

Returning to full training following reduced training load

*Sport Wales & WIPS
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Introduction

Following on from the Sport Wales physical training advice during COVID-19 restrictions and looking towards the next steps, it is important to begin thinking about transitioning back to full training. With the majority of training facilities closed most athletes will have experienced some level of disturbance or reduction in normal training load, some more than others depending on sport and access to equipment. The aim of this document is to assist in returning athletes back to full training loads following a period of reduced or modified training. Through a periodized plan based on current training load and practical progressions this will allow athletes to return to full training in the most efficient way possible and minimise the risk of further time loss.

Considerations

Whilst the table below provides guidance on general training volume progression, it should not replace information provided by the Sport Wales Multidisciplinary Team

Some athletes will be able to return to 'normal' training quicker than others, conversely some may take longer

The athletes training load pre the COVID-19 break should be used as the level you are aiming to return to

Use your usual measure of load (e.g. distance, S-RPE, HR or even training time)

Perceived exertion to training sessions and recovery/wellness after training should be used to help guide progression

Determining modified training period on return from reduced training load

		Weeks of modified training to return to full training				
		0%	20%	40%	60%	80%
Weeks of training at a reduced load	12	10.2	9.0	7.8	6.7	5.5
	8	8	6.9	5.8	4.8	3.7
	4	5.7	4.7	3.6	2.5	1.5
	2	4.6	3.6	2.5	1.4	0.4
		0%	20%	40%	60%	80%
		Percentage of normal training load completed				

Source: AIS - Prescription of training load in relation to loading and unloading phases of training (2015)

Key:

Red = Long Return Time

Amber = Moderate Return Time

Green = Short Return Time

Practical Examples

Example 1

If an athlete has **8 weeks** of not being able to perform any training (**0%**), the athlete will require 8 weeks of incremental training to return to full training (pre COVID-19 training levels)

Example 2

If an athlete has **8 weeks** of training at a reduced load (**40%**), the athlete will require **5.8 weeks** of incremental training to return to full training (pre COVID-19 training levels)

Example 3

If an athlete has **8 weeks** of training at a reduced load (**80%**), the athlete will require **3.7 weeks** of incremental training to return to full training (pre COVID-19 training levels)

What if I can't train as normal?

Even a small amount of training can be beneficial. Research has shown that completing a small amount of training each week (e.g. 1x Strength and 2x 40 mins aerobic sessions @ 80% of $VO_2\max$) can greatly reduce decreases in strength and aerobic endurance. Continuing some training will also help to speed up return to full training.

(Garcia-Pallares et.al 2010 - Physiological effects of tapering and detraining in world-class kayakers)

What if I can't train at all?

Don't Panic!! Other research has showed that following 8 weeks of **no training** you can return to similar levels of fitness after 8 weeks of retraining. Important to follow sensible and guided training load progressions over this period.

(Godfrey et.al 2005 - The detraining and retraining of an elite rower: a case study)

Recommendations for maintaining Muscle mass, Strength & Power with limited resources

- Lighter weights lifted to the point of volitional failure work to enhance gains, and prevent losses in muscle mass
- Aim for 3 sessions per week
- Volume can be increased if desired frequency is less
- Increases in power are possible using a wider variety of loads
- Work with intention and focus – quality with the intention to lift as explosively as possible

Don't Forget ...

- Do not train if experiencing any suspected coronavirus symptoms (e.g *fever, fatigue, cough, anorexia, malaise, muscle pain, sore throat, dyspnoea, nasal congestion or headache. Rarely, patients present with diarrhoea, nausea and vomiting*)
- Plan adequate recovery throughout this period
- Monitor all forms of physical and psychosocial stress
- Aim for >8 hours sleep each night
- Maintain high hygiene standards