
The systems physiology of exercise

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ASE Annual Conference

Biology in the Real World: A Sporting Chance

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Plan

- ‘System physiology’
- Exercise & ‘the human machine’
- Methods: VO_2 , MRS and others
- Interpreting ^{31}P MRS data
- Integrating the methods
- Simulation
- Key concepts & implications for interventions

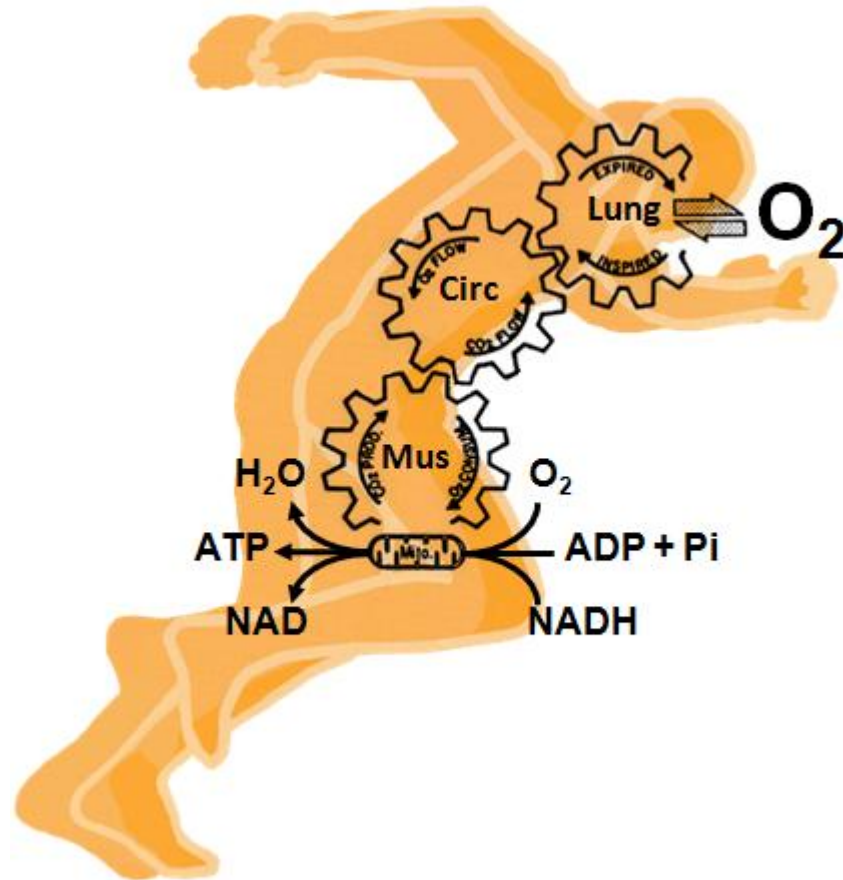
'System physiology'

- Just physiology?
- The parts ('modules') and the whole
- Interactions & causation
- Quantification, analysis & simulation
- Levels of explanation: scale, time, mechanism
- Methods of study: *ex vivo*, *in vivo*, *in silico*
- Manipulation
- Disease (pathophysiology): often complicated

Exercise

- Physiological challenge
- Inherently multisystem
- Quantitative endpoints
- Relationships to age & health
 - ‘Ability to sustain exercise is a key determinant of cardiovascular health, quality of life and mortality’
- Interventions
 - Training, ‘exercise prescription’, nutrition

'The human machine'



Exercise tolerance depends on the integration of the pulmonary, circulatory and muscular systems to transport and use O_2 .

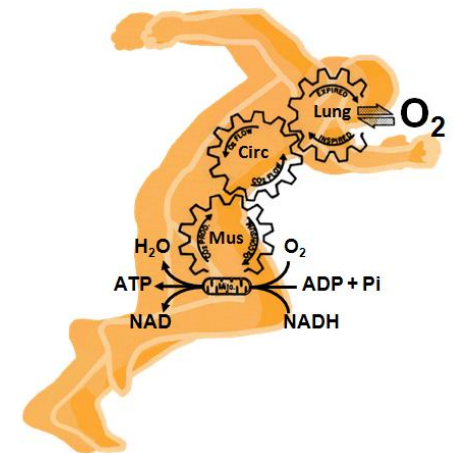
The effective integration of these systems' dynamics remains poorly understood.

... not forgetting:

- skeleton, joints & tendons
- central, peripheral & autonomic nervous system
- gut, liver & adipose tissue

Measuring aspects of the system

- *Ex vivo* measurements
 - **Muscle biopsy** – metabolites, gene expression, enzymes, histology
 - **Blood sampling** – metabolites, enzymes, gases
- *In vivo* measurements
 - Magnetic resonance imaging (MRI), ultrasound, DEXA
 - Exercise techniques
 - Muscle magnetic resonance spectroscopy (MRS)
 - Whole body VO_2 – kinetics, $\text{VO}_{2\text{max}}$
 - **Arteriovenous difference (AVD) studies**
 - Near-infrared spectroscopy (NIRS)
 - Electromyography (EMG), force & motion analysis



Cardiopulmonary exercise testing

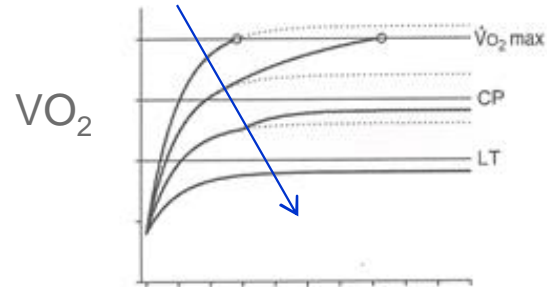


Human Bioenergetics Research Lab

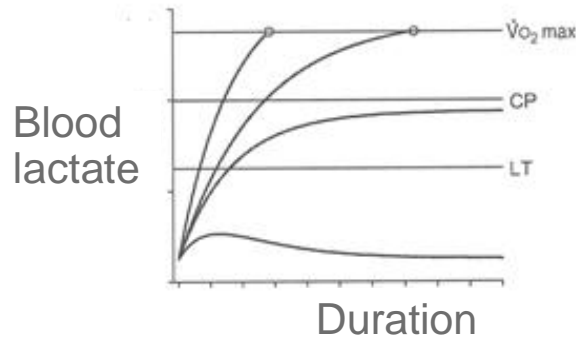
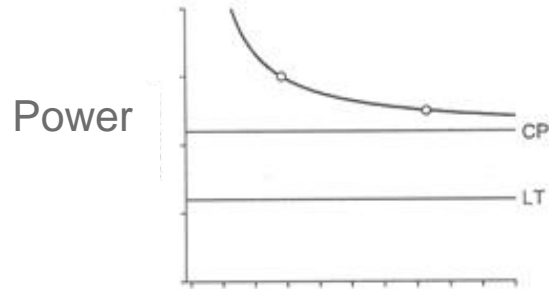


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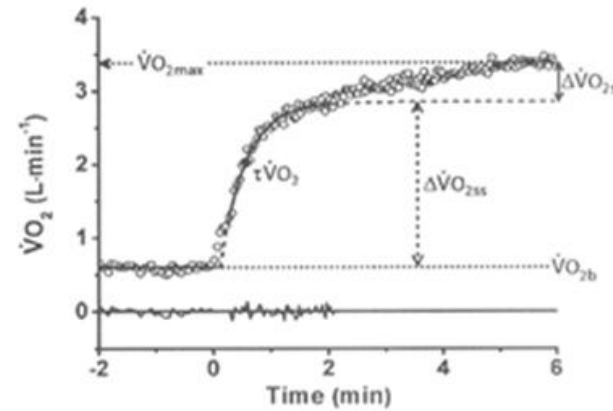
VO₂ response to exercise





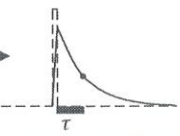
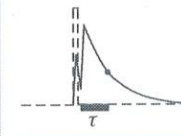
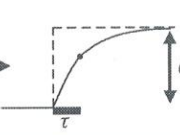
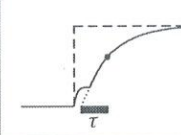
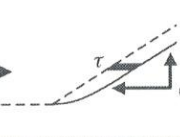
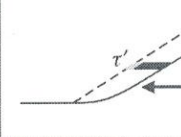
Severe
Very heavy
Heavy
Moderate



