

# Hidratação e exercício

Prof. Dr. Guilherme G. Artioli

Água é a molécula  
mais abundante do  
organismo,  
correspondendo a  
~70% da nossa  
massa corporal

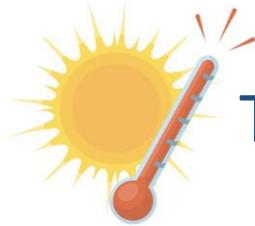


# Cumpra inúmeras funções



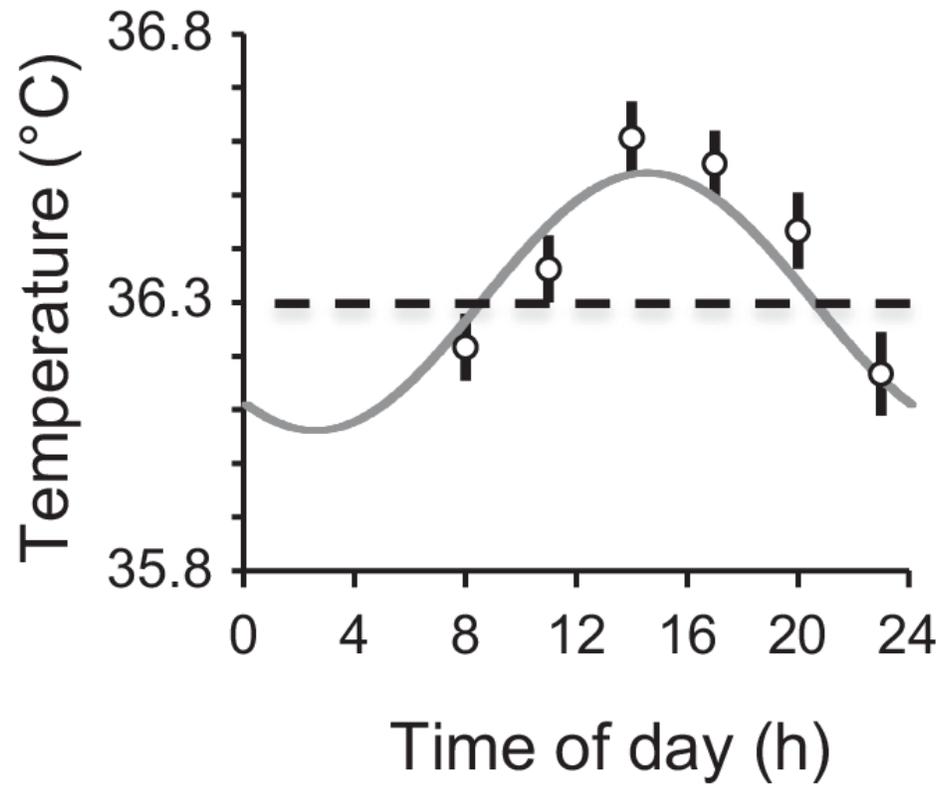
## Solvente “universal”

- > meio onde reações e interações ocorrem
- > meio que permite transportes diversos
- > meio que permite excreções diversas



## Termorregulação

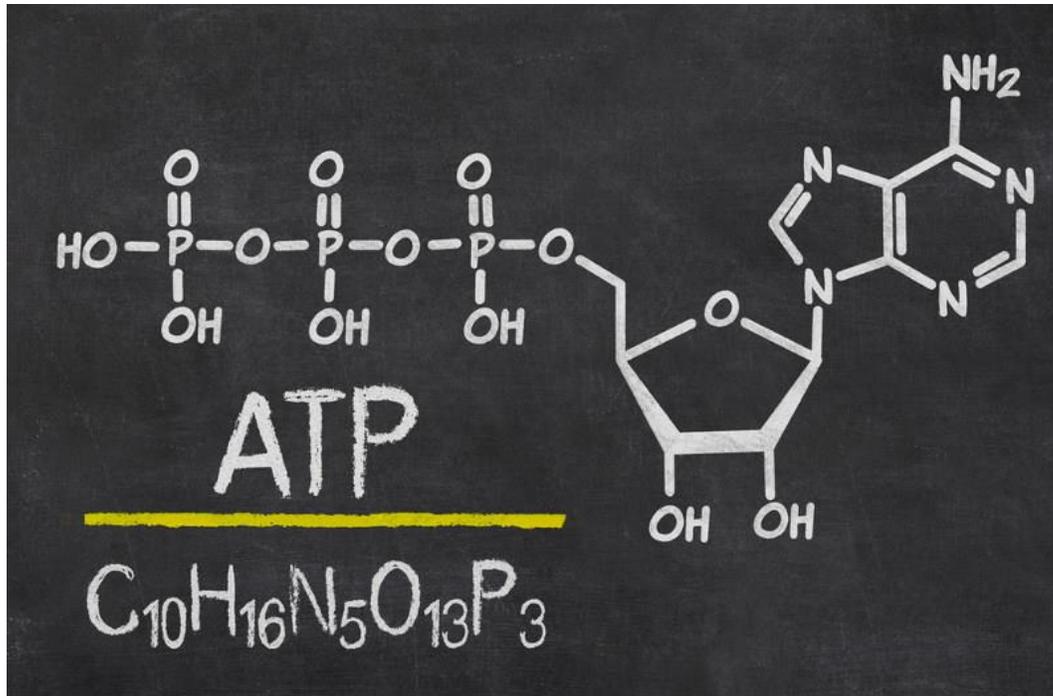
- > “leva embora” energia da superfície corporal
- > resfria o corpo



