

ORIGINAL ARTICLE

# Estimating Aerobic Capacity (VO<sub>2</sub>-max) Using a Single-stage Step Test and Determining its Effective Factors

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#### ABSTRACT

Maximal Aerobic Capacity (VO<sub>2</sub>-max) is an indicator of the preparedness of the cardiovascular and respiratory systems and a tool to estimate the physiological fitness of individuals for their work. This study aimed to measure the VO<sub>2</sub>-max and Physical Work Capacity (PWC) of workers at a metal industry and the factors affecting it using a single-stage step test. This cross-sectional study was conducted on 60 workers in a metal industry in Tehran, in 2017. Data collection tools were a questionnaire including separate sections asking about demographic and anthropometric (height, weight, and BMI) characteristics. Quantitative variables were recorded after being measured. The Tuxworth and Shahnawaz method and step test were used in order to estimate VO<sub>2</sub>-max and PWC. Data were analyzed using SPSS 22. The relative humidity of the place was 40% and local air pressure was 879 atmospheres. The average VO<sub>2</sub>-maxand average maximum PWC of the study population were  $3.13\pm0.283L/min$  and  $15.65\pm1.41$  kcal/min, respectively. There was a significant relationship between VO<sub>2</sub>-maxusingsingle-stage step test and BMI (*P*=0.01), number of hours of exercise per week (*P*=0.009) and age (*P*=0.01). The step test is a rapid, easy and low-cost method to estimate physiological adaptation and PWC of individuals. Variables such asage, hours of exercise per week and BMI are effective on aerobic capacity.

KEYWORDS: VO<sub>2</sub>-max, Physical work capacity, Step test

# **INTRODUCTION**

Assigning jobs proportionate to individuals' physiological capacityhelps maintain workers' health, prevent their premature burnout, and increases their efficiency and production rate. Measurement of PWC is one of the important topics in ergonomics [1-2]. Today, the PWC can be determined using VO<sub>2</sub>-max [1]. VO<sub>2</sub>-max is an index for the maximum energy produced from the

Corresponding author: M.R Ghotbi Tavandi Email: <u>ghotbi@kmu.ac.ir</u> aerobic processes [3-4] and is an accepted criterion for measuring the functional limit of the cardio-respiratory system because it is closely correlated with cardiac output [5] often used as an index for this system's preparation [4].

VO<sub>2</sub>-max is affected by factors such as the physical, psychological, environmental and physiological characteristics of the individual [6], and is lower in women compared to men. Exercise increases it; but aging [5, 6], weight gain [5], using diuretics like alcohol and caffeine [7], as well as insufficient fluid intake and increased sweating [8] reduce VO<sub>2</sub>-max.

VO<sub>2</sub>-max is measured in two ways, directly and indirectly. Since it is difficult to use the direct method and it cannot be widely used, thus the indirect method was proposed [9].

Indirect methods include the use of the ergonomic bicycle, conveyor belt or the stairs [1, 6]. These methods are based on the relationship between heart rate and oxygen consumption. The main disadvantage of treadmills and ergonomic bicycles is that they have limitations for their use in field studies and out of the lab [10].

Single-stage step test is used widely and has become popular in estimating  $VO_2$ -max, because of its less complexity and unnecessary to use expensive equipment [11] as well as ease to use for high sample sizes [10-11].

Aside from the frequent use of VO<sub>2</sub>-max in the medical, sports and rehabilitation fields, there is little research about this in industry. Among the range of industries available in the country, workers in the metal and steel industry, are exposed to noise [12] and a relatively unsafe working environment [13], and are involved in heavy physical work [14]; therefore, their physiological adaptation and concordance between the energy required for physical work and their strength is very important in these industries.

The present study estimated VO<sub>2</sub>-max and PWC of workers in a metal industry and examined the demographic factors affecting VO<sub>2</sub>-max.

