

International Journal of Physiology, Health and Physical Education



ISSN Print: 2664-7265
ISSN Online: 2664-7273
Impact Factor: RJIF 8
IJPHPE 2024; 6(2): 81-84
www.physiologyjournals.com
Received: 02-06-2024
Accepted: 11-07-2024

Dr. Shatha Hazim Gorgees
Assistant Professor,
Department of Physical
Education and Sports Sciences,
College of Education for Girls,
University of Mosul, Mosul,
Iraq

Response of blood sugar and accumulative sugar after high-intensity aero and UN aero effort for athletes and non-athletes

Dr. Shatha Hazim Gorgees

DOI: <https://doi.org/10.33545/26647265.2024.v6.i2b.74>

Abstract

The aim of the study: To measure levels of blood sugar and accumulative sugar After High-intensity Aero and Un Aero Effort for athletes and Non-Athletes
Know the differences between pre-post-tests regarding levels of Blood Sugar and Accumulated Sugar After High-intensity Aerobic and Uni-Aerobic Effort for athletes and non-athletes.
Research hypothesized the existence of moral differences in levels of blood sugar and accumulative sugar After High-intensity Aero and Un Aero Effort for athletes and Non-Athletes
Existence of moral differences between pre-post-tests regarding levels of Blood Sugar and Accumulative Sugar After High-intensity Aero and Un Aero Effort for athletes and Non-Athletes
The sample of research included (17) students enrolled in the athletic activity chosen intentionally and similar (17) students in other departments such as (history and geography)
The researcher used the following statistical means (arithmetic mean, standard deviation, t-test of related, variance factor)
The researcher concluded that aerial effort (Bruce) and aerial effort of high intensity had anoral variance on these variables (number of breathings, heartbeat, systolic
Neither high-tensity aerial and aerial efforts (Bruce) did not have any moral variance in accumulative blood sugar.

Keywords: High-intensity, non-athletes, heartbeat, sugar

Introduction

Humans seek and cling to any opportunity to have a good life with good health. Researches on athletes proved impact of high intense physical or aerobic exercise on metabolism of carbohydrates in muscles, using numerous ways and methods of training and measurement until fatigue while performing researches also concentrated on nutrition and nutritional preparation for athletes on the same level with physical or professional preparation for athletes in various athletic activities (www.iraq Sports Academy).

Need of specialists in athletic physiology and training increased to know importance of carbohydrates as an energy source during training of all kinds in 20th and 21st centuries, through laboratory or field studies to know all changes that happen during training depending on measuring biochemical changes in blood and muscles during aerobic and abaerobic exercise.

Blood sugar or glocuse is a basic element in producing energy in all important biological interactions to stabilize blood cells in life and to do required activities that will in sum represent how body works mentally and physically. Blood glocuse as well as klikogene of muscles are main energy source for muscles at the beginning of exercise when blood supplies of oxygen are less than required. Participation of blood glocuse and blood klikogene increase with intense of physial effort. It is known that in extreme intensens or near extreme intensens, carbohydrates (Blood glocuse and klikogene of muscles) are the main source to give muscles power. At this intensity, fats are excluded as a fuel (Abulullah, 1985, p 10) [5].

High intense aerobic exercise uses a certain amount of klikogene stored in muscles, this will increase efficiency of inculin for a certain period inculin plays an important role in organizing glocuse transference from blood stream into general tissues of muscles, increase store of glikogene and substitute what is consumed during activity.

Corresponding Author:
Dr. Shatha Hazim Gorgees
Assistant Professor,
Department of Physical
Education and Sports Sciences,
College of Education for Girls,
University of Mosul, Mosul,
Iraq

Due to increase demand of glucose by muscles during moderate physical activity, level of blood glucose decreases, such decrease is substituted by time via transferring stored glycogen in blood muscle glycogen and blood glucose are very important in forming what is known as ATP during muscle shrink modern studies confirm their importance in long physical exercises. These studies also stated that muscle fatigue is result of decrease in muscle glycogen or blood glucose (www.ShababNahda.com).

