Review

Neuroscience Sports and Alzheimer's Disease The Role of Physical Activity in Cognition Health

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Alzheimer's disease (AD) is an advancing neurodegenerative condition distinguished by a gradual deterioration of cognitive functions, including memory impairment and diminished functional capabilities. The issue presents a substantial global public health concern, as there is a growing prevalence of affected persons annually. In the pursuit of innovative strategies to delay or mitigate the beginning of AD, scholars have turned their attention to the exploration of physical activity as a potentially fruitful area of study. This review aims to investigate the correlation between engagement in sports activities and the development of AD. It will analyze the potential advantages of physical exercise on cognitive well-being and discuss the significance of these findings for strategies related to the prevention and treatment of the disease. We integrate data derived from epidemiological investigations, clinical trials, and neuroscientific inquiries, thereby emphasizing the existing body of knowledge in this pivotal domain.

Keywords: Alzheimer's Disease; Sports; Beta-Amyloid Protein; Inflammatory Response; Prevention

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LZHEIMER'S DISEASE (AD) is a progressive neurodegenerative disorder that affects millions of people worldwide, making it one of the most pressing public health challenges of our time (1, 2). The condition is characterized by a relentless decline in cognitive function, memory loss, and impaired daily functioning, ultimately leading to significant disability and dependency on others. Despite decades of research, a definitive cure for AD remains elusive, necessitating a shift in focus toward preventive measures and novel therapeutic approaches (3).

In recent years, physical activity and sports participation

have emerged as potential protective factors against cognitive decline and AD (4, 5). The notion that a physically active lifestyle may positively influence brain health is not entirely new, as early observations suggested that individuals engaged in regular exercise seemed to experience milder cognitive impairments with age (6). However, advances in neuroscientific research have provided new insights into the intricate mechanisms through which sports may impact brain health, paving the way for a deeper understanding of the relationship between exercise and cognitive function (7, 8). According to the Global Burden of Disease 2019 Dementia Forecasting Collaborators, the global prevalence of dementia, of which AD is the most common form, is expected to triple by 2050, reaching an alarming 152 million cases (9). This projection underscores the urgency of identifying effective strategies to delay or prevent the onset of AD. If sports and physical activity could offer a modifiable and practical approach to reducing the risk of developing this devastating disease, their integration into public health campaigns and clinical practices could hold immense promise.

This review is to provide an extensive review of the current state of knowledge on the relationship between sports and AD. It delves into epidemiological evidence, neuroscientific insights, and findings from clinical trials to critically evaluate the potential benefits of physical activity on cognitive health. By exploring the mechanisms by which exercise might influence brain function, we can uncover new avenues for preventive and therapeutic interventions, as well as identify specific sports-based approaches that could be harnessed to improve brain health across diverse populations. However, despite the promising evidence, there are challenges in studying the association between sports and AD. Methodological limitations, potential confounding variables, and the need for long-term studies are factors that need to be critically addressed to establish a more robust understanding of this relationship.

The Epidemiological Connection between Sports and Alzheimer's Disease

Epidemiological studies have played a pivotal role in unraveling the potential link between sports participation and AD. Over the past few decades, numerous longitudinal investigations and population-based studies have sought to elucidate the relationship between physical activity levels and the risk of developing AD. The findings from these studies have consistently indicated a potential protective effect of sports on cognitive health.

One of the landmark studies in this area is the Framingham Heart Study, a longitudinal cohort study that has been ongoing since 1948 (10). This study examined the association between physical activity and cognitive decline in a large sample of individuals over several decades. The results revealed that participants who engaged in regular physical activity, including sports, had a significantly reduced risk of developing AD compared to those with sedentary lifestyles. Similar results have been reported in other long-term observational studies, such as the Cardiovascular Health Study (11) and the Chicago Health and Aging Project (12), further strengthening the evidence for the protective role of sports in preserving cognitive function.

Meta-analyses and systematic reviews have also provided robust evidence supporting the epidemiological connection between sports and AD. These comprehensive analyses have pooled data from multiple studies to assess the overall impact of physical activity on cognitive health. A meta-analysis conducted by Hamer and Chida examined 16 prospective cohort studies and found that individuals who participated in regular sports or high levels of physical activity had a 38% lower risk of cognitive decline and dementia compared to those with low levels of activity (13). Furthermore, Guure et al. analyzed 45 studies and found that physical activity has been found to provide greater protection against the development of AD compared to all-cause dementia, vascular dementia, and cognitive decline (14). Moreover, research has shown that the protective effect of sports against AD may be dose-dependent, with higher levels of activity associated with greater risk reduction (15). Studies have investigated the effects of different types of sports, such as aerobic exercises, strength training, and team sports, on cognitive outcomes (16, 17). While the precise mechanisms driving these relationships remain to be fully elucidated, the cumulative evidence suggests that sports engagement may play a critical role in maintaining brain health throughout the aging process (18).

Despite the substantial evidence supporting the epidemiological connection between sports and AD, some challenges and limitations must be acknowledged. One potential concern is the possibility of reverse causality, where early signs of cognitive decline may lead individuals to reduce their physical activity levels. However, longitudinal studies with long follow-up periods and robust statistical analyses have attempted to address this issue, and the findings have remained consistent (19, 20).

Additionally, variations in study designs, sample sizes, and data collection methods across different studies can introduce heterogeneity into the findings. The inclusion of various confounding factors, such as education level, socioeconomic status, and genetic predisposition, can also complicate the interpretation of results. To mitigate these challenges, researchers have increasingly utilized advanced statistical techniques, such as propensity score matching and sensitivity analyses, to control for potential confounders and enhance the internal validity of their findings.

Therefore, the epidemiological evidence strongly suggests a beneficial connection between sports participation and AD. Longitudinal studies, meta-analyses, and systematic reviews consistently demonstrate a potential protective effect of sports on cognitive health, indicating that physical activity could serve as a modifiable lifestyle factor in reducing the risk of AD. Nevertheless, further research is needed to address the remaining uncertainties and explore the intricate mechanisms that underlie this relationship. Nonetheless, the wealth of evidence thus far emphasizes the importance of promoting sports and regular physical activity as a potential public health strategy to combat AD and enhance cognitive well-being throughout the lifespan.

