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TESTOSTERONE/CORTISOL RATIO AS A BIOMARKER TO PREDICT PODIUM RESULTS: EVIDENCE FROM ADOLESCENT AND MASTER ROWERS

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1. INTRODUCTION

The athletic performance can be highly influenced by stress rather than appropriate training, as stress hormones have substantial variability during all ages. This is especially true during puberty when hormones may change from month to month according to the physical development of the individual. Motivational response to competition is also very complex at hormonal level and it is not only determined by intrinsic factors as psychological factors but also by stress and cortisol/testosterone production. There is a lack of data regarding the stress and motivation response in either adolescent and master athletes during competitions. Generally, the hypothalamic-pituitary adrenal-axis (HPA) is activated due to psycho-socially related stressors [1,2], leading to high cortisol secretion from the adrenal gland, which plays an essential role both in the regulation and utilization of energy derived from carbohydrates and proteins as well as the production of reserve materials for metabolic adaptations to physical effort [3]. The adrenal gland, also releasing adrenalin, induces an increase in testosterone levels from testes, a masculinizing hormone whose classic functions depend on the age of the subject [4]. In relation to both hormones, training and competition have been shown to induce distinct responses; in particular, competition is characterized by different variables which are not always present in training [5]. Hormones can be measured in either blood and other fluids as saliva, this latter is more feasible for determinations in subjects that are under age or in situations that do not allow to withdraw blood in sterile conditions, as during races.

The effects of hormones on the rower

Hormones play a significant role in rowing, influencing various aspects such as energy, endurance, muscle strength, and stress response. Hormonal fluctuations can have both shortterm impacts during training and competitions, as well as long-term effects on performance and physical adaptation, also in rowing. Cortisol is often associated with stress and can increase

during high-intensity situations, such as competitions. Elevated cortisol levels may contribute to increased energy mobilization, but if chronic, they could lead to an inflammatory response and loss of muscle mass.

In the case of testosterone, it is involved in the regulation of muscle strength and protein synthesis. Optimal levels of testosterone can promote muscle growth and improve strength. However, intense periods of prolonged training or overtraining situations can negatively impact testosterone levels. During exercise, adrenaline increases to prepare the body for physical activity. Excess adrenaline can contribute to a higher heart rate, dilation of airways, and increased muscle strength. However, excessively high levels can cause nervousness and anxiety. Also insulin has a role, as it is involved in the regulation of carbohydrate and sugar metabolism in the blood. During training, insulin can influence the absorption of glucose to provide energy. Inadequate insulin regulation can negatively affect energy management. Thyroid hormones on the other hand, regulate metabolism and energy. Insufficient thyroid activity can lead to a reduction in available energy for physical activity, while overactive thyroid activity can cause nervousness and excessive weight loss. Sex hormones, such as estrogen in women and testosterone in men, can influence body composition and muscle strength. Changes in estrogen levels can affect bone density and muscle endurance in women. Also Hormone Binding Globulin (SHBG) can influence the availability of testosterone. Changes in SHBG levels can affect the amount of free, biologically active testosterone. In the case of women, hormonal fluctuations during the menstrual cycle can influence the perception of fatigue, muscle strength, and coordination.

It is important to note that hormonal balance is a complex process that varies from individual to individual. Factors such as age, gender, training, rest, and nutrition all play a role in hormonal regulation and their influence on rowing. Thus a careful monitoring of hormones and appropriate management can contribute to optimizing performance in rowing.

Testosterone and cortisol fluctuations in sportsmen

Salivary testosterone and cortisol reflect the free fraction of the available bioactive steroid hormones found in the general bloodstream [6]. High levels of free testosterone may indicate a better "bioactivity status" in the blood of master and adolescent athletes [7]. Meanwhile, low doses of testosterone are indicators of fatigue, and in some cases of over training. Cortisol is considered the major hormone responsible for catabolic processes because it reduces protein synthesis, increases protein degradation, and inhibits the inflammatory process, affecting immunity [6]. Monitoring cortisol in sports can be used as a marker of the stress response to physical effort [8].

Produced primarily in testes, testosterone is a hormone that is present in greater quantities in males. In females, this hormone is produced by the adrenal glands, the ovaries, as well as through peripheral conversion of circulating androstenedione. Despite the testosterone concentrations in women are about one-tenth the concentrations in man, the response of testosterone to acute physical exercise seems to be of increment. In untrained men, both the strength exercise and the endurance exercise, increase total and free testosterone after about 15- 20 minutes of activity. The cortisol response appears to be similar in both sexes, increasing in response to moderate exercise both short and long term.

When considering acute responses, most fleeting hormonal changes, such as a greater than 30% drop in testosterone/cortisol ratio, occur in amateur male athletes after marathon races, but such hormonal changes tend to become normalized in the following days of the strenuous exercise and do not correlate with the signs and symptoms of overtraining. Such a response may vary depending on the fitness of the athlete. During a chronic response, the hormonal levels may "remain altered" for prolonged periods and can serve as a variable for the broader analysis of physical training.

In terms of medical aspects, low testosterone levels may be indicative of poor health in men. Extreme levels of circulating androgens, whether high or low can have negative effects on women's health. In women, the chronic hypercortisolism was found to be associated with isolated exercise-induced amenorrhea.

Testosterone/cortisol ratio in sportsmen and rowers

The testosterone/cortisol (T/C) ratio has been used as an indication of anabolic/catabolic balance [9] and as a biochemical marker of incomplete recovery and overload [10, 11]. This ratio decreases in relation to the intensity and duration of physical exercise, as well as during periods of intense training or frequent competition, and can be reversed by regenerative measures [9]. As common methods to regenerate muscle capacity, a reduction of training load is usually performed after intense training periods or competitions; this is important to prepare the body for the upcoming demand as in the case of a race or to allow muscle regeneration.

On the other hand, regular physical training can increase testosterone levels in older people, suggesting that the exercising status of masters athletes can preserve testosterone levels in old age [12]. In young runners it has been observed that testosterone levels and T/C ratio decreased and cortisol levels increased after the pre-competition phase, which would indicate an increase in the catabolic process of the elite runners before competitions [13]. In a study involving 9 male master athletes of different sports the differences in cortisol and testosterone levels were evaluated at the beginning (M1) and at the end (M2) of a 7-month sport season [14]. The decrease in the T/C ratio was evidenced by the reduction of testosterone because the cortisol levels were maintained at the end of sport season. These results highlight some different aspects of the master athletes, namely the inability to recover the salivary concentration of testosterone, unlike cortisol, at the end of the sports season. Another aspect to be considered is that the reduction ratio T/C was approximately 50% at M2 when compared with M1. Considering data from the literature, reductions in the T/C ratio on the 30% scale may be indicative of incomplete

recovery [15, 16]. From these data it is possible to speculate that master athletes need a longer recovering period, and this new evidence from the literature points to the need of further research to develop a training model capable of reducing these testosterone and T/C ratio deficits in master athletes during the sports season. Additionally, it also suggests the need for more study involving master athletes to better understand if the longer recovery period is limited to endurance sport or to all kind of sport.