## Somos homeotérmicos

Temperatura corporal constante, apesar das  
flutuações do meio ambiente

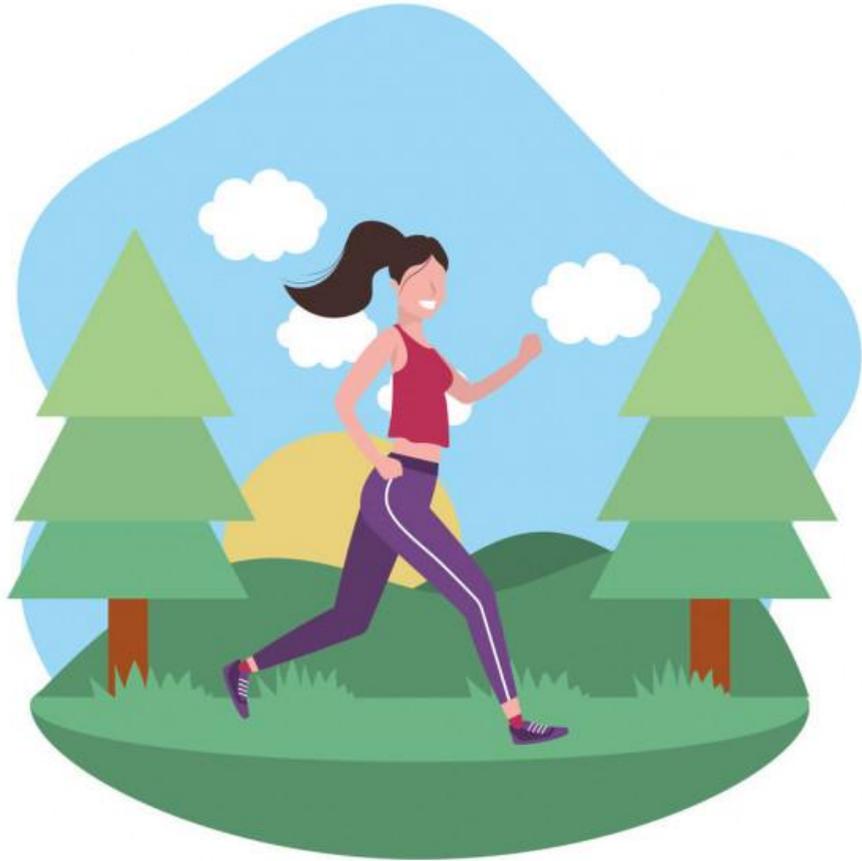
# Exercício e quebra de ATP



Eficiência mecânica ~25%



Energia "perdida" ~75%



Mais ATP sendo quebrado por minuto

Mais energia a ser “perdida” do organismo

Maior a necessidade por termorregulação

# Como nosso organismo perde calor?

## Irradiação térmica



Emissão de ondas eletromagnéticas que toda matéria emite

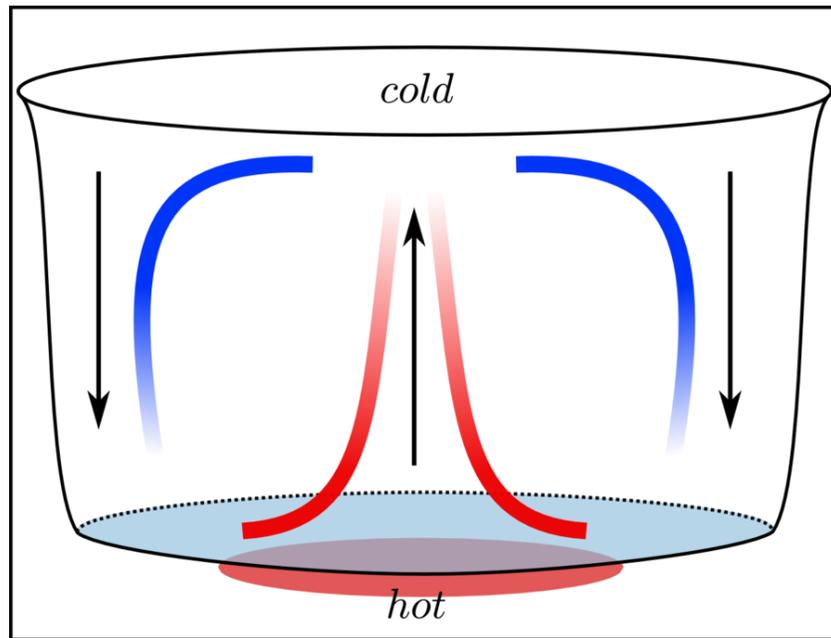
(reflete a conversão da energia cinética das partículas - movimentos aleatórios intrínsecos – em energia eletromagnética)

# Visualização da irradiação térmica



# Como nosso organismo perde calor?

## Convecção



Transferência de calor pelo movimento de massa (matéria) que, ao ser aquecida, move-se para longe da fonte de calor

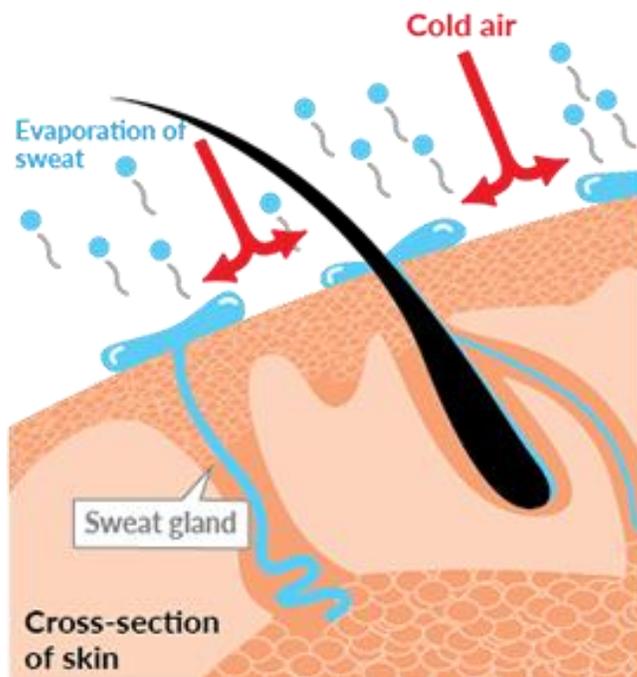
Ar esquenta em uma superfície quente, torna-se menos denso e sobe, levando o calor embora

Água esquenta em uma superfície quente, torna-se menos densa e sobe, levando o calor embora



# Como nosso organismo perde calor?

## Evaporação



Transferência de calor pela mudança do estado físico da água (suor)

O calor da pele é transferido para as moléculas de água, que se agitam e evaporam.

Ao se afastar do organismo, abre-se espaço para que o ar mais frio se aproxime da pele, reduzindo a temperatura por convecção