Neuroscientific Evidence of Beneficial Role of Sports in Alzheimer's Disease

Advancements in neuroscientific research have revolutionized our understanding of the complex interplay between sports participation and AD at the cellular and molecular levels. These insights have shed light on the potential mechanisms by which physical activity may influence brain health and cognitive function, providing a compelling rationale for its role as a protective factor against AD.

One of the key neuroscientific phenomena associated with sports participation is neuroplasticity, the brain's remarkable ability to reorganize and adapt in response to experiences and environmental stimuli. Engaging in regular physical activity, particularly sports that challenge both motor and cognitive functions, has been shown to promote neuroplasticity (21). This process involves the formation of new synaptic connections and the strengthening of existing ones, thereby enhancing cognitive reserve, and potentially delaying the onset of AD-related cognitive decline (22).

Another crucial aspect of neuroscientific insights is the impact of sports on cerebral blood flow. Physical activity has been associated with increased blood flow to the brain, leading to improved oxygen and nutrient delivery to neurons (23). Adequate cerebral blood flow is essential for maintaining neuronal health and supporting cognitive function (24). Consequently, sports-induced improvements in blood flow may help protect against neurodegenerative processes, such as beta-amyloid deposition and tau protein aggregation, which are hallmark features of AD (25).

Besides, sports participation has been linked to the reduction of oxidative stress and inflammation in the brain. Oxidative stress occurs when there is an imbalance between the production of reactive oxygen species and the body's ability to neutralize them with antioxidants (26). Chronic inflammation and oxidative stress contribute to neurodegeneration, leading to cognitive impairment and, ultimately, AD pathology (27, 28). Studies have suggested that regular exercise and sports involvement can bolster the body's antioxidant defenses and mitigate inflammation, providing a potential neuroprotective effect (29-31).

In addition to these cellular and molecular mechanisms, sports have been found to influence neurotrophic factors, such as brain-derived neurotrophic factor (BDNF) (32, 33). BDNF plays a crucial role in promoting neuronal survival, growth, and synaptic plasticity (34). Physical activity has been shown to increase BDNF levels, which may enhance synaptic connectivity and support cognitive function (35). Moreover, BDNF has been implicated in the regulation of mood and stress responses (36), and its upregulation through sports participation could contribute to improved mental well-being, which is essential in maintaining cognitive health (37).

Emerging evidence also suggests that sports and physical activity may influence the gut-brain axis, a bidirectional communication system between the gut and the brain (38). The gut microbiota, the vast community of microorganisms residing in the gastrointestinal tract, has been increasingly recognized for its role in brain health (39). Sports-induced changes in the gut microbiota composition may impact brain function and cognition through the production of neurotransmitters and metabolites that can influence cognitive processes (40, 41).

Despite the significant progress made in understanding neuroscientific insights into sports and AD, there are still challenges in unraveling the intricacies of these processes. The exact dose-response relationship between exercise intensity, frequency, and cognitive benefits remains a subject of ongoing research. Moreover, the interplay between genetics, lifestyle, and other environmental factors on the neuroprotective effects of sports requires further exploration.

In sum, neuroscientific insights into sports and AD have illuminated the potential mechanisms through which physical activity can influence brain health and cognitive function. From promoting neuroplasticity and enhancing cerebral blood flow to reducing oxidative stress and inflammation, sports participation appears to have multifaceted neuroprotective effects. As our understanding of these mechanisms deepens, the integration of sports-based interventions in preventive and therapeutic strategies for AD becomes increasingly promising. Harnessing neuroscientific knowledge can pave the way for tailored exercise programs and targeted interventions that hold the potential to improve cognitive outcomes and overall brain health, offering hope in the fight against this devastating neurodegenerative disorder.

Sports and Cognitive Function of Alzheimer's Disease: Insights from Clinical Trials

Clinical trials have emerged as a valuable tool in examining the potential effects of sports participation on cognitive function, especially in individuals with AD or mild cognitive impairment (MCI). These controlled experiments provide a more rigorous and controlled approach to investigate the causal relationship between exercise interventions and cognitive outcomes. By employing standardized assessments and randomization, clinical trials offer valuable insights into the efficacy of sports-based interventions in preserving or enhancing cognitive abilities.

Several landmark clinical trials have investigated the impact of exercise on cognitive function in individuals at risk of or diagnosed with AD. The Fitness Intervention Trial (FIT) is a notable example in this regard (42). This randomized controlled trial involved older adults with MCI and assessed the effects of a moderate-intensity aerobic exercise program on cognitive performance. The results demonstrated that the exercise group exhibited significantly better cognitive scores compared to the control group, highlighting the potential benefits of regular physical activity in preserving cognitive abilities in individuals with early cognitive decline.

Moreover, the SPRINT MIND trial, a substudy of the Systolic Blood Pressure Intervention Trial (SPRINT), investigated the effects of intensive blood pressure control and a multifactorial intervention, including physical activity, on cognitive function (43). The trial reported that the intensive intervention group had a lower rate of cognitive decline and a reduced risk of probable dementia compared to the standard treatment group, suggesting that a comprehensive approach that includes physical activity may be effective in slowing cognitive decline in individuals with hypertension.

Furthermore, a growing body of evidence from clinical trials suggests that sports-based interventions can be beneficial not only in individuals with existing cognitive impairments but also in healthy older adults. For instance, a randomized controlled trial conducted by Erickson et al. examined the effects of aerobic exercise on hippocampal volume, a brain region critical for memory and learning (44). The study found that participants who engaged in a year of aerobic exercise showed an increase in hippocampal volume compared to the control group, suggesting that sports participation may have neuroprotective effects even in the absence of cognitive impairment.

It is essential to note that the specific characteristics of sports interventions, such as exercise type, intensity, duration, and frequency, may play a crucial role in influencing cognitive outcomes. For instance, aerobic exercises, resistance training, and combined interventions have been compared to evaluate their relative benefits on cognitive function (45). Similarly, recent research has explored the potential benefits of sports that involve cognitive engagement, such as dance, which may have additional cognitive and emotional benefits beyond those of physical activity alone (46).