In the case of rowing a classical 2000-m competitive race requires a substantial aerobic effort contribution (75-80%) and a 20-25% of anaerobic energy, these latter are especially needed in the most critical periods of the race: at the start and again during the final sprint. Optimal energy production is dependent on several complex and interdependent physiological responses, especially the utilization of stored energy. In muscle fibers energy production begins with the use of ATP and phosphocreatine followed rapidly by the metabolism of intracellular carbohydrate (glycogen), fat, and protein which, when combined with oxygen, will provide the energy to sustain exercise. In this framework, maximization of the technical and tactical preparation to get ready for an upcoming major competition is called peaking. Peaking is a superior, biological state characterized by perfect health, a quick adaptability to training stimuli and a very good rate of recovery. From a psychological point of view, peaking is a state of readiness for action. The athlete's nervous system and hormone secretion adapts quickly and efficiently to the stress of competition. Athletes who reach this training state are also highly motivated and can tolerate various degrees of frustration which occur before, during and after competition. To produce this level of tolerance, a coach can create many training sessions so the psychological stresses specific to the main competition are created. The hormone status needs to adapt to these stressors (psychological and physical) and in master rowers the process can be slower than in young rowers leading to different results in terms of performance during the race and recovery time.

Rowing can be considered either a team and an individual sport since the same athlete, in nonelite races, may compete in single or multiple scull boats, thus the technical difficulties of the required skills, the nature of the event, and the competition level (regional or national) may influence the physical and psychological response of the athletes [17, 18]. The subjective response to stress is dynamic and complex includes multiple variables, especially during different official level events [19].

Some Authors have demonstrated a higher stress-associated response in competition than training in sports such as running, soccer, golf and Jiu-Jitsu [5]. The anticipatory stress, also known as CAR (Cortisol Awakening Response) combines characteristics of a reactivity index (the starting of a new day) with the circadian cycle (it repeats every day at the same time), providing information regarding the HPA reactivity of subjects to psychosocial, cognitive and health-related stressors [20]. In rowers has been noted a differential response to mental and physical stressors, probably related to the type of performance which is highly demanding either in terms of technical skills and muscular efforts, involving the explosive force together with the resistance [21].

The daily fluctuations of testosterone during adolescence range in the morning (9:00 to 13:00 am) from 35.4 to 20.4 pg/ml with a net 40% decrease due to the circadian rhythm [22], thus changes in these normal variations may account for different behavioral responses.

It is known that the importance of the race can also change the type of hormonal response and the level of the two hormones can be modulated as an anticipatory response to an upcoming competition to prepare the organism to the physiological and behavioural demands. Monitoring hormonal responses of cortisol and testosterone during training and competition seems to provide precious stress level information, in order to properly plan training and to avoid overtraining. Very few studies have investigated the variation of hormonal markers associated with training or competition in adolescents practicing rowing. As a matter of fact, the

testosterone/cortisol ratio is useful to emphasize the way in which the variations in these two hormones take place during prolonged exercise and training periods, in other sports it has been observed that changes in testosterone and cortisol levels either affects performance and contribution to team outcome but are in turn affected by the venue and the importance of the competition itself [23-26].

The evaluation of testosterone/cortisol ratio has been studied in several settings and a recent meta-analysis [27] showed that most of the changes in this ratio are achieved during aerobic and power exercise rather than endurance training. If this is true for most sports, which are predominantly aerobic or anaerobic, there could be differences in the specific case of rowing since it is an aerobic and anaerobic sport with a lactacid and a-lactacid component during the race [28]. In addition, in young amateur rowing athletes very little is known regarding testosterone/cortisol ratio and its possible role as a predictor of performance beyond the classical use to determine adequate recover after training in elite sportsman [29].

The study arises from the need of comparing the differences in bio-humoral response during indoor and outdoor races. As a matter of fact, these two types of races have peculiar differences especially in amateur athlete, in fact during indoor races there is a greater physical stress with a lower influence of coordination technique as compared to the outdoor race were the coordinative and technical skills prevail. In addition, different other factors could mentally influence the athlete's performance in outdoor races, such as weather conditions and the assigned lane. These peculiarities could account for an increase in testosterone during the indoor race and a more stressed attitude during the boat race.

Aim of the study

After all these considerations on the importance of the testosterone cortisol ratio in athletes, this research focuses on this specific issue. The populations enrolled were adolescent and master athletes.

In both populations we tested the hormone levels during competitions and we correlated the ratio to podium results. So the primary outcome was to use the T/C ratio as predictive factor for podium placement in both populations and the secondary outcomes were: i) to evaluate the T/C ratio differences in male adolescent athletes during an indoor and an outdoor competition; ii) evaluate the T/C ratio in master athletes (over 40) during an outdoor competition; iii) evaluate in a population of master the T/C ratio as potential predictive factor for podium placement.

Since the level of knowledge in young non-elite rowers is very little, these athletes have been evaluated in different competition settings that might alter their stress status and performance. On the other hand, master rowers have been evaluated only in a single setting. In both populations the hormone levels were evaluated in saliva samples to reduce the stress of withdrawal and ensure the maximum cooperation from athletes and their families, in the case of adolescents.

2. MATERIALS AND METHOD*.*

2.1 Young subjects and training protocol

The study was carried out in accordance with Helsinki declaration and approved by the rowing team coach of Circolo Canottieri Peloro (based in Messina, Italy), the medical staff, and by the Ethics Committee of Messina University Hospital (approval protocol number 4157/2021). Written informed consent was released by the parents of all participants to the corresponding author. Seventeen Sicilian teenage male rowers (age 13.5 ± 2.4 years; height 164 ± 12 cm; weight 60.41 ± 14.56 body mass index (BMI) 21.89 ± 2.97 kg/m²) of the rowing team Circolo Canottieri Peloro participated in this study (Table 1).

Of the 32 adolescent male athletes of our team 15 were not included for the following reasons:

- 2 athletes were elite rowers of the national team:
- 5 athletes had a BMI above 25.0 kg/m^2 ;
- 8 athletes were not authorized by parents to undergo the saliva test.