#### MATERIALS AND METHODS

This descriptive and analytical crosssectional study was conducted on volunteers working in a pipe and profiles producing industry, located in one of the industrial towns of Tehran Province, Iran, in 2017. The sample size was calculated to be at least 45, using the standard deviation of aerobic capacity (0.17) obtained from previous studies [15] and  $\mathbf{n} = \frac{z^2 \times (SD^2)}{d^2}$  formula

with an acceptable error of 0.05 and a 95% confidence level. In order to increase accuracy, 60 workers were enrolled in the study.

The objectives of the research were explained to the participants and they were assured that their personal information would remain confidential. Informed consent was obtained from the subjects. The Ethics Committee of Kerman University of Medical Sciences, IR.KMU.REC.1394.737, approved this project.

Estimating aerobic capacity puts pressure on various body parts such as the cardiovascular, respiratory and musculoskeletal system. Therefore, in addition to consent, participants had to be free of cardiovascular, respiratory, musculoskeletal and neurological diseases. For this purpose, participants' medical records were reviewed and a medical emergency technician measured their blood pressure and heart rate. If the participant had a history of a disease or could not tolerate the aerobic capacity test, and we felt extra pressure on their cardio-respiratory system during VO<sub>2</sub>-max measurement, we would stop the test and exclude the participant. All tests were carried out within two days and between 8 am and 2 pm while the volunteers were wearing light clothing [*Fig.*1].

Before the start of the study, environmental parameters were measured at the site. A questionnaire containing questions about age, marital status, educat [level, having a particular disease, smoking ercise, medication (any type) was used an ompleted by the researchers by asking the wo:



*Fig.1.* A participant dressed in light clothing while performing the Tuxworth and Shahnawaz test

*Estimating*  $VO_2$ -max and PWC:  $VO_2$ -max was estimated using the step test and the Tuxworth and Shahnawaz method [16]. In this method, the height of the stairs is 40 cm for men. In this test, the participant has to go up and down the stair 25 cycles per minute for 5 min. After this, the heart rate was reported as at three different times, as follows: M1: number of heartbeats at 30-60 sec, M2: number of heartbeats at 90-120 sec and M3: number of heartbeats at 150-180 sec. Then, the index b was calculated by this formula:

Index 
$$b = \frac{(M_1 + M_2 + M_3) \times 2}{BW(kg)}$$

Then VO<sub>2</sub>-maxwas calculated using the index *b* and the following formula:

Y = -0.378(Index b) + 4.67, In this formula, Y isVO<sub>2</sub>-max (l/min).

Since the thermal value of using one liter of oxygen in the body is about 5 kcal; therefore,

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the maximum energy exertion per minute can be calculated by multiplying VO<sub>2</sub>-max by 5; and 33% of that is equal to the PWC (Kcal/min) or the maximum physical work capacity of a person for a period of 8 h without experiencing physiological stress, physical exhaustion or harm [1].

*Measuring environmental parameters:* Environmental parameters were measured using a conventional thermometer, whirling psychrometer and barometer, which respectively measured dry temperature, wet and dry spinning temperature and pressure. Relative humidity was estimated using the psychrometric chart [17].

*Measuring height, weight, blood pressure, heart rate and body surface area:* Participants' height and weight were measured by using a tape measure and a digital scale while wearing light clothing and no shoes or gloves. Body surface area (BSA) was determined using the DuBois Equation (11). In this formula, BSA, height, and weight are respectively in square meters, centimeters and kilograms.

BSA (m<sup>2</sup>) = (Height)  $^{0.725} \times (BW) ^{0.425} \times 0.007184$ 

D) Heart rate was measured by using a PO 80pulseoximeter (Bearer Co.) by the medical emergency technician.

**Data Analysis:** Data were analyzed by SPSS (ver. 22 Chicago, IL, USA) and *P*-values less than 0.05 were considered significant. As the VO<sub>2</sub>max variable did not have a normal distribution (Kolmogorov–Smirnov test P<0.05),the Kruskal-Wallis test was used to determine the difference between the average VO<sub>2</sub>-max (l/min) among different age, weight, height, BMI, BSA and hours of exercise per week; groups.

