1 Title: 2 Isothermic and fixed intensity heat acclimation methods elicit equal increases in Hsp72 mRNA. 3 4 2. Submission Type: 5 **Original Investigation** 6 7 3. Names of Authors: 8 ¹Oliver R. Gibson, University of Brighton 9 ¹ Jessica A. Mee, University of Brighton ²Lee Taylor, University of Bedfordshire 10 11 ² James A. Tuttle, University of Bedfordshire ¹Peter W. Watt, University of Brighton 12 13 ¹Neil S. Maxwell, University of Brighton 14 4. Contact Details: 15 ¹Oliver Gibson, <u>o.r.gibson@brighton.ac.uk</u> Centre for Sport and Exercise Science and Medicine (SESAME), 16 University of Brighton, Welkin Human Performance Laboratories, Denton Road, Eastbourne, UK 17 18 ² Muscle Cellular and Molecular Physiology (MCMP) and Applied Sport and Exercise Science (ASEP) 19 20 Research Groups, Department of Sport Science and Physical Activity, Institute of Sport and Physical Activity 21 Research (ISPAR), University of Bedfordshire, Bedford Campus, Polhill Avenue, Bedfordshire, UK 22 23 5. Preferred Running Head 24 Hsp72 responses to Heat Acclimation methods. 25 26 6. Abstract Word Count 27 214 28 29 7. Text Word Count 30 4,777 31 32 8. Number of Figures and Table 33 Three figures. Two tables. 34 35 9. Keywords: 36 Thermoregulation, Heat Stress, Cellular Stress Response, Hyperthermia, Thermotolerance, Heat Shock Protein 37 72, Heat Illness.

38 Abstract

Thermotolerance, to which Heat shock protein-72 (Hsp72) contributes, is an acquired state achieved following
heat acclimation (HA), eliciting cellular adaption and protection against thermal stress. Optimal HA methods
achieving the greatest heat shock response (HSR) are equivocal; therefore investigation of methods provoking
the greatest sustained HSR is required to optimise cellular adaptation.

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44 Twenty four males performed short term HA (STHA; five sessions) and long term HA (LTHA; STHA plus 45 further five sessions) utilising fixed intensity (FIXED; workload = $50\%\dot{V}O_{2peak}$), continuous isothermic HA 46 (ISO_{CONT}; target rectal temperature (T_{rec}) = 38.5° C) or progressive isothermic HA (ISO_{PROG}; target T_{rec} = 38.5° C 47 for STHA then target T_{rec} = 39.0° C for LTHA). Leukocyte Hsp72 mRNA was measured pre and post day 1, day 48 5 and day 10 of HA via qRT-PCR to determine the HSR.

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50 Hsp72 mRNA increased (p < 0.05) pre to post day 1, pre to post day 5, and pre to post day 10 in FIXED, ISO-51 _{CONT} and ISO_{PROG}, but no differences were observed between methods (p > 0.05). The equal Hsp72 mRNA 52 increases occurring from consistent, reduced or increased endogenous strain following STHA and LTHA 53 suggest that transcription occurs following attainment of sufficient endogenous criteria. These data give 54 confidence that all reported HA methods increase Hsp72 mRNA and are capable of eliciting adaptations towards 55 thermotolerance.

57 Introduction

58 Repeated exposure to stressful thermal environments initiates a phenotypic heat adaptation known as heat 59 acclimation (HA) (Garrett et al. 2011), an element of which has been identified as thermotolerance (Moseley 60 1997). Thermotolerance (Moseley 1997), or acquired cellular thermotolerance (McClung et al. 2008), describes 61 the cellular adaptation accompanying systemic changes (Magalhães et al. 2010b; Sawka et al. 2011; Hom et al. 62 2012) induced by successful HA. Acquired cellular thermotolerance confers cytoprotection against subsequent 63 thermal exposure, translating to complimentary reductions in endogenous physiological and systemic strain (Yamada et al. 2007; McClung et al. 2008). An established element of acquired cellular thermotolerance 64 65 involves changes in heat shock proteins (HSP) (Moseley 1997); in particular increases in the inducible, and 66 thermosensitive protein heat shock protein HSPA1A (HSP72) (McClung et al. 2008; Beckham et al. 2008; 67 Kampinga et al. 2009) following transcription of its gene (Hsp72 mRNA) as part of the heat shock response 68 (HSR).