Table 1. Characteristics of the amateur young athletes enrolled

The rowers were all second/third year competitors and both indoor and outdoor races were regionals. None of the enrolled subject could be considered as an elite athlete, but mostly amateurs. All subjects followed a training routine of 6 days per week, based on a mesocycle preparation program, training sessions for races were specifically assessed 6 weeks before competitions (Table 2).

| | 6 weeks before indoor race | 6 weeks before outdoor race |
|----------------|-----------------------------------|---|
| Ergometer | 1 time/week 12km; | 1 time/week 4 repetitions 2250m |
| | time/week - 40 minutes 1 | rest 5 min) |
| | interval training | |
| Weights and | 60 minutes time/week 1 | 1 time/week 60 minutes weights and |
| running | weights and 40 min running | 40 min running |
| Rowing | 1 time/week endurance | 1 time/week 3 reps of 3km high |
| | 12km; | intensity; |
| | 1 time/week 8 reps of 750 m | time/week $\overline{1}$ 1x 8km (top) |
| | high intensity | performance); |

Table 2. Training protocol for indoor and outdoor race

In detail, before the indoor race athletes did 5 sessions of training per week, 2 on the ergometer, 1 weight and running and 2 boat training sessions with intensive endurance and load volume. On the other hand, the 6 weeks before the outdoor regatta the number of boat sessions become 3 with high intensity training at 70-80% of the best training load of the athletes.

In both cases, the week before the race the focus of training is on physiological recovery implying less volume at 50% of their best training load. The last days before the competition, training sessions are relatively short though intensive, tactical situations like starts and sprints are studied with the coach, and 3 days before the race, a simulated session is dedicated to test the race distance on the ergometer.

2.2 Collection of saliva samples

Saliva collection was performed in 3 different moments: early morning (T0, between 6:00 and 7:30 AM), 5 minutes before the race (T1), and 15 minutes after the race (T2) both on a day of indoor and on a day of outdoor race. Saliva samples were self-collected by the athletes using Salivette devices Sarstedt (Medical Systems, Genova, Italy) according to manufacturer's instructions. All participants and their parents have been instructed for sample collection as follows: the T0 sample was taken immediately after awakening before getting out from the bed, drinking anything, eating, and washing their mouth; as a matter of fact, the salivette device was left on the nightstand the night before and to be sure that the instructions were followed properly a tutorial video was sent to all participants through a chat group. The T1 sample was taken 5 minutes before the race, between 10:00 and 13:00 am for the indoor and between 9:30 and

13:30 am for the outdoor. For the boat race the athlete was instructed to carry the salivette on the boat and do the saliva collection when the equipages of the preceding race were called for alignment on the starting line, this would account for 5 min before the actual start of the race for the rower. While for the T2, the time for sampling was set at 15 min after the race in either competition settings.

2.3. Biochemical tests

Total salivary proteins were quantified using the standard Bradford assay and salivary cortisol and testosterone were measured by indirect competitive ELISA kits (Abcam, Prodotti Gianni, Milan, Italy) as previously reported [26]. Salivary proteins were used to normalize hormone concentrations. Cortisol levels were expressed as ng/ml in all results and were transformed to nmol/L using an online tool [\(https://unitslab.com/node/110\)](https://unitslab.com/node/110) to calculate the ratio with testosterone (results shown in Table 5 and 6, and Figure 4). Testosterone levels were always expressed as pg/ml.

2.4. Statistical analyses

The numerical data were expressed as means and standard error (SEM). The distribution of examined variables was not found normal (for cortisol and testosterone values at baseline), as verified by Kolmogorov–Smirnov test. Then, the nonparametric Kruskal Wallis test and Mann– Whitney U test were used for comparison of the 3 data sets (T0-T1-T2) and the two-by two comparisons between conditions (indoor and outdoor competitions). The Spearman correlation test was applied to determine the existence of any significant interdependence between the examined variables, as previously reported [26]. Linear regression model was adopted to evaluate the association of testosterone/cortisol ratio with the podium position in both competitions. A post-hoc power calculation (T test Wilcoxon signed-rank test) was performed

on cortisol saliva levels during the indoor race, considering the median values of the 10 enrolled subjects at pre-race and post-race with a probability of error $\alpha = 0.05$. The post-hoc power calculation, including 10 enrolled subjects as sample size with median cortisol saliva levels of 4,64 ng/mL at pre-race and 12,35 ng/mL (+/- SD =7,68) at post-race and with an α error probability = 0.05, showed an effects size $d = 1.142857$ and a power (1-β error probability) = 87.6%. The CAR was calculated by subtracting cortisol levels at awakening (T0) from levels before the race (T1). A P value<.05 was considered statistically significant. Graphics were performed using Graph Pad Prism software and the post-hoc power calculation was calculate using G Power 3.1 [30].

3.MATERIALS AND METHODS – MASTER ATHLETES

3.1 Veteran subjects and training protocol

The study was carried out in accordance with Helsinki declaration and approved by the rowing team coach of Rowing Club Peloro (based in Messina, Italy), the medical staff, and by the Ethics Committee of Messina University Hospital (approval protocol number 4157/2021). Written informed consent was released by all participants to the corresponding author. 24 Sicilian male and female rowers (age 50.67 ± 7.15 years; height 168.2 ± 7.03 cm; weight 65.73 \pm 9.41 body mass index (BMI) 23.05 \pm 2.61 kg/m²) of the team Rowing Club Peloro participated in this study (Table 3).

Of the 24 veteran athlete rowers 6 were male and 18 female.

Table 3

The rowers were all second year competitors and the race was outdoor and of regional level. None of the enrolled subject could be considered as an elite athlete, but mostly amateurs. All subjects followed a training routine of 5 days per week, based on a mesocycle preparation program, training sessions for races were specifically assessed 4 weeks before competitions

Table 4. Training protocol for outdoor race (master athletes)

| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-----------|-------------------------|-----------|--------------|-----------|----------------|--------|
| | | | | | | |
| 8K | $4 \times 1.5k$ in | Rest | 4x10' | Running | 4×1 | Rest |
| ergometer | the boat | | Rpm 22-24 | 45' | $28 -$ Rpm | |
| interval | Rest time | | ergometer | Stretchin | 30 | |
| training | $3^{\circ} - 5^{\circ}$ | | rest time 3' | g15' | time Rest | |
| | | | | | 5 ² | |

3.2 Collection of saliva samples

This step was performed in accordance to the above reported protocol for young athletes.

3.3 Biochemical tests

This step was performed in accordance to the above reported protocol for young athletes.

3.4 Statistical analyses

Same as above.

4. RESULTS

4.1 Effects of training on performance of young athletes

The enrolled subjects (n=17) were all adolescent male athletes doing rowing from at least 2 years, and both indoor and outdoor races were regionals.

All athletes were subjected to the same training protocol reported in Table 2. The protocol was specifically studied to obtain the maximum performance for the two types of competitions and lasted 3 months before the indoor and 3 months before the outdoor race. The week before race all athletes performed a test on the ergometer to evaluate the improvements, and to test race distance.

4.2 Cortisol and testosterone changes during the indoor competition in adolescents

The first set of results, obtained during the indoor competition on 17 athletes, showed that salivary cortisol had a different trend from subject to subject over time. However, 13 out of 17 athletes had similar values ranging between 0 and 10 ng/ml, as shown in the graph below.