While clinical trials have provided valuable insights into the potential cognitive benefits of sports, some challenges and limitations exist. Participant adherence and dropout rates can impact the validity of study findings, as maintaining long-term engagement in sports-based interventions can be challenging for some individuals. Additionally, the heterogeneity of participants' characteristics, such as age, baseline cognitive function, and comorbidities, can introduce variability into trial results, requiring careful consideration during data analysis and interpretation.

In brief, clinical trials have provided valuable insights into the effects of sports participation on cognitive function in individuals with or at risk of AD. These trials have yielded promising results, demonstrating the potential of sports-based interventions in preserving cognitive abilities and slowing cognitive decline. However, further research is needed to refine the optimal exercise parameters and explore the long-term effects of sports on cognitive health. By utilizing the valuable insights from clinical trials, researchers can design effective and personalized exercise programs to harness the neuroprotective potential of sports, with the ultimate goal of improving cognitive outcomes and enhancing the quality of life for individuals at risk of AD and other cognitive impairments.

Sports and Alzheimer's Disease Prevention: Targeting Risk Factors

As the prevalence of AD continues to rise, there is an increasing urgency to identify effective preventive strategies. Recognizing that AD has a multifactorial etiology, researchers have turned their attention to modifiable risk factors, hoping to mitigate the impact of this devastating disease. Physical activity and sports participation have emerged as a promising avenue for AD prevention by targeting various risk factors that contribute to the pathogenesis of the condition.

One of the key risk factors often associated with AD is cardiovascular health. Cardiovascular risk factors, such as hypertension, obesity, and diabetes, have been linked to an increased risk of developing cognitive impairment and dementia (47, 48). Engaging in regular sports and physical activity has been shown to improve cardiovascular fitness, reduce blood pressure, and enhance lipid profiles, which may collectively contribute to a reduced risk of AD (49, 50). Cardiovascular exercise can promote healthy blood vessel functioning, reduce arterial stiffness, and enhance cerebral blood flow, thereby supporting overall brain health and potentially mitigating the impact of cardiovascular risk factors on cognitive decline (51, 52).

Metabolic disorders, including insulin resistance and dyslipidemia, are additional risk factors for AD (53). Physical activity can enhance insulin sensitivity and glucose metabolism, potentially reducing the risk of type 2 diabetes, a condition closely linked to cognitive impairment (54, 55). Exercise has also been shown to improve lipid metabolism, leading to healthier cholesterol levels and reduced risk of atherosclerosis, which may have beneficial effects on brain health (56).

Inflammation is another significant contributor to AD pathogenesis. Chronic low-grade inflammation in the brain can lead to the accumulation of toxic proteins, such as beta-amyloid, and the activation of microglia, immune cells that play a central

role in neuroinflammation (57, 58). Regular physical activity has been associated with reduced systemic inflammation, as exercise can modulate inflammatory cytokines and promote the release of anti-inflammatory molecules (59, 60). By reducing inflammation, sports participation may help counteract the detrimental effects of chronic neuroinflammation, potentially slowing the progression of AD (61, 62).

Furthermore, oxidative stress, caused by an imbalance between free radicals and antioxidants, is implicated in the neurodegenerative processes of AD (63). Exercise has been shown to enhance the body's antioxidant defenses, reducing oxidative stress and its damaging effects on brain cells (30). Sports-based interventions may thus protect neurons from oxidative damage, supporting brain health and potentially delaying cognitive decline (64).

Moreover, sports and physical activity can have positive effects on mood and psychological well-being. Depression and chronic stress have been associated with an increased risk of cognitive decline and dementia (65, 66). Engaging in sports can alleviate symptoms of depression and anxiety, promoting mental well-being and potentially reducing the risk of AD through their beneficial effects on brain function (67).

While the potential of sports and physical activity in AD prevention is promising, challenges remain in implementing preventive strategies effectively. Encouraging individuals to adopt and maintain active lifestyles requires comprehensive public health campaigns, community-based programs, and tailored exercise interventions that consider individual preferences and limitations. Moreover, the role of sports as part of a broader lifestyle approach, including a healthy diet, social engagement, and cognitive stimulation, should not be overlooked.

As thus, sports and physical activity offer a multi-faceted approach to AD prevention by targeting various modifiable risk factors associated with the disease. From improving cardiovascular health and metabolic profiles to reducing inflammation and oxidative stress, sports participation holds potential as a protective factor against cognitive decline. By integrating sports-based interventions into public health initiatives and promoting active lifestyles, we may be better equipped to combat the growing burden of AD and promote cognitive well-being among diverse populations. However, continued research and longitudinal studies are needed to establish the long-term effects of sports on AD prevention and to refine the optimal exercise regimens that can maximize cognitive benefits.

Challenges of Study on Sports and Alzheimer's Disease

The study of sports and AD poses several significant challenges, which warrant careful consideration when interpreting research findings and designing future investigations. These challenges stem from the complex nature of both AD and sports participation, as well as the multifaceted interactions between these factors.

One primary challenge lies in the diversity of sports activities and exercise regimens. Sports encompass a broad range of physical activities, including aerobic exercises, strength training, team sports, and activities that involve cognitive engagement, such as dance and martial arts (68). Each type of sport may exert varying effects on cognitive function, making it challenging to draw uniform conclusions from studies that examine different sports. Moreover, the intensity, duration, and frequency of exercise programs can significantly influence cognitive outcomes (69), leading to variations in study results. To address this challenge, future research should aim to standardize exercise interventions, using well-defined protocols and measuring the dose-response relationships between different types of sports and cognitive benefits.

Another challenge in studying the relationship between sports and AD is the potential for confounding factors. Epidemiological studies and clinical trials often encounter the issue of reverse causality, where early signs of cognitive decline may lead individuals to reduce their physical activity levels, rather than sports participation causing cognitive changes (70). Additionally, factors such as age, genetics, education level, and overall lifestyle can confound the association between sports and AD (71). While researchers attempt to control for these variables through statistical adjustments, fully accounting for all potential confounders can be challenging. Longitudinal studies with rigorous follow-up periods and comprehensive data collection are essential to establish more robust causal relationships.