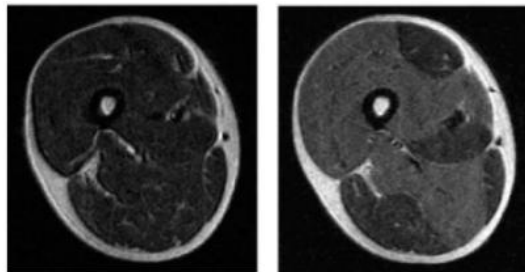
Rossiter. *Comprehensive Physiology* 1: 203-244, 2011



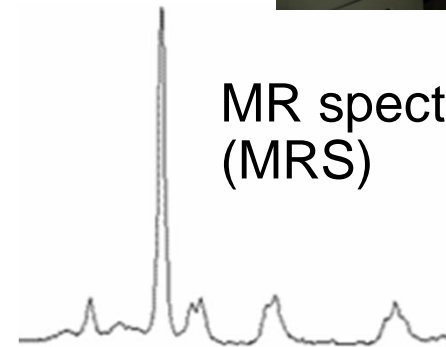
Murgatroyd et al. *J Appl Physiol* **110**:1598-1606, 2011

Input		Output	
Forcing function	Pattern (work rate)	Muscle pattern ($\dot{V}O_{2m}$)	Pulmonary pattern ($\dot{V}O_{2p}$)
 	Pulse		
	Step		
	Ramp incremental		

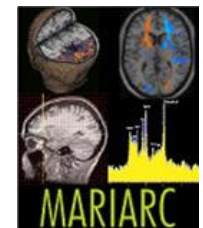
Magnetic resonance methods



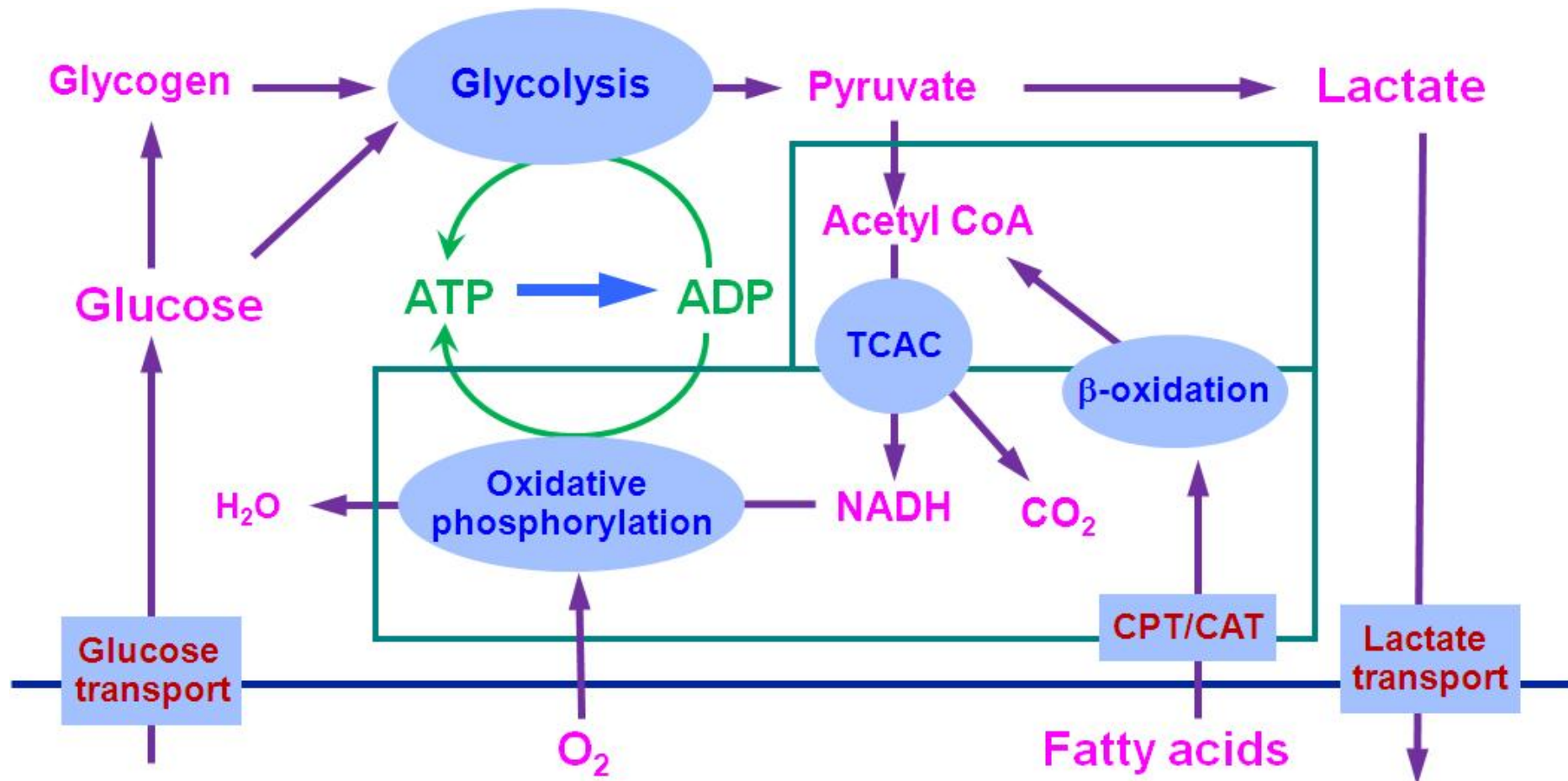
MR imaging
(MRI)



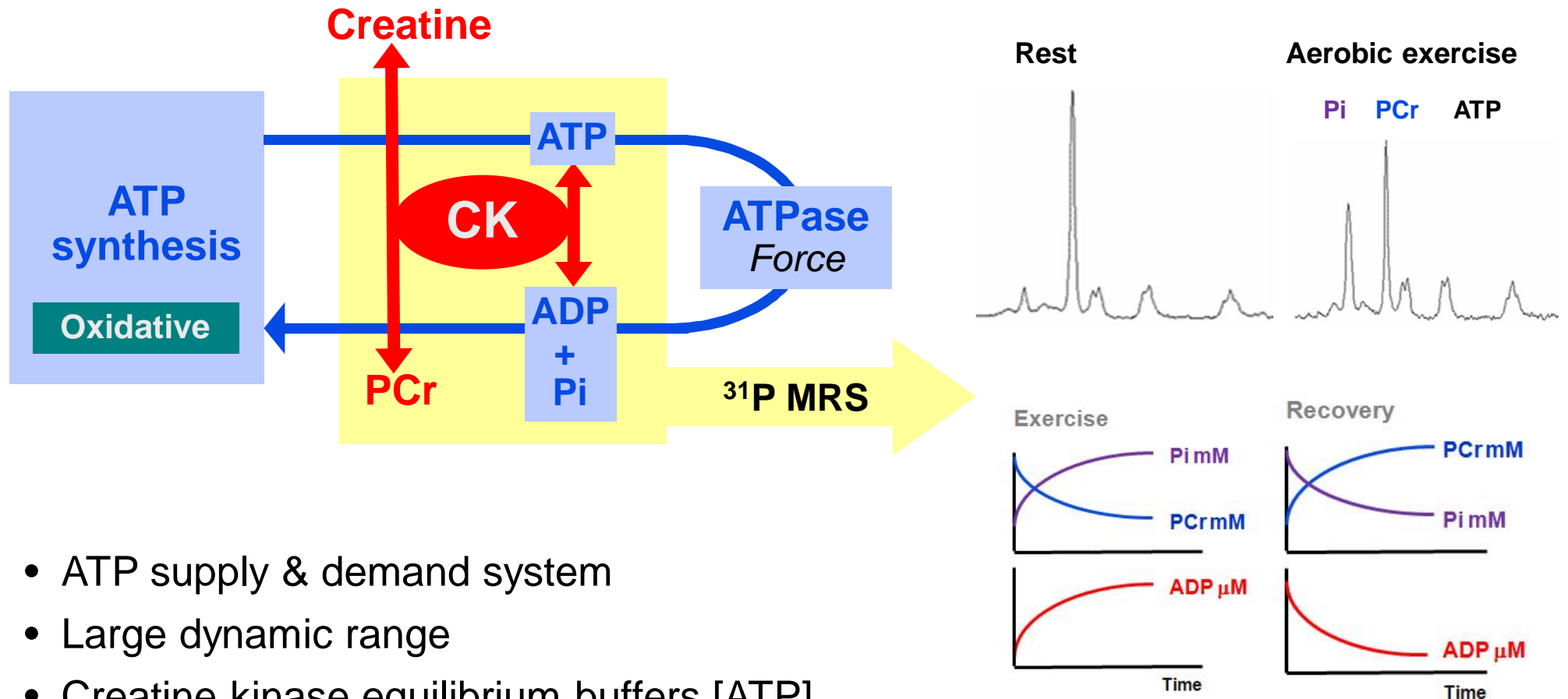
MR spectroscopy
(MRS)



