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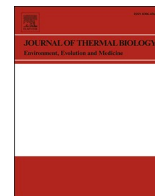
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Blood serum denaturation profile examined by differential scanning calorimetry reflects the effort put into ultramarathon by amateur long-distance runners

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ABSTRACT

The impact of participation in the ultramarathon on the health and mental and physical condition is very complex. Undoubtedly, exercise brings many benefits but also involves health risks. Especially such an extreme effort as the one associated with finishing the ultramarathon run, can be dangerous to the health of the runner. With the variety of possible biomarkers of excessive fatigue that threaten health and life, a question arises which of them are the best and which should be considered in amateur long-distance runners showing particularly high individual variability. In this study differential scanning calorimetry (DSC) has been applied to show the overall effect of the 12-h run on blood sera of participants. Serum samples were obtained from the blood of ten male amateur long-distance runners, collected before and immediately after the run. Distinct changes in the shape of DSC curves have been observed for serum after finishing the run relative to pre-race serum. Statistically significant differences between stages “before” and “after” ultramarathon running have been found for parameters of the endothermic transition associated with denaturation of serum proteins. An increase in the temperature (from 70.9 ± 0.9 to 75.8 ± 2.9 °C) and excess heat capacity (from 0.859 ± 0.201 to 1.102 ± 0.226 Jg⁻¹ °C⁻¹) at peak maximum, the enthalpy of serum denaturation (from 18.55 ± 6.52 to 22.08 ± 5.61 Jg⁻¹) and the first moment of the thermal transition with respect to the temperature (from the value of 67.0 ± 2.1 to 72.6 ± 2.1 °C) has been observed. These results show a clear impact of running an ultramarathon on the participant's blood serum.

1. Introduction

Ultramarathon run is a unique sport that has been growing in popularity in recent years. An ultramarathon can be defined as any running performance lasting for longer than 6 h and/or longer than the classical marathon distance of 42.195 km (Knechtle and Nikolaidis, 2015, 2018; Scheer et al., 2020). Although the long distance puts high physical demands on the runner, the popularity of ultramarathon participation increases also among amateur athletes. It seems obvious that such extreme forms of recreation as marathons or ultramarathons demand very good physical conditions great mental preparation and involve health risks. Therefore, these sports are becoming more and

more interesting for scientific research. Ultramarathoners are a group of athletes that has been little studied in terms of the physiology of systems or metabolic processes. More reliable studies have been conducted among shorter distance runners, but extrapolating conclusions from marathon runners to ultra-runners appears to be an abuse. Additionally, environmental factors such as a heat or humidity can affect the thermoregulatory and metabolic responses of long distance runners. (Rodrigues Júnior et al., 2020). Ultramarathoners differ from marathoners regarding anthropometry and training (Knechtle and Nikolaidis, 2015). Ultramarathoners are older (the average age of an ultra endurance athlete is 45 years) and have a larger weekly training volume but run more slowly during training compared to marathoners (Knechtle

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and Nikolaidis, 2018). So far, most of participants in ultramarathon events were male.

Several review papers and articles provide a brief overview of the recent literature and trends in ultramarathon running and present the current state of knowledge on the topic of physiology and pathophysiology of such extreme efforts (Knechtle and Nikolaidis, 2018; Spittler and Oberle, 2019; Tiller, 2019; Martinez-Navarro et al., 2020). Physiological, pathophysiological, and metabolic responses to ultra-endurance exercise have been also investigated in nonelite and amateur ultramarathon participants (Waśkiewicz et al., 2012; Kłapcińska et al., 2013; Hoppel et al., 2019). There is a constant increase in literature regarding ultramarathon-specific illnesses and injuries, nutrition guidelines, psychology, physiologic changes, training methods, and equipment (Hoffman et al., 2014; Hoffman, 2016; Knechtle, 2017). Scientists also tried to understand the motivation of ultramarathoners during the races and preparatory periods (Waśkiewicz et al., 2019). There is still limited understanding of the psychological characteristics of ultramarathon runners.