#### RESULTS

In the experiment setting, the spinning wet and dry temperature, relative humidity and air pressure were 26 °C, 17 °C, 40% and 879 atmospheres. In Table 1 Some Characteristics of the participants are displayed. Also The mean, standard deviation, minimum and maximum of VO<sub>2</sub>-max and PWC are displayed in Table 2 and 3, Mean, standard deviation, minimum and maximum of VO<sub>2</sub>-max based on BMI, BSI, age, weight, height and hours of exercise among the participants are displayed.

Variable	Mean	SD	Min	Max
Age (yr)	31.7	4.94	22.00	42.00
Weight (kg)	76.16	1.28	52.00	98.00
Height (cm)	172.58	6.13	160.00	191.00
Work experience (yr)	4.15	3.11	0.00	14.00
Hours of exercise per week	1.56	2.9	0.00	14.00
BMI $(kg/m^2)$	25.49	3.49	19.00	33.71
$BSA(m^2)$	1.89	0.17	1.62	2.21
Smoking (cigarettes per day)	2.53	5.18	0	20
			Number(p	ercent)
Marital status	Single		4 (6.7)	
	Married		54 (93	.3)
Level of education	Under Diplo	oma	26 (43	.3)
	Diploma		32 (51	.7)
	Undergraduate	3 (5)		

**Table 1.** The Characteristics of the participants (n = 60)

<b>Table 2.</b> Mean, standard deviation, minimum and maximum VO <sub>2</sub> -max (n	n = 60
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Variable	Mean	SD	Min	Max
VO <sub>2</sub> -max(L.min <sup>-1</sup> )	3.13	0.283	2.07	3.58
Corrected VO <sub>2</sub> -max(Ml.kg-1.min <sup>-1</sup> )	41.92	5.5	31.87	53.74
Maximum energy exertion(Kcal / min)	15.65	1.41	10.37	17.91
PWC (Kcal / min)	5.16	0.46	3.42	5.91

Variable _	VO <sub>2</sub> -max (l.min-1)				P-value*	
		Mean	SD	Max	Min	
BMI groups(kg/m <sup>2</sup> )	Thin (<18.5)					0.01
	Normal (18.5-24.9)	3.22	0.26	2.72	3.61	
	Overweight(25.29.9)	3.07	0.24	2.49	3.64	
	Obese (≥30)	2.96	0.22	2.64	3.23	
Smoking Status	Smoker	3.08	0.27	2.49	3.51	0.5
	Non-smoker	3.14	0.26	2.64	3.61	
BSI group (m <sup>2</sup> )	1.55-1.77	2.96	0.29	2.55	3.61	0.1
	1.78-2	3.17	0.24	2.49	3.54	
	2.01-2.23	3.28	0.18	2.88	3.58	
Weight groups (kg)	<60	2.80	0.19	2.45	3.08	0.4
	60-70	2.96	0.36	2.77	3.33	
	71-80	3.19	0.18	2.84	3.56	
	>80	3.29	0.14	3.02	3.58	
height groups (m)	<170	3.04	0.31	2.49	3.54	0.4
	170-180	3.15	0.23	2.64	3.58	
	>180	3.35	0.21	3.11	3.61	
Age groups (yr)	22-26.9	3.31	0.28	2.75	3.61	0.01
	27-31.9	3.20	0.21	2.64	3.54	
	32-36.9	3.025	0.26	2.49	3.38	
	37-42	3.021	0.28	2.79	3.64	
Hours of exercise per week	0-4.99	3.09	0.26	2.49	3.61	0.009
	5-9.99	3.32	0.16	3.12	3.47	
	10-15	3.49	0.07	3.43	3.58	

**Table 3.** Mean, standard deviation, minimum and maximum of VO2-max based on BMI, BSI, age, weight, height and hours<br/>of exercise among the participants (n = 60)