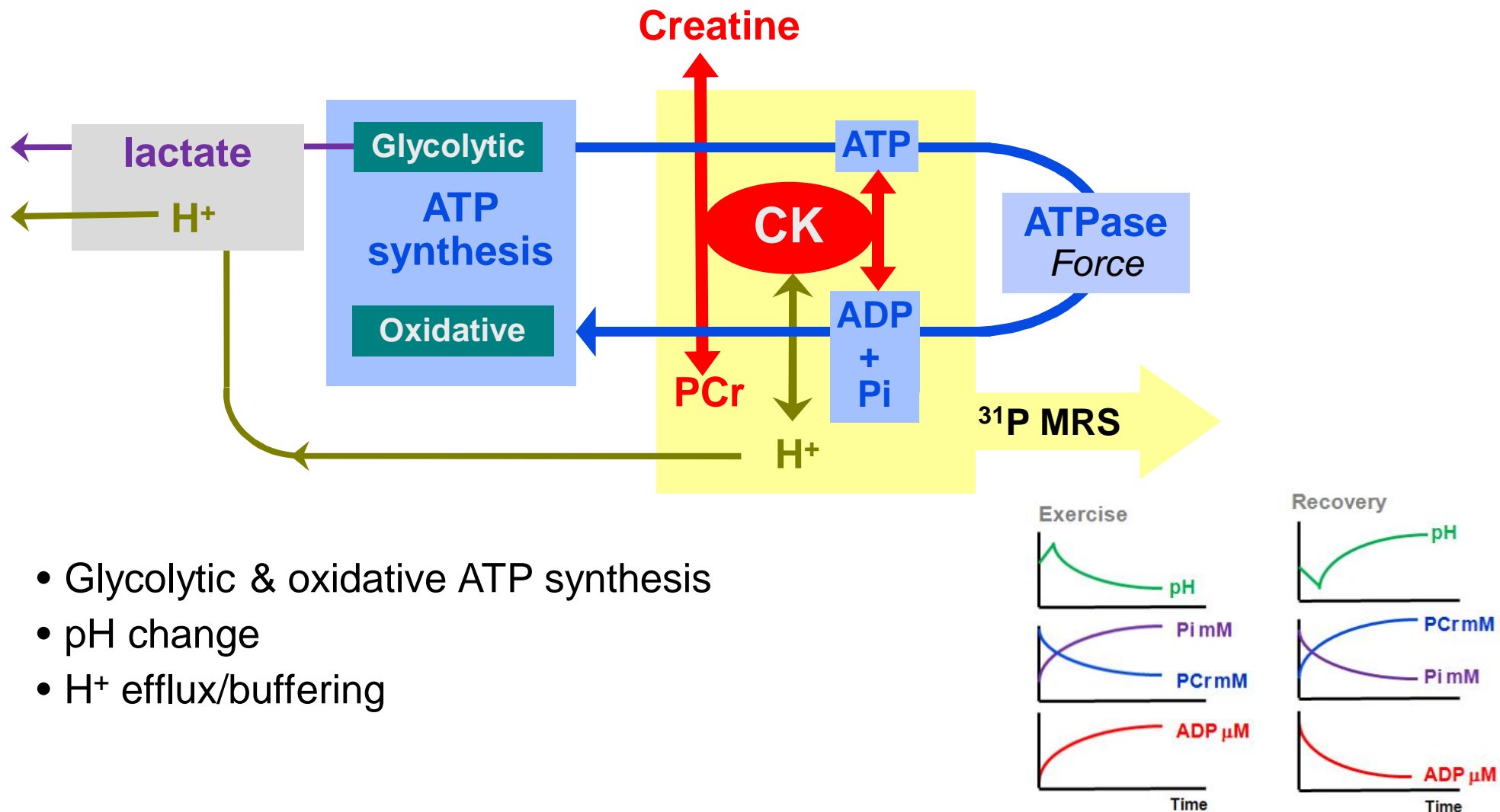
Muscle metabolism in outline



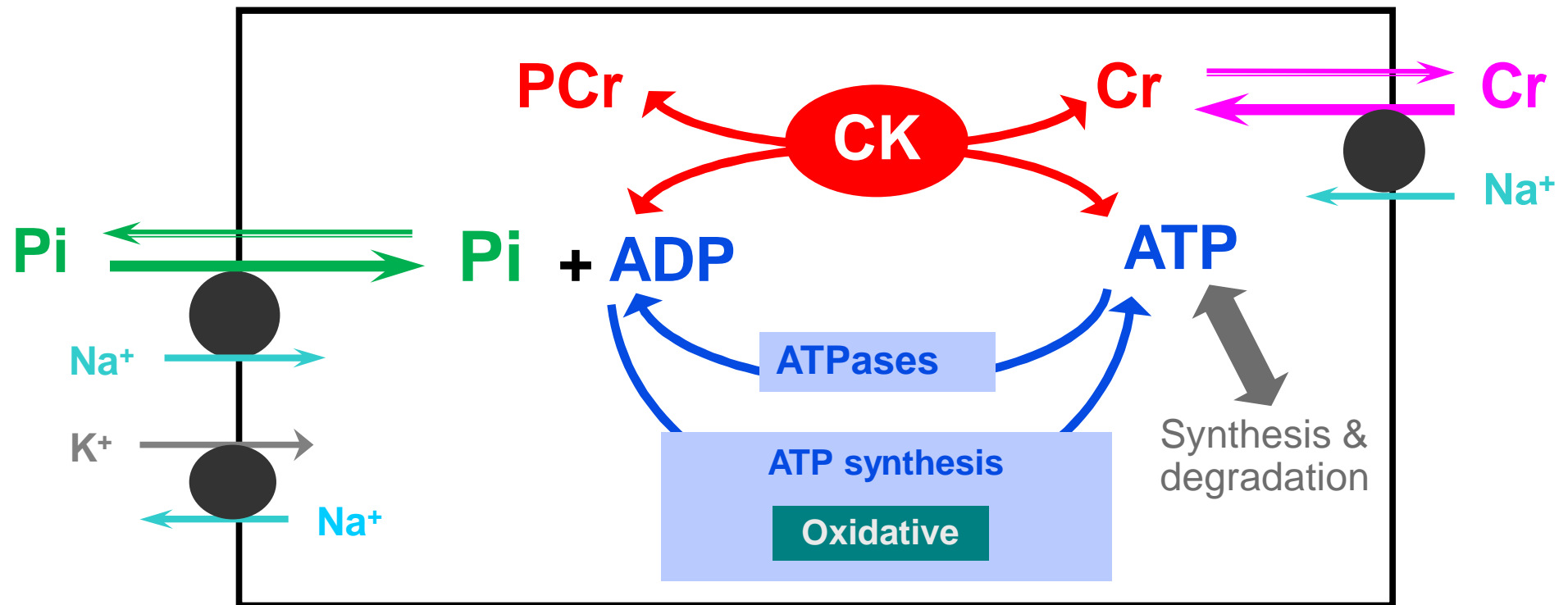
The ^{31}P MRS 'window'