# Como nosso organismo perde calor?

## Respiração (Evaporação)

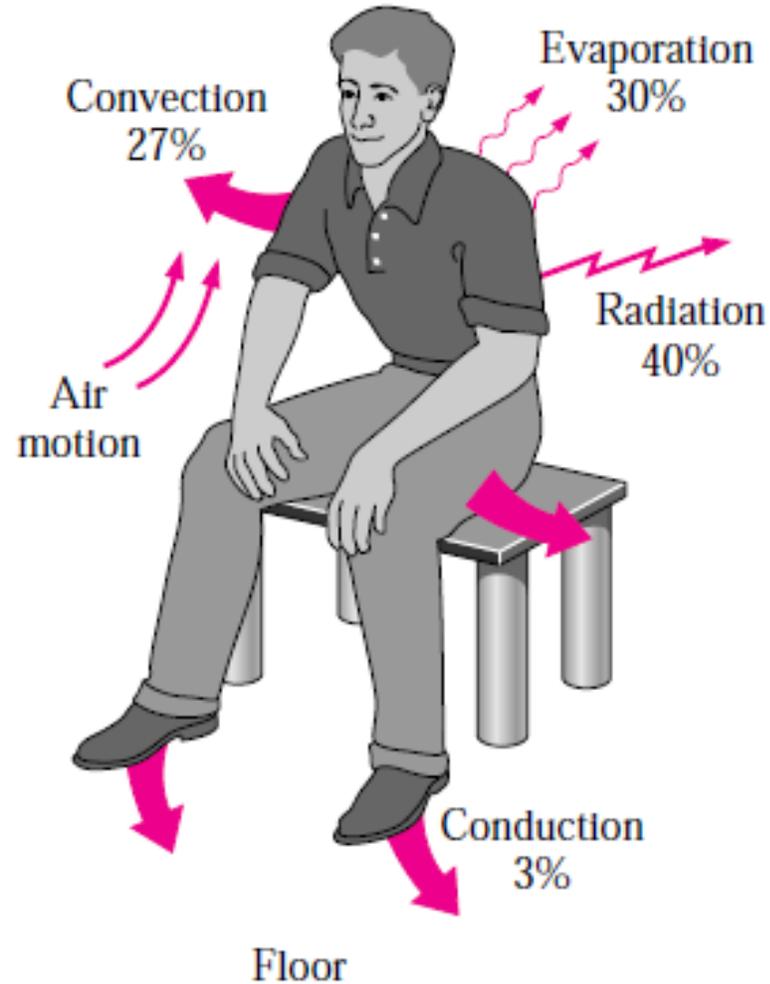


## Transferência de calor pela mudança do estado físico da água (suor)

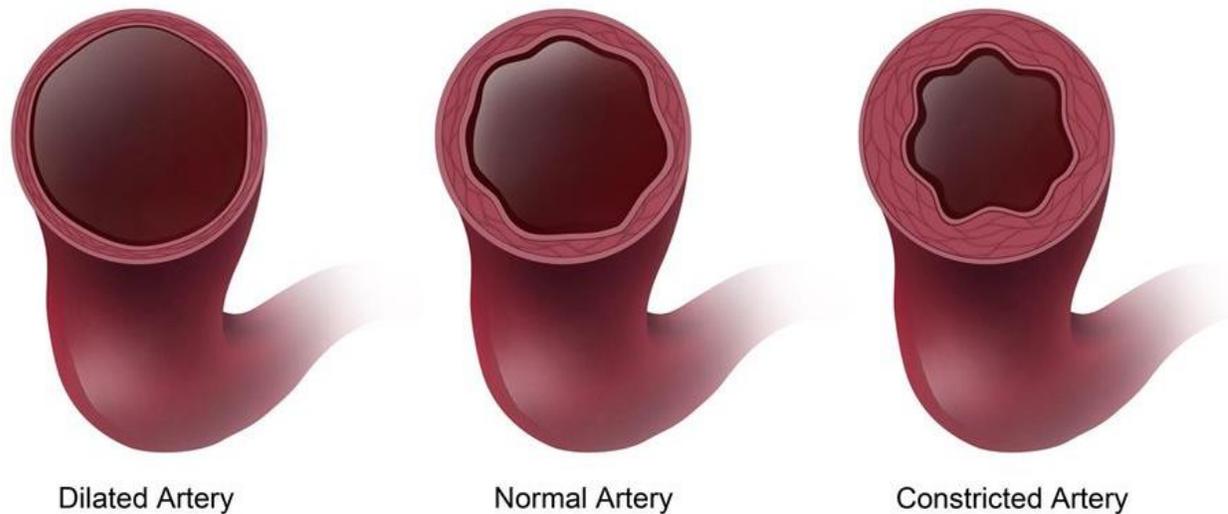
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# Como nosso organismo perde calor?



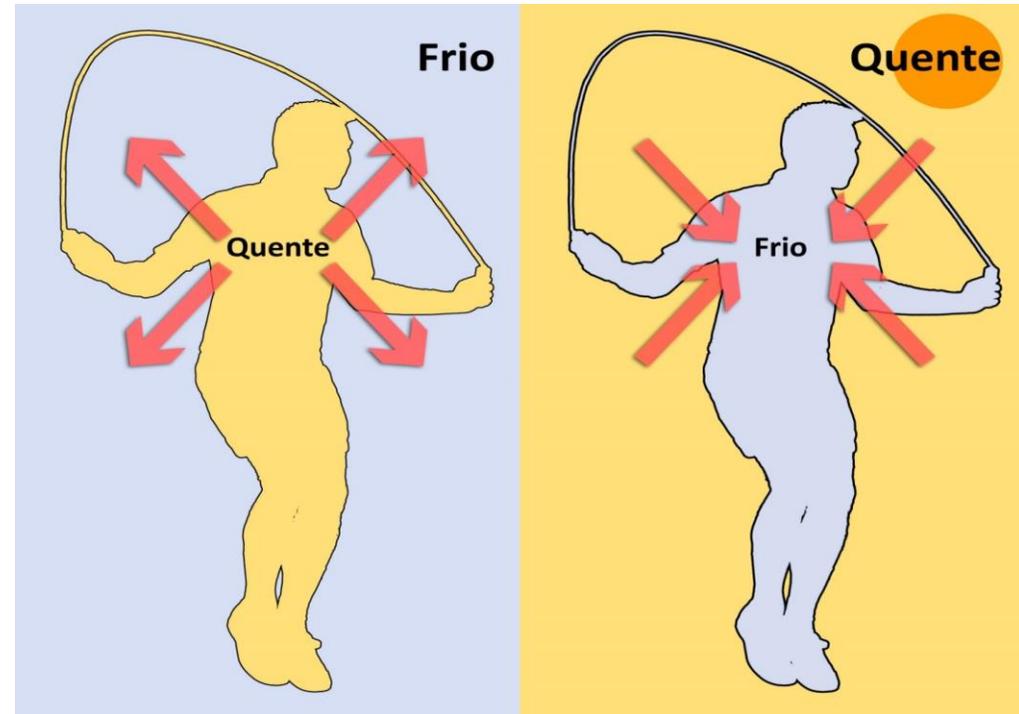
# A temperatura da pele influencia os mecanismos de troca de calor