Kruskal-Wallis test\*

The Kruskal– Wallis test, did not show a significant difference for VO<sub>2</sub>-max between smokers and non-smokers (P=0.5), and different weight (P=0.4), height (P=0.408) and BSA groups (P=0.1) (Table 4). However, the average VO<sub>2</sub>-max decreased as age increased. The Kruskal - Wallis test showed that the average VO<sub>2</sub>-max was significantly different in different age groups (P=0.011). The Mann-Whitney-U test also revealed that the average VO<sub>2</sub>-max was significantly different in the first (22-26.9 yr) and third groups (32-36.9 yr) (P=0.01), and second and third groups (P=0.007).

In BMI classified according to WHO definition, among the three BMI groups, the maximum VO<sub>2</sub>-max was observed in the group with normal BMI (Table 4). The Mann-Whitney test also revealed that there was a significant difference between normal and overweight groups (P=0.001) and normal and obese groups (P=0.013) in terms of average VO<sub>2</sub>-max. This means that individuals with normal BMI have higher VO<sub>2</sub>-max than other groups and are in better conditions in terms of the cardio-respiratory status.

The Kruskal-Wallis test showed that the median VO<sub>2</sub>-max is significantly different in different groups in terms of hours of exercise per week (P=0.009). The Mann-Whitney test also revealed that there was a statistically significant difference between the first group (0-4.99 h per week) and the third group (10-15 h/w) in terms of VO<sub>2</sub>-max (P=0.004).

# DISCUSSION

The present study was conducted on 60 young men with an average age of 31.7 yr, average height of 172.58 cm and average BMI of 25.49kg/m<sup>2</sup>;working in a metal industry.

The averageVO<sub>2</sub>-max and average maximum PWC in the studied population was  $3.13\pm0.283$ l/min and  $15.65\pm1.41$ kcal/min, respectively. This finding is somewhat different from the results, which studied labor populations and estimated aerobic capacity, attributed to the individual characteristics of individuals [16].

Overall, 105 Iranian male workers in three age categories of 20-29, 30-39 and 40-49 were studied and estimatedVO<sub>2</sub>-max in these age groups as  $3.45\pm0.34$ ,  $2.73\pm0.29$  and  $2.33\pm0.29$ l/min, respectively, which is similar to the 20-29 age group of the present study and the difference is probably related to the effect of age on VO<sub>2</sub>-max[2].

Overall, 500 male workers were studied in different factories in the city of Shiraz using anergometricbicycle, according to the Åstrand protocol. VO<sub>2</sub>-max was  $2.69\pm0.263$  which is slightly different from the present study, and it is likely due to a large number of workers in various industries and the average age of individuals who participated in their study. However, the significant relationship found between VO<sub>2</sub>-max and age, BMI and the number of hours of exercise per week are consistent with the present study [6].

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Our results showed that the average VO<sub>2</sub>maxwassignificantly different in subjects who did weekly exercise and persons who did not weekly exercise, which confirms the results of studies [2, 7, 18]. In addition, VO2-max was not significantly related to age, though it decreased in age groups above 40 yr. which is not consistent with the current study whichVO2-max decreased with increase in age (19). In the present study, there was no significant relationship between the average VO<sub>2</sub>-max and variables such as weight, body surface are and height. However, significant correlations between mean VO<sub>2</sub>-max, height, weight, and BSA that was inconsistent with the results of the present study (9). However, both studies found a significant relationship between VO<sub>2</sub>-max and age.

# CONCLUSION

Among the indirect means of assessing VO<sub>2</sub>-max, the single stage step test is an easy and low-cost method that can provide a rough estimate of physiological adaptation and PWC of workers in a few minutes. There is a significant relation between VO<sub>2</sub>-max and age, BMI and hours of exercise per week. Therefore, these factors can affect PWC as well. However, weight, height, and BSA had no impact on VO<sub>2</sub>-max. VO<sub>2</sub>-max can help assign duties to workers according to their physical and physiological capacity, and improve work efficiency and keep workers healthy as well.

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