

1 **MANAGING PERFORMANCE THROUGHOUT PERIODS OF TRAVEL**

2
3 **ABSTRACT:**

4 Understanding the impact of travel on physical performance is an increasing area of
5 interest for the strength and conditioning practitioner. Previous research surrounding
6 the effect of travel on the physiology of an athlete has focused on sleep. Of particular
7 concern to coaches and athletes are strategies to help attenuate any detrimental
8 impact of travel on subsequent performance. The aim of this article is to provide
9 informative practical guidelines for prior, during and post travel that can be
10 implemented by coaches and athletes. The key coping strategies addressed include
11 timed light exposure; managing sleep deprivation and nutritional recommendations.

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35 **INTRODUCTION:**

36 Long distance travel for training camps and competition is becoming more common.
37 The unique combination of physiological, psychological and environmental factors
38 associated with travel may cause detrimental effects on an athlete's ability to recover
39 and perform (8, 35, 39, 51). Dependant on the direction and length of the travel,
40 these factors may include jet lag, disruption of circadian rhythm, joint stiffness,
41 dehydration and sleep disruption (24, 35). While these undesirable side effects of
42 travel are difficult to avoid, a greater understanding of the fatigue inducing
43 mechanisms involved may help the strength and conditioning coach to implement
44 strategies that reduce the potential decrement in performance. Therefore, throughout
45 this review, the physiological mechanisms behind the performance effect of travel
46 are outlined with the aim to discuss practical solutions to the raised concerns.

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49 **MECHANISMS OF TRAVEL FATIGUE**

50 Desynchronosis dysrhythmia, commonly referred to as 'jet lag', is a set of transitory
51 alternations in human physiological functions affected by rapid air travel across time
52 zones leading to decrement in mental and physical performance (13, 52). Jet lag is
53 found to be more complex and greater after trans meridian compared to trans
54 latitudinal travel due to the changes in time zones (51). Jet lag can manifest as:
55 sleep disturbances, daytime fatigue, lack of concentration, headaches, irritability,
56 loss of appetite and gastrointestinal disturbances (28, 50). Most of the symptoms
57 associated with jet lag mainly occur due to the desynchronization between the
58 body's internal time-keeping system and the external environment (38). During
59 eastwardly travel, there is a need for a circadian phase advance (sleep promotion),
60 which is much more difficult to accommodate compared to a circadian phase delay
61 (sleep deterrence) required for westward travel (16, 52). Subsequently, the effect of
62 jet lag remains longer with eastbound compared to westbound travel (16, 52).
63 However, irrespective of the direction of travel, the body's circadian rhythm can be
64 resynchronised at the rate of approximately one time zone per day (51). In order to
65 develop successful coping strategies, it is imperative to appreciate the intrinsic
66 mechanisms of the human biological clock.

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68 The circadian rhythm is governed by a 24-hour solar cycle which maintains both
69 endocrine and metabolic processes. The endogenous mechanism that regulates
70 circadian rhythm in humans is the superchiasmatic nuclei of the anterior
71 hypothalamus (24). The circadian system is composed of the central oscillator
72 located at the base of the hypothalamus and peripheral oscillators found in other
73 areas of the hypothalamus and the endocrine system (20). The central oscillator is
74 affected by the peripheral oscillators' feedback from environmental stimuli (24, 38).
75 A disruption in the signal from the external environment can cause
76 desynchronization (between central and peripheral oscillators) affecting body
77 temperature, cardiovascular function, ventilation, gastrointestinal function, mood
78 states and hormonal secretion (3). One important behaviour that affects normal
79 physiological function is the sleep-wake cycle. The sleep-wake cycle is regulated by
80 the hormone melatonin, secreted from the pineal gland. The secretion of melatonin is
81 inhibited by exposure to natural light and, therefore it peaks during the hours of
82 darkness (2, 31, 35). Core body temperature also works on a 24-hour cycle (35),
83 peak body temperature is reached around 18:00 hrs before dropping to its lowest
84 (nadir) during sleep (28). This decrease in core body temperature also coincides with
85 increase in melatonin secretion causing a rise in endogenous melatonin levels and
86 prompt sleep onset (12). This demonstrates a strong relationship between the
87 circadian rhythms of melatonin secretion, sleep propensity, and the body's
88 thermoregulation, all of which can be disrupted by rapid air travel across multiple
89 time zones.