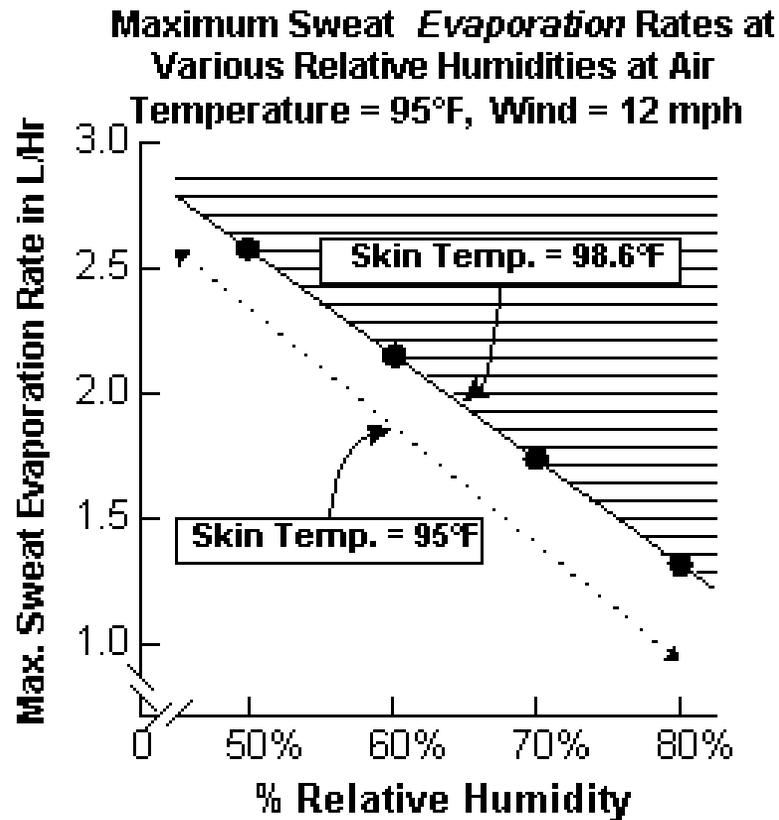
Vasodilatação aumenta o fluxo sanguíneo, que aumenta a temperatura da pele. Isso facilita a perda de calor para o ambiente.

# As condições ambientais também...

Em ambientes quentes, o gradiente de temperatura é menor, dificultando a perda de calor

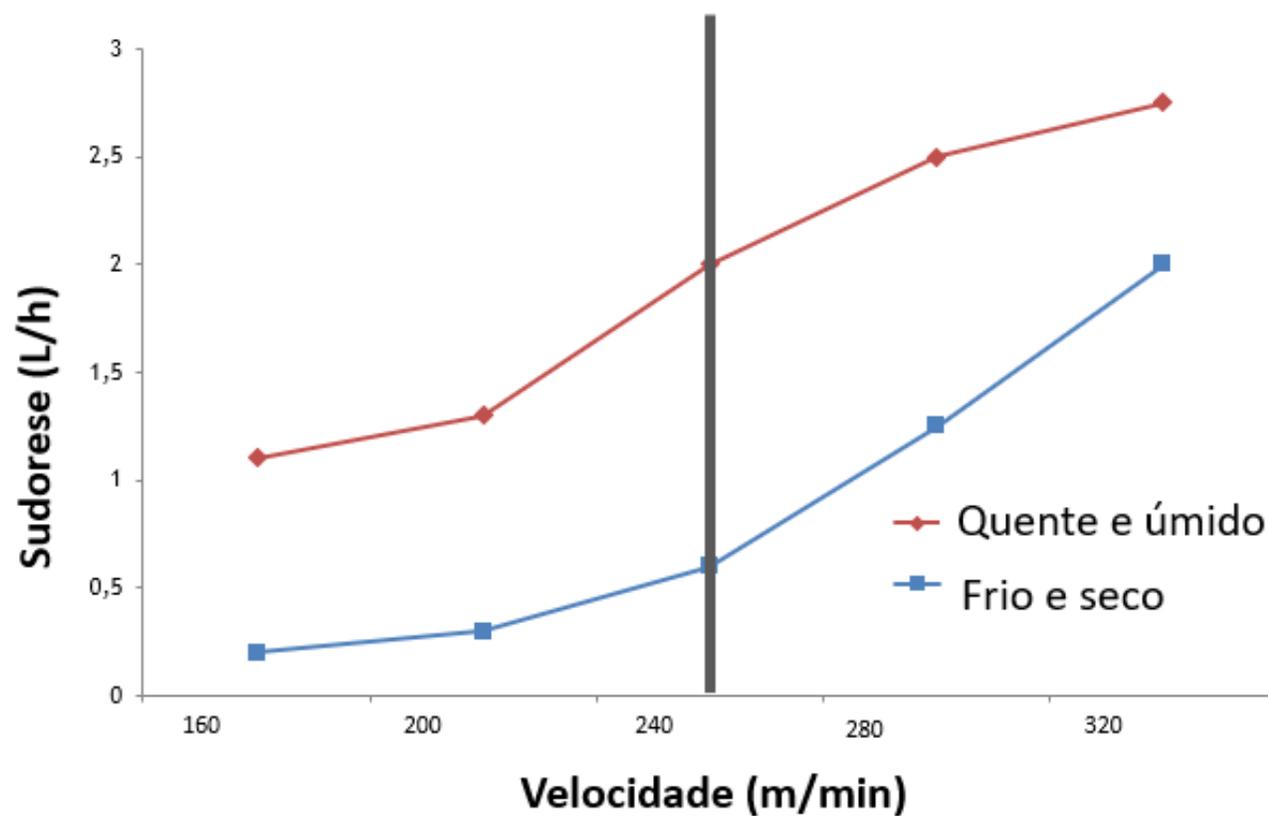


# As condições ambientais também...



Em ambientes úmidos, a alta saturação de água do ar dificulta a evaporação do suor

# As condições ambientais também...

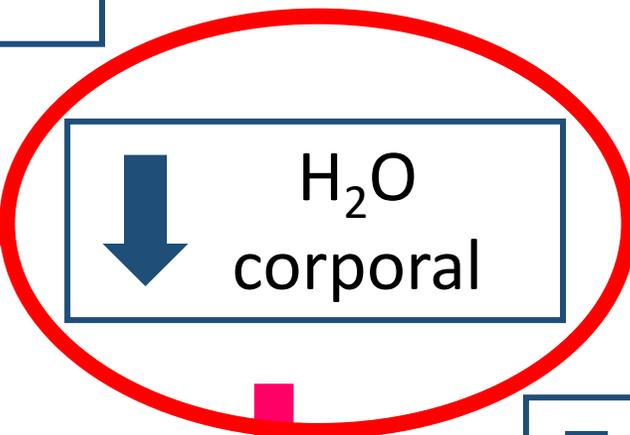
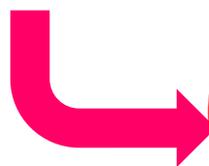