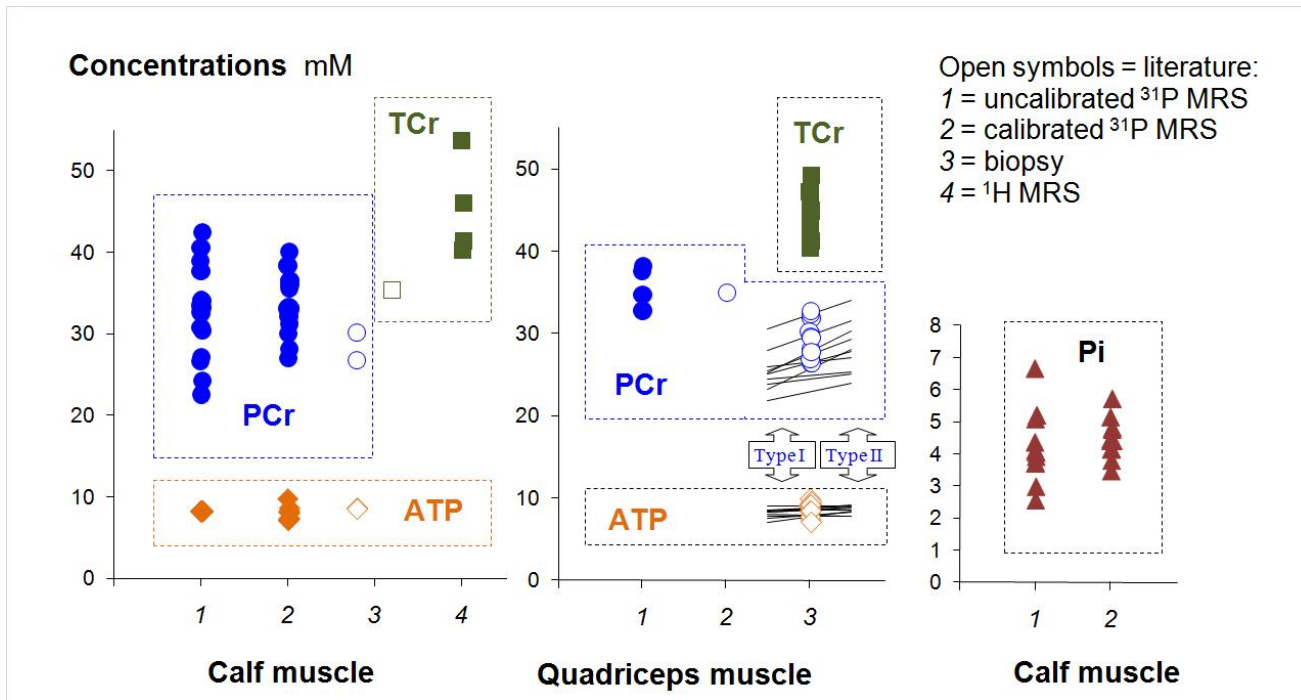
³¹P MRS & muscle: 'mixed' exercise



Muscle at rest: some physiology

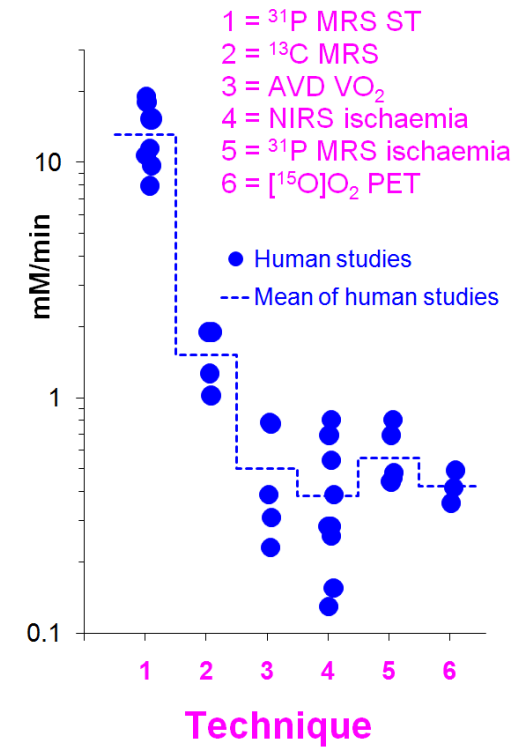


Muscle at rest: some data



Kemp et al. *NMR in Biomed* **20**: 555–565, 2007

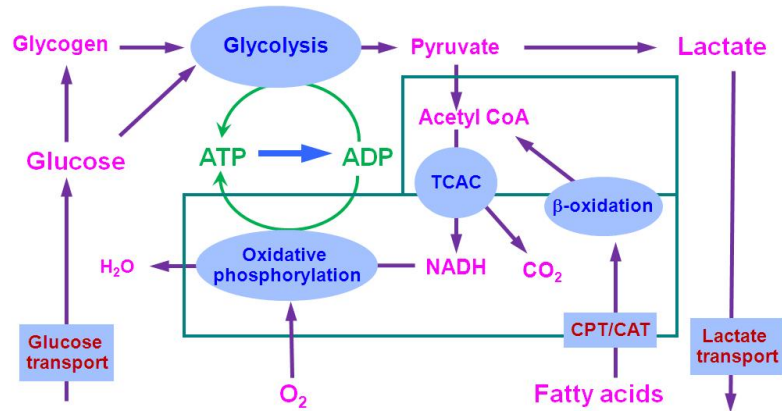
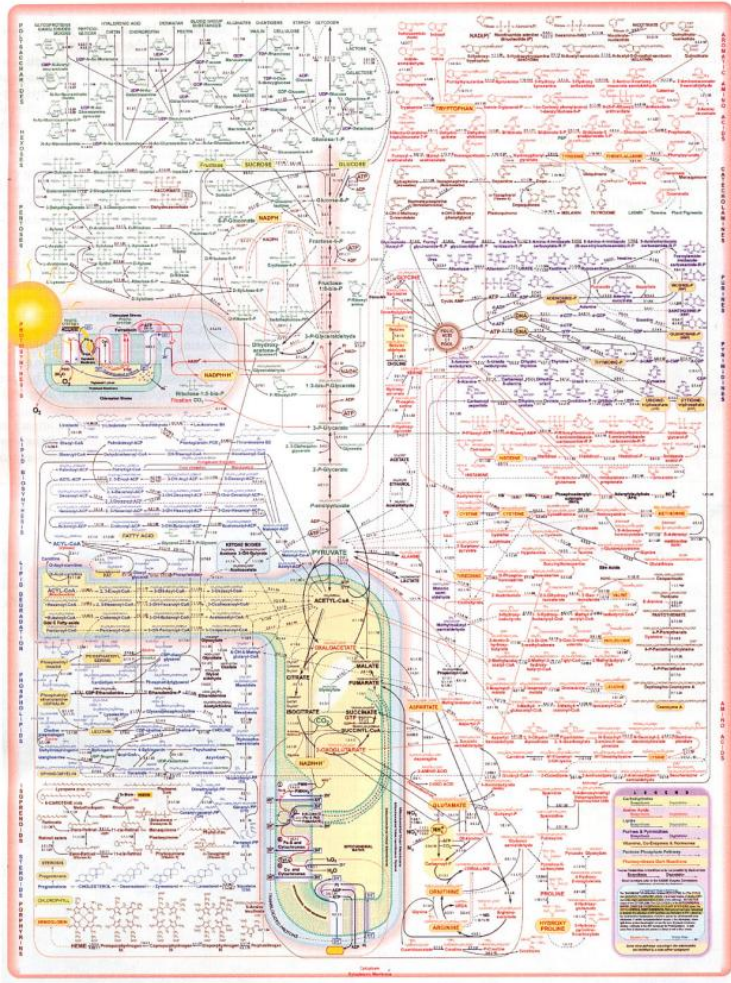
Estimated resting ATP turnover



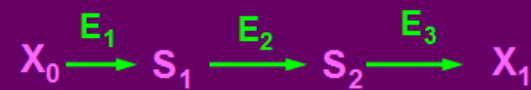
Kemp *Am J Physiol* **294**: 640-642, 2008