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91 After travelling across several time zones, the delay in resynchronizing body's sleep-
92 wake cycle according to environmental light-dark cycle of the new location induces
93 sleep deprivation (37, 45). Although everyone will experience sleep deprivation
94 induced by jet lag, the intensity and duration of this will depend on the number of
95 time zones crossed, the direction of travel, sleep during traveling, local circadian time
96 cues and individual tolerance levels (38). The departure time from the original
97 location and arrival time at the destination may also have some influence on jet lag
98 symptoms. In a study involving 85 participants travelling eastward crossing 10 time
99 zones, evening departures/early morning arrivals had twice as much total sleep
100 during flight compared to early morning departure/midday arrivals (49). However,
101 early morning departure/midday arrival participants suffered fewer jet lag symptoms

102 and less fatigue compared to their evening departures/early morning arrivals
103 counterparts (49). It was proposed that early morning departure/midday arrivals
104 enabled normal sleep quality (i.e., use of own bed during the night prior to departure)
105 reducing the symptoms of jet lag. Whereas the evening departures/early morning
106 arrivals reduced sleep quality due to the need to attempt sleep during travel (49).
107 Although jet lag symptoms are the predominant factors contributing to fatigue in a
108 travelling athlete, additional contributors include, stress from delays and detours,
109 joint stiffness and muscle cramps from prolonged sitting in restricted postures (35,
110 36, 50). Therefore, symptoms of travel fatigue should be monitored and managed to
111 ensure optimal performance and well-being. Support staff should therefore plan and
112 implement appropriate strategies to alleviate these unfavourable scenarios.

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115 **IMPACT OF SLEEP DEPRIVATION ON PERFORMANCE**

116 Sleep deprivation causes diurnal sleepiness, depressed mood, insomnia and
117 declined mental performance (24). While sleep deprivation may be associated with
118 jet lag, it is possible that travel such as trans longitudinal journeys have lesser effect
119 on circadian rhythms, but do cause sleep deprivation if travel occurs overnight and
120 sleep patterns are compromised. Although compelling evidence is lacking or
121 inconsistent, some recent studies have reported the importance of adequate sleep in
122 athletic performance. Skein et al., (42) reported diminished muscle glycogen levels
123 and reduced intermittent sprint performance (15m sprint every minute for 50
124 minutes) with 30 hours of sleep deprivation in male team-sport athletes. Recently,
125 Fowler, Duffield and Vaile (17) demonstrated that 24 hours of simulated international
126 air travel had a negative effect on aerobic performance (Yo-Yo Intermittent Recovery
127 Test Level 1) yet no impact on counter-movement jump (CMJ) (17). Results of this
128 research suggest that maximal exertion or fatiguing aerobic tasks (intermittent sprint
129 and Yo-Yo tasks) may be impacted to a greater degree when athletes experience a
130 reduction in quality and quantity of sleep. Interestingly, Blumert et al., (9)
131 investigated the effects of 24 hours of sleep deprivation in college-level weightlifters
132 and found no differences in snatch, clean and jerk, front squat, total volume load, or
133 training intensity. However, the authors reported negative mood disturbances among
134 the weightlifters after acute sleep loss, indicating some psychological effects of sleep
135 deprivation (9).

136 While results of this research indicate no performance decline, factors such as
137 negative mood, may be exasperated in team environments where unity and
138 organization are important for success and may provide further explanation of athlete
139 motivation towards tasks requiring maximal aerobic exertion (17). This theory may
140 be supported by the findings of Mah, Mah, Kezirian and Dement (27) who studied
141 the effects of extended sleep in athletic performance among male varsity basketball
142 players. The study reported reduced mood disturbances (tension, depression, anger
143 and confusion), increased vigour, reduced fatigue and significant performance
144 changes (faster sprint times and improved free throw shooting accuracies), following
145 an extended sleep of (507.6 ± 78.6 minutes) per night compared to their regular
146 sleep duration (400.7 ± 61.8 minutes per night). Furthermore, Waterhouse et al.,
147 (48) reported improved alertness, mental, and physical performance following a 30-
148 minute nap compared to no nap. The performance tests included short-term
149 memory, visual choice reaction time, handgrip strength and sprint performance (48).
150 Results indicate that a short 30-minute nap produced significant improvement in
151 sprint performance and visual choice reaction accuracy, but no improvement in hand
152 grip strength or average reaction times compared to the no nap condition (48).
153 Therefore, daytime fatigue and sleep deprivation may be considered as the key
154 drivers that impact performance by causing impairments in cognitive function and
155 decreased motivation (24).

156 Monitoring and managing the sleep-wake cycle of a travelling athlete is vital for
157 maintaining optimal performance as it appears athletes require adequate sleep for
158 optimizing physiological and psychological recovery and sports performance (7).
159 However, the effect of sleep deprivation on performance is specific to the required
160 task as a negative impact has been reported on aerobic performance, sprint
161 performance and free-throw shooting, but not on CMJ and weightlifting performance
162 (9, 17, 27).

