 male**
- Cervical/Thoracic: **22/3**
  - **C5** **2**
  - **C6** **10**
  - **C7** **9**
  - **C8** **1**
  - **T1-5** **3**
- Average time post SCI: **13±5 years**
- Average age: **32±5 years**
- **Classifications**
  - 0.5-1.5 9 players (36%)
  - 2-2.5 12 players (48%)
  - 3-3.5 4 players (16%)



# Orthostatic Sit-Up Test



## Protocol of Study –

1. 10 minutes rest
2. Orthostatic challenge test

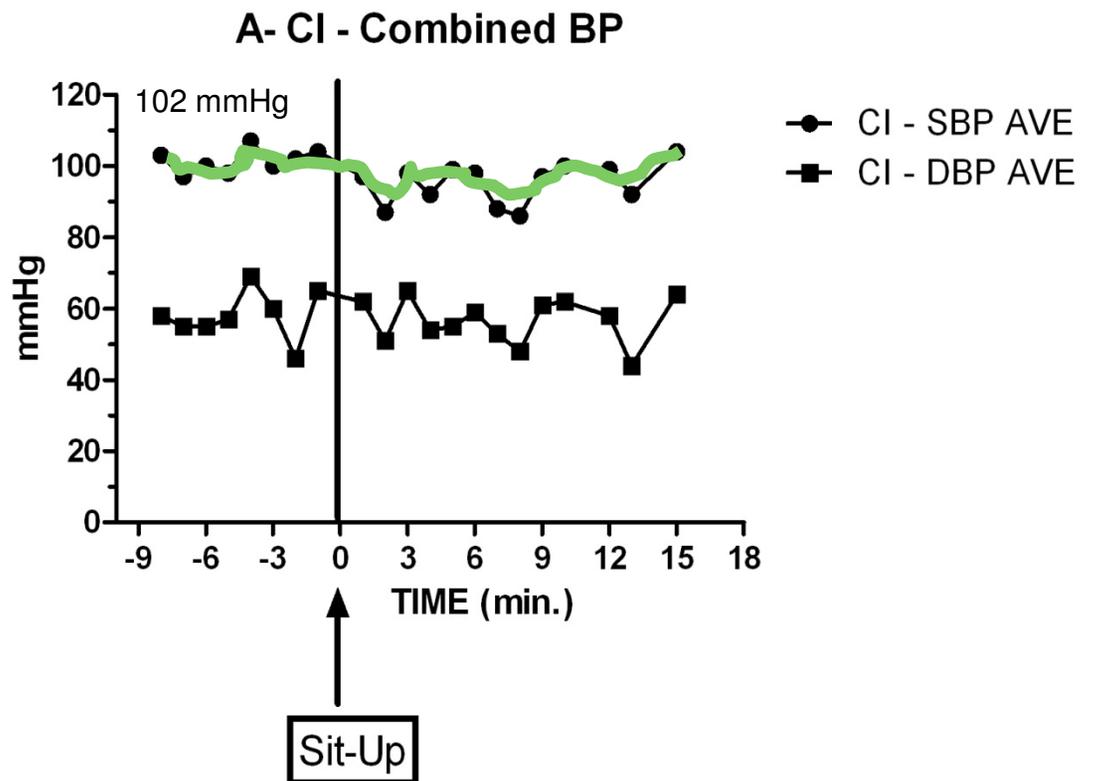
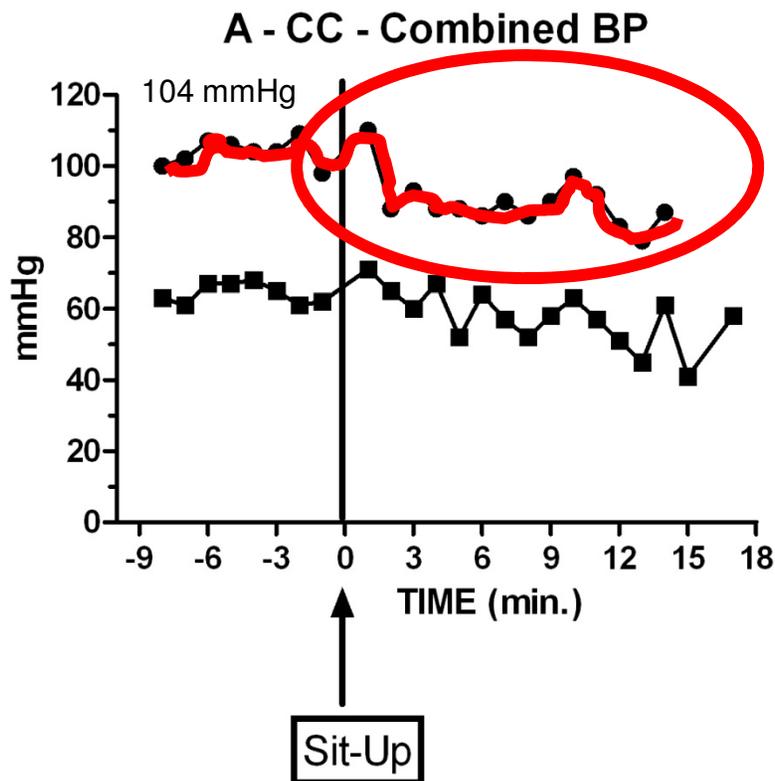
## Parameters Recorded–

1. Resting SBP/DBP and HR
2. BP and HR responses to orthostatic challenge
3. Sympathetic Skin Responses
4. Symptoms during orthostatic test

# Changes in blood pressure following sit up test in individuals with cervical complete (n=10) and incomplete (n=12) SCI

Average classification = 1.80

Average classification = 1.88



**\*Orthostatic hypotension was observed in ~43% of subjects**  
**\*Many developed dizziness and lightheadedness!**

# Most common symptoms during sit-up test

## COMPLETE

- Light-headedness (10%)
- Dizziness (20%)
- Test-stopped or interrupted (0%)
- Syncope (0%)

## INCOMPLETE

- Light-headedness (8%)
- Dizziness (25%)
- Test stopped or interrupted (0%)
- Syncope (0%)

\*Overall, 43% of these elite wheelchair athletes developed orthostatic hypotension

# Conclusions:

- It was documented previously that cardiovascular dysfunctions including orthostatic hypotension are common among individuals with SCI
- We are presenting novel information that up to 43% of elite Paralympic athletes experience symptomatic orthostatic hypotension during international competition.
- Together with the International Paralympic Committee (IPC), we propose the need for the addition of autonomic evaluations into future Paralympic classification.

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