1 point = 1 study

Analysing metabolic control

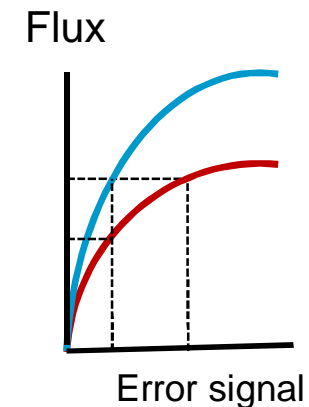
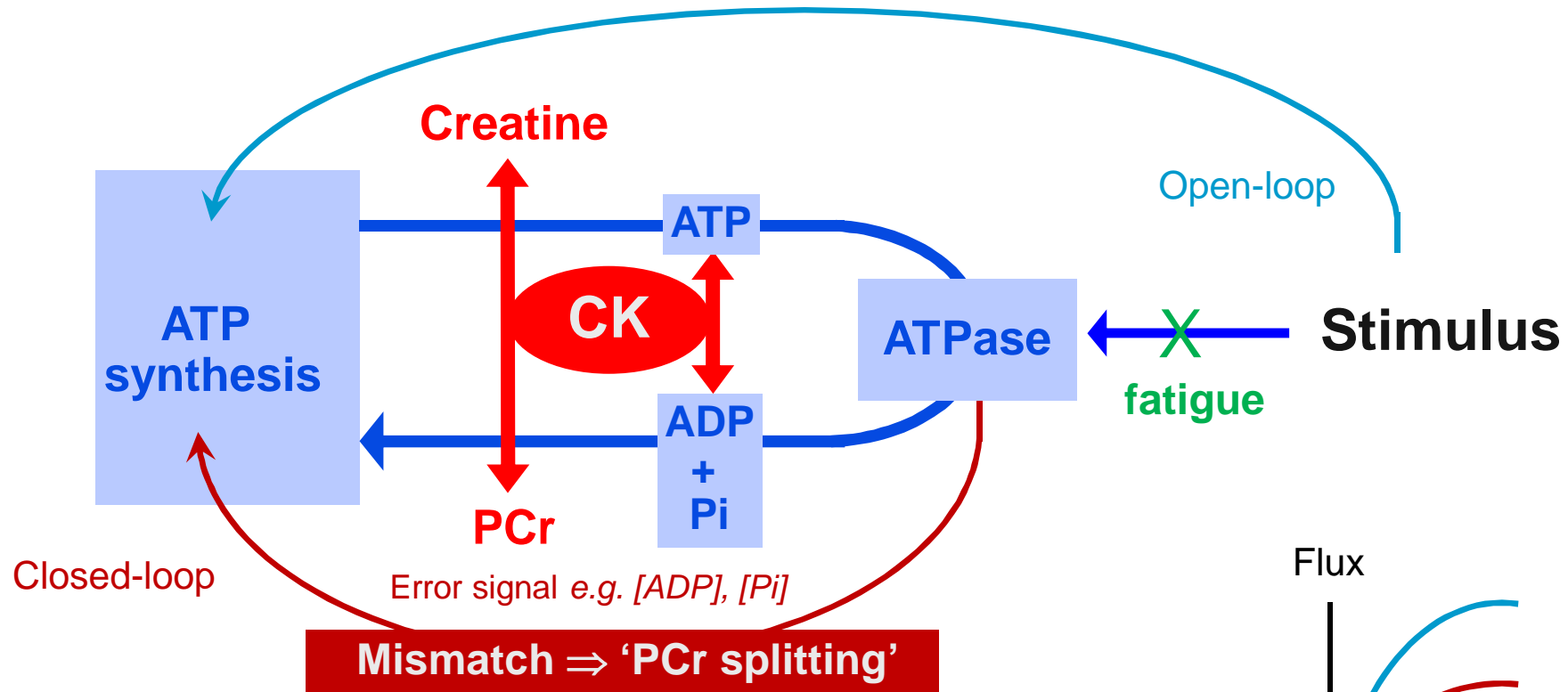


Metabolic control analysis



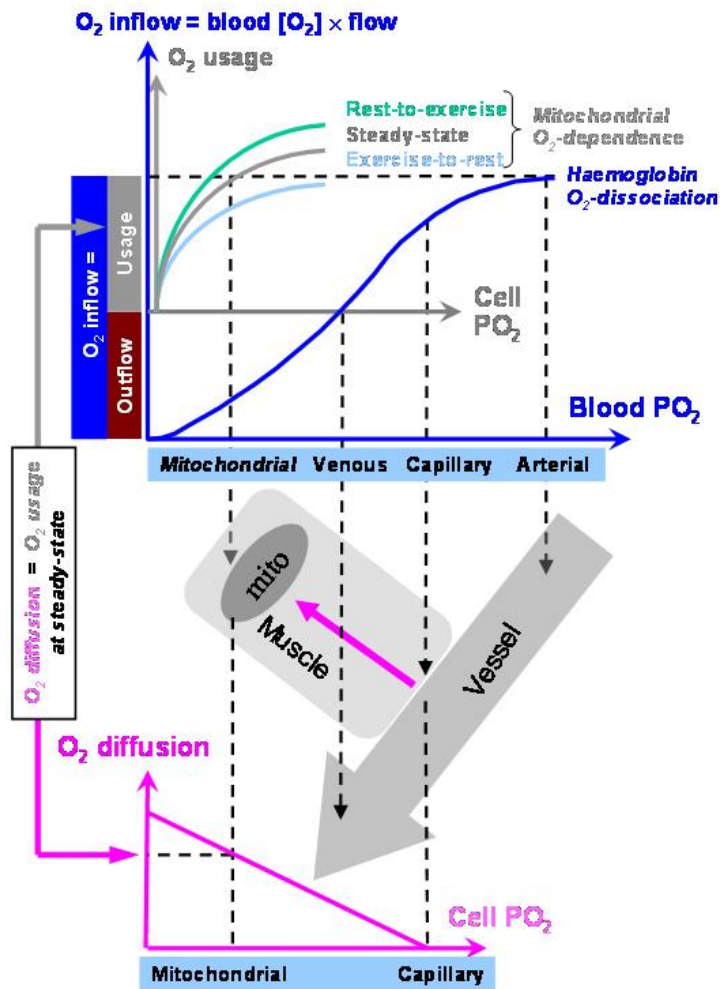
- Flux control distributed between many enzymes
- Multiple activations, most unknown
- Importance of control by demand

Open- and closed-loop feedback



- ATP turnover is demand-driven, until fatigue
- Closed-loop, integral feedback
- Open-loop, parallel activation?

Aerobic metabolism of muscle



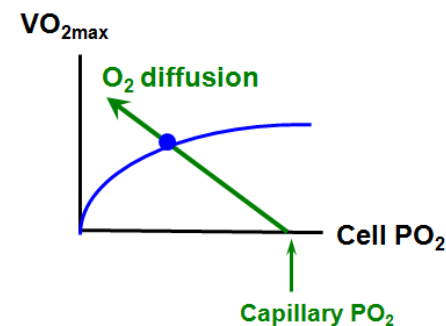
Kemp *Mitochondrion* 4:629-640, 2004

O_2 delivery to mitochondrion

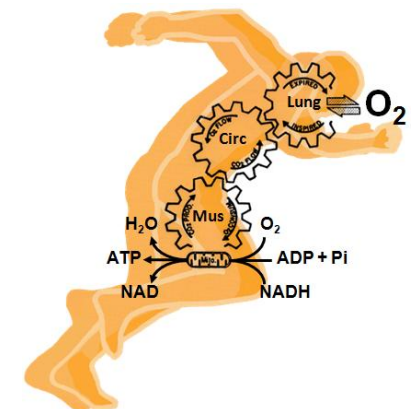
- Net O_2 supply to muscle
= flow \times (arterial-venous $[O_2]$)
- O_2 flux to mitochondrion
= diffusion coefficient \times (capillary-mitochondrial ΔPO_2)

Mitochondrial O_2 consumption

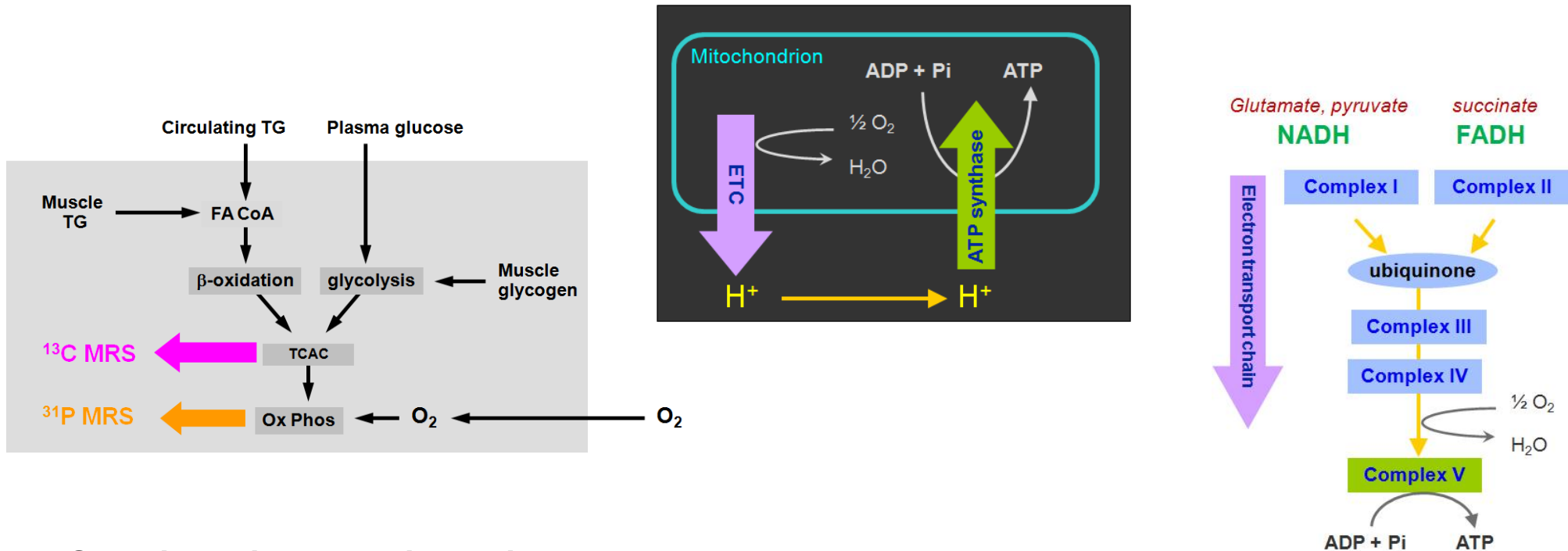
- PO_2 -dependence of cytochrome oxidase
- Closed-loop feedback by e.g. [ADP]
- Open-loop influences?