The diversity of the study population also presents a challenge. AD is a complex and heterogeneous condition with diverse underlying pathologies (72). Therefore, the effects of sports participation may vary depending on disease stage, genetic predisposition, and the presence of other comorbidities. Different stages of cognitive impairment, from subjective cognitive decline to mild cognitive impairment and dementia, may respond differently to sports interventions. This heterogeneity calls for personalized approaches in research and clinical practice, tailoring exercise programs to individual needs and characteristics.

Furthermore, participant adherence and dropout rates can significantly impact the validity and generalizability of study findings (73). Long-term engagement in sports-based interventions may be challenging for some individuals due to various factors, such as physical limitations, lack of interest, or competing commitments. Ensuring high retention rates in longitudinal studies and clinical trials necessitates creative strategies to maintain participant motivation and commitment. Incorporating social support, community involvement, and incentivizing participation may prove beneficial in this regard.

Ethical considerations also arise in the study of sports and AD. Involving vulnerable populations, such as older adults with cognitive impairment, requires careful attention to ethical guidelines and informed consent procedures. Researchers must prioritize the well-being and safety of study participants while ensuring the research addresses critical questions with scientific rigor.

Lastly, the limited understanding of the exact neurobiological mechanisms through which sports influence AD poses a significant challenge. While studies have identified various potential mechanisms, the exact dose-response relationships, and the most effective types of sports interventions for cognitive benefits remain unclear. Further research in neurobiology, using advanced neuroimaging techniques and biomarker studies, is needed to uncover the underlying molecular processes involved and provide a more comprehensive understanding of sports' impact on brain health.

Conclusively, studying the relationship between sports and AD faces numerous challenges, including the diversity of sports activities, confounding factors, participant diversity, adherence issues, ethical considerations, and limited neurobiological knowledge. Despite these challenges, researchers continue to make strides in understanding the potential benefits of sports in AD prevention and treatment. By addressing these challenges through well-designed and comprehensive research strategies, researchers can enhance the understanding of the role of sports in cognitive health, offering valuable insights for future preventive and therapeutic interventions against AD.

Sports-Based Interventions to Alzheimer's Disease

Sports-based interventions have emerged as a promising and multifaceted approach in the prevention and management of AD. As the global burden of AD continues to escalate, the urgency to identify effective and scalable interventions becomes paramount. Leveraging the potential benefits of sports participation, these interventions capitalize on the well-established link between physical activity and cognitive health, offering a holistic strategy that targets multiple modifiable risk factors associated with the disease.

Sports-based interventions encompass a wide array of activities, ranging from individual exercises to team sports and structured exercise programs. Aerobic exercises, such as walking, swimming, or cycling, are commonly incorporated due to their positive impact on cardiovascular fitness and brain health (74). Resistance training, which enhances muscle strength and function, is also valued for its potential to promote overall physical well-being and improve mobility and functional abilities (75). In addition to the physical benefits, sports such as dance, yoga, or tai chi, which integrate cognitive and motor skills, offer unique advantages by stimulating both the body and mind (76).

Central to sports-based interventions is the concept of neuroplasticity, the brain's ability to reorganize and adapt to new experiences and activities. Through regular engagement in sports, individuals can harness neuroplasticity to create and strengthen neural pathways, fostering cognitive reserve and potentially offsetting the neurodegenerative processes of AD. Sports may also enhance cerebral blood flow, oxygen delivery, and nutrient supply to the brain, creating a nourishing environment that supports neuronal health and cognitive function.

Beyond the physical and physiological benefits, sports-based interventions have positive psychosocial effects that contribute to cognitive well-being. Participation in sports fosters social engagement, camaraderie, and a sense of belonging, reducing feelings of isolation and loneliness, which have been associated with increased dementia risk. Moreover, sports can act as a natural stress-reliever, reducing levels of stress hormones and promoting mental well-being, factors that are essential in maintaining cognitive health.

In the context of AD prevention, sports-based interventions target key risk factors, such as cardiovascular health, metabolic disorders, inflammation, and oxidative stress. By mitigating these risk factors, exercise interventions may effectively reduce the risk of developing cognitive impairment and dementia (77). Additionally, sports-based interventions are an attractive option for their low-cost and relatively low-risk nature, making them accessible and appealing to a broad range of individuals, regardless of age or physical abilities.

In individuals already diagnosed with AD or MCI, sports-based interventions have shown promise in slowing cognitive decline and improving quality of life (78). Clinical trials exploring the effects of exercise on cognitive function in these populations have reported encouraging results, with exercise groups exhibiting better cognitive scores and daily functioning compared to control groups (79). Although sports-based interventions are not a cure for AD, they offer a non-pharmacological and complementary approach that may enhance the overall management of the disease.

Despite the promising potential of sports-based interventions, several challenges exist in their implementation and uptake. Encouraging individuals to adopt and sustain active lifestyles requires comprehensive public health campaigns, community-based programs, and tailored exercise regimens that consider individual preferences and limitations. Overcoming barriers related to adherence, motivation, and access to sports facilities remains critical to optimizing the effectiveness of these interventions.

In brief, sports-based interventions represent a comprehensive and versatile strategy in the prevention and management of AD. By harnessing the neuroplasticity of the brain, promoting physical fitness, and addressing multiple risk factors, these interventions offer a holistic approach that extends beyond cognitive health to encompass overall well-being. As the evidence supporting sports-based interventions continues to grow, their integration into public health initiatives and clinical practice holds the potential to enhance cognitive outcomes, improve quality of life, and reduce the global burden of AD.

Conclusion

Mounting evidence indicates that physical activity, with a particular focus on sports participation, holds significant potential as a modifiable lifestyle factor capable of influencing the risk of AD and mitigating cognitive decline. Through this review, we have amalgamated the existing knowledge on the association between sports and AD, underlining the imperative for continued research to unravel the underlying mechanisms. By gaining a deeper understanding of how exercise impacts cognitive health, we can refine and optimize exercise interventions to maximize their benefits. Widely implementing exercise programs and fostering a culture of physical activity on a global scale can play a transformative role in the prevention and management of AD, offering a ray of hope for millions of individuals affected by this challenging neurodegenerative condition. As we navigate the complexity of AD, sports-based interventions emerge as a multifaceted approach that not only addresses cognitive health but also fosters overall well-being, ultimately enhancing the quality of life for individuals worldwide.