As depicted in Figure 1 A and Table 5, cortisol mean values were 4.96 ± 2.01 ng/ml in the morning, 6.53 ± 6.15 ng/ml pre-race and 10.27 ± 6.86 ng/ml post-race. In general, there was an increase in cortisol levels before the competition, compared to the morning values ($p<0.05$). However, these levels further increase 15 minutes after the race compared to the morning values ($p<0.01$). The same level of significance ($p<0.01$) was observed when comparing the levels of this stress hormone in the post-competition vs pre-competition. A reduction in cortisol levels at T1 and T2 compared to T0 was found only in 2 athletes, probably due to their young age (11 years). When recalculating means excluding these 2 outliers cortisol mean values were $4.74 \pm$ 1.87 ng/ml in the morning, 7.15 ± 6.32 ng/ml pre-race and 11.46 ± 6.51 ng/ml post-race with no substantial changes into significance.

Figure 1A. Levels of cortisol (ng/ml) at awakening (T0), before (T1) and after (T2) the indoor race. Each color identifies a single athlete.

Salivary testosterone levels (Figure 1B and Table 5) from the indoor competition, showed a similar trend to cortisol, even if no significant differences were found between the morning values and those obtained before the race.

However, there was a statistically significant increase after the competition $(p<0.05)$, probably due to the agonism of the race. Again, it was observed that the post-competition increase in testosterone was significantly higher versus the other values. A further similarity between the results of the two hormones is the reduction in testosterone values in the same two athletes in the post-competition evaluation. When recalculating means excluding these 2 young rowers testosterone mean values were 120.84 ± 64.13 pg/ml in the morning, 115.28 ± 42.40 pg/ml prerace and 193.51 ± 47.90 pg/ml post-race with no substantial changes into significance.

Figure 1B. Levels of testosterone (pg/ml) at awakening (T0), before (T1) and after (T2) the indoor race. Each color identifies a single athlete as in Figure 1A.

Table 5. Cortisol and Testosterone levels on the day of the indoor race. Values are mean +/- SD of the 17 athletes.

4.3 Cortisol and testosterone changes during the outdoor competition in adolescents

For the outdoor competition the 2 youngest athletes were not included in the evaluation and 5 other athletes were not able to participate because were in quarantine for testing positive to COVID-19, this resulted in a homogeneous sample of athletes aged 14-18 yrs. Figure 2A and 2B depict the individual values of the 10 athletes (using the same identification color used in Figure 1A and 1B) regarding either cortisol and testosterone. Table 6 includes the values of cortisol and testosterone of the 10 athletes that performed both races on the day of the indoor competition.

Figure 2B. Levels of testosterone (pg/ml) at awakening (T0), before (T1) and after (T2) the outdoor race. Each color identifies a single athlete.

Table 6. Comparison of Cortisol and Testosterone levels of the 10 athletes evaluated at the indoor and outdoor event. Values are mean +/- SD of the 10 athletes.

The day of the outdoor competition, the athletes showed a very similar pattern of distribution of cortisol values, in particular the morning expression was significantly higher (12.73 ± 7.62) vs 4.64 ± 1.88 ng/ml; p<0.01) as compared to the indoor race (Table 6). The pre- and post-race values were almost similar (pre-race 11.10 ± 7.26 and post-race 14.20 ± 9.36 ng/ml) although slightly reduced right before the competition (Table 6). No difference was found comparing the levels of the stress hormone in the two competition settings pre- and post-competition (Table 6).

Testosterone levels were lower in the morning of the outdoor race $(41.34 \pm 21.61 \text{ pg/ml})$ compared to the ergometer session (111.40 \pm 44.25 pg/ml), even if there was no significant difference (Table 6). The aggressiveness hormone increased following the race as observed also in the indoor competition, although a difference was found only when comparing the two competition settings pre-race values (Table 6; p=0.02).

4.4 Cortisol awakening response in adolescents

The CAR plays an important role in determining the ability of an athlete to cope with stressors as it easily happens during competitions, rather than training sessions, in our sample we observed a good cortisol response in all subjects involved in the indoor race; while 4 out of 10 athletes of the outdoor competition demonstrated higher levels of anticipatory stress, having a difference of more than 2.5 ng/ml in their cortisol levels compared to baseline.

Considering the stress generated by the competition itself, at the indoor race 4 out of 10 had increased cortisol levels at the end (T2) of the competition, while 5 athletes (4 of which did not cope well with stress either at the indoor race) were more stressed after the outdoor competition. Considering the CAR as the difference between the levels of cortisol at T0 and T1, 4 subjects at the indoor and only 1 at the outdoor race, demonstrated a greater anxiety on the day of the competition. This has been done taking into account that all the T0 and T1 evaluations have been done in the same time range, representing single assessments for each athlete.

We further considered for each of the 10 athletes that completed the indoor and outdoor races the percentage of increase in either cortisol and testosterone, as shown in Figure 3 (A and B). The graph shows that 8 out of 10 athletes were more subjected to an increase in cortisol levels and 9 out of 10 had an increase in testosterone during the indoor race (Figure 3A). As demonstrated by data, rowers #4 and #5 had an increase in testosterone levels only, while rower #7 showed augmented levels of cortisol only (Figure 3A). As far as the outdoor race is concerned, we observed a percentage increase in both hormones in 6 out of 10 athletes (Figure 3B). In this setting rowers #1, #3, and #7, had increased levels of testosterone only, while rowers #6, #8, and #10 increased only their cortisol levels; while rower #4 had a peculiar condition of reduced release of both hormones when the whole time span was considered (Figure 3B).

Figure 3. Percentage change of the values of cortisol and testosterone stratified for each athlete, for both indoor (A) and outdoor race (B). Each number on the X-axis corresponds to a specific athlete.

B

Significantly higher values of the Testosterone/Cortisol ratio were observed during the indoor race than to outdoor competition, at all time points (Table 7). In addition, intra- and interindividual differences were reported for the three time points for each competition in Figure 4.

Table 7. Testosterone (pg/ml)/Cortisol (mmol/l) ratio at the three time points evaluated, indoor vs outdoor race.

| Testosterone $(pg/ml) /$ | Indoor race | Outdoor race | p value |
|--------------------------|--------------------|-------------------|---------|
| Cortisol (nmol/l) ratio | | | |
| Morning | $10.2 \ (\pm 5.1)$ | $1.6 (\pm 1.1)$ | < 0.01 |
| Pre-competition | $8.2 \ (\pm 6.3)$ | $2.3 \ (\pm 1.6)$ | < 0.01 |
| Post-competition | $9.8 (\pm 11.6)$ | 2.1 (± 1.8) | 0.02 |

Figure 4. Testosterone (pg/ml)/Cortisol (nmol/l) ratio stratified for each athlete in indoor (A)

and outdoor (B) race.

4.5 Testosterone/cortisol ratio as podium predictor in young athletes

To better understand the influence of the hormonal response on the performance of the 10 athletes that competed either in the indoor and the outdoor races, we interviewed the coach (Mr. Dario Femminò) to identify those who had an expected or an un-expected race result. According to his evaluation we identified 3 out of 10 that performed un-expectedly at the indoor and 4 out of 10 at the outdoor. The un-expected performance correlated with a higher testosterone/cortisol ratio at the end of the indoor race (T2), while athletes that performed as expected by the coach had a more aggressive behavior right before the race (T1) in the outdoor competition as demonstrated in Table 7.