Exercises help to increase connectivity and integration of insulin in recipients found on cells of muscles making it easy for glucose to enter muscles, proving that insulin is responsible for transmitting glucose while training and these exercises increase its effect (Erik 1981, p 302) [9].

Importance of research comes from knowing glucose rate in blood, following the changes in its rate in blood after exercise so that interested in physical education know how to decrease training burden, how to distribute physical effort for students in practical lessons beginning from warming up throughout the whole course

Goals of research

Know Response of blood sugar level and accumulative sugar after high intense aerobic and anaerobic exercises for practitioners and non practitioners know differences between pre-post-tests in blood sugar level and accumulative sugar after high intense aerobic and anaerobic exercises for practitioners and non practitioners.

Hypotheses: Existence of morally significant differences in blood sugar level and accumulative sugar after high intense aerobic and anaerobic exercises for practitioners and non

practitioners Existence of morally significant differences between pre-post-tests in blood sugar level and accumulative sugar after high intense aerobic and anaerobic exercises for practitioners and non practitioners

Fields

Human: Students of college of basic education / university of Mosul.

Time: 6/11/2022 until 10/11/2022

Place: Physiology lab / college of basic education / department of physical education and sport sciences – outer field of college.

Procedures

Methodology: Researcher adopted descriptive method due to its appropriateness.

Society and sample

Society was students of college of basic education / university of Mosul after that researcher limited society to be students of the following departments (Physical education and sport sciences – history and geography). Both groups (Practitioners and non practitioners) were chosen on the following basis.

Practitioners were intentionally chosen.

Non practitioners were intentionally chosen.

Equation of research sample.

Equation between both groups was done in the following variables (height/age/weight) as shown in table (1) variance factor showed accepted equation between sample members.

Table 1: Means and deviations for height, weight, age

Statistical variances Subjects	Practitioners			Non practitioners		
	Arithmetic means	Standard deviation+	Variance factor	Arithmetic means	Standard Deviation+	Variance factor
Height	176,411	5,350	3,117	170,794	4,870	2,851
Weight	72,041	8,134	11,290	15,858	6,948	10,549
Age	23,235	1,855	7,983	21,588	1,416	6,559

Data collecting methods

Following appliances, tests, references, and measurements to collect data.

Tools

Height and weight measuring device from medical scale detector brand / American.

Upper arm electronic blood pressure device / china authorized by Madrid Spain S.A.H-Group.

Japanese device to measure blood glucose / contour brand

Trademill/ track master brand / American.

One-time use blood sugar measuring ribbons.

Picking a device to get a blood drop.

Picking needle.

Sanitizer digital timers to the nearest (1/10) per second.

Tests and measurements.

Bodily measurements.

Measuring height (cm) and weight (kg).

Height and weight of sample were taken using height and weight measuring device from medical scale detector. Student stands barefooted on scale with her back on fixed metal pole then a team assistant records weight and moves metal plate to reach student's head to get height in cm.

Measuring physiological variables.

Taking heart beat and blood pressure.

They were taken using digital device shrinking and recess blood pressures as well as heart beat were found the traditional way reading was done pre and post exercise.

Glucose concentration was taken pre and post exercise.

Sample fasted for (12) hours before test.

Measurement was done using blood glucose monitoring – contour system) with chemical detecting ribbons that give electric signal due to blood interaction signal differs according to different glucose concentrations of sample.

Steps: done the usual way to measure blood sugar.

Measuring accumulative sugar.

Triglycerides were measured after taking blood sample from testees after (120 hours fasting, twice pre-post exercise using analysis device to find out (HBAIC).

Physical test;

Aerobic exercise (Bruce test).

Aim: to reach longest endurance time for testee.