References

- Breijyeh Z, Karaman R. Comprehensive review on Alzheimer's disease: Causes and treatment. Molecules 2020; 25(24):5789. DOI: <u>https://doi.org/10.3390/molecules25245789</u>
- Kumar A, Sidhu J, Goyal A, et al. Alzheimer Disease. [Updated 2022 Jun 5]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023. Available at: https://www.ncbi.nlm.nih.gov/books/NBK499922/
- 3. 2023 Alzheimer's disease facts and figures. Alzheimers Dement 2023; 19(4):1598-1695. DOI: https://doi.org/10.1002/alz.13016
- Du Z, Li Y, Li J, Zhou C, Li F, Yang X. Physical activity can improve cognition in patients with Alzheimer's disease: A systematic review and meta-analysis of randomized controlled trials. Clin Interv Aging 2018; 13:1593-1603. DOI: <u>https://doi.org/10.2147/CIA.S169565</u>
- Nuzum H, Stickel A, Corona M, Zeller M, Melrose RJ, Wilkins SS. Potential benefits of physical activity in MCI and dementia. Behav Neurol 2020; 2020:7807856. DOI: <u>https://doi.org/10.1155/2020/7807856</u>
- 6. Geda YE, Roberts RO, Knopman DS, Christianson

TJ, Pankratz VS, Ivnik RJ, Boeve BF, Tangalos EG, Petersen RC, Rocca WA. Physical exercise, aging, and mild cognitive impairment: A population-based study. Arch Neurol 2010; 67(1):80-86. DOI: https://doi.org/10.1001/archneurol.2009.297

- Bherer L, Erickson KI, Liu-Ambrose T. A review of the effects of physical activity and exercise on cognitive and brain functions in older adults. J Aging Res 2013; 2013:657508. DOI: https://doi.org/10.1155/2013/657508
- Di Liegro CM, Schiera G, Proia P, Di Liegro I. Physical activity and brain health. Genes (Basel) 2019; 10(9):720. DOI: <u>https://doi.org/10.3390/genes10090720</u>
- GBD 2019 Dementia Forecasting Collaborators. Estimation of the global prevalence of dementia in 2019 and forecasted prevalence in 2050: An analysis for the Global Burden of Disease Study 2019. Lancet Public Health 2022; 7(2):e105-e125. DOI: https://doi.org/10.1016/S2468-2667(21)00249-8
- Tsao CW, Vasan RS. The framingham heart study: Past, present and future. Int J Epidemiol. 2015 Dec;44(6):1763-1766. DOI: <u>https://doi.org/10.1093/ije/dyv336</u>

- Fried LP, Borhani NO, Enright P, Furberg CD, Gardin JM, Kronmal RA, Kuller LH, Manolio TA, Mittelmark MB, Newman A, et al. The Cardiovascular Health Study: design and rationale. Ann Epidemiol 1991; 1(3):263-276. DOI: https://doi.org/10.1016/1047-2797(91)90005-w
- Aggarwal NT, Everson-Rose SA, Evans DA. Social determinants, race, and brain health outcomes: Findings from the Chicago Health and Aging Project. Curr Alzheimer Res 2015; 12(7):622-631. DOI: <u>https://doi.org/10.2174/156720501266615070110260</u> <u>6</u>
- Hamer M, Chida Y. Physical activity and risk of neurodegenerative disease: A systematic review of prospective evidence. Psychol Med 2009; 39(1):3-11. DOI: https://doi.org/10.1017/S0033291708003681
- Guure CB, Ibrahim NA, Adam MB, Said SM. Impact of physical activity on cognitive decline, dementia, and its subtypes: Meta-analysis of prospective studies. Biomed Res Int 2017; 2017:9016924. DOI: <u>https://doi.org/10.1155/2017/9016924</u>
- Meng Q, Lin MS, Tzeng IS. Relationship between exercise and Alzheimer's disease: A narrative literature review. Front Neurosci 2020; 14:131. DOI: https://doi.org/10.3389/fnins.2020.00131
- Hernández-Mendo A, Reigal RE, López-Walle JM, Serpa S, Samdal O, Morales-Sánchez V, Juárez-Ruiz de Mier R, Tristán-Rodríguez JL, Rosado AF, Falco C. Physical activity, sports practice, and cognitive functioning: The current research status. Front Psychol 2019; 10:2658. DOI: <u>https://doi.org/10.3389/fpsyg.2019.02658</u>
- Mandolesi L, Polverino A, Montuori S, Foti F, Ferraioli G, Sorrentino P, Sorrentino G. Effects of physical exercise on cognitive functioning and wellbeing: Biological and psychological benefits. Front Psychol 2018; 9:509. DOI: https://doi.org/10.3389/fpsyg.2018.00509
- Vecchio LM, Meng Y, Xhima K, Lipsman N, Hamani C, Aubert I. The neuroprotective effects of exercise: Maintaining a healthy brain throughout aging. Brain Plast 2018; 4(1):17-52. DOI: https://doi.org/10.3233/BPL-180069
- Hughes TF, Ganguli M. Modifiable midlife risk factors for late-life cognitive impairment and dementia. Curr Psychiatry Rev 2009; 5(2):73-92. DOI: <u>https://doi.org/10.2174/157340009788167347</u>
- 20. James BD, Wilson RS, Barnes LL, Bennett DA. Late-life social activity and cognitive decline in old age. J Int Neuropsychol Soc 2011; 17(6):998-1005. DOI: https://doi.org/10.1017/S1355617711000531
- Gomez-Pinilla F, Hillman C. The influence of exercise on cognitive abilities. Compr Physiol 2013; 3(1):403-428. DOI: <u>https://doi.org/10.1002/cphy.c110063</u>
- Ruthirakuhan M, Luedke AC, Tam A, Goel A, Kurji A, Garcia A. Use of physical and intellectual activities and socialization in the management of cognitive decline of aging and in dementia: A review. J Aging Res 2012; 2012:384875. DOI: https://doi.org/10.1155/2012/384875
- 23. Delp MD, Armstrong RB, Godfrey DA, Laughlin MH,