Table 7. Testosterone/cortisol ratio according to expected or un-expected results at the indoor or outdoor race**.** The final outcome of the race was used to divide the athletes in the two groups according to their ability to perform better or as expected.

Since the testosterone/cortisol ratio can be used as a predictor of performance, the podium results were correlated to this ratio revealing that at least for the indoor race the higher levels of this ratio correlated with the highest podium positions (Figure 5A; B= -0.266; p=0.032). The same relationship was not found on the day of the outdoor competition, although a certain pattern or correlation was evidenced (Figure 5B; B= -0.144; p=0.795).

Figure 5. The testosterone/cortisol ratio significantly influenced the position podium (B= -0.266; p=0.032) in indoor race. In particular, higher testosterone/cortisol ratio values were associated with the better podium positions (A). Instead, no significantly associated was observed in outdoor competition $(B=-0.144; p=0.795)$, (B).

4.6 Effects of training on performance of master athletes

The enrolled subjects (n=24) were athletes of both sexes doing rowing from at least 2 years, and they were tested during a regional race.

All athletes were subjected to the same training protocol reported in Table 4. The protocol was specifically studied to obtain the maximum performance by this specific kind of athletes who

are not former sportsmen. The week before race all athletes performed a test on the ergometer to evaluate the improvements, and to test race distance.

4.7 Cortisol and testosterone changes in master athletes

Figure 6A and 6B depict and Table 8 the individual values (using the same identification color between Figure 6A and 6B for each athlete) of either cortisol and testosterone obtained from the saliva samples of the 24 athletes.

Figure 6. A. Levels of cortisol (ng/ml) and B. levels of testosterone (pg/ml) at awakening (T0), before (T1) and after (T2) the race. Each color identifies a single athlete.

The mean values of the morning expression of cortisol remained unchanged before the race and raised at the end of the competition as shown in Table 8. On the contrary, testosterone levels increased before the race, as compared to early morning, suggesting an aggressive/competitive behavior of the athletes and then returned to basal values (Table 8).

| Timing | Cortisol ng/ml | Testosterone pg/ml |
|------------------|-----------------|--------------------|
| Morning | 3.59 ± 2.09 | 60.71 ± 87.99 |
| Pre-competition | 3.52 ± 1.36 | 74.95 ± 95.27 |
| Post-competition | 5.03 ± 2.14 | 61.57 ± 53.4 |

Table 8. Cortisol and Testosterone levels on the race day. Values are mean +/- SD of the 24 athletes.

4.8 Cortisol awakening response in master athletes

Considering the CAR as the difference between the levels of cortisol at T0 and T1, master athletes demonstrated less ability to cope with stressors as 12 out of 24 athletes demonstrated higher levels of anticipatory stress, having a difference of more than 2.5 ng/ml in their cortisol levels compared to baseline.

The graph shows that 8 out of 24 athletes were more subjected to an increase in testosterone levels and 12 out of 24 had an increase in cortisol (Figure 7). As demonstrated by data, rowers #4, 8, 9, and 10 had an increase in cortisol levels only, while only rower #20 showed augmented levels of testosterone only (Figure 7).

Figure 7. Percentage change of the values of cortisol and testosterone stratified for each athlete. Each number on the X-axis corresponds to a specific athlete.

4.9 Testosterone/cortisol ratio as podium predictor in master athletes

To better understand the influence of the hormonal response on the performance of master athletes, we interviewed the coach (Mr. Dario Femminò) to identify those who had an expected or an un-expected race result. According to his evaluation we identified 6 out of 24 that performed better than expected at the race (Table 9). However, no difference was observed in the values reported for the testosterone/cortisol ratio at any timepoint between the 2 groups of performants. A trend of significance $(p=0.056)$ was observed at T2 (post-competition) between the two groups, suggesting an increase in testosterone levels in those who had a better performance than expected, but the number of cases are not enough to draw conclusions.

Table 9. Testosterone/cortisol ratio according to expected or un-expected results**.** The final outcome of the race was used to divide the athletes in the two groups according to their ability to perform better or as expected.

Since the testosterone/cortisol ratio can be used as a predictor of performance, and in the young athletes we saw this kind of correlation, we correlated podium results to the testosterone/cortisol ratio (Figure 8; B= 8.5; p=0.245). The data showed no significant relationship between the ratio of the hormones and the results obtained in the race.

Figure 8. Testosterone/cortisol ratio compared to the podium results. All results are expressed as single result per each athlete.

To further dissect out this data and considering that during master regattas at regional level there are usually few entries (even 2-3 teams participating in each race), we further correlated the hormonal levels to the podium result adjusted for the number of entries of each race (Figure 9; B=0.22, p=0.990) and again no correlation was found.

5. DISCUSSION

As observed in many context, the changes in cortisol and testosterone levels in players might be due to a winning/losing situation or to the social support of team mates, families and coaches. Even in the context of a dominance contest, aggressive behavior (demonstrated by higher testosterone levels) depends less on motivational and hormonal factors, directly linked to dominance, and more on stress and its endocrine basis [31]. It is known that at least for men, latent power motivation is positively correlated with baseline levels of testosterone [31]. According to the dual-hormone hypothesis, both testosterone and cortisol regulate dominance motivation in men and women. However, high cortisol levels reduce or even halt testosterone response [32].

This same pattern of hormonal response was also observed in our sample where the variability in testosterone and cortisol levels was mostly related to the general setting of the race. The dualhormone response has been observed in our athletes during the indoor race, their raised cortisol levels were paralleled by a reduced increase in testosterone levels. As a matter of fact, during indoor races all the attending people is close to the athletes, the coach and the public are right behind the rower and this provides strong feelings of support and stress, which can be similar to the stress of competing home or away in other sport settings [33]. In fact, cortisol levels on the day of the race were lower when measured at the time of awakening for the indoor as compared with the outdoor competition, this can be considered as a normal response, known as CAR (cortisol awakening rise) [34]. This might also be due to mental factors, as the awareness that the real race for a rower is on the boat rather than on the ergometer. Despite a blunted CARs before a competition may reflect burnout and exhaustion, however an exaggerated cortisol increase reduces testosterone leading to reduced aggressivity, which may be responsible for a poor performance. As known CAR is considered an adaptive response to prepare for forthcoming demands; but no signs of overtraining were observed in our rowers. In

addition, the nature of the two competitions (regional races) might also have played a role in the reduced stress responsiveness. Similar results have previously described in elite rowers either as a positive function of repeated exercise or habituation to competition [35].