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70 Increased basal HSP72 is commonly reported following repeated exercise-heat stress, as is the inducibility of 71 the protein (Maloyan et al. 1999; McClung et al. 2008; Selkirk et al. 2009; Magalhães et al. 2010b; Amorim et 72 al. 2011). Previously, extracellular HSP72 (eHSP72) has been used as a marker of the stress response. In spite of 73 an established eHSP72 response to sufficient exercise-heat stress (Marshall et al. 2006; Yamada et al. 2007; 74 Ogura et al. 2008; Magalhães et al. 2010b; Périard et al. 2012; Gibson et al. 2014), the mechanisms leading to an 75 increase in circulating concentration are equivocal (Fleshner and Johnson 2005; Lancaster and Febbraio 2005b; 76 Lancaster and Febbraio 2005a). Additionally, the biological role of eHSP72 appears more closely linked to an 77 immunological response, rather than a process favourably augmenting thermotolerance, and the associated 78 cytoprotective adaptations (Asea 2006). The measurement of intracellular HSP72 is optimal for determining 79 cellular responses to HA (Magalhães et al. 2010b). HA increases basal HSP72, improving the cellular defence of 80 heat stress, and also leading to augmented translation during heat stress (Maloyan et al. 1999). The measurement 81 of HSP72 gene expression (Hsp72 mRNA) therefore offers an alternative marker of the magnitude of the 82 cellular stress response, and subsequent initiation of protein transcription required for increased thermotolerance 83 (Maloyan and Horowitz 2002). Based upon previous data (Maloyan et al. 1999) HA should increase the 84 measured Hsp72 mRNA transcription, a process primarily regulated by Heat shock factor protein 1 (HSF-1) as 85 part of the HSR (Kregel 2002).

HSF1 activation involves a complex series of regulatory events, including nuclear localization, oligomerisation
and acquisition of HSE–DNA binding, ultimately resulting in the transcription of Hsp72 mRNA (Sarge et al.
1993), this in response to the magnitude of thermal and physiological challenge (Maloyan et al. 1999; McClung
et al. 2008).

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92 Fixed intensity HA methods (Houmard et al. 1990; Nielsen et al. 1993; Nielsen et al. 1997; Cheung and 93 McLellan 1998; Kresfelder et al. 2006; Marshall et al. 2007; Yamada et al. 2007; Watkins et al. 2008; 94 Sandström et al. 2008; Lorenzo et al. 2010; Lorenzo and Minson 2010; Amorim et al. 2011; Castle et al. 2011) 95 derive exercise intensity from pre acclimation baseline testing with the workload and exogenous environment 96 consistent day to day. Whilst thermal stress may be sufficient for the initial sessions of HA, with ongoing 97 adaptation, the relative potentiating stimuli may diminish along with the rate of adaptation, even to the extent 98 that the latter stage of HA are analogous to a reduction in stress (Taylor and Cotter 2006; Taylor 2014). 99 Isothermic HA, also known as controlled hyperthermia, (Patterson et al. 2004; Magalhães et al. 2006; Garrett et 100 al. 2009; Magalhães et al. 2010a; Magalhães et al. 2010b; Hom et al. 2012; Garrett et al. 2012; Castle et al. 101 2012; Garrett et al. 2014; Patterson et al. 2014) imposes session-by-session workloads based upon targeted 102 endogenous criteria (core temperature \geq 38.5°C), thus sustaining potentiating stimuli throughout the intervention 103 via a combination of active then passive heat exposure (Fox et al. 1963).