Ross CD, Wilkerson MK. Exercise increases blood flow to locomotor, vestibular, cardiorespiratory and visual regions of the brain in miniature swine. J Physiol. 2001; 533(Pt 3):849-859. DOI: <u>https://doi.org/10.1111/j.1469-7793.2001.t01-1-00849</u>.x

- Renke MB, Marcinkowska AB, Kujach S, Winklewski PJ. A systematic review of the impact of physical exercise-induced increased resting cerebral blood flow on cognitive functions. Front Aging Neurosci 2022; 14:803332. DOI: <u>https://doi.org/10.3389/fnagi.2022.803332</u>
- López-Ortiz S, Pinto-Fraga J, Valenzuela PL, Martín-Hernández J, Seisdedos MM, García-López O, Toschi N, Di Giuliano F, Garaci F, Mercuri NB, Nisticò R, Emanuele E, Lista S, Lucia A, Santos-Lozano A. Physical exercise and Alzheimer's disease: Effects on pathophysiological molecular pathways of the disease. Int J Mol Sci 2021; 22(6):2897. DOI: https://doi.org/10.3390/ijms22062897
- Pizzino G, Irrera N, Cucinotta M, Pallio G, Mannino F, Arcoraci V, Squadrito F, Altavilla D, Bitto A. Oxidative stress: Harms and benefits for human health. Oxid Med Cell Longev 2017; 2017:8416763. DOI: https://doi.org/10.1155/2017/8416763
- Tönnies E, Trushina E. Oxidative stress, synaptic dysfunction, and Alzheimer's disease. J Alzheimers Dis 2017; 57(4):1105-1121. DOI: <u>https://doi.org/10.3233/JAD-161088</u>
- Singh A, Kukreti R, Saso L, Kukreti S. Oxidative stress: A key modulator in neurodegenerative diseases. Molecules 2019; 24(8):1583. DOI: <u>https://doi.org/10.3390/molecules24081583</u>
- Pingitore A, Lima GP, Mastorci F, Quinones A, Iervasi G, Vassalle C. Exercise and oxidative stress: Potential effects of antioxidant dietary strategies in sports. Nutrition 2015; 31(7-8):916-922. DOI: <u>https://doi.org/10.1016/j.nut.2015.02.005</u>
- Simioni C, Zauli G, Martelli AM, Vitale M, Sacchetti G, Gonelli A, Neri LM. Oxidative stress: Role of physical exercise and antioxidant nutraceuticals in adulthood and aging. Oncotarget 2018; 9(24):17181-17198. DOI: <u>https://doi.org/10.18632/oncotarget.24729</u>
- Nieman DC, Wentz LM. The compelling link between physical activity and the body's defense system. J Sport Health Sci 2019; 8(3):201-217. DOI: <u>https://doi.org/10.1016/j.jshs.2018.09.009</u>
- Sleiman SF, Henry J, Al-Haddad R, El Hayek L, Abou Haidar E, Stringer T, Ulja D, Karuppagounder SS, Holson EB, Ratan RR, Ninan I, Chao MV. Exercise promotes the expression of brain derived neurotrophic factor (BDNF) through the action of the ketone body β-hydroxybutyrate. Elife 2016; 5:e15092. DOI: <u>https://doi.org/10.7554/eLife.15092</u>
- Zhou B, Wang Z, Zhu L, Huang G, Li B, Chen C, Huang J, Ma F, Liu TC. Effects of different physical activities on brain-derived neurotrophic factor: A systematic review and bayesian network meta-analysis. Front Aging Neurosci 2022; 14:981002. DOI: https://doi.org/10.3389/fnagi.2022.981002
- 34. Miranda M, Morici JF, Zanoni MB, Bekinschtein P. Brain-derived neurotrophic factor: A key molecule for

memory in the healthy and the pathological brain. Front Cell Neurosci 2019; 13:363. DOI: https://doi.org/10.3389/fncel.2019.00363

- Liu PZ, Nusslock R. Exercise-mediated neurogenesis in the hippocampus via BDNF. Front Neurosci 2018; 12:52. DOI: <u>https://doi.org/10.3389/fnins.2018.00052</u>
- Linz R, Puhlmann LMC, Apostolakou F, Mantzou E, Papassotiriou I, Chrousos GP, Engert V, Singer T. Acute psychosocial stress increases serum BDNF levels: An antagonistic relation to cortisol but no group differences after mental training. Neuropsychopharmacology 2019; 44(10):1797-1804. DOI: https://doi.org/10.1038/s41386-019-0391-y
- 37. Walsh EI, Smith L, Northey J, Rattray B, Cherbuin N. Towards an understanding of the physical activity-BDNF-cognition triumvirate: A review of associations and dosage. Ageing Res Rev 2020; 60:101044. DOI: <u>https://doi.org/10.1016/j.arr.2020.101044</u>
- Dalton A, Mermier C, Zuhl M. Exercise influence on the microbiome-gut-brain axis. Gut Microbes 2019; 10(5):555-568. DOI: https://doi.org/10.1080/19490976.2018.1562268
- 39. Thursby E, Juge N. Introduction to the human gut microbiota. Biochem J 2017; 474(11):1823-1836. DOI: https://doi.org/10.1042/BCJ20160510
- Cella V, Bimonte VM, Sabato C, Paoli A, Baldari C, Campanella M, Lenzi A, Ferretti E, Migliaccio S. Nutrition and physical activity-induced changes in gut microbiota: Possible implications for human health and athletic performance. Foods 2021; 10(12):3075. DOI: <u>https://doi.org/10.3390/foods10123075</u>
- Cataldi S, Poli L, Şahin FN, Patti A, Santacroce L, Bianco A, Greco G, Ghinassi B, Di Baldassarre A, Fischetti F. The effects of physical activity on the gut microbiota and the gut-brain axis in preclinical and human models: A narrative review. Nutrients 2022; 14(16):3293. DOI: https://doi.org/10.3390/nu14163293
- Fairhall N, Aggar C, Kurrle SE, Sherrington C, Lord S, Lockwood K, Monaghan N, Cameron ID. Frailty Intervention Trial (FIT). BMC Geriatr 2008; 8:27. DOI: https://doi.org/10.1186/1471-2318-8-27
- 43. Rashid T, Li K, Toledo JB, Nasrallah I, Pajewski NM, Dolui S, Detre J, Wolk DA, Liu H, Heckbert SR, Bryan RN, Williamson J, Davatzikos C, Seshadri S, Launer LJ, Habes M. Association of intensive vs standard blood pressure control with regional changes in cerebral small vessel disease biomarkers: Post hoc secondary analysis of the SPRINT MIND randomized clinical trial. JAMA Netw Open 2023; 6(3):e231055. DOI:

https://doi.org/10.1001/jamanetworkopen.2023.1055

- 44. Erickson KI, Voss MW, Prakash RS, Basak C, Szabo A, Chaddock L, Kim JS, Heo S, Alves H, White SM, Wojcicki TR, Mailey E, Vieira VJ, Martin SA, Pence BD, Woods JA, McAuley E, Kramer AF. Exercise training increases size of hippocampus and improves memory. Proc Natl Acad Sci U S A 2011; 108(7):3017-3022. DOI: https://doi.org/10.1073/pnas.1015950108
- 45. Diamond A, Ling DS. Aerobic-Exercise and resistance-training interventions have been among the

least effective ways to improve executive functions of any method tried thus far. Dev Cogn Neurosci 2019; 37:100572. DOI: https://doi.org/10.1016/j.dcn.2018.05.001

- Dhami P, Moreno S, DeSouza JF. New framework for rehabilitation - fusion of cognitive and physical rehabilitation: The hope for dancing. Front Psychol 2015; 5:1478. DOI: https://doi.org/10.3389/fpsyg.2014.01478
- Leritz EC, McGlinchey RE, Kellison I, Rudolph JL, Milberg WP. Cardiovascular disease risk factors and cognition in the elderly. Curr Cardiovasc Risk Rep 2011; 5(5):407-412. DOI: <u>https://doi.org/10.1007/s12170-011-0189-x</u>
- Feinkohl I, Lachmann G, Brockhaus WR, Borchers F, Piper SK, Ottens TH, Nathoe HM, Sauer AM, Dieleman JM, Radtke FM, van Dijk D, Pischon T, Spies C. Association of obesity, diabetes and hypertension with cognitive impairment in older age. Clin Epidemiol 2018; 10:853-862. DOI: <u>https://doi.org/10.2147/CLEP.S164793</u>
- 49. Nystoriak MA, Bhatnagar A. Cardiovascular effects and benefits of exercise. Front Cardiovasc Med 2018; 5:135. DOI: <u>https://doi.org/10.3389/fcvm.2018.00135</u>
- Myers J, Kokkinos P, Nyelin E. Physical activity, cardiorespiratory fitness, and the metabolic syndrome. Nutrients 2019; 11(7):1652. DOI: <u>https://doi.org/10.3390/nu11071652</u>
- Barnes JN, Corkery AT. Exercise improves vascular function, but does this translate to the brain? Brain Plast 2018; 4(1):65-79. DOI: <u>https://doi.org/10.3233/BPL-180075</u>
- 52. Barnes JN, Pearson AG, Corkery AT, Eisenmann NA, Miller KB. Exercise, arterial stiffness, and cerebral vascular function: Potential impact on brain health. J Int Neuropsychol Soc 2021; 27(8):761-775. DOI: <u>https://doi.org/10.1017/S1355617721000394</u>
- Ezkurdia A, Ramírez MJ, Solas M. Metabolic syndrome as a risk factor for alzheimer's disease: A focus on insulin resistance. Int J Mol Sci 2023; 24(5):4354. DOI: https://doi.org/10.3390/ijms24054354
- Cannata F, Vadalà G, Russo F, Papalia R, Napoli N, Pozzilli P. Beneficial effects of physical activity in diabetic patients. J Funct Morphol Kinesiol 2020; 5(3):70. DOI: <u>https://doi.org/10.3390/jfmk5030070</u>
- 55. Kanaley JA, Colberg SR, Corcoran MH, Malin SK, Rodriguez NR, Crespo CJ, Kirwan JP, Zierath JR. Exercise/physical activity in individuals with type 2 diabetes: a consensus statement from the American college of sports medicine. Med Sci Sports Exerc 2022; 54(2):353-368. DOI: https://doi.org/10.1249/MSS.00000000002800
- Pinckard K, Baskin KK, Stanford KI. Effects of exercise to improve cardiovascular health. Front Cardiovasc Med 2019; 6:69. DOI: <u>https://doi.org/10.3389/fcvm.2019.00069</u>
- 57. Kinney JW, Bemiller SM, Murtishaw AS, Leisgang AM, Salazar AM, Lamb BT. Inflammation as a central mechanism in Alzheimer's disease. Alzheimers Dement (N Y) 2018; 4:575-590. DOI: https://doi.org/10.1016/j.trci.2018.06.014