Ultramarathoners are prone to numerous illnesses and injuries, which range from minor skin breakdown to sudden death. After extreme running effort, the development of the Acute Kidney Injury (AKI) often appears (Kao et al., 2015). According Spittler & Oberle review article (Spittler and Oberle, 2019), changes in metabolic biomarkers and hormone levels during an ultramarathon include: elevated skeletal muscle, cardiac muscle, and liver enzymes; elevated creatinine and variable fluctuations in electrolyte levels; elevated leukocytes, iron, and ferritin; decreased erythrocytes; elevated inflammatory markers (C-reactive protein, erythrocyte sedimentation rate, interleukins); decreased testosterone and increases in other hormones. In addition, ultramarathon finishers seem to have a hypovolemic physiologic response during competition with lower diastolic blood pressure and lower oxygen saturation. Sodium imbalances may be seen in ultraendurance athletes. Several reviews have evaluated the effect of hydration status on ultramarathon running (Costa et al., 2014; Hoffman et al., 2019; Burke et al., 2019). Ultramarathon runners may develop varying degrees of both hypohydration and hyperhydration (with accompanying exercise associated hyponatremia), dependent on event duration, and environmental conditions. Additionally, the demand for water and electrolytes is an individual characteristic of the athlete. Proper management of hydration is critical for both performance and overall health in ultramarathon running.

Multiple studies have examined predictor variables for successful ultramarathon running performance (Knechtle and Tanda, 2015; Coates et al., 2020). In recent years, attention has been given to the effects of aging on endurance performance in runners (Knechtle et al., 2012; Lehto, 2016; Nikolaidis and Knechtle, 2020). In general, age 35–50 years, low body mass index (BMI), and low body fat are consistent predictors of better ultramarathon performance (Spittler and Oberle, 2019). Considering changes in blood morphology and chosen biochemical parameters in ultramarathon runners Jastrzębski et al. (2015) have concluded that organ damage and negative metabolic changes during a 100-km run occurred similarly in participants less experienced as well as in well trained runners.

In this study differential scanning calorimetry (DSC) has been used to assess potential alterations in the blood serum heat capacity profile during extremely demanding 12-h of running. The thermal denaturation profiles of serum proteins have been monitored before the run and immediately after finishing the ultramarathon. It has been hypothesized that DSC heat capacity profiles of blood serum proteome would be changed due to this extreme physical fatigue. The DSC technique provides valuable information about folding and binding interactions in proteins and the thermodynamic driving forces governing protein stability. It has been recently used successfully in analyzing heat capacity changes of physiological fluids (blood plasma/serum, cerebrospinal fluid, synovial fluid) to monitor various physiological responses in health and disease (Garbett et al., 2008, 2009; Michnik et al., 2010,

2013, 2018a, 2018b; Chagovetz et al., 2011; Todinova et al., 2011, 2012, 2018; Fekacs et al., 2012; Mehdi et al., 2013; Barceló et al., 2015; Kikalishvili et al., 2015; Krumova et al., 2015; Kędra-Królik et al., 2017; Tenchov et al., 2019; Wiegand et al., 2019; Antonova et al., 2020; Dandé et al., 2020; Ferencz, 2020). Alterations in serum protein content, changes in the protein structure, changes in protein denaturation temperature due to a ligand binding or protein-protein interactions lead to modifications of the serum heat capacity profiles detected by DSC. So, the effects of extremely demanding physical activity during ultramarathon running should be reflected in serum DSC profiles.

2. Materials and methods

2.1. Participants

Ten male amateur long-distance runners (mean age 52.0 ± 6.2 years, body height 176.9 ± 4.9 cm, body mass 73.9 ± 6.0 kg, weekly covered distance 57.4 ± 22.9 km, training history 7.3 ± 2.2 years) were recruited from participants in a 12-hr race organized by the Municipal Sports and Recreation Canter and the recreation and sports club TKKF “Jastrząb” in Ruda Śląska (Poland). All runners were non-smokers and did not intend to use non-steroidal analgesics before and during the race. They completed a questionnaire on their medical and training history and signed informed consent to participate in the study after being informed about the experimental procedures. The study protocol conformed to the ethical guidelines of the World Medical Association Declaration of Helsinki and was approved by the Ethics Committee of the Jerzy Kukuczka Academy of Physical Education in Katowice (Poland).