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The aim of the present study was to identify differences in Hsp72 mRNA response to exogenously controlled, fixed intensity HA, an endogenously controlled isothermic HA method, and a progressive endogenous isothermic HA method. We hypothesised that Hsp72 mRNA would increase following completion of an acute HA session, irrespective of the method used; however isothermic methods would sustain the magnitude of increase throughout acclimation due to sustained elevations in core temperature, with an increase in target core temperature progressively increasing transcription.

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112 Methods

113 Participants

114 Twenty-four healthy males were assigned into fixed intensity HA (FIXED) (n = 8) continuous isothermic HA 115 (ISO_{CONT}) (n = 8) or progressive isothermic HA (ISO_{PROG}) (n = 8), see Table 1 for descriptive characteristics. 116 Confounding variables of smoking, caffeine, glutamine, alcohol, generic supplementation, prior thermal, 117 hypoxic, and hyperbaric exposures were all controlled in line with previous work in the field (Taylor et al. 2011; 118 Gibson et al. 2014). Following full description of experimental procedures, the methods were approved by the

119 institutional ethics committee. All participants completed medical questionnaires and provided written informed

120 consent following the principles outlined by the Declaration of Helsinki of 1975, as revised in 2013.

121

122 *Preliminary Testing*

Participants consumed 500 mL of water 2 h before all preliminary and experimental exercise sessions (Sawka et 123 124 al. 2007). A urine osmometer (Alago Vitech Scientific, Pocket PAL-OSMO, UK) ensured consistent hydration 125 prior to each experimental session (Garrett et al. 2014) in accordance with established urine osmolality (<700 126 mOsm·Kg⁻¹ H₂O (Sawka et al. 2007)), if this criterion was not met participants consumed 500 mL of water and 127 rested until hydration criteria was achieved. Prior to the VO_{2peak} determination, height (cm) was measured using 128 a fixed stadiometer (Detecto Physicians Scales; Cranlea & Co., Birmingham, UK) and NBM recorded to 0.01 kg 129 from digital scales (ADAM GFK 150, USA). Body fat (%) was calculated (Siri 1956) from body density, 130 derived from a four site skin fold calculation (Durnin and Womersley, 1974) using skin fold calipers 131 (Harpenden, Burgess Hill, UK) with body surface area also calculated later (Du Bois and Du Bois 1916).

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¹³³ VO_{2peak} (L.min⁻¹) was determined from an incremental test on a cycle ergometer (Monark e724, Vansbro,
¹³⁴ Sweden) in temperate conditions (20°C, 40% relative humidity (RH). Saddle position was adjusted by the
¹³⁵ participant to their preferred cycling position and remained unchanged for all experimental trials. Starting
¹³⁶ intensity was set at 80 W with resistance applied to the flywheel eliciting 24 W.min⁻¹ increases at the constant
¹³⁷ cadence of 80 rpm. Heart rate (HR; b.min⁻¹) was monitored continually during all exercise tests by telemetry
¹³⁸ (Polar Electro Oyo, Kempele, Finland). Expired metabolic gas was measured using an online system (Metamax
¹³⁹ 3X, Cortex, Germany). VO_{2peak} was considered the highest VO₂ obtained in any 10 s period.

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141 *Heat Acclimation Protocol*