# Durante o exercício físico

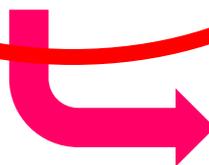
↑ Produção de calor



↑ Sudorese



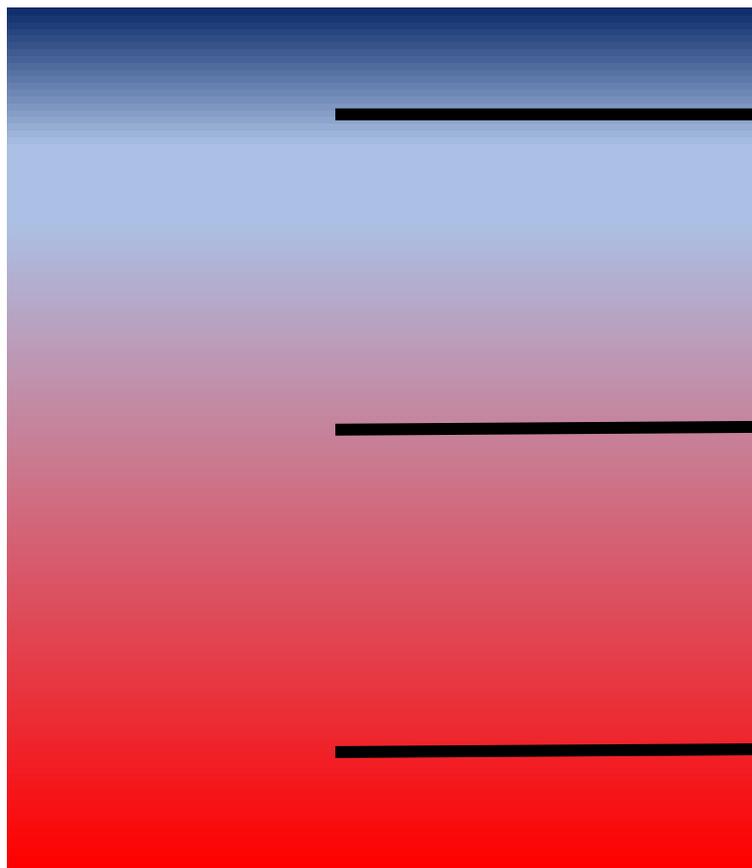
↓ H<sub>2</sub>O corporal



↓ Capacidade termorregulação



Hipertermia



hiperidratado

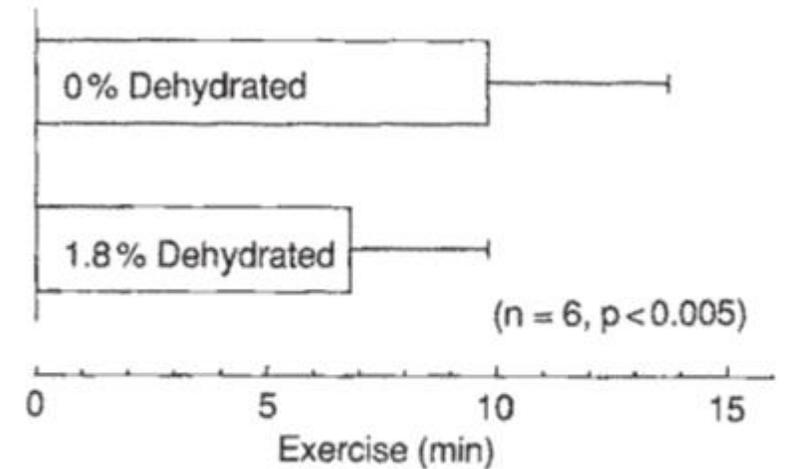
euidratado

hipoidratado



# Quais os efeitos da hipoidratação sobre o desempenho?

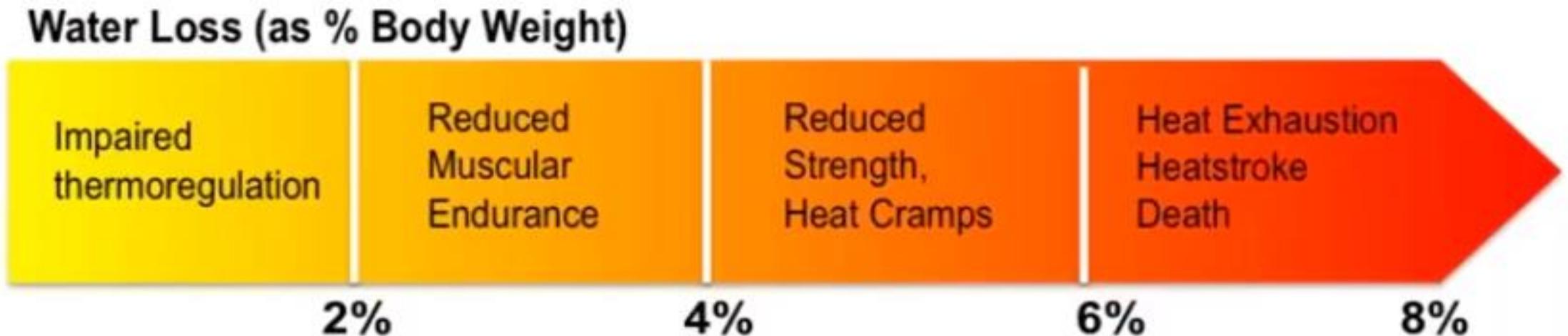
Time (min)		Rest	0	20	30	40	50	60
RPE	NF		2.0	2.8	2.8	3.0	3.6	3.8*
			1.1	0.4	0.8	0.6	0.7	0.8
	F		1.8	2.2	2.7	2.7	2.9	3.0
			1.0	1.0	0.8	0.8	0.9	0.6



**Fig. 2** Cycling time to exhaustion at 90 % of maximal oxygen uptake following 60 minutes of cycle exercise at 70 % of maximal oxygen uptake. Values are mean

## Impaired High-Intensity Cycling Performance Time at Low Levels of Dehydration

# Efeitos ergolíticos dependem do grau de hipoidratação



# Visão clássica é um pouco exagerada...

*High-Intensity Cycling Performance Time and Low Levels of Dehydration*

Time (min)		Rest	0	20	30	40	50	60
HR (bpm)	NF		148 13	153 11	154 13	159 13	161 15	163 13
	F		145 19	152 16	154 16	156 15	157 16	158 16
RPE	NF		2.0 1.1	2.8 0.4	2.8 0.8	3.0 0.6	3.6 0.7	3.8* 0.8
	F		1.8 1.0	2.2 1.0	2.7 0.8	2.7 0.8	2.9 0.9	3.0 0.6
T <sub>re</sub> (°C)	NF	37.1 0.5	37.4 0.5		37.9 0.2		38.2 0.2	38.2 0.4
	F	37.1 0.2	37.4 0.4		38.1 0.3		38.4 0.4	38.4 0.4
T <sub>sk</sub> (°C)	NF		37.2 0.7		34.3 0.2		34.2 0.6	34.2 0.6
	F		34.4 0.5		34.6 0.4		34.8 0.4	34.8 0.6
VO <sub>2</sub> (l)	NF			2.90 0.40		2.93 0.37		2.96 0.37
	F			2.87 0.37		2.93 0.42		2.91 0.40

2% do peso corporal NÃO alteram

Volume plasmático  
FC  
Temperatura central  
Temperatura da pele  
VO<sub>2</sub>

Possível benefício com peso baixo?