2.2. Study protocol

The run took place between 7 a.m. and 7 p.m., on April 28, 2018, in the town of Ruda Śląska. The contestants were required to cover a circular route of 1.6 km as many times as they could. The average distance covered was 94.73 ± 12.97 km with an average speed 7.9 ± 1.1 km h⁻¹. The ambient temperature was 24 ± 4 °C and relative humidity $46 \pm 2\%$. The runners ingested carbohydrate-rich food (sandwiches, cookies, fruits, and carbohydrate energy bars) every 90–120 min and fluids (water and sport beverages) every 20–25 min during the run.

2.3. Blood serum samples

Blood samples were obtained 1 h before the running (pre-run) and immediately after finishing the 12-h running (post-run) into tubes for separation of serum (BD Vacutainer™ Serum Tube, UK) and then they were allowed to stand for 30 min for blood to clot before serum was separated. Serum was stored frozen for analysis at -20 °C for a period shorter than one month without unfreezing and freezing. Total protein content was assayed using the biuret method (Randox Laboratories, UK) by means of the Hitachi 917 Modular P analyser.

For DSC experiment, serum samples were diluted 20-fold with distilled degassed water. The pH value of the diluted samples was within the range 6.5–7.0.

2.4. Differential scanning calorimetry

DSC measurements were performed using the VP DSC MicroCal instrument (Northampton, MA) in the temperature range of 20–100 °C with the heating rate 1 °C min⁻¹. A constant pressure of about $1.7 \cdot 10^5$ Pa was exerted on the liquids in the cells. Duplicate scans for each sample were collected. The calorimetric data were corrected for the instrumental baseline water–water. DSC curves were normalized for the gram mass of protein and next a linear baseline was subtracted. An apparent excess heat capacity C_p^{ex} (J °C⁻¹ g⁻¹) versus temperature (°C) has been plotted.

The following parameters of the observed endothermic transition

have been determined: the temperature and excess heat capacity at maximum (T_m , C_{pm}), the enthalpy (ΔH) of serum denaturation (calculated as the area under the endothermic peak, expressed in $J g^{-1}$), the width of peak in its half height (HHW) and T_{FM} (the first moment of the thermal transition with respect to the temperature axis (the formula is given e.g. in (Michnik et al., 2010; Michnik et al., 2013))).

2.5. Statistical analysis

Statistical analysis was performed using the Statistica 13 software. For all measures, descriptive statistics were calculated. The Shapiro – Wilk test was used to check the normality of distributions of the studied variables. Student t-test was used to compare mean values of parameters of thermal denaturation transition before and after the ultramarathon running. Pearson's correlation coefficient (r) was found to describe the relationships between the age of the participants, covered distance, speed, and serum thermal transition parameters. The level of significance was set at $p < 0.05$.

3. Results

Fig. 1 shows the mean DSC curves of blood serum collected from amateur long-distance runners before and after ultramarathon. The complex endothermic transition observed on the serum DSC curve in the temperature range 40–90 °C comes from denaturation of serum proteins. Assuming there are no significant interactions between the serum proteins, this transition is the sum of thermal transitions of the individual proteins weighted according to their mass in solution (Garbett et al., 2008). For healthy people, DSC profiles made under the same physicochemical and experimental conditions are similar. The typical calorimetric profile of serum in aqueous solution usually exhibits 3–4 local maxima (Michnik et al., 2013, 2018, 2020a, 2020b; Duch et al., 2019, 2020). The first peak (or shoulder), at about 58 °C, represents mainly a non-ligated form of albumin, the most abundant serum protein. The second peak at about 62 °C (sometimes invisible) has its source in the denaturation of haptoglobin, the acute phase protein belonging to the alpha-2 globulin fraction. The third peak at about 70 °C, frequently the most intense, represents mainly the contributions from denaturation of immunoglobulins. At about 83 °C the fourth peak (or shoulder) is sometimes visible. It represents contributions from the C_{H3} domain of immunoglobulin IgG1 and/or transferrin (Garbett, 2009).