Each HA testing session was conducted in the morning $(08:00 \pm 01:00 \text{ h})$ to minimise daily variation in performance (Drust et al. 2005). Following provision of a urine sample and measurement of NBM, each participant was equipped with a rectal thermistor (Henleys Medical, UK, Meter logger Model 401, Yellow Springs Instruments, Yellow Springs, Missouri, USA) and a HR monitor. Resting measures, including pre- and post-session venous blood samples, were taken whilst participants were seated in temperate laboratory conditions. Following resting measures, participants mounted a cycle ergometer (Monark, e724, Vansbro, 148 Sweden) located inside an environmental chamber and commenced exercising ($40.2 \pm 0.4^{\circ}$ C, $39.0 \pm 7.8\%$ RH; 149 WatFlow control system; TISS, Hampshire, UK). FIXED participants performed all ten 90 min sessions cycling 150 continuously at a workload corresponding to 50% $\dot{V}O_{2peak}$ (80 rpm; 50% $\dot{V}O_{2peak} = 1.90 \pm 0.30 \text{ L.min}^{-1}$, power at 151 50% $\dot{V}O_{2peak} = 125 \pm 30$ W). ISO_{CONT} (65% $\dot{V}O_{2peak} = 2.19 \pm 0.34$ L.min⁻¹, 175 ± 27 W) and ISO_{PROG} (65% 152 $\dot{V}O_{2peak} = 2.46 \pm 0.46 \text{ L.min}^{-1}$, 197 ± 36 W) participants began exercising at a workload corresponding to 65% of 153 \dot{VO}_{2peak} until a target T_{rec} of 38.5°C or 39.0°C was achieved, respectively. ISO_{CONT} targeted a T_{rec} of 38.5°C for 154 all ten sessions, whereas ISO_{PROG} targeted a T_{rec} of 38.5°C for the first five sessions progressing to a T_{rec} of 155 39.0°C for the final five sessions. In both ISO_{CONT} and ISO_{PROG}, once target T_{rec} had been reached, power was adjusted every 5 min, first by a 25% $\dot{V}O_{2peak}$ reduction, and then adjusted (± 5% $\dot{V}O_{2peak}$, or seated rest) to 156 157 maintain the experimental T_{rec} for a total session duration of 90 min, exercising duration was calculated based 158 upon the duration of cycling required to reach, and then maintain the target T_{rec} in ISO_{CONT} and ISO_{PROG}. All 159 participants in ISO_{CONT} and ISO_{PROG} were required to rest during both STHA (ISO_{CONT} = 23 ± 9 min.session⁻¹; 160 $ISO_{PROG} = 37 \pm 9 \text{ min.session}^{-1}$ and LTHA ($ISO_{CONT} = 19 \pm 10 \text{ min.session}^{-1}$; $ISO_{PROG} = 30 \pm 9 \text{ min.session}^{-1}$), 161 exercise was resumed once core temperature reduced below 38.5° C. During each testing session HR, T_{rec} and 162 power output were recorded every 5 min, a visual representation of the exercise intensities and T_{rec} responses to 163 STHA and LTHA are presented in Figure 1.

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Blood Sampling, RNA extraction and One step reverse transcription quantitative polymerase chain reaction
(RT-QPCR)

167 Venous blood samples were taken immediately pre- and post- exercise-heat exposure on the first, fifth and tenth 168 experimental sessions for FIXED, ISO_{CONT} and ISO_{PROG}. All blood samples were drawn from the antecubital 169 vein into 6 mL EDTA Vacuette tubes (Grenier BIO-one, UK). 1 mL of venous blood was pipetted into 10 mL of 170 1 in 10 red blood cell lysis solution (10X red blood Cell Lysis Solution, Miltenyi Biotech, UK). Samples were 171 incubated for 15 min at room temperature then isolated via centrifugation at 400G for 5 min and washed twice 172 in 2 mL PBS at 400G for 5 min to isolate all leukocytes. RNA was then extracted via the previously validated acid guanidium thiocyanate-phenol-chloroform extraction method (Chomczynski and Sacchi 1987). Quantity 173 174 was determined at an optical density of 260 nm while quality was determined via the 260/280 and 260/230 175 ratios using a nanodrop spectrophotometer (Nanodrop 2000c Thermo Scientific).