Indeed, testosterone fluctuations demonstrated a linear increase from morning values (with no difference between awakening and pre-race) to post-competition in the indoor race probably due to the close presence of team mates and coaches causing an excessive aggressive and motivational response. Also, the type of physical effort at the ergometer implies a maximal muscular response and less technical skills that may justify the rise in testosterone levels after the race, independently of the winning/losing outcome.

On the other hand, pre-competition levels of cortisol were similar in the two settings, showing a little decrease that was independent of the time of the day, considering that in both cases the races have been performed in the morning, so the time of the day has not an influence on these values. These same hormonal values, measured in saliva samples, were already observed in a previous work that compared the levels of cortisol in light and heavy-weight rowers in a day of competition and during the week of the race [21].

The day of the outdoor race the levels of testosterone followed the trend of cortisol, showing an increase at the last evaluation, this parallel activation seems to be specific of adolescence [36] to influence the psychology of dominance and competition. It has to be considered also the metabolic role of testosterone that plays a pivotal role in gluconeogenesis via the proteolytic pathway, in the storage of glycogen and in protein synthesis at muscular level [37]. The higher increase noted in testosterone following the indoor race, was probably induced by adrenaline stimulation, and by the stimulatory effect of lactate which is mostly produced during ergometer sessions rather than boat races [38]. It is also important to note that in adolescent non-elite athletes the improvement of the technical approach is important to determine a better physical response, also in terms of stress-related biomarkers and to maximize the effort of the performance.

As far as the cortisol response is concerned during the indoor competition the race was between 10 and 13 am, in this time frame normal cortisol levels for age-matched adolescents decrease from 3.95 to 1.81 ng/ml [39], while in our athletes was 4.64 ng/ml at T0 (between 7 and 7:30 am), 8.75 ng/ml at T1 and 12.35 ng/ml at T2, clearly indicating a higher level of stress. During the outdoor competition races were between 9:30 and 13:30 am and the mean cortisol levels at T0 (at 6:00 am) were 12.73 ng/ml, 11.10 ng/ml at T1, and 14.20 ng/ml at T2; these values strongly suggest a higher stress level also compared to the indoor race. In the context of the outdoor race, the athlete is stressed for several factors which may include the early awakening (usually at 6:00 am), the trip to the race venue (usually lakes or rivers far from cities), the boat and oars setting, and the race itself. In the specific condition evaluated in this study, the coach Mr Dario Femminò ruled out the stress deriving from boat setting because his team of coaches and helpers, usually travels one day before the competitions to the venue to set up all the equipment for the athletes, thus the stress derives only from the early wake up and the bus trip (usually 2-3 hours), plus the race itself. These stressors are not the same as during the indoor race, in fact the venue is a gym in the city which minimize travel time and does not force the athletes to an early wake up, additionally the only equipment needed is the ergometer that is already set up when the competition starts. Considering also the above mentioned variables is not difficult to understand the predictability of the different stress levels observed in our athletes in the two race settings.

In the case of testosterone, the mean salivary levels reported in age-matched adolescents [22] in the morning (9:00 to 13:00 am) range from 35.4 to 20.4 pg/ml with a net 40% decrease, while in our sample values ranged from 111.4 to 183.4 pg/ml in the indoor race, while the values obtained for the outdoor race ranged from 41.3 to 61.6 pg/ml. In both competitions our athletes

demonstrated an increased aggressivity related to the race that highly affected the circadian rhythm of testosterone, as could be expected during such a demanding condition.

As the HPA is activated due to several types of stressors from psychological to socially related, CAR is considered an adaptive response to prepare for forthcoming demands; in this context, the competition-related increases in salivary cortisol clearly supports the activation of the hypothalamo-pituitary adrenal axis. During adolescence some instability of the HPA could be responsible for exaggerated responses both in the anticipatory and in the stress-related response as demonstrated in different cohorts of subjects [40, 41].

Considering the overall results, the positive relationship between cortisol and testosterone levels may be related to stimulation of the adrenal gland in response to physical stress, since both hormones are synthesized by the same stimulatory axis, even though testosterone is secreted mainly by testes. Indeed, in most of our athletes a very similar pattern of response for both hormones was noted.

The testosterone:cortisol ratio is commonly used to determine the level of overtraining and sometimes of stress and aggressiveness for athletes of different sports [27] however in young athletes this is not always true due to the hormonal changes typical of adolescence. A recent metanalysis [27] showed that following resistance exercise there are little changes, while most of the alterations in this ratio have been observed during aerobic and power exercise. In this context, considering that rowing is an aerobic and anaerobic sport with a lactacid and a-lactacid component during the race [28], the variation in the testosterone:cortisol ratio might have a peculiar pattern. In addition, it has been little investigated as relative to a single event or in young amateur athletes since this ratio is usually considered a parameter to determine adequate recover after training in elite sportsman [29].

In response to physical exercise, or at least until overreaching when a negative correlation between cortisol and testosterone levels is reported, testosterone increases linearly with peak

concentrations at the end of training sessions [42]. The testosterone:cortisol ratio has been also shown to be reduced by at least 30% when the athletes suffer from overtraining [43]. It has been proposed that during training conditions the increase of free testosterone is at least partially due to the contribution of the adrenal cortex which counteracts the depressor effect of cortisol and the normal circadian fluctuation. Additional evidence obtained in runners sustain the hypothesis that this type of acute biphasic response may correlate to the intensity of the stimulus, as a matter of fact, endurance runners have a reduced increase in testosterone as compared to middle-distance runners following an acute effort [44, 45]. On the other hand, amateur runners demonstrated increased cortisol levels two days before the marathon, while professionals had increased testosterone levels, probably due to a reduced HPA activation in response to the training volume [46, 47]. In the present investigation, the testosterone/cortisol ratio was intended to be a marker of the ability of the athlete to cope with stressors in the two different race settings, despite the young age of the subjects the obtained results indicate that the outdoor competition greatly stimulates the competitiveness and combative attitude since the testosterone dynamic was significantly modified. This result was to be expected since the percentage increase in both cortisol and testosterone, evaluated to understand if the two different competitions could influence the hormonal levels, demonstrated the prevalence of the aggressivity hormone in the outdoor race. These results suggest that boat races, usually with multiple rowers racing together determine a lower rate of pre-competition stress and aggressiveagonist behavior as compared to the ergometer where the athlete is alone. As a matter of fact, our hypothesis was that the more stressful event was meant to be the boat race, as it could be considered "the real race" for a rower, surprisingly this was instead the competition that had a greater stimulus on the aggressive and competitive attitude of the athletes. Clearly this result could be due mainly to the fact that our athletes were amateur and thus approached the race with a lower stress level. The overall data comparing the 2 competition settings (Figure 3A and