The shape of serum DSC profile visible in Fig. 1 for ultramarathon runners before the run has the characteristics of a profile observed for healthy people. The comparison of DSC curves of sera before and after finishing the 12-h ultramarathon running clearly shows significant

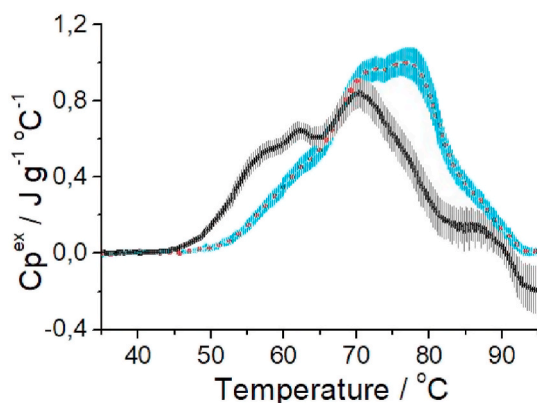


Fig. 1. Mean DSC curves of serum before (solid black line) and after ultramarathon running (dot red line); the shaded area is the standard error of the mean (SEM) at each temperature (gray for “pre-run”, cyan for “post-run”). (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

differences. The transition shifts towards higher temperatures and its shape changes due to the great effort during a long, exhausting run. The decrease in the intensity of the transition in the low-temperature range may indicate a decrease of non-ligated form of albumin. The local maximum at about 62 °C is no longer visible, which may suggest a drop in haptoglobin levels. Outlining exothermic transition above 90 °C on the pre-run profile is not visible in DSC curve after the run. Such exothermic contribution suggests the occurrence of the process of aggregation of denatured proteins in this high temperature range.

The parameters describing the endothermic transition of serum denaturation are shown in Table 1. Statistically significant differences between “pre-run” and “post-run” stages have been found for the temperature T_m ($p = 0.0003$) and excess heat capacity at maximum C_{pm} ($p = 0.00004$), the enthalpy of serum denaturation ΔH ($p = 0.04$) and the first moment temperature T_{FM} ($p = 0.00006$). The mean values of all these parameters are higher after the run. Contrary, a width of peak in its half height (HHW) decreases, but the difference between mean values of HHW in both stages is not statistically significant ($p = 0.09$).

Data presented in the current study refer to amateurs, which constitute a widely heterogeneous group in terms of general lifestyle and individual, not professionally designed training regimens. The Fig. 2 a-d shows the diversity of responses of ultramarathon participants to the 12-h run. Serum DSC curves before and after the run have been compared for the exemplary 4 participants.

Fig. 2a represents the set of DSC curves obtained for the 52-year-old runner who ran the longest distance (114 km) and had the highest average speed ($9.5 km h^{-1}$) from among all participants. Fig. 2b shows the curves for the oldest participant (63 years old) who ran 97 km with the average speed $8.1 km h^{-1}$. The curves shown in Fig. 2c correspond to the 49-year-old runner who covered a similar distance to a) (111 km) with the average speed $9.2 km h^{-1}$. The distance covered in 12 h by a 51-year-old runner, for whom the curves are presented in Fig. 2d, was 85 km and the average speed $7.0 km h^{-1}$.

The heterogeneity of our runners and the small sample size makes it impossible to find a relationship between the intensity of the observed changes in the parameters of the serum denaturation transition and the distance covered. Positive correlation between the average speed and the difference in C_{pm} value has been suggested by Pearson's correlation coefficient ($r = 0.6$; $p = 0.1$). Statistically significant correlations have been found only between the age and the pre-run values of T_{FM} ($r = 0.65$; $p = 0.04$) and HHW ($r = 0.82$; $p = 0.006$). Additionally, the age of the participant has appeared negatively correlated with differences between “pre-run” and “post-run” stages in the enthalpy of serum denaturation ($r = -0.82$; $p = 0.006$) and in HHW values ($r = -0.79$; $p = 0.01$).