Richardson et al *J Appl Physiol*
87:325-331, 1999



Mitochondrial metabolism



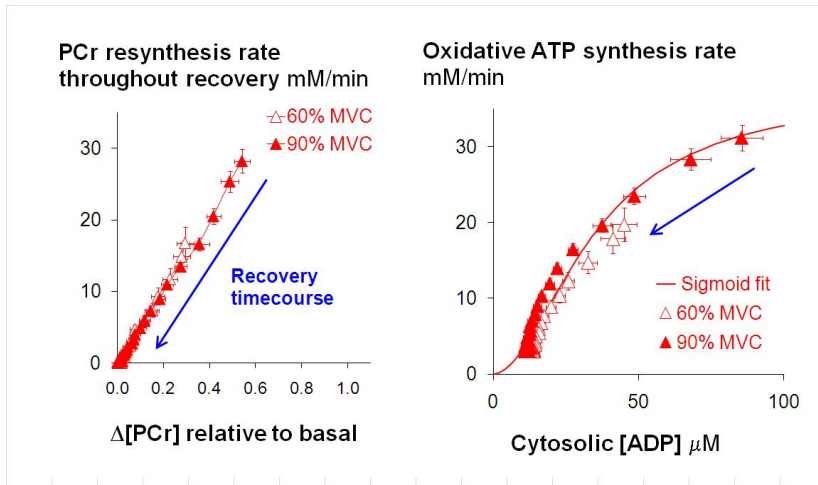
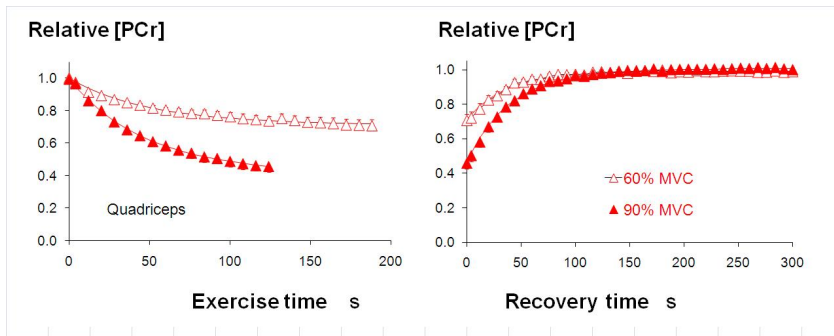
Studying mitochondria ex vivo

- Mitochondrial numbers & volume
- Molecular genetics: mitochondrial DNA copy number; transcription/expression of e.g. proliferator-activated receptor- γ coactivator 1 α (PGC-1 α) and genes it controls (e.g nuclear respiratory factors (NRFs), mtTFA)
- In extracts: mitochondrial enzymes: citrate synthase, OGDH
- Isolated mitochondria: ATP production and respiration +/- inhibitors

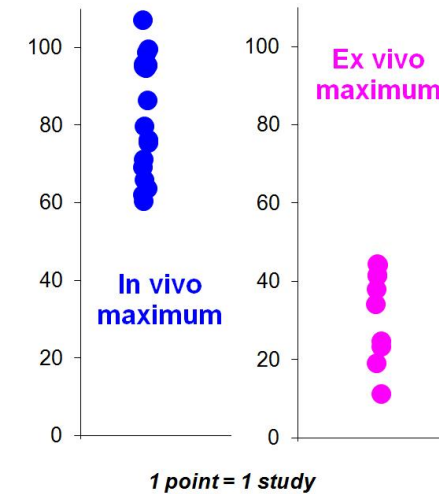
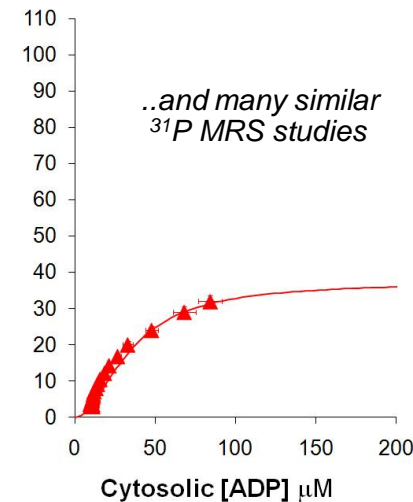
Mitochondrial function by ^{31}P MRS

'Aerobic exercise' at two intensities

Implications for mitochondrial function



Oxidative ATP synthesis rate mM/min Maximum ATP synthesis rate mM/min



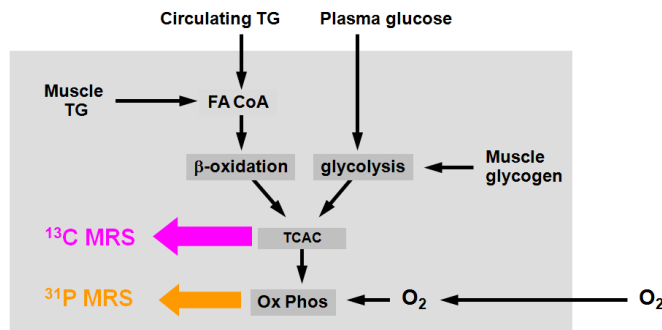
Ex vivo: Blomstrand, Rasmussen, Sahlin
In vivo: Sahlin, Bangsbo, Richardson etc

Measures of 'mitochondrial capacity':

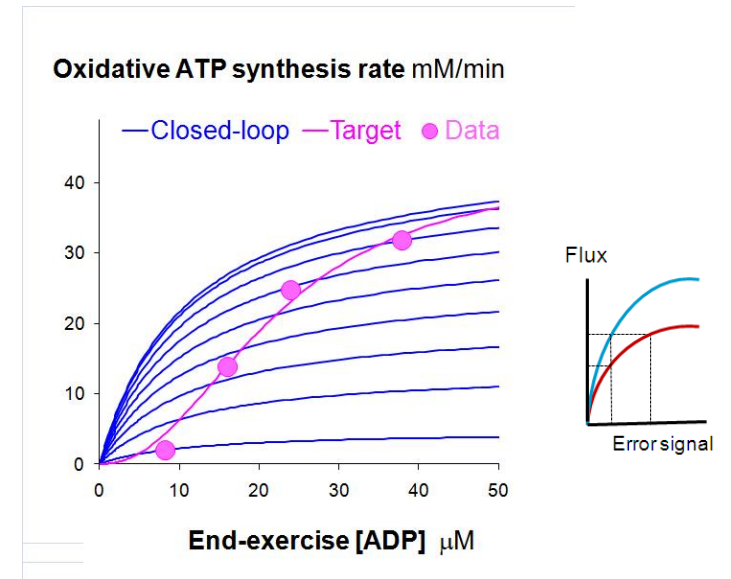
- increase with endurance training,
 - decrease with age
 - correlate appropriately with mitochondrial content & $\text{VO}_{2\text{max}}$
 - reduced in disease: mitochondrial, vascular, cardiopulmonary
- BUT 'maximum' rates are functions of state, assumptions and method

More about muscle mitochondria

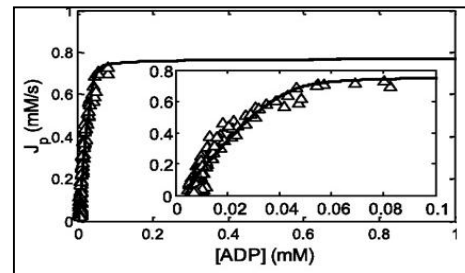
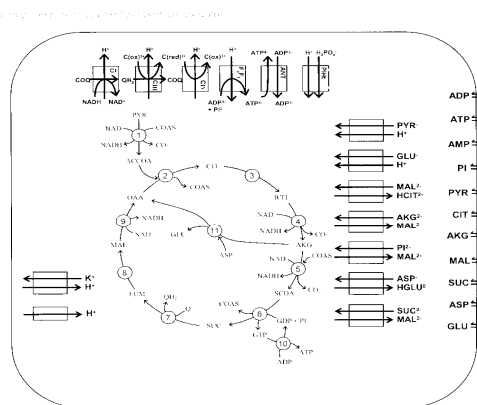
Mitochondrial function is a system property



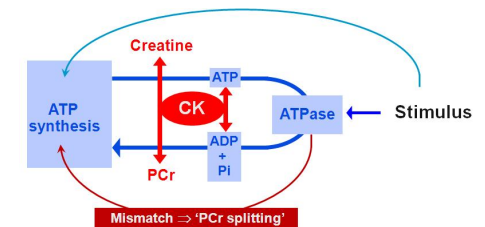
Open-loop control?