177 Hsp72 relative mRNA expression (Hsp72 mRNA) was quantified using RT-QPCR. Primers β2-Microglobulin 178 (B2-M; NCBI Accession number: NM 004048; Forward CCGTGTGAACCATGTGACT, Reverse, 179 TGCGGCATCTTCAAACCT) and Hsp72 (NCBI Accession number: NM_005345; Forward 180 CGCAACGTGCTCATCTTTGA, Reverse TCGCTTGTTCTGGCTGATGT) were designed using primer 181 design software (Primer Quest and Oligoanalyzer - Integrated DNA technologies). 20 µL reactions containing 182 10 µL SYBR-Green RT-PCR Masternix (Quantifast SYBRgreen Kit, Qiagen), 0.15 µL forward primer, 0.15 183 µL reverse primer, 0.2 µL reverse transcription mix (Quantifast RT Mix, Qiagen) and 9.5 µL sample (70 ng 184 RNA/µL) were prepared in separate tubes. Each PCR reaction (Rotorgene Q, Qiagen, Manchester, UK) was 185 then performed as follows: 10 min, 50°C (reverse transcription), 5 min 95°C (transcriptase inactivation and 186 initial denaturation); followed by: 10 s, 95°C (denaturation), 30 s, 60°C (annealing and extension) for 40 cycles. 187 Fluorescence was measured following each cycle as a result of the incorporation of SYBR green dye into the 188 amplified PCR product. Melt curves (50 to 95°C; Ramp protocol 5s stages) were analysed for each reaction to 189 ensure only the single gene of interest was amplified. A comparative critical threshold (CT) method was used to 190 quantify Hsp72 mRNA in comparison with β 2-M (Schmittgen and Livak 2008).

191

192 *Statistical Analysis*

193 All outcome variables were first checked for normality using Kolmogorov-Smirnov and sphericity using the 194 Greenhouse Geisser method prior to further analysis. Two way mixed design ANOVA were performed to 195 determine differences in dependent variables between HA methods for STHA and LTHA timescales (between 196 HA methods and Day 1, Day 5 and Day 10). A three way mixed design ANOVA was performed on the Hsp72 197 mRNA data to determine differences between pre and post value (repeated measures - within subjects) on 198 different days (repeated measures - within subjects) from independent HA methods (between subjects). 199 Adjusted Bonferroni comparisons were used as post hoc analyses, determining where differences existed within 200 ANOVA when a time or interaction was found. Data are reported as mean \pm SD, with two-tailed significance 201 was accepted at p < 0.05.

202

203 Results

204 Participant Characteristics

No differences (p > 0.05) existed between groups for descriptive variables height, NBM, BSA, body fat % or \dot{VO}_{2peak} . A difference (p < 0.05) was observed for age whereby ISO_{PROG} was older than FIXED (+6.5 years).

Resting T_{rec} was reduced (p = 0.002), and sweat loss increased (p = 0.002) overall, with a significant reduction between Day 1 and Day 10 (p = 0.003 and p = 0.002 respectively), no interaction effects were observed for resting T_{rec} (; p = 0.592) or sweat loss (p = 0.281), figure 2. Resting HR demonstrated a significant overall effect (p < 0.001) and interaction effect (p = 0.009), with significant differences observed between Day 1 and Day 5 (p = 0.001) and Day 1 and Day 10 (p = 0.001) in ISO_{CONT}, and a difference between ISO_{PROG} and FIXED (p = 0.043), and ISO_{PROG} and ISO_{CONT} (p = 0.015) on Day 1, and between FIXED and ISO_{CONT} (p = 0.038), and FIXED and ISO_{PROG} (p = 0.023) on Day 10, figure 2.

216

217 Session Specific Data

Exercising duration (p = 0.001), mean session intensity (p = 0.002), total work done (p < 0.001), mean T_{rec} (p = 0.002), duration T_{rec} $\geq 38.5^{\circ}$ C (p = 0.011), mean HR (p = 0.019), and peak HR (p < 0.001) all demonstrated overall differences between days, no between day difference was observed for peak T_{rec} (p = 0.226) or duration T_{rec} $\geq 39.0^{\circ}$ C (p = 0.245).

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Exercising duration (p = 0.004), mean session intensity (p = 0.000), total work done (p = 0.004), mean T_{rec} (p = 0.010), peak T_{rec} (p = 0.004), duration T_{rec} $\geq 38.5^{\circ}$ C (p = 0.008), duration T_{rec} $\geq 39.0^{\circ}$ C (p = 0.005) all demonstrated interaction effects, no interaction effect was observed for mean HR (p = 0.077) or peak HR (p = 0.588). See Table 2 for full post hoc analysis.

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228 No differences between days or the interaction effect were observed for mean exercising intensity (p = 0.124; p229 = 0.061), change T_{rec} (p = 0.227; p = 0.109).