4. Discussion

In the present study, DSC method has been used to evaluate the effect of the ultramarathon running on participant's blood serum. DSC allows to generate unique signatures for serum/plasma samples, which can be used for diagnostic purposes and for monitoring the stage of the disease or treatment efficacy (Garbett et al., 2008, 2009; Michnik et al., 2010, 2018; Chagovetz et al., 2011; Todinova et al., 2011, 2012, 2018; Fekecs et al., 2012; Mehdi et al., 2013; Barceló et al., 2015; Kikalishvili et al., 2015; Krumova et al., 2015; Keđra-Królik et al., 2017; Tenchov et al., 2019; Wiegand et al., 2019; Antonova et al., 2020; Dandé et al., 2020;

Table 1
Mean (\pm SD) parameters of serum DSC transition.

Stage	$T_m/^\circ C$	$C_{pm}/Jg^{-1} \ ^\circ C^{-1}$	$\Delta H/J g^{-1}$	HHW/ $^\circ C$	$T_{FM}/^\circ C$
pre-run	70.9 ± 0.9	0.859 ± 0.201	18.55 ± 6.52	23 ± 6	67.0 ± 2.1
post-run	75.8 ± 2.9	1.102 ± 0.226	22.08 ± 5.61	19 ± 3	72.6 ± 2.1

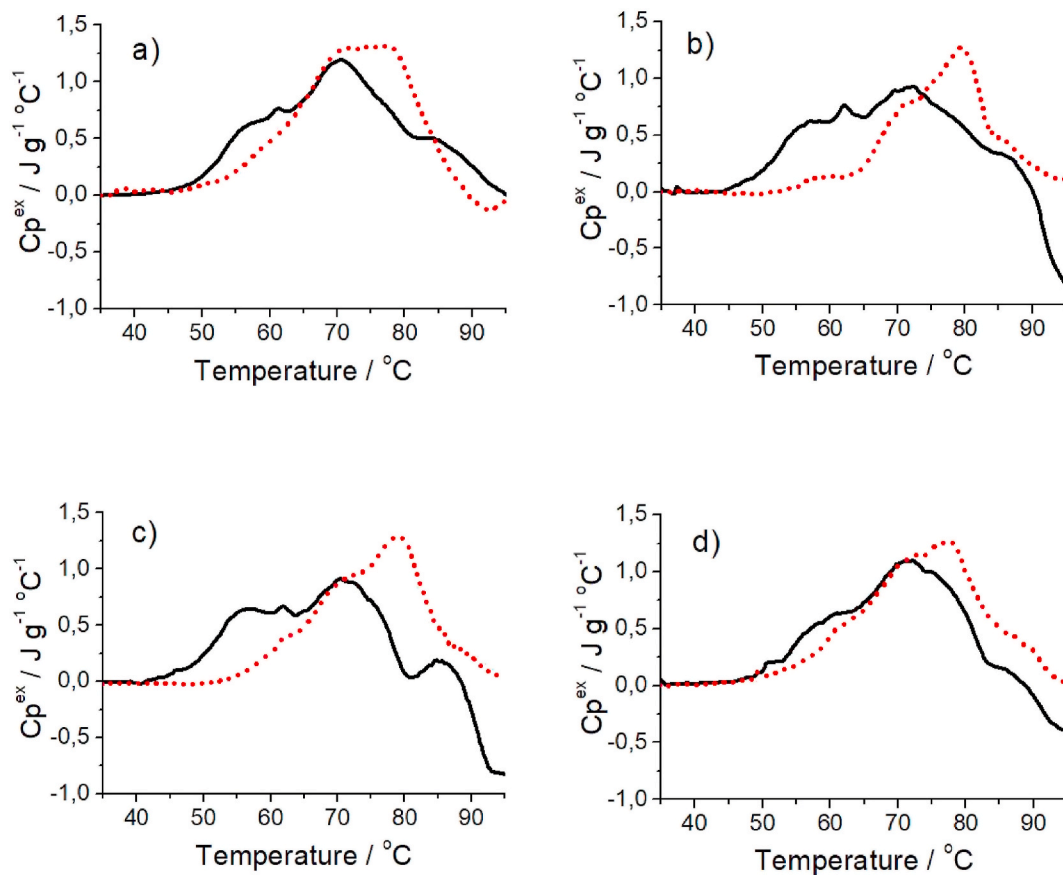


Fig. 2. Serum DSC curves before (solid black line) and after (dot red line) the 12-h run for selected examples of 4 participants. (For interpretation of the references to colour in this figure legend, the reader is referred to the Web version of this article.)