# Por que a hipoidratação é ergolítica?



Redução do vol. plasmático



Volume ejeção



FC



Viscosidade sanguínea



Aumento da temp. corporal



Recrutamento de un. motoras



Reduz transporte de oxigênio



Aumenta o recrutamento dos sistemas anaeróbios



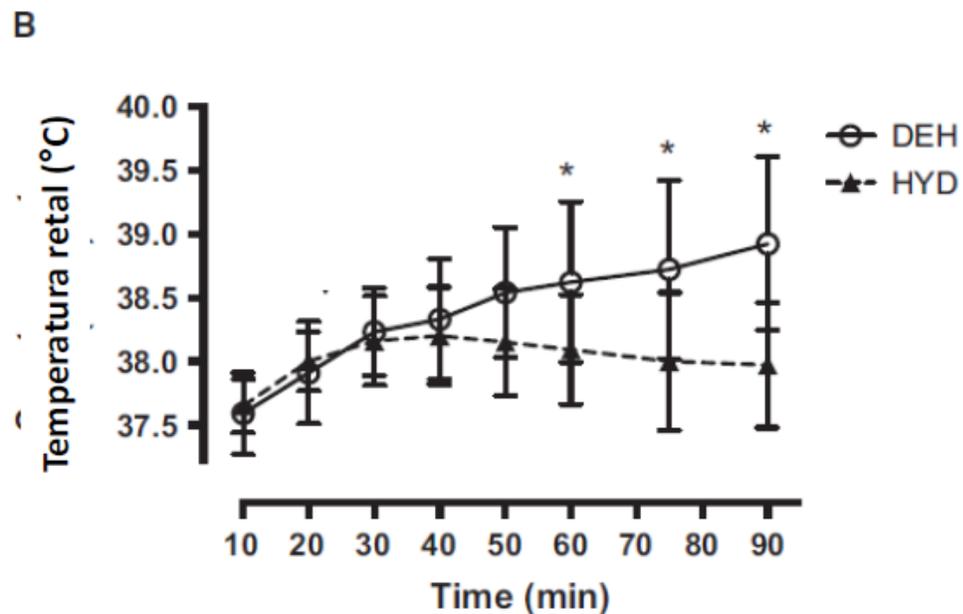
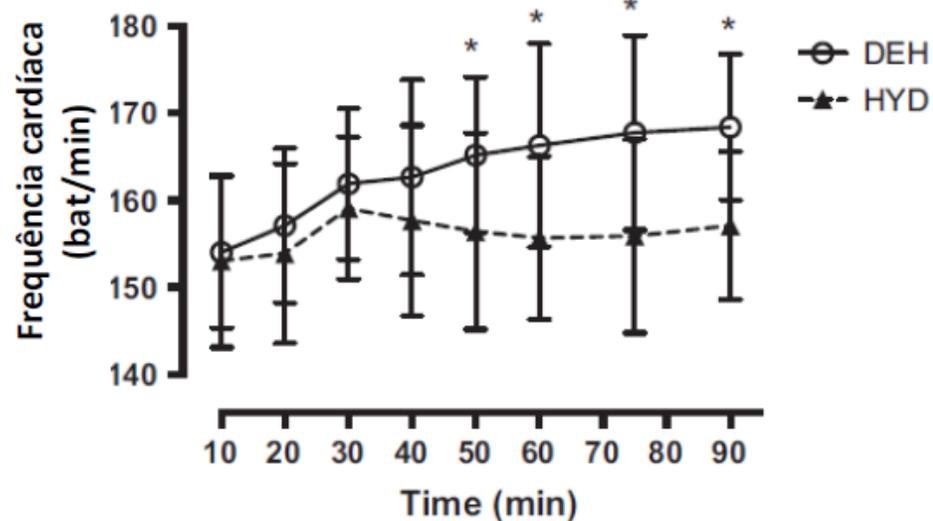
Percepção de fadiga

## The effect of dehydration on muscle metabolism and time trial performance during prolonged cycling in males

Heather M. Logan-Sprenger<sup>1</sup>, George J.F. Heigenhauser<sup>2</sup>, Graham L. Jones<sup>2</sup> & Lawrence L. Spriet<sup>3</sup>

- Ciclistas treinados;
- 90 minutos a 65% VO<sub>2</sub>máx;
- Seguido de um contrarrelógio de ~30km;
- A - Restrição hídrica VS sem restrição;

Início do exercício: -0,5% peso corporal  
Final do exercício: - 3% do peso corporal



# Heat stroke



## HEAT STROKE

Condição de risco que ocorre quando temperatura corporal >40° C

Redução drástica de sudorese

Alterações cardiovasculares (pulso rápido)

Confusão mental, dor de cabeça, agitação, letargia e até coma

Redução de função renal

### SIGNS AND SYMPTOMS

- Very high fever of 41 degree celsius
- Warm flushed dry or damp skin
- Intense thirst, dehydration
- Fast strong pulse
- Headache
- Dizziness
- Nausea
- Confusion
- Convulsion
- Unconsciousness

