# Bone health in professional cycling

No registrations found.

**Ethical review** Positive opinion

**Status** Pending

**Health condition type** 

**Study type** Observational non invasive

## **Summary**

#### ID

NL-OMON27586

**Source** 

Nationaal Trial Register

**Brief title** 

**BONE** 

**Health condition** 

Osteoporosis

## **Sponsors and support**

**Primary sponsor:** HAN University of Applied Sciences **Source(s) of monetary or material Support:** Eat2Move

### Intervention

#### Outcome measures

### **Primary outcome**

Whole body and regional (lumbar spine and femoral hip) bone mineral density (t- and z-scores) and bone mineral content as determined by dual-energy X-ray absorptiometry (DXA).

### **Secondary outcome**

Whole body and regional (lumbar spine and femoral hip) bone mineral content as determined by dual-energy X-ray absorptiometry (DXA).

Cycling exercise volume during the preceding 12 months (for retired cyclists we obtain the average volume during a 5 year period in their career).

Dietary intake (energy, macronutrients, calcium, vitamin D).

Blood parameters of bone health: Procollagen type I N propeptide (P1NP), carboxy-terminal crosslinking telopeptide of type I collagen (CTX-I), calcitonine, parathyroid hormone (PTH), testosterone and oestrogen.

Current and life time sports participation.

# **Study description**

### **Background summary**

Bone is a highly dynamic tissue that undergoes constant remodeling, mainly influenced by physical activity. Non-weight-bearing activities, such as cycling do not contribute to bone health, with potentially severe consequences for individuals who engage in high volume non-weight-baring exercise training and competition such as professional cyclists. There is a lack of data on the time course and severity of low bone mineral density in professional and retired cyclists. We hypothesize that the greater part of professional cyclist will be diagnosed with osteopenia or osteoporosis. Furthermore, we expect that low bone mineral density will not be normalized after the active career.

### Study objective

We hypothesize that the greater part of professional cyclist will be diagnosed with osteopenia or osteoporosis. Furthermore, we expect that low bone mineral density will not be normalized after the active career.

### Study design

A subgroup of young talented cyclists will be followed over a 4 year period, including yearly measurements of bone mineral density during the off-season.

#### Intervention

None

## **Contacts**

#### **Public**

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# **Eligibility criteria**

### Inclusion criteria

#### Inclusion criteria

World tour level (highest level) professional male cyclists (aged 22 - 40):

- Male
- Professional cyclist competing in UCI's WorldTour competition
- Willing to give written informed consent.
- Willing to comply with study procedures.
- Accept use of all encoded data, including publication, and the confidential use and storage of all data for 15 years.

World tour level professional female cyclists (aged 22 - 40):

- Female
- Professional cyclist competing in UCI's Women's WorldTour competition
- Willing to give written informed consent.
- Willing to comply with study procedures.
- Accept use of all encoded data, including publication, and the confidential use and storage of all data for 15 years.

Talented elite male cyclist (aged 18 - 22):

- Male
- Included in a talent program of professional cycling team
- Willing to give written informed consent.
- Willing to comply with study procedures.
- Accept use of all encoded data, including publication, and the confidential use and storage of all data for 15 years.

Retired world tour level professional cyclists (aged 35 - 60):

- Retired male of female professional cyclist.
- A minimum of 5 years of professional cycling at WorldTour level.
- Duration of retirement is minimal 1 year before Day 01 of this study.
- Willing to give written informed consent.
- Willing to comply with study procedures.
- Accept use of all encoded data, including publication, and the confidential use and storage

of all data for 15 years.

### **Exclusion criteria**

#### **Exclusion** criteria

- Having a history of medical events or medication use that may significantly affect bone metabolism, to be decided by the principal investigator.
- Medication use that may affect tests within this study must be minimal 3 months before Day 01 of this study.
- Participation in any clinical trial including blood sampling and/or administration of substances up to 30 days before Day 01 of this study
- A recent injury that may significantly affect BMD, to be decided by the principal investigator.

# Study design

## **Design**

Study type: Observational non invasive

Intervention model: Other

Allocation: Non controlled trial

Masking: Open (masking not used)

Control: N/A, unknown

### Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-10-2020

Enrollment: 75

Type: Anticipated

## **IPD** sharing statement

Plan to share IPD: No

**Plan description**Not applicable

# **Ethics review**

Positive opinion

Date: 08-06-2020

Application type: First submission

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

NTR-new NL8691

Other METC Zuyderland : METCZ20200039

# **Study results**

## **Summary results**

Not applicable