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164 **NUTRITIONAL CHALLENGES**

165 From a nutritional perspective, the challenge for strength and conditioning coaches is
166 that travel may often create an enhanced likelihood of inadequate nutritional intake
167 and subsequent decrements in performance at a time where performance

168 implications are most significant (6, 33). Challenges may include limited access to
169 the individual's habitual food types and food quantities; necessitating a reliance on
170 food provided by hotels and restaurants. These may not sufficiently meet the daily
171 nutritional requirements of the individual or may provide buffet style options,
172 encouraging over-eating. Gastrointestinal illnesses are also more likely due to
173 exposure to food and water with differences in hygiene standards. Some evidence
174 suggests that more than half of athletes who travel internationally develop diarrhoea
175 with primary sources of bacterial pathogens coming from food or water (18). The
176 journey itself may also facilitate dehydration due to the dry air of flight cabins, which
177 should be monitored throughout the travel process (36, 50).

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179 **COPING STRATEGIES**

180 Minimizing the potential decrement in athletic performance caused by travel requires
181 comprehensive management by both athletes and support staff. Educating the
182 athlete on fundamental circadian rhythm responses and appropriate pre, during and
183 post travel activities could influence athlete's awareness and behaviour during travel.
184 Although limited, some research has attempted to provide some guidance in
185 managing travel fatigue in athletes. The leading cause of circadian rhythm
186 disruptions is the transition between time-zones and hence most of these strategies
187 subsequently target resynchronization of circadian rhythms. However, if the length
188 of stay at the new destination is short (< 3 days), it is recommended to maintain
189 behavioural patterns to coincide with the original 'home' time (50). Also, if less than 3
190 time zones are crossed, then the jet lag symptoms are less severe, and hence,
191 coping strategies differ compared to travel across 3+ time zones (50). Since the
192 normal cycle of the human circadian rhythm is slightly longer than 24 hours, we have
193 a natural tendency to accommodate lengthening of time zone (Westward) than
194 shrinking (Eastward) and as such, coping strategies are based on the direction of
195 travel and the number of time zones crossed (34, 39). Therefore, while the severity
196 of jet lag symptoms increase in Eastward travellers after crossing 3 or more time
197 zones, in Westward travellers this increase may occur when crossing 4 or more time
198 zones (Figures 1 and 2). During planning, it is recommended that, if possible, at least

199 one day per time zone should be allowed before competition for resynchronization of
200 the internal body clock (48).

201

202 Managing Light Exposure

203 Upon arrival, depending on the timing, intensity and duration, exposure to bright light
204 (especially natural light) can advance or delay the circadian phase (30). Since
205 melatonin secretion is inhibited on exposure to bright light and increased during
206 darkness, allowing or restricting light exposure would seem an ideal pre-requisite for
207 altering melatonin secretion to suit circadian phase delay or advance, respectively. It
208 has been demonstrated that fluorescent and blue light can also be used to effectively
209 suppress melatonin as they simulate the photic environmental stimuli associated with
210 daytime light (14). For example, Wright, Lack and Partridge (53) found that different
211 light-emitting diodes were effective in suppressing melatonin, with the blue/green
212 diode being more effective than any others. Desan, et al., (15) found that the
213 Litebook light-emitting diode light therapy (which uses shortwave blue light) was an
214 effective device for treatment of seasonal affective disorder, which could also be
215 repurposed for extending melatonin suppression. Recently, intermittent transcranial
216 light has also been researched, where exposure to bright light via the ear canal (4 x
217 12 minute per day) has been shown to have a positive effect on overall subjective jet
218 lag symptoms after cumulative days of treatment (23), but no effect on circadian
219 phase shifts after acute and short term treatment of 1 x 12 minute exposure (10).
220 The exact physiological mechanisms are currently not understood, although
221 transcranial bright light has been shown to have no effect on melatonin secretion yet
222 a positive effect on brain (32, 43) and psychomotor function (47). Some practical
223 guidelines from the literature on managing light exposure are provided in behavioural
224 management plan (Figures 1 and 2).

225

226 However, timing of bright light is critical as the direction of the circadian system shift
227 is dependent on the circadian phase and the timing of the core body temperature
228 nadir. Subsequently, eastwardly travellers should avoid bright light before body
229 temperature nadir occurs and seek bright light after (50). This becomes more and
230 more challenging for eastwardly travellers as the number of time zones crossed
231 increases. Dark goggles can be used to reduce exposure to bright light and induce
232 melatonin secretion. Sasseville, Paquet, Sévigny and Hébert (40) found that blue

233 blocker glasses significantly impede the capacity of bright light to suppress
234 melatonin. Similarly, research carried out on night shift workers reported that wearing
235 dark goggles during the morning commute to reduce light exposure has enabled
236 adaptive circadian phase resetting (37). Such a critical stimulation of melatonin
237 secretion can help increase the levels of endogenous melatonin, resulting in
238 promotion of sleep propensity that is required to advance the circadian phase.