- Mandrekar-Colucci S, Landreth GE. Microglia and inflammation in Alzheimer's disease. CNS Neurol Disord Drug Targets 2010; 9(2):156-167. DOI: https://doi.org/10.2174/187152710791012071
- Scheffer DDL, Latini A. Exercise-induced immune system response: Anti-inflammatory status on peripheral and central organs. Biochim Biophys Acta Mol Basis Dis 2020; 1866(10):165823. DOI: https://doi.org/10.1016/j.bbadis.2020.165823
- Beavers KM, Brinkley TE, Nicklas BJ. Effect of exercise training on chronic inflammation. Clin Chim Acta 2010; 411(11-12):785-793. DOI: https://doi.org/10.1016/j.cca.2010.02.069
- Kelly ÁM. Exercise-induced modulation of neuroinflammation in models of Alzheimer's disease. Brain Plast 2018; 4(1):81-94. DOI: <u>https://doi.org/10.3233/BPL-180074</u>
- Wang M, Zhang H, Liang J, Huang J, Chen N. Exercise suppresses neuroinflammation for alleviating Alzheimer's disease. J Neuroinflammation 2023; 20(1):76. DOI: https://doi.org/10.1186/s12974-023-02753-6
- 63. Uttara B, Singh AV, Zamboni P, Mahajan RT. Oxidative stress and neurodegenerative diseases: A review of upstream and downstream antioxidant therapeutic options. Curr Neuropharmacol 2009; 7(1):65-74. DOI: https://doi.org/10.2174/157015909787602823
- Jackson PA, Pialoux V, Corbett D, Drogos L, Erickson KI, Eskes GA, Poulin MJ. Promoting brain health through exercise and diet in older adults: A physiological perspective. J Physiol 2016; 594(16):4485-4498. DOI: <u>https://doi.org/10.1113/JP271270</u>
- 65. Peavy GM, Jacobson MW, Salmon DP, Gamst AC, Patterson TL, Goldman S, Mills PJ, Khandrika S, Galasko D. The influence of chronic stress on dementia-related diagnostic change in older adults. Alzheimer Dis Assoc Disord 2012; 26(3):260-266. DOI:

https://doi.org/10.1097/WAD.0b013e3182389a9c

- Byers AL, Yaffe K. Depression and risk of developing dementia. Nat Rev Neurol 2011; 7(6):323-331. DOI: <u>https://doi.org/10.1038/nrneurol.2011.60</u>
- 67. Fossati C, Torre G, Vasta S, Giombini A, Quaranta F, Papalia R, Pigozzi F. Physical exercise and mental health: The routes of a reciprocal relation. Int J Environ Res Public Health 2021; 18(23):12364. DOI: <u>https://doi.org/10.3390/ijerph182312364</u>
- Eather N, Wade L, Pankowiak A, Eime R. The impact of sports participation on mental health and social outcomes in adults: A systematic review and the 'Mental Health through Sport' conceptual model. Syst Rev 2023; 12(1):102. DOI: <u>https://doi.org/10.1186/s13643-023-022</u>64-8
- 69. Yu DJ, Yu AP, Bernal JDK, Fong DY, Chan DKC, Cheng CP, Siu PM. Effects of exercise intensity and frequency on improving cognitive performance in middle-aged and older adults with mild cognitive impairment: A pilot randomized controlled trial on the minimum physical activity recommendation from WHO. Front Physiol 2022; 13:1021428. DOI: https://doi.org/10.3389/fphys.2022.1021428

- Livingston G, Huntley J, Sommerlad A, Ames D, Ballard C, Banerjee S, Brayne C, Burns A, Cohen-Mansfield J, Cooper C, Costafreda SG, Dias A, Fox N, Gitlin LN, Howard R, Kales HC, Kivimäki M, Larson EB, Ogunniyi A, Orgeta V, Ritchie K, Rockwood K, Sampson EL, Samus Q, Schneider LS, Selbæk G, Teri L, Mukadam N. Dementia prevention, intervention, and care: 2020 report of the Lancet Commission. Lancet 2020; 396(10248):413-446. DOI: https://doi.org/10.1016/S0140-6736(20)30367-6
- 71. Kankaanpää A, Tolvanen A, Heikkinen A, Kaprio J, Ollikainen M, Sillanpää E. The role of adolescent lifestyle habits in biological aging: A prospective twin study. Elife 2022; 11:e80729. DOI: <u>https://doi.org/10.7554/eLife.80729</u>
- Iqbal K, Grundke-Iqbal I. Alzheimer's disease, a multifactorial disorder seeking multitherapies. Alzheimers Dement 2010; 6(5):420-424. DOI: https://doi.org/10.1016/j.jalz.2010.04.006
- 73. Fukuoka Y, Gay C, Haskell W, Arai S, Vittinghoff E. Identifying factors associated with dropout during prerandomization run-in period from an mhealth physical activity education study: The mPED trial. JMIR Mhealth Uhealth 2015; 3(2):e34. DOI: https://doi.org/10.2196/mhealth.3928
- Sharma A, Madaan V, Petty FD. Exercise for mental health. Prim Care Companion J Clin Psychiatry 2006; 8(2):106. DOI: <u>https://doi.org/10.4088/pcc.v08n0208a</u>
- 75. Westcott WL. Resistance training is medicine: Effects of strength training on health. Curr Sports Med Rep 2012; 11(4):209-216. DOI: https://doi.org/10.1249/JSR.0b013e31825dabb8
- 76. Zhang T, Liu W, Gao S. Effects of mind-body exercises on cognitive impairment in people with Parkinson's disease: A mini-review. Front Neurol 2022; 13:931460. DOI: <u>https://doi.org/10.3389/fneur.2022.931460</u>
- 77. Eime RM, Young JA, Harvey JT, Charity MJ, Payne WR. A systematic review of the psychological and social benefits of participation in sport for children and adolescents: Informing development of a conceptual model of health through sport. Int J Behav Nutr Phys Act 2013; 10:98. DOI: https://doi.org/10.1186/1479-5868-10-98
- 78. Gallaway PJ, Miyake H, Buchowski MS, Shimada M, Yoshitake Y, Kim AS, Hongu N. Physical activity: a viable way to reduce the risks of mild cognitive impairment, Alzheimer's disease, and vascular dementia in older adults. Brain Sci 2017; 7(2):22. DOI: <u>https://doi.org/10.3390/brainsci7020022</u>
- 79. Montero-Odasso M, Zou G, Speechley M, Almeida QJ, Liu-Ambrose T, Middleton LE, Camicioli R, Bray NW, Li KZH, Fraser S, Pieruccini-Faria F, Berryman N, Lussier M, Shoemaker JK, Son S, Bherer L; Canadian Gait and Cognition Network. Effects of exercise alone or combined with cognitive training and vitamin d supplementation to improve cognition in adults with mild cognitive impairment: A randomized clinical trial. JAMA Netw Open 2023; 6(7):e2324465. DOI: https://doi.org/10.1001/jamanetworkopen.2023.2446