Ferencz and Lőrinczy, 2020). Although the complex endothermic DSC transition observed for serum solution arises from the denaturation of the constituent proteins, this method does not rely on identification of the components within serum, rather it relies on the overall DSC pattern generated by a clinical sample of interest. The shape of DSC curves is sensitive to protein structure modifications, protein-protein interactions, and various ligand binding to a protein. The specific biomarkers present in serum in the disease state, or in conditions of disturbed equilibrium of the body for other reasons, can modify the serum thermal denaturation profile. The source of such biomarkers can be biochemical and physiological processes resulting from racing. It has been shown, for example, that endurance exercise evokes transient increases in certain cardiac biomarkers (Scharhag et al., 2008; Żebrowska et al., 2019; Martínez-Navarro et al., 2019). Various blood and urine biomarkers after an ultra-distance race have been compared to their respective baseline levels by Joufroy et al. (2019). We assume that medical consequences of long-term endurance running training and competition should be reflected in the DSC profiles of the sera.

The main findings of this study are significant changes in blood serum DSC profiles of amateur ultramarathon runners immediately after finishing the 12-h running. They are associated with significant changes in the serum proteome and reflect a physiological response to a state of acute stress and volume overload. Ultra-endurance events exert a huge impact on metabolism and energy balance. It seems probable that excessive amounts of intramuscular proteins and metabolic products may be released into the blood stream due to an enhanced metabolism. Hoppel et al. (2019) suggest impaired kidney function in most of the non-elite ultramarathon runners immediately post-race. Ultra-distance races have been shown to increase the accumulation of nitrotyrosine and protein carbamyl in serum and urine, thereby suggesting the induction

of oxidative stress induced by extreme physical exercise (Levey et al., 2005). Generally, it is accepted that strenuous physical exercise can induce oxidative stress in humans, enhances oxygen consumption and production of reactive oxygen species (Mastaloudis et al., 2001; Imai et al., 2002; Finaud et al., 2006; Lamprecht et al., 2008; Park and Kwak, 2016). However, it is difficult to establish to what extent our results can be explained by oxidative protein modification connected with the stress of exercise.

The changes observed in the shape as well as in parameters of serum denaturation transition after 12 h ultramarathon running are similar but much stronger than these reported by us earlier for elite cross-country skiers after exercise (Michnik et al., 2020b). Those previous studies also stated an increase of T_m , Cp_m , T_{FM} and a decrease of HHW after exercise compared to before exercise stage. These post-exercise effects have been enhanced by sauna treatments (Duch et al., 2020; Michnik et al., 2020a). A shift of the endothermic transition towards higher temperatures was also observed during the aging of serum solutions (Kielboń et al., 2019). However, during the aging process, the presence of the exothermic peak has been additionally observed in the temperature range preceding the endothermic transition. We did not observe such an effect in the present study.

Despite the fact that the endothermic transition associated with serum denaturation is generated by the whole serum proteome, it seems obvious that the changes observed in DSC profiles of athlete's blood serum should be largely related to the predominant serum protein, albumin. This protein possesses a unique capability to bind, covalently or reversibly, a great number of various endogenous and exogenous compounds. The ability to fluctuate between isomeric forms in aqueous solution could assist in adapting the albumin molecule to bind ligands with a diverse nature with high affinity (Kragh-Hansen, 1990). Both in