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240 Coping with and Avoiding Sleep Deprivation

241 Sleep deprivation can have negative effects on athletic performance (17, 42) and
242 can occur from both sleep loss during travel (overnight flights) and jet lag (the need
243 for circadian phase advance or delay). Therefore, coping strategies to alleviate and
244 avoid this deprivation are of high importance. When planning trans meridian travel,
245 depending on the direction, pre-flight practices such as adjusting bedtime by 1 or 2
246 hours, 1 to 2 days prior to travel are recommended to promote partial adaptation to a
247 new time zone (34) (Figures 1 and 2). **Also, if possible, to mitigate travel fatigue by**
248 **reducing sleep cycle interference, plan early morning departure and afternoon**
249 **arrivals, which will enable the next night's sleep sooner compared to evening**
250 **departures/early morning arrivals (49).** In order to reduce the negative effects of the
251 travel process, it is recommended that sleep during travel is maximized (29, 34, 39).
252 Behavioural recommendations such as, keeping the cabin window shades down,
253 turning the cabin lights off until an hour prior to arrival (29) and ensuring good sleep
254 hygiene (avoiding caffeine, nicotine, food and brain stimulating activities) (7), can all
255 be used to reduce sleep interference and reduce travel fatigue. These sleep hygiene
256 recommendations should also be followed prior to and after travel to help reduce
257 travel fatigue or to cause the desired circadian phase shift. Upon arrival, any athletes
258 displaying symptoms of travel fatigue may be successfully managed using an
259 appropriate napping strategy (48). Naps of less than 30 minutes are not susceptible
260 to "sleep inertia", the fatigued state experienced upon waking from sleep (22).
261 Moreover, short naps (< 30 minutes) have been reported to improve alertness and
262 cognitive performance following restricted nocturnal sleep (22). Naps were also
263 found to be more effective with prior caffeine intake followed by bright light and face
264 washing (21).

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266 Nutritional Recommendations

267 Whilst travelling poses a number of nutritional challenges, many of these can be
268 overcome prior to travel. Food requirements should be discussed with those who will
269 provide catering at the new destination and during transit. If requirements are unable
270 to be met then staff and athletes may need to travel with additional supplementation.
271 During travel, the dry air circulated in flight cabins can increase the likelihood of
272 dehydration, therefore special attention should be paid to athletes' fluid intake (36,
273 50). Upon arrival, if trying to adjust the circadian rhythm to the destinations time
274 zone, meal times should coincide with that of the destination in order to aid circadian
275 phase advances or delays (36). In order to minimize the risk of gastrointestinal
276 illness, athletes should seek to avoid drinking local water (including ice cubes and
277 water for brushing teeth) and the consumption of raw foods or those that may have
278 been washed in contaminated water. Additionally, the adoption of good personal
279 hygiene practices (i.e. frequent hand-washing, hand-sterilizers etc.) will also help to
280 minimize the risk of illness and diarrhoea. Travelling athletes are often directed to
281 avoid the intake of caffeinated beverages due to concerns regarding the potential
282 diuretic effects of caffeine. However, whilst the general consensus of evidence
283 suggests that moderate amounts of caffeine have minimal impact upon overall
284 hydration status (1), athletes should nonetheless avoid the consumption of
285 caffeinated beverages due to the purported impact upon wakefulness and
286 interference with the adjustment of circadian rhythms. Burke et al., (11) recently
287 demonstrated that caffeine ingestion caused ~3 hour delay in the circadian melatonin
288 rhythm, which could potentially induce poorer sleep quality and greater lethargy.
289 Similarly, there is evidence that alcohol intake can also disturb normal sleep patterns
290 (19) and should subsequently be avoided.