230

231 Hsp72 mRNA responses

No differences in Hsp72 mRNA were observed between days (p = 0.236) or across HA methods between days (p = 0.167). Hsp72 mRNA did increase Pre to Post overall (p < 0.001), and Pre to Post over time (p = 0.034); Day 1 (p < 0.001), Day 5 (p < 0.001) and Day 10 (p < 0.001). No Pre to Post difference occurred between HA

235 methods (p = 0.069) or for the Pre to Post, between day, between HA methods interaction (p = 0.217); on Day 1

236 (FIXED; 2.3 ± 1.0 to 6.4 ± 2.8 , ISO_{CONT}; 1.9 ± 0.6 to 4.4 ± 1.1 and ISO_{PROG}; 1.9 ± 0.8 to 7.1 ± 2.9), Day 5

237 (FIXED; 2.3 ± 0.8 to 4.2 ± 2.2 , ISO_{CONT}; 2.3 ± 0.8 to 5.3 ± 2.5 and ISO_{PROG}; 2.2 ± 0.5 to 6.3 ± 2.2) and Day 10

238 (FIXED; 2.3 ± 0.7 to 4.3 ± 2.0 , ISO_{CONT}; 2.1 ± 0.7 to 4.3 ± 1.3 and ISO_{PROG}; 2.0 ± 0.5 to 6.1 ± 1.7).

240 Discussion

241 The aim of this experiment was to determine whether there was a difference in the change in leukocyte Hsp72 242 mRNA expression between fixed intensity, continuous isothermic, and progressive isothermic methods during 243 STHA and LTHA. Participants were successfully matched for anthropometric descriptive data and VO_{2peak}. 244 ISO_{PROG} participants were observed as older than FIXED although the magnitude of difference is not 245 physiologically relevant with regards to heat stress responses (Kenny et al. 2010). An anticipated increase in 246 Hsp72 mRNA expression was observed pre to post each session of exercise-heat stress across all groups overall. 247 No statistical difference in Hsp72 mRNA existed between HA methods, either pre or post acclimation on day 1, 248 day 5 or day 10.

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250 In spite of diminished endogenous stress in FIXED due to the ongoing HA adaptations the reduction was not to 251 the extent that mRNA was statistically reduced on day 5 or day 10. Consequently equal signals for the attainment of thermotolerance are present in FIXED (active heat acclimation) as ISO_{CONT} and ISO_{PROG} methods 252 253 (active and passive acclimation). This is an important observation which suggests that exercise per se is not as 254 significant as hyperthermia. No significant pre to post increase in Hsp72 mRNA was observed by implementing 255 a progressive increase in core temperature/hyperthermia (38.5°C to 39.0°C) suggesting targeting a Tree of 38.5°C 256 is sufficient. The reduced endogenous thermal strain (mean T_{rec} , peak T_{rec} , and duration $T_{rec} \ge 38.5^{\circ}$ C) did not 257 attenuate Hsp72 mRNA responses observed following FIXED between day 1 and day 5 (following STHA) and 258 day 10 (following LTHA) (Table 2). Previous data from our laboratory has shown FIXED day 1 presents 259 equivalent endogenous strain to that elicited at 50% VO_{2peak} in 40°C, whereas day 10 presents strain equivalent 260 to working at the same intensity in just 30°C (Gibson et al. 2014). This reduction in strain due to the ongoing 261 adaptive process of HA. The attenuated endogenous criteria were not apparent within isothermic methods 262 demonstrating the effectiveness of these methods at targeting core temperatures. Correspondingly Hsp72 263 increases were also maintained each day as previously within the field (Magalhães et al. 2010b). Our data 264 further implicates these endogenous thermoregulatory markers as the most relevant signals for manipulating 265 Hsp72 mRNA (Magalhães et al. 2010b) with all the methods tested providing sufficient endogenous stimuli for 266 Hsp72 mRNA transcription. Different duration exercising and workload intensity across day 1 and day 5 and 267 day 10 do not appear relevant contributors to the Hsp72 mRNA response within our experimental design, and 268 are in accordance with previous suggestions (Hom et al. 2012). These observations, that hyperthermia rather 269 than exercise is an important signal for Hsp72 transcription is supported by the equal post exercise expression 270 using active then passive acclimation in ISO_{CONT} and ISO_{PROG}, as active only in FIXED. This is in agreement 271 with other passive heating data (Maloyan et al. 1999). It is not known if this is true of the mean exercise 272 intensity required of each method which, despite not being significantly different between methods, may 273 influence the magnitude of the mRNA response during heat acclimation (e.g. if the FIXED intensity group 274 exercised at an intensity >50% VO_{2peak}). Increased relative exercise intensity proportionally increases metabolic 275 heat production, thus increasing core temperature (Mora-Rodriguez et al. 2008) which is associated with 276 increased HSP72 (Mestre-Alfaro et al. 2012). This exogenous parameter of exercise-heat stress therefore cannot 277 be disassociated from changes in Hsp72 mRNA in spite of a secondary rather than causal role (Liu et al. 2000; 278 Milne and Noble 2002; Liu et al. 2004).