B) show a more stressful condition during the indoor rather than outdoor race, this could be indeed an expected outcome given the several stressors that are present during an indoor race. On the other hand, testosterone levels increased more, as a percentage, during the outdoor competition (Figure 3A and B) as compared to the indoor when considering the overall data. As previously shown blood and saliva levels often correlates and in young athletes is far easier to use saliva as a non-invasive, nor stressing method for determining levels of this useful biomarkers [26, 37]. Some limitations in our study should be taken into account, first of all the relatively small sample that does not allow to generalize the obtained data; second, we do not have hormone data from training sessions; third we did not assay the emotional status of the athletes with an appropriate questionnaire. A further limitation is that we did not find any correlation between the percentage variation of the evaluated hormones and the athlete performance during the race, a bigger sample would have probably provided such information. Nonetheless considering that participation was on a voluntary base it was not possible to expand the sample, but our data provide similar results to those previously described even if are the first ones to report the differences between two race settings in non-elite adolescent rowers. Another important result emerging from this study is the possible role of the testosterone/cortisol ratio as a predictor of performance during a race since it was associated with podium positioning, at least during the indoor race. In the future it will be important to prolong the study observations and to include a female group to determine if the salivary levels of these hormones and their ratio, could be predictive of performance outcomes in young rowers. In addition, due to the hormonal changes observed in the two 11-year-old subjects in our study, other future studies could evaluate the hormonal difference according to the age groups of the adolescents that could have a different type of response to the stress of competition.

CONCLUSIONS

As emerged from this study the amateur rowers that approached competitive sport during adulthood may have problems in coping with the race-related stress and thus the outcome of their performance might be affected, as it happens in adolescents. Coaches can use different methods to engage in meaningful communication with athletes, gaining insights into the athletes' true feelings across different training periods. This information serves as a basis for adjusting training loads on a given day, as it could be the day of a race. As a matter of fact, assessment tools like the DALDA would lack effectiveness without open, honest, and candid communication between the athlete and coach. Integral to the coaching and teaching process is assisting athletes in conveying essential information to the coach. A successful coach must be a proficient listener, displaying openness to the athlete, even in the case of adult amateur that face competitions for their first times. The training environment should foster a learning atmosphere where athletes feel comfortable sharing information with the coach, ensuring they are consistently reassured of their value and that their feelings are taken into account. In return, athletes should be capable of providing intrinsic feedback or kinesthetic awareness to the coach regarding their bodily sensations, perceptions, and experiences during performance activities.