Tools: digital trademill with speed and steep scale.

Preparation: testee warm up for (5) minutes by going on trademill to walk or jog with speed of (6km/h) steep (4%) and rest for (5) minutes.

Conditions: Test consists of (7) stages with a different speed and steep for each stage. Every stage lasts for (3) minutes as shown on table (2).

Table 2: Test Stages with Speed and Steep Percentages

Features	Stages	Total time	Steep %	Speed (km/h)
1	Stage 1	1-3	10%	2,47
2	Stage 2	3-6	12	4,02
3	Stage 3	6-9	14	5,47
4	Stage 4	9-12	16	6,76
5	Stage 5	12-15	18	8,05
6	Stage 6	15-18	20	8,8
7	Stage 7	18-21	22	9,7

High intense abaerobic exercise:
Running from flying phase for (60 m) with an intense of (95%).

Aim; to know maximum speed.

Description; run with maximum speed from flying phase for (60 m) with least time.

Pilot experiment;

Took place on Sunday 6/11/2022 on 11:00 a.m. for 1 hour on sample so that sample members as well as assistants get accustomed to devices used, to measure all research variables except taking blood samples, to know obstacles that face researchers when carrying out main experience

Main experience

Took place on Thursday 10/11/2022 in physiology lab of department of physical education and sport sciences / college of basic education and outer field of college. blood sample was taken from testees, blood pressure, pulse, glocuse, then student warmed up for (5) minutes rested for 2 then came physical test as shown on table (2) to get the student to her limit on trademill after that team assistants took blood pressure, pulse and a second blood sample then measuring glocuse all sample member did experiment fasting in the same steps for abaerobic exercise

Statistical methods

Researchers used the following statistical methods;

Arithmetic means.

Standard deviation.

T-test for irrelated samples.

Variance factor.

Results

Table 3: Arithmetic means, standard deviations, t-value, probability, error rate, morality of research variables

Variables	Arithmetic means	Standard deviation	T value	Probability	Morality
Heartbeat pre-exercise	8,05	10,7	18,8	0,00	moral
Heart beat post exercise	14,01	6,5	18,8	0,00	moral
Shrinking pressure pre-exercise	116,8	8,9	9,02	0,00	moral
Shrinking pressure post exercise	141,3	3,9	9,02	0,00	Moral
Recess pressure pre-exercise	71,4	1,06	2,5	0,03	moral
Recess pressure post exercise	69	9,3	2,5	0,03	moral
Glocuse pre-exercise	89,70	6,46	9,9	0,00	moral
Glocuse post exercise	101,35	24,72	9,9	0,00	moral
Accumulative sugar level pre-exercise	4,90	0,27	0,7	045	immoral
Accumulative sugar level post exercise	4,94	0,26	0,7	0,45	Immoral

Moral at (0, 05) >level

Table (3) shows

Existence of morally significant differences between research variables except accumulative blood sugar t- values were (-18, 8 / -9, 02 / -9, 9) at the probability of (0, 00/ 0,

00/0, 03/0, 45) respectively at (0, 05) level-no morally significant differences in accumulative blood sugar. T-value reached (0, 7) at probability of (0, 45) at false ratio of (0, 05).

Table 4: Arithmetic means, standard deviations, t-value, probability, error rate, morality of research variables for non-athletes

Variables	Arithmetic means	Standard deviation	T value	Probability	Morality
Heart beat pre-exercise	80	10,7	19,1	0,00	moral
Heart beat post exercise	16,01	7,5	19,1	0,00	moral
Shrinking pressure pre-exercise	120,2	8,9	9,22	0,00	moral
Shrinking pressure post exercise	165,4	4,9	9,22	0,00	Moral
Recess pressure pre-exercise	78,6	10,6	2,8	0,02	moral
Recess pressure post exercise	75	9,34	2,8	0,02	moral
Glocuse pre-exercise	94,23	12,83	10,5	0,01	moral
Glocuse post exercise	87,35	8,14	10,5	0,01	moral
Accumulative blood sugar pre-exercise	5,5	0,29	0,9	0,48	immoral
Accumulative blood sugar post exercise	6,1	0,30	0,9	0,48	Immoral

Moarl at (0, 05) level

Table (4) shows that

Existence of morally significant differences between research variables except accumulative blood sugar, t-values

reached (19, 1/9, 22/2, 8/5, 10) at probability levels of (0, 00/0, 00/0, 02/0, 01).