291
292 *Clothing, Exercise and other Behavioural Changes*

293 Timed exercise, appropriate clothing, and seating arrangements are hypothesized to
294 reduce fatigue in a travelling athlete (30, 35). When possible, periods of mobilization
295 should be practiced to promote blood flow and reduce the risk of venous
296 thromboembolism, joint stiffness and muscle cramps that could result from long
297 periods of inactivity during travel (5, 30, 41). Unfortunately, long haul flights do not
298 provide the luxury of a 30-minute service stop. Thus, all activation and walking must
299 be performed on the plane. In-flight activities such as simple stretching and mild

300 isometric exercises while seated or walking in the cabin when it is safe to do so are
301 recommended to reduce muscle stiffness, the risk for thrombosis and other
302 discomforts associated with prolonged sitting (30). After arriving at the final
303 destination, to benefit from exercise-induced circadian phase shifts, it is
304 recommended to perform exercise early in the morning when body temperature is
305 lowest to promote phase delays and in the evening to gain phase advances (30).
306 However, some studies have reported that exercise might not reliably shift circadian
307 rhythms, but could be beneficial for maintaining arousal levels post travel (25). Some
308 guidelines on exercise and training a travelling athlete are compiled from the
309 literature and produced in Figures 1 and 2.

310

311 Compression garments have also been suggested to provide beneficial effects in
312 alleviating discomfort and difficulties associated with prolonged sitting in a cramped
313 position during travel (35). Belcaro et al., (5) and Scurr et al., (41) propose that
314 compression stockings when worn below the knee can significantly reduce the risk of
315 blood pooling and venous thromboembolism. Recently, nerve stimulation has also
316 been studied where electrical stimulation of the peroneal nerve has been shown to
317 increase blood flow to the lower leg (46), enhance venous return by up to 95% (26),
318 and be more effective than both water-aerobic exercise and passive rest at reducing
319 muscle pain in young soccer players (44). Furthermore, Beaven et al., (4) reported
320 enhanced self-assessed energy levels and enthusiasm when electrostimulation was
321 combined with compression garments, and an accelerated return of creatine kinase
322 to baseline levels after rugby competition when compared to compression garments
323 alone. Subsequently, it may be logical to assume that the use of electrical stimulation
324 during travel would have both a physiological benefit as well as a psychological
325 benefit. However, little research exists in relation to the use of electrical stimulation
326 on physiological performance after travel or periods of prolonged sitting.

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329 **** Insert FIGURE 1 here***

330 **** Insert FIGURE 2 here***

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332 **INDIVIDUAL CONSIDERATIONS**

333 Jet lag effects are influenced by a number of individual differences in people and
334 these range from chronotype, age, fitness levels and adaptability of sleeping patterns
335 (34). Chronotype refers to the behavioural manifestation of an individual's underlying
336 circadian rhythms. A person's chronotype is the propensity for the individual to sleep
337 at a particular time during a 24-hour period. Morning type people who retire early and
338 arise early are less affected flying eastward, whereas evening type people who retire
339 late and wake up late have less difficulty flying westward (25). The influence of age
340 on travel-related circadian rhythm disruptions should also be considered while
341 planning coping methods. While older (50+ years) individuals may be less affected
342 by jet lag symptoms, sleep and alertness levels of middle-aged travellers (37-52
343 years) are greatly affected after travel, compared to 18 to 25-year olds (25).
344 Physically fitter individuals should experience less difficulty with jet lag as they adapt
345 to travel and sleep disruption (51). Adaptability of sleeping patterns relates to an
346 individual's ability to adjust their times of sleeping, and are influenced less by the
347 conditions in which they sleep. It is proposed that these factors would lessen the
348 impact of jet lag on an individual who undertakes long haul travel (48). Further
349 experimental support is required to verify these predictions and the impact these
350 factors have upon individuals and their response to prolonged travel. However,
351 although these differences are smaller in an athletic population (34), knowing this
352 information on individual sleeping habits and circadian rhythms would assist in
353 planning appropriate interventions.

354

355 **Practical Applications**

356 A travelling athlete creates unique challenges for strength and conditioning coaches
357 in accomplishing effective total athlete management. However, awareness of the
358 fundamental mechanisms of fatigue associated with travel and implementing
359 recommended coping measures can provide some favourable outcomes. Available
360 literature in this area suggests that a greater focus on strategic timings for sleep/nap,
361 light exposure/avoidance and food/fluid intake can help alleviate the adverse effects
362 of travel on physiological factors and athletic performance. Studies also propose that
363 planned pre-travel adaptation measures, use of compression garments, timed
364 exercise, practice of good personal hygiene and proper management of travel
365 logistics (to avoid psychological stress and/or to gain from favourable departure &
366 arrival timings) can be beneficial. In addition, further coping methods available to

367 explore include nerve stimulation and transcranial light exposure, both of which
368 require further research. Finally, understanding and considering an athlete's age and
369 chronotype related differences can make the coping strategies more effective.

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373 **FIGURE LEGEND**

374 Figure 1. Coping strategies for Eastward Travellers

375 Figure 2. Coping strategies for Westward Travellers

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