### TREATMENT OR REMEDY

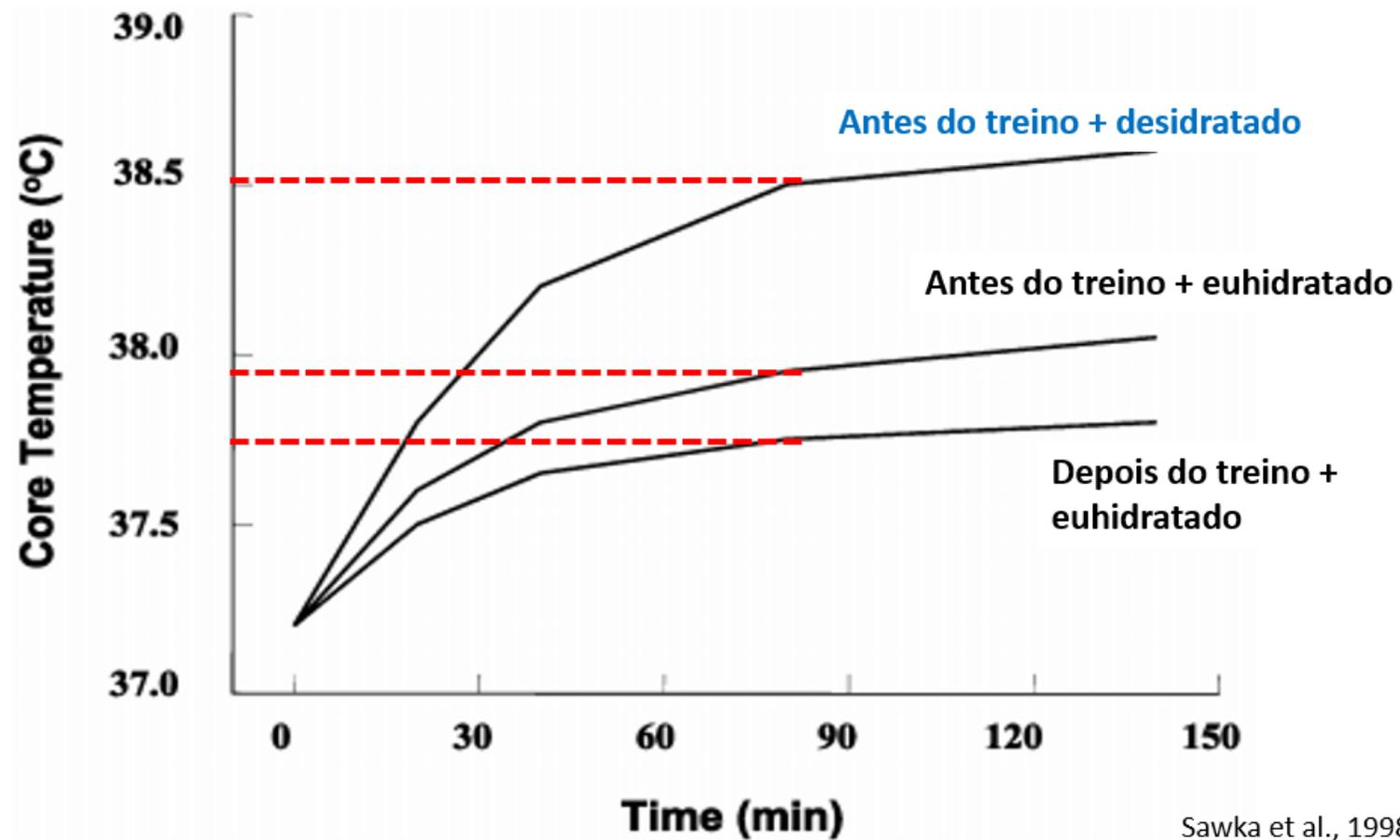
**Heat stroke is a medical emergency.**

Bring the patient immediately to the hospital after instituting emergency measures.

#### EMERGENCY MEASURES:

- Move the person to a shady spot or indoors
- Have him/her lie down with legs elevated
- Remove clothing, apply cool water to the skin, & fan the person
- Help lower the person's temperature by applying ice packs to the armpits, wrists, ankles & groin

# Aclimatação



Sawka et al., 1998

# Eficiência termorregulatória



Maior área de superfície e menor volume = maior perda de calor

Manter-se hidratado é importante!



# Consensual

- Começar o exercício em estado de euidratação (urina clara)
  - >> ao longo do dia: ~1 ml de água para cada 1 kcal gasta
  - >> ~4 horas antes do exercício: 5-7 ml/kg de peso de água

Consumo excessivo de água pré-exercício:

Apenas necessidade de ir ao banheiro durante o exercício.



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POSITION STAND

## SUMMARY

This Position Stand provides guidance on fluid replacement to sustain appropriate hydration of individuals performing physical activity. The goal of prehydrating is to start the activity euhydrated and with normal plasma electrolyte levels. Prehydrating with beverages, in addition to normal meals and fluid intake, should be initiated when needed at least

SPECIAL COMMUNICATIONS

## Exercise and Fluid Replacement

This pronouncement was written for the American College of Sports Medicine by Michael N. Sawka, FACSM (chair); Louise M. Burke, FACSM, E. Randy Eichner, FACSM, Ronald J. Maughan, FACSM, Scott J. Montain, FACSM, Nina S. Stachenfeld, FACSM.

and the impact of their imbalances on exercise performance and health. This position statement replaces the prior Position Stand on exercise and fluid replacement published in 1996 (39). The new Position Stand includes a Strength of Recommendation Taxonomy (SORT) to document the strength of evidence for each conclusion and recommen-

# Um pouco controverso



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Reposição hídrica deve ser suficiente para manter o peso corporal no limite de -2% do peso pré-exercício

Determinar a taxa de perda de peso (perdas hídricas) individualmente e em condições climáticas semelhantes às da prova, e planejar a reposição hídrica antecipadamente

TABLE 2. Observations of sweat rates, voluntary fluid intake and levels of dehydration in various sports. Values are mean, plus (range) or [95% reference range].

Sport	Condition	Sweat rate (L·h <sup>-1</sup> )		Voluntary fluid intake (L·h <sup>-1</sup> )		Dehydration (% BM) (= change in BM)	
		Mean	Range	Mean	Range	Mean	Range
Waterpolo [41]	Training (males)	0.29	[0.23–0.35]	0.14	[0.09–0.20]	0.26	[0.19–0.34]
	Competition (males)	0.79	[0.69–0.88]	0.38	[0.30–0.47]	0.35	[0.23–0.46]
Netball [16]	Summer training (females)	0.72	[0.45–0.99]	0.44	[0.25–0.63]	0.7	[+0.3–1.7]
	Summer competition (females)	0.98	[0.45–1.49]	0.52	[0.33–0.71]	0.9	[0.1–1.9]
Swimming [41]	Training (males & females)	0.37		0.38		0	(+1.0–1.4 kg)
Rowing [22]	Summer training (males)	1.98	(0.99–2.92)	0.96	(0.41–1.49)	1.7	(0.5–3.2)
	Summer training (females)	1.39	(0.74–2.34)	0.78	(0.29–1.39)	1.2	(0–1.8)
Basketball [16]	Summer training (males)	1.37	[0.9–1.84]	0.80	[0.35–1.25]	1.0	[0–2.0]
	Summer competition (males)	1.6	[1.23–1.97]	1.08	[0.46–1.70]	0.9	[0.2–1.6]
Soccer [130]	Summer training (males)	1.46	[0.99–1.93]	0.65	(0.16–1.15)	1.59	[0.4–2.8]
Soccer [89]	Winter training (males)	1.13	(0.71–1.77)	0.28	(0.03–0.63)	1.62	[0.87–2.55]
American football [62]	Summer training (males)	2.14	[1.1–3.18]	1.42	[0.57–2.54]	1.7 kg (1.5%)	[0.1–3.5 kg]
Tennis [15]	Summer competition (males)	1.6	[0.62–2.58]	~1.1		1.3	[+0.3–2.9]
	Summer competition (females)		[0.56–1.34]	~0.9		0.7	[+0.9–2.3]
Tennis [14]	Summer competition (cramp-prone males)	2.60	[1.79–3.41]	1.6	[0.80–2.40]		
Squash [18]	Competition (males)	2.37	[1.49–3.25]	0.98		1.28 kg	[0.1–2.4 kg]
Half marathon running [21]	Winter competition (males)	1.49	[0.75–2.23]	0.15	[0.03–0.27]	2.42	[1.30–3.6]
Cross-country running [62]	Summer training (males)	1.77	[0.99–2.55]	0.57	[0–1.3]	~1.8	
Ironman triathlon [133]	Temperate competition (males & females)						
	Swim leg					1 kg	(+0.5–2.0 kg)
	Bike leg	0.81	(0.47–1.08)	0.89	(0.60–1.31)	+0.5 kg	(+3.0–1.0 kg)
	Run leg	1.02	(0.4–1.8)	0.63	(0.24–1.13)	2 kg	(+1.5–3.5 kg)
	Total race			0.71	(0.42–0.97)	3.5%	(+2.5–6.1 %)

+ = gain in BM; ^not corrected for change in BM that occurs in very prolonged events due to factors other than fluid loss (e.g. metabolic fuel losses).