Feedback role of ADP & Pi arises from complexity

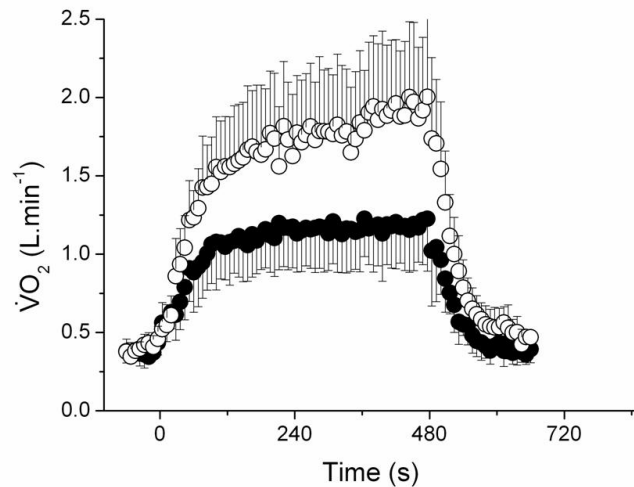


Beard *PLoS Comput Biol* 1: e36.2005
 Wu et al. *Am J Physiol* 292:115-124, 2007.
 Jeneson et al. *Am J Physiol* 297:774-784, 2009



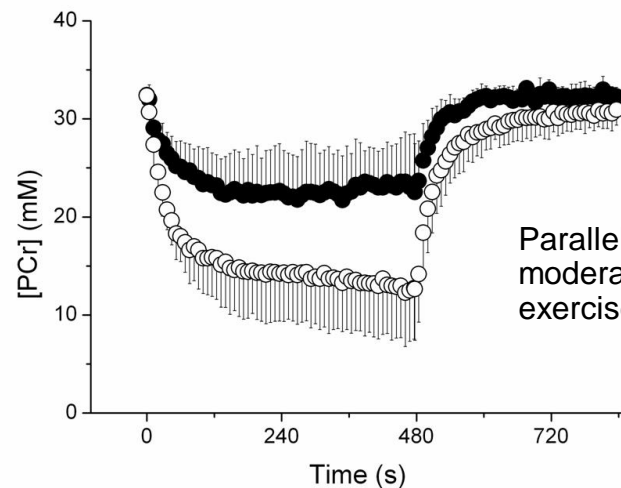
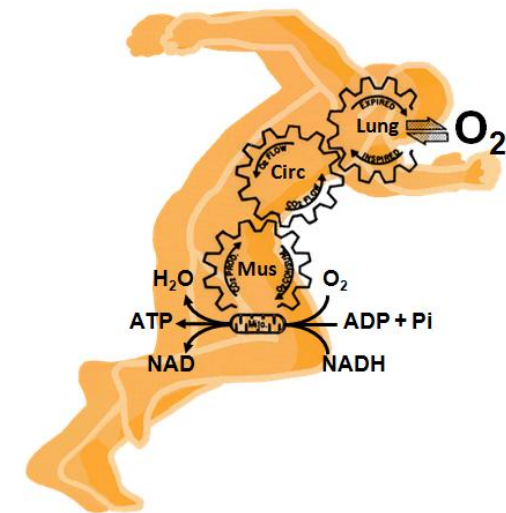
Cf Wüst et al *J Physiol* 589: 3995-4009, 2011

Integration of methods: VO_2 & ^{31}P MRS



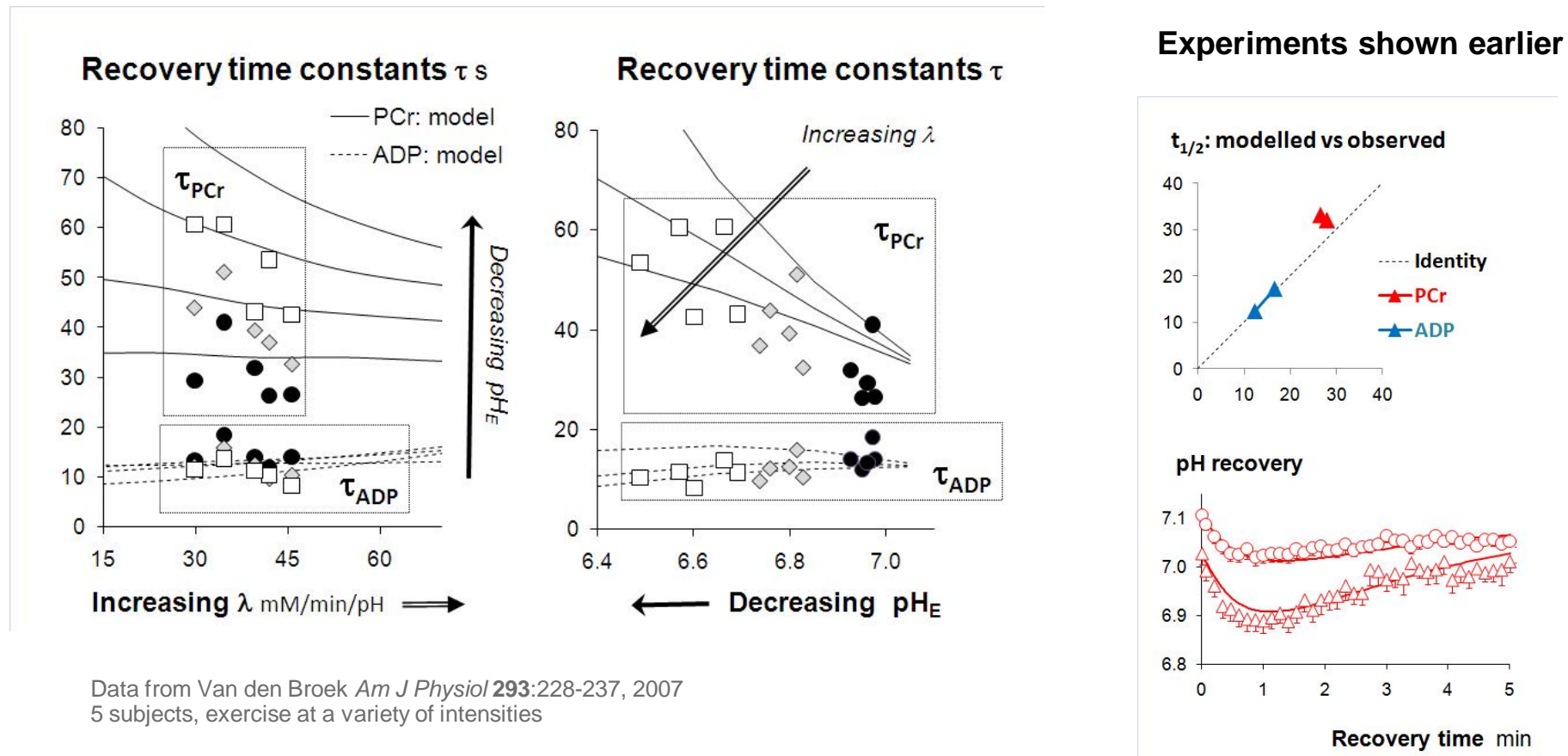
ATP turnover increased between 3 and 8 min of supra-lactate threshold (LT), but not sub-LT, exercise.

Thus reduced work efficiency in heavy exercise is partly wholly due to increased contraction cost, although reductions in P:O may also contribute.