No morally significant differences in accumulative sugar level. T-value was (0, 9) at probability level of (0, 48) at false rate of (0, 05).

Discussion

Regarding shrinking and recess blood pressure, heartbeats there are morally significant differences in favor of post-exercise for both samples due to the impact of physical exercise on the heartbeat to increase oxygen intake while exercising. Fox (1984) ^[12] says that there is a positive relation between speed of heart beat and intensity of physical exercise (Fox 1984, p 176) ^[12] current research agrees with (Al-Saffar 2002) ^[3], (Alawi and Abdulfattah, 2000) ^[6] and (Al-Dohuki, 2007) ^[2]

Researcher attributes morality of glucose for both samples that physical exercise lead to increase tissues ability to receive more insulin, carry sugar particles and burn them inside cells engaging in a physical effort body stops insulin hormone (Because there is need for glucose) in return some antihormones increases (Glogakon, catocolamin, cortezol, and growth hormon) (Bahaj ahlamontada.com/t topic). These hormones urge liver to decompose glicogene found in liver into glucose (To be source of energy) some hormones help in preparing fatty acids to be used as fuel for muscles moreover increased concentration of catoclammin (Specially during high intensity physical exercise) in blood contributes to make clicogene of muscles, the perfect fuel of shrinking muscles during the increased intensity of physical activity, physical activity decreases insululin from pankerias leading to increased sensitivity of insulin recipients in muscles (Rvoti *et al.*, 1994, p 35) ^[10], meaning that less amount of insulin becomes more efficient to let glucose into muscle. Another thing helps to increase muscle's intake of glucose in blood which is regular workout to increase glucose transmitters through cell membrane (Paitakari *et al.*, 1997, p 1055) ^[11].

Workouts cause deep changes in glucose sugar. Exercises usually lower glucose concentration in blood fast while abaeobics do just the opposite (Erik, 1981, p 302) ^[9].

Current research agrees with (Al-Hazaa, 2004) ^[7] and a french study form Louis Pastor university (cf www.albawaba.com/ar)

Regarding immoral change in accumulative sugar of two samples, researcher attributes it to the fact that this variable is attached to surface of red blood cells. (AIC) results showed that mean of blood sugar in the past 2-3 months. specifically speaking (AIC) shows percentage of hymoglobin protiens in blood covered by sugar hymoglobin protiens found in red blood cells moves oxygen glucose remains attached to hymoglobin through life circle of red blood cells that is usually (120) days (<http://www.mayoclinic.org>) so period of this test was ineffective regarding the rate of this kind of sugar

Conclusion and Recommendations

Conclusion

High intensity aerobic effort (Bruce) and abaeobics effort brought a moral change in variables of (Times of breathing, heartbeats, shrinking and recess blood pressures, blood sugar) for athletes.

High intensity aerobic effort (Bruce) and abaeobics effort brought a moral change in variables of (Times of breathing, heartbeats, shrinking and recess blood pressures, blood sugar) for non-athletes.

High intensity aerobic effort (Bruce) and abaeobics effort didn't have any moral difference on accumulative blood sugar for athletes.

High intensity aerobic effort (Bruce) and abaeobics effort didn't have any moral difference on accumulative blood sugar for non-athletes.

Recommendations

Compare results of current research on a sample of females Measure more physiological variables like laktite due to its importance.

Make current research in different temperatures.

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