the blood and in extravascular fluids albumin is susceptible to different oxidative modifications, especially thiol oxidation and carbonylation. Ligand binding and the oxidation of albumin alter its structure. Conformation differences between various forms of albumin (e.g. reduced (human mercaptalbumin, HMA) oxidized (human non-mercaptalbumin, HNA), non-ligated, with bound fatty acids or other ligands, glycosylated) lead to differences between their DSC profiles. An increasing fraction of albumin carrying different ligands could at least partly explain the upward shift of the endothermic transition observed after the ultramarathon running, since the ligated form of albumin has a higher thermal stability than non-ligated (Michnik et al., 2006; Musante et al., 2006; Garidel et al., 2009; Michnik and Drzazga, 2010; Minami et al., 2014; Bohlooli et al., 2014). The effects of altered carbohydrate metabolism, the regulation of substrate metabolism, protein degradation, an increase in oxygen demand during prolonged exercise affect the state of albumin. Spanidis et al. (2017) examined the oxidation of human serum albumin caused by oxidative stress following an ultramarathon race. They reported that HSA oxidation after ultramarathon race exhibited a great variation between different athletes.

Generally, the thermal transitions observed for serum/plasma of individuals suffering from various diseases have been found significantly shifted towards higher denaturation temperatures when compared with healthy controls. According to Hoffman and Krishnan (2014) study of 1212 active ultramarathon runners, they appear healthier, compared with the general population. However, intense endurance training before the ultramarathon may result in the accumulation of fatigue already at this stage. The mean value of the first moment temperature T_{FM} (about 67 °C) for participants of this study before the run is similar for that found by us earlier for cross country skiers (Michnik et al., 2020a) and slightly higher than the value reported for other group of athletes (Michnik et al., 2013). The pre-run value of T_{FM} has been found significantly correlated with the age of the participant in the current study. A positive value of the Pearson's correlation coefficient ($r = 0.65$) indicates an increase in pre-run T_{FM} value with age. The value of T_{FM} increases significantly to 72.6 °C after the run. Ultramarathon running, being one of the most extreme and strenuous types of exercise, represents a major physical challenge even for elite athletes. The question remains about its safety for amateur runners. Participants of current study were non-elite runners with large interindividual performance differences. Amateurs may be more prone to developing adverse effects of a long-term high-intensity stimulus compared to elite athletes. On the other hand, results of Jastrzębski et al. (2015) study have indicated that organ damage and negative metabolic changes during a 100-km run occur similarly in participants less experienced as well as in well trained runners and are independent of their age. The similar conclusion can be drawn from the comparison of the DSC curves shown in Fig. 2b and c for 63- and 49-years old participants, respectively. In both cases, despite the difference in the age of runners, the changes connected with the 12-h running are large. However, the results of current study suggest smaller differences between "pre-run" and "post-run" stages in the enthalpy of serum denaturation and in the width of the thermal transition with age.

This study has a few limitations worth noting. Firstly, it was conducted on a relatively small group including male subjects only. Therefore, we are not able to discuss possible gender differences. Secondly, the observation time was limited to pre- and post-running. We did not monitor the changes in serum DSC curves during and at the end of the recovery phase. Therefore, we did not observe whether and how quickly the values of the parameters describing the analyzed denaturation transition return to pre-race values. Such information on the recovery time would be valuable, and the DSC method ideally suited to obtain it. However, we did not have serum samples from this period.

5. Conclusions

This study is probably the first to investigate the effects of

ultramarathon running using the differential scanning calorimetry method. The results of the DSC study showed that the 12-h running race led to significant changes in the serum proteome of participants. A clear influence of the ultramarathon run on the shape and parameters of the endothermic transition resulting from the denaturation of serum proteins was observed in all participants, who were amateur long-distance runners. The direction of changes was the same, but a large variation in the size of the effect was found due to large interindividual performance differences. The small sample size and the heterogeneity of amateur runners made it impossible to find a relationship between the intensity of the observed changes and the age of the participant and the distance covered.

Author contributions

Conceptualization, A.M. and E.S-K.; Formal analysis, A.M.; Investigation, A.M., A.K., K.D., E.S-K. S.B.; Methodology, A.M. and E.S-K.; Resources, A.M. and E.S-K.; Visualization, A.M., A.K., K.D. S.B.; Writing-original draft, A.M.; Writing-review & editing A.M., E.S-K, A.K., K.D. All authors have read and agreed to the published version of the manuscript.

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Declaration of competing interest

The authors declare no conflict of interest.

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