279

280 Reduced thermal endogenous strain, particularly the attenuated magnitude and rate of core temperature increase, 281 may be most pertinent to the observed reductions in Hsp72 mRNA transcription in this study. These endogenous 282 criteria have been considered as important in other measures of HSP responses to acclimation (Magalhães et al. 283 2010b). Post acclimation day increases in Hsp72 mRNA indicated that the stress presented at the start of HA, 284 and after STHA and LTHA all surpassed the minimum required endogenous strain to elicit increased 285 transcription of Hsp72 mRNA in leukocytes across HA methods. The Hsp72 mRNA response provides further 286 evidence of the importance of providing a consistent stressor for adaptation, via the facilitation of consistent or 287 elevations in core temperature throughout STHA and LTHA. Sustained Hsp72 mRNA increases demonstrate the 288 continued stimulation of the pathway responsible for thermotolerance - the cellular stress response to heat. As 289 Hsp72 mRNA continued to elevate throughout the HA period, complete HSP72 protein mediated acclimation 290 benefits had not been achieved in any method, despite adaptive phenotypic HA responses following both STHA 291 and LTHA (Horowitz and Kodesh 2010). It is currently unknown whether an upper adaptive limit to HA or 292 thermotolerance exists at a cellular level. HA increases baseline HSP72 and blunts inducibility of HSP72 ex vivo 293 heat shock (McClung et al. 2008). Theoretically, once stress is presented to a cell, thermotolerance through 294 optimised HSP72 affords sufficient cytoprotection and therefore, normal cell function and homeostasis is 295 maintained without further transcription (Kregel 2002). Implementation of isothermic methods give the greatest 296 efficacy towards continual and consistent magnitudes of Hsp72 mRNA transcription and concurrent increases in 297 HSP72 which are associated with thermotolerance in vitro (Kregel 2002), in vivo (Maloyan et al. 1999), and HA 298 improvements in heat tolerance (Patterson et al. 2004). Augmented HSP72, enhances cell tolerance to 299 subsequent heat insults translating to enhanced organ, systemic and whole body tolerance (Beckham et al. 2008) 10 300 and when considering the heat shock response (HSR) to the stress stimuli, a repressed HSF-1 activity. HA and 301 thermotolerance are associated, with greater physiological HA adaptation blunting HSP72 induction to heat 302 shock ex vivo, with HA accompanied by elevated baseline and improved regulation of HSP72 (Yamada et al. 303 2007; McClung et al. 2008). It is known that HSR inhibition impairs cellular and systemic adaptations 304 associated with thermotolerance and HA in exercising humans via reductions in circulating cytokines and 305 cellular and systemic markers of heat strain (Kuennen et al. 2011). Phenotypic adaptations occurring throughout 306 STHA and LTHA do not delay or mitigate the HSR requirement of the tested HA methods, with sufficient if not 307 consistent core temperature increases (Hom et al. 2012) augmenting synergistic cellular thermotolerance 308 (Maloyan et al. 1999; Horowitz et al. 2004) alongside systemic HA phenotype adaptations (Moseley 1997).