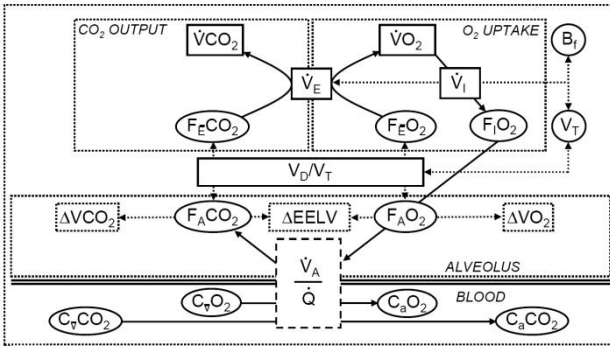
Parallel measurements of VO_2 and $[\text{PCr}]$ during moderate (\bullet) and heavy (\circ) knee extension exercise & recovery. Means with SD bars

Simulation: ^{31}P MRS recovery data

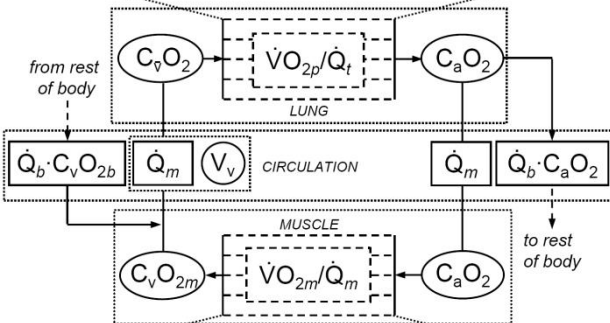


A simple model using (pH-dependent acid efflux and ADP-dependent ATP synthesis) reproduces main features of pH- and efflux-dependence of PCr and ADP recovery

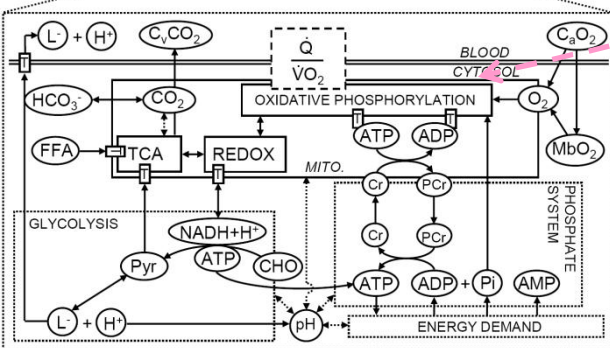
Computational approach to O₂ usage



Details of lung

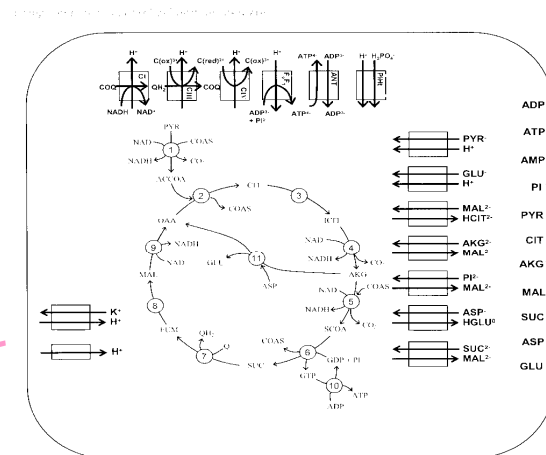


Lungs & muscle linked by circulation



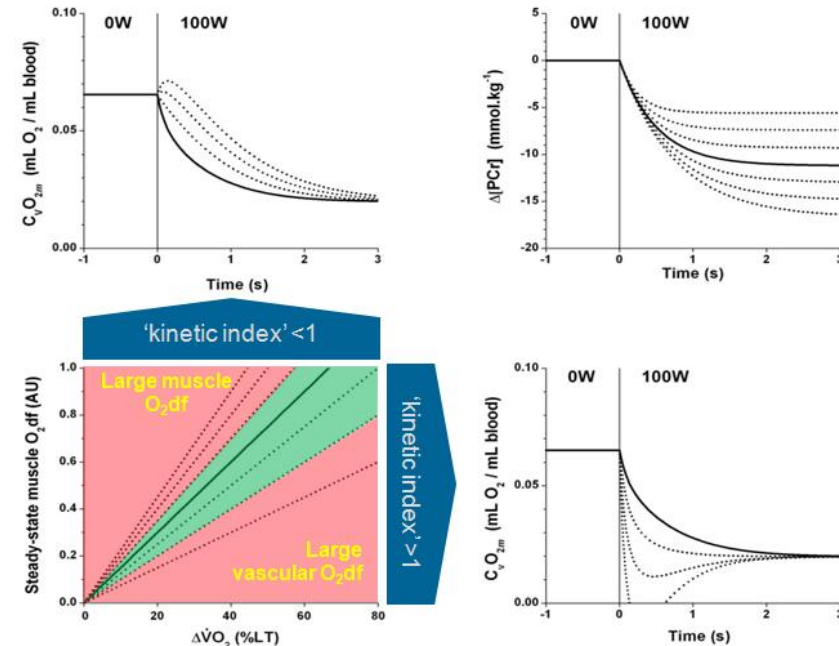
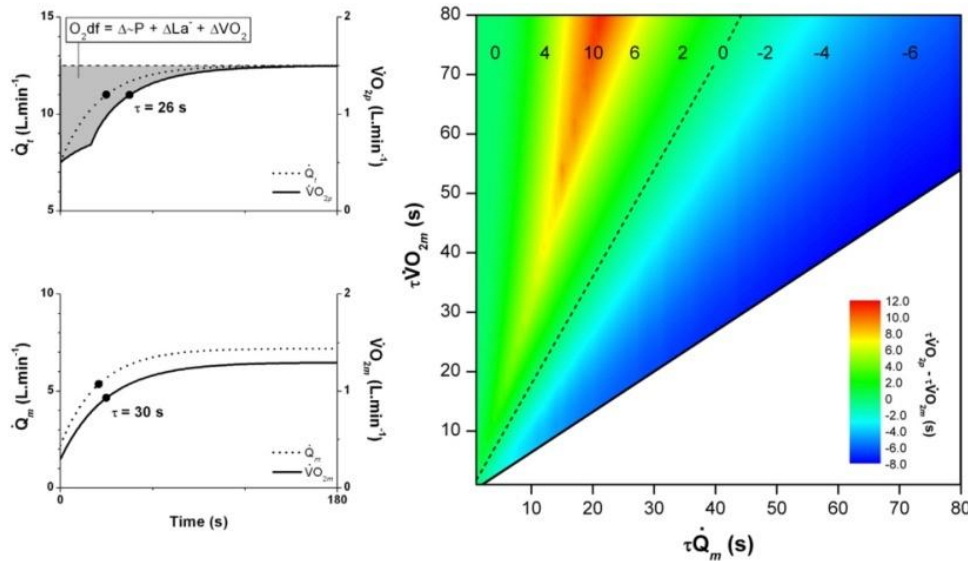
Details of muscle

Rossiter. *Comprehensive Physiology* 1: 203-244, 2011



Beard *PLoS Comput Biol* 1: e36.2005
 Jeneson et al. *Am J Physiol* 297:774-784, 2009

Simulation of $\dot{V}O_2$ responses

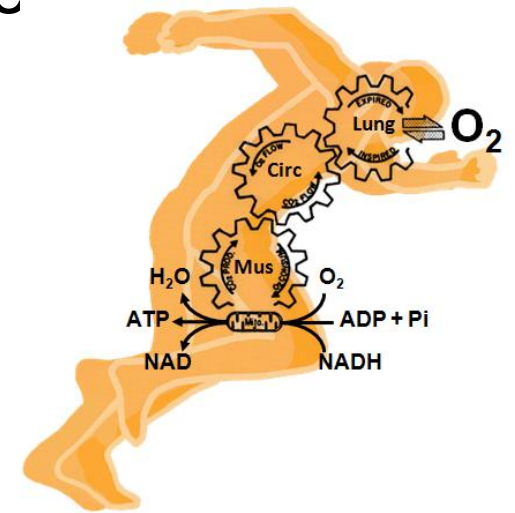


Effect of muscle blood flow (\dot{Q}_m) on pulmonary oxygen uptake ($\dot{V}O_{2p}$) kinetics at onset of moderate-intensity exercise

When muscle oxygen consumption ($\dot{V}O_{2m}$) lags muscle blood flow (\dot{Q}_m) (upper curves) venous oxygen content ($C_{vO_{2m}}$) is well maintained in the transient. If vice versa, $C_{vO_{2m}}$ undershoots

Key concepts

- Systems & modules; organs, pathways
- Feedback, stability
- Supply & demand, challenge & response
- Steady-state vs kinetic responses
- Dynamic range, quantitation
- Control coefficients
- Levels of explanation/causation
 - spatial & temporal
 - mechanisms – metabolic, signalling, genetics & epigenetics, expression



Implications for interventions

- Interventions
 - Training: strength, endurance, daily activity
 - Nutrition
 - Pharmacotherapy
- Issues:
 - ‘control strength’
 - trade-offs
 - understanding vs engineering vs empirics