# Tênis como exemplo

- Taxa de sudorese: 1,6 L/h
- Tempo médio de partida: 2,5 h
- Total a ser ingerido: ~4 L

É viável?  
É seguro?

## Hiponatremia

[Na<sup>+</sup>] sangue <135 mM

Dor de cabeça

Desorientação

Sonolência

Confusão

Fraqueza

Perda de consciência

Risco de morte

ORIGINAL ARTICLE

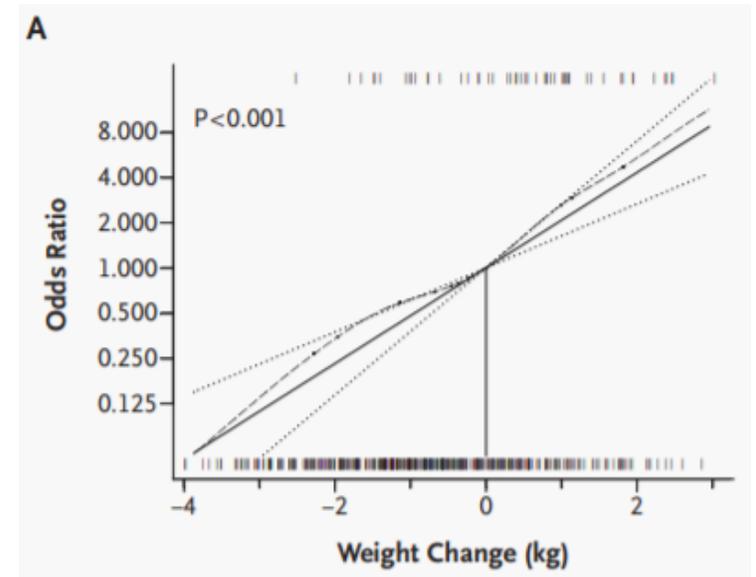
## Hyponatremia among Runners in the Boston Marathon

Christopher S.D. Almond, M.D., M.P.H., Andrew Y. Shin, M.D.,  
Elizabeth B. Fortescue, M.D., Rebekah C. Mannix, M.D., David Wypij, Ph.D.,  
Bryce A. Binstadt, M.D., Ph.D., Christine N. Duncan, M.D.,  
David P. Olson, M.D., Ph.D., Ann E. Salerno, M.D.,  
Jane W. Newburger, M.D., M.P.H., and David S. Greenes, M.D.

- 13% dos corredores terminaram a prova com hiponatremia
- 0,6% em hiponatremia grave (<120 mM)

### Fatores de risco:

- Ganho de peso
- Consumo >3 L de líquidos
- Consumo de líquidos a cada milha
- Tempo de prova >4 h



Tentar manter perdas  $<2\%$  parece razoável, mas a reposição excessiva também pode ser prejudicial

E se eu repuser sódio também (ex.: “isotônicos”)?

As bebidas esportivas são hipotônicas!

Product	Na <sup>+</sup> /240 mL (mg)	K <sup>+</sup> /240 mL (mg)	CHO/240 mL (g)	CHO source <sup>a</sup>	KCal/240 mL
Allsport	55	55	19	F	70
Cytomax	53	100	13	F, G	66
Endura	46	46	15	F, P	60
Exceed	50	45	17	F, P	70
Gatorade	110	30	14	F, P, S	50
Hydrafuel	25	50	16	F, G, P	66
Hy-5	40	70	13	F, M	50
Powerade	55	30	19	C, M, P	70
10 K	55	30	15	F, S	60
1 <sup>st</sup> Ade	55	25	16	C, F, G, S	60

# Definição de isotônico:

mesma concentração de eletrólitos do sangue

~140 de Na<sup>+</sup> mmol/L

ou

~770 mg de Na<sup>+</sup> em 240 mL

ou

3220 mg/L

Product	Na <sup>+</sup> /240 mL (mg)	l
Allsport	55	
Cytomax	53	
Endura	46	
Exceed	50	
Gatorade	110	
Hydrafuel	25	
Hy-5	40	
Powerade	55	
10 K	55	
1 <sup>st</sup> Ade	55	

Pela definição da ANVISA:

460 a 1150 mg/L

Consumo elevado de **bebidas isotônicas** também aumenta o risco de hiponatremia!

Existem vantagens no uso de isotônicos?

Sais facilitam a absorção de água

Mais palatáveis

Possuem carboidratos



# Beber pela sede seria uma estratégia mais segura?

WILDERNESS & ENVIRONMENTAL MEDICINE, 27, 192–202 (2016)

## VIEWPOINTS

### VIEW: Is Drinking to Thirst Adequate to Appropriately Maintain Hydration Status During Prolonged Endurance Exercise? Yes

Martin D. Hoffman, MD; James D. Cotter, PhD;  
Éric D. Goulet, PhD; Paul B. Laursen, PhD

*From the Department of Physical Medicine & Rehabilitation  
Department of Veterans Affairs, Northern California Health Care  
System, and University of California Davis Medical Center,  
Sacramento, CA, USA (Dr Hoffman); the Exercise and Environmental*



coupled with excessive concerns about dehydration and the need for adequate hydration to prevent decline in performance, heat illness, and muscle cramping, likely fueled by various organizational hydration guidelines. Because there have been several deaths, as well as other morbidity, from EAH,<sup>3</sup> a discussion to clarify current knowledge about proper hydration during exercise extends beyond merely being of academic interest.

#### Fluid Balance During Exercise

Glycogen oxidation during exercise results in mass loss, the extent of which depends on the intensity and duration of the exercise. Associated with the oxidation of glycogen is release of water, as 1 to 3 g of water are stored with every gram of glycogen.<sup>4</sup> Thus, it is important to recognize that a loss of body mass during moderate-to-high-intensity exercise does not necessarily imply dehy-

Reidratação voluntária  
é capaz de manter  
perda de peso ~2%,  
com baixo risco de  
sobrecarga hídrica