REFERENCES

- 1) Hinds JA, Sanchez ER. The Role of the Hypothalamus–Pituitary–Adrenal (HPA) Axis in Test-Induced Anxiety: Assessments, Physiological Responses, and Molecular Details. Stresses. 2022; 2: 146-155. [doi: 10.3390/stresses2010011](https://doi.org/10.3390/stresses2010011)
- 2) Westenberg PM, Bokhorst CL, Miers AC, Sumter SR, Kallen VL, van Pelt J, Blöte AW. A prepared speech in front of a pre-recorded audience: subjective, physiological, and neuroendocrine responses to the Leiden Public Speaking Task. Biol Psychol. 2009; 82: 116-24. doi: 10.1016/j.biopsycho.2009.06.005.
- 3) Hackney AC, Walz EA. Hormonal adaptation and the stress of exercise training: the role of glucocorticoids. Trends Sport Sci. 2013; 20: 165-171.
- 4) Celec P, Ostatníková D, Hodosy J. On the effects of testosterone on brain behavioral functions. Front. Neurosci. 2015; 9: 12. doi: 10.3389/fnins.2015.00012
- 5) De Pero R, Minganti C, Cibelli G, Cortis C, Piacentini MF. The Stress of Competing: Cortisol and Amylase Response to Training and Competition. J. Funct. Morphol. Kinesiol. 2021; https://doi.org/ 10.3390/jfmk6010005
- 6) Hayes LD, Grace FM, Baker JS, Sculthorpe N. Exercise‐induced responses in salivary testosterone, cortisol, and their ratios in men: a meta‐analysis. Sport Med. 2015;45(5):713‐726.
- 7) Hayes LD, Grace FM, Sculthorpe N, Herbert P, Kilduff LP, Baker JS. Does chronic exercise attenuate age‐related physiological decline in males? Res Sports Med. 2013;21(4):343‐354.
- 8) Papacosta E, Nassis GP. Saliva as a tool for monitoring steroid, peptide and immune markers in sport and exercise science. J Sci Med Sport. 2011;14(5):424‐434.
- 9) Urhausen A, Gabriel H, Kindermann W. Blood hormones as markers of training stress and overtraining. Sport Med. 1995; 20(4):251‐276.
- 10) Banfi G, Marinelli M, Roi GS, Agape V. Usefulness of free testosterone/cortisol ratio during a season of elite speed skating athletes. Int J Sports Med. 1993;14(7):373‐379.
- 11) Vervoorn C, Vermulst LJM, Boelens‐Quist AM, et al. Seasonal changes in performance and free testosterone: cortisol ratio of elite female rowers. Eur J Appl Physiol Occup Physiol. 1992; 64(1):14‐8
- 12) Pollock RD, Carter S, Velloso CP, et al. An investigation into the relationship between age and physiological function in highly active older adults. J Physiol. 2015;593(3):657‐ 680.
- 13) Hejazi K, Hosseini S‐RA. Influence of selected exercise on serum immunoglobulin, testosterone and cortisol in semi‐ endurance elite runners. Asian J Sports Med. 2012;3(3):185‐192.xf
- 14) Minuzzi LG, Rama L, Chupel MU, Rosado F, Kuga GK, Gaspar RC, Muñoz VR, Pauli JR, Paiva A, Teixeira AM. Immune-endocrine responses and physical performance of master athletes during the sports season. J Cell Biochem. 2019;120(4):5551-5557.
- 15) Banfi G, Marinelli M, Roi GS, Agape V. Usefulness of free testosterone/cortisol ratio during a season of elite speed skating athletes. Int J Sports Med. 1993;14(7):373‐379.
- 16) Vervoorn C, Vermulst LJM, Boelens‐Quist AM, et al. Seasonal changes in performance and free testosterone: cortisol ratio of elite female rowers. Eur J Appl Physiol Occup Physiol. 1992; 64(1):14‐21.
- 17) Mellalieu SD, Neil R, Hanton S, Fletcher D. Competition stress in sport performers: Stressor experienced in the competition environment. J. Sport Sci. 2009; 27: 729–744
- 18) Woodman T, Hardy L. The relative impact of cognitive anxiety and selfconfidence upon sport performance: A meta-analysis. J. Sport Sci. 2003; 21: 443–457
- 19) Cerin E. Anxiety versus fundamental emotions as predictors of perceived functionality of pre-competitive emotional states, threat, and challenge in individual sports. J. Appl. Sport Psychol. 2003; 15: 223–238.
- 20) Stalder T, Kirschbaum C, Kudielka BM, Adam EK, Pruessner JC, Wüst S, Miller R. Assessment of the cortisol awakening response: Expert consensus guidelines. Psychoneuroendocrinology. 2016; 63: 414–432.
- 21) Kallen VL, Stubbe JH, Zwolle HJ, Valk P. Capturing effort and recovery: reactive and recuperative cortisol responses to competition in well-trained rowers. BMJ Open Sport Exerc Med. 2017; 3(1): e000235. doi: 10.1136/bmjsem-2017-000235.
- 22) Butler GE, Walker RF, Walker RV, Teague P, Riad-Fahmy D, Ratcliffe SG. Salivary testosterone levels and the progress of puberty in the normal boy. Clin Endocrinol (Oxf). 1989; 30(5): 587-96
- 23) Carré J, Muir C, Belanger J, Putnam SK. Pre-competition hormonal and psychological levels of elite hockey players: relationship to the "home advantage". Physiol Behav. 2006; 89: 392-8. Doi: 10.1016/j.physbeh.2006.07.011.
- 24) Gonzalez-Bono E, Salvador A, Serrano MA, Ricarte J. Testosterone, cortisol, and mood in a sports team competition. Horm Behav. 1999; 35(1): 55-62.
- 25) Passelergue P, Lac G. Saliva cortisol, testosterone and T/C ratio variations during a wrestling competition and during the post-competitive recovery period. Int J Sports Med. 1999; 20(2): 109-13.
- 26) Ferlazzo N, Currò M, Saija C, Naccari F, Ientile R, Di Mauro D, Trimarchi F, Caccamo D. Saliva testing as noninvasive way for monitoring exercise-dependent response in teenage elite water polo players: A cohort study. Medicine (Baltimore). 2021; 100(46): e27847. doi: 10.1097/MD.0000000000027847
- 27) Crewther BT, Sanctuary CE, Kilduff LP, et al. The workout responses of salivary-free testosterone and cortisol concentrations and their association with the subsequent competition outcomes in professional rugby league. J Strength Cond Res. 2013; 27(2):471–6.
- 28) Martin SA, Tomescu V. Energy systems efficiency influences the results of 2,000 m race simulation among elite rowers. Clujul Med. 2017; 90(1): 60-65.
- 29) Purge P, Jürimäe J, Jürimäe T. Hormonal and psychological adaptation in elite male rowers during prolonged training. J Sports Sci. 2006; 24(10): 1075-82.
- 30) Faul F, Erdfelder E, Buchner A, Lang AG. Statistical power analyses using G*Power 3.1: Tests for correlation and regression analyses. 2009; 41(4): 1149–1160. doi:10.3758/brm.41.4.1149.
- 31) Oxford JK, Tiedtke JM, Ossmann A, Özbe D, Schultheiss OC. Endocrine and aggressive responses to competition are moderated by contest outcome, gender, individual versus team competition, and implicit motives. PLoS One. 2017; 12(7): e0181610.
- 32) Mehta PH, Josephs RA. Testosterone and cortisol jointly regulate dominance: evidence for a dual-hormone hypothesis. Horm Behav. 2010; 58(5): 898-906. doi: 10.1016/j.yhbeh.2010.08.020.
- 33) Bray SR, Jones MV, Owen S. The influence of competition location on athletes' psychological states. J Sport Behav 2002; 25: 231–42.
- 34) Wüst S, Wolf J, Hellhammer DH, Federenko I, Schommer N, Kirschbaum C. The cortisol awakening response - normal values and confounds. Noise Health. 2000; 2(7): 79-88
- 35) Strahler K, Ehrlenspiel F, Heene M, Brand R. Competitive anxiety and cortisol awakening response in the week leading up to a competition. Psychol Sport Exerc. 2010; 11: 148–154. doi: 10.1016/j.psychsport.2009.10.003.
- 36) Turan B, Tackett JL, Lechtreck MT, Browning WR. Coordination of the cortisol and testosterone responses: A dual axis approach to understanding the response to social status threats. Psychoneuroendocrinology. 2015; 62: 59-68. doi: 10.1016/j.psyneuen.2015.07.166
- 37) Alghadir AH, Gabr SA, Aly FA. The effects of four weeks aerobic training on saliva cortisol and testosterone in young healthy persons. J Phys Ther Sci. 2015; 27(7): 2029-2033
- 38) Huang C, Nesser TW, Jeffrery E. Strength and Power Determinants of Rowing Performance. Journal of Exercise Physiology Online. 2007; 10: 43-50
- 39) Kiess W, Meidert A, Dressendörfer RA, Schriever K, Kessler U, König A, Schwarz HP, Strasburger CJ. Salivary cortisol levels throughout childhood and adolescence: relation with age, pubertal stage, and weight. Pediatr Res. 1995; 37(4 Pt 1): 502-6.
- 40) Westenberg PM, Bokhorst CL, Miers AC, Sumter SR, Kallen VL, van Pelt J, Blöte AW. A prepared speech in front of a pre-recorded audience: subjective, physiological, and neuroendocrine responses to the Leiden Public Speaking Task. Biol Psychol. 2009; 82(2): 116-24.
- 41) Sumter SR, Bokhorst CL, Miers AC, Van Pelt J, Westenberg PM. Age and puberty differences in stress responses during a public speaking task: do adolescents grow more sensitive to social evaluation? Psychoneuroendocrinology. 2010; 35(10): 1510-6. doi: 10.1016/j.psyneuen.2010.05.004.
- 42) Luccia TP. Use of the Testosterone/Cortisol Ratio Variable in Sports. The Open Sports Sciences Journal 2016; 9: 104-113.
- 43) Adlercreutz H, Härkönen M, Kuoppasalmi K, Näveri H, Huhtaniemi I, Tikkanen H, Remes K, Dessypris A, Karvonen J. Effect of training on plasma anabolic and catabolic steroid hormones and their response during physical exercise. Int J Sports Med. 1986; 7 Suppl 1: 27-8.
- 44) Kraemer WJ, Gordon SE, Fleck SJ, Marchitelli LJ, Mello R, Dziados JE, Friedl K, Harman E, Maresh C, Fry AC. Endogenous anabolic hormonal and growth factor responses to heavy resistance exercise in males and females. Int J Sports Med. 1991; 12(2): 228-35. doi: 10.1055/s-2007-1024673.
- 45) Vuorimaa T, Ahotupa M, Häkkinen K, Vasankari T. Different hormonal response to continuous and intermittent exercise in middle-distance and marathon runners. Scand J Med Sci Sports 2008; 18(5): 565-72.
- 46) Bobbert T, Mai K, Brechtel L, Schulte HM, Weger B, Pfeiffer AF, Spranger J, Diederich S. Leptin and endocrine parameters in marathon runners. Int J Sports Med. 2012; 33(3): 244-8. doi: 10.1055/s-0031-1291251.
- 47) Luger A, Deuster PA, Kyle SB, Gallucci WT, Montgomery LC, Gold PW, Loriaux DL, Chrousos GP. Acute hypothalamic-pituitary-adrenal responses to the stress of treadmill exercise. Physiologic adaptations to physical training. N Engl J Med. 1987; 316(21): 1309-15. doi: 10.1056/NEJM198705213162105