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310 Both final/peak, and absolute change in T_{rec} appear to have an effect on HSP72 changes during HA (Magalhães 311 et al. 2010b), this has been previously shown by extracellular HSP72 release (Périard et al. 2012; Gibson et al. 312 2014), and now Hsp72 mRNA, indicating elevated thermal stress. Mechanistically, failure for ISO_{PROG} to elicit 313 significant differences in Hsp72 mRNA in spite of differential mean, peak, and change in T_{rec} in comparison 314 with ISO_{CONT} suggest progressively increasing the endogenous thermal strain through isothermic HA may not 315 augment additional phenotypic HA or acquired cellular thermotolerance. A required "threshold" for the 316 transcription of Hsp72 mRNA appears to be surpassed by ISO_{CONT} over both STHA and LTHA time scales 317 irrespective of a 0.5°C increase in the target temperature suggesting the rate of transcription may be maximal 318 following attainment of an internal temperature of 38.5° C. Maximal mean $T_{rec} \ge 38.5^{\circ}$ C were higher in this study 319 and others showing increased HSP72 (McClung et al. 2008; Magalhães et al. 2010b) compared with others 320 where mean $T_{rec} < 38.5^{\circ}C$ (Yamada et al. 2007; Hom et al. 2012), no data is available for the duration spent at 321 this Tree. A "threshold" for HA appears to be surpassed by ISO_{CONT} and ISO_{PROG} over LTHA with no further 322 benefit of a 38.5°C to 39.0°C progression in the "threshold". We observed no difference in Hsp72 mRNA transcription between 38.5°C and 39.0°C T_{rec}, suggesting mean temperature alone may not be the most 323 324 important signal for increase or that an optimal Hsp72 mRNA transcription rate may occur once a suggested 325 threshold of 38.5°C (T_{rec}) has been surpassed (Morton et al. 2009; Amorim et al. 2011).

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It appears that despite achieving consistent core temperatures, isothermic methods contain some degree of variability in the acute sessional, and adaptive responses. This variability in the response to the isothermic should be acknowledged as a potential limitation of the method. Figure 1 demonstrates that the resting temperature of ISO_{PROG} was lower than the other groups, most notably when compared with ISO_{CONT} during 331 STHA. Additionally ISO_{PROG} required a lower final exercise intensity in than ISO_{CONT}, this despite similar 332 temperature during STHA and higher temperature during LTHA. The variability in isothermic methods is most 333 identifiable from exercise/rest durations between ISO_{CONT} and ISO_{PROG}, and following the progression from 334 STHA to LTHA. Additional duration at rest in LTHA is counter intuitive with heat gain decreasing with 335 adaptation thus greater work is required to achieve the target temperature. This appears true of the initial bout 336 of exercise where attainment of the target temperature is delayed in LTHA compared to STHA (figure 1). 337 Mechanistically, the additional duration at rest in LTHA, compared to STHA is facilitated by the requirement 338 for exercise to be maintained longer during the initial bout of exercise to achieve the target temperature. The 339 result of this is a reduced requirement for participants to resume exercise following rest as the 90 minute session 340 ends before temperature reduces below the target threshold. During STHA, the time to target core temperature is 341 achieved earlier in the session than in LTHA. A greater duration then remains for heat dissipation and 342 temperature reduction, consequently initiating a resumption of exercise in accordance of the requirements of the 343 protocol. The extended first exercise bout in LTHA reduces the time remaining in the session for resuming 344 exercise and thus participants demonstrate less work/lower average intensity of work later in the session. The 345 greater duration of the initial bout of exercise prior to cessation also rationalises some of the differences between 346 ISO_{CONT} and ISO_{PROG} during LTHA. The requirement for a greater change in core temperature in ISO_{PROG}, 347 requires participants to exercise for longer initially to attain the higher temperature as such they again perform 348 less work later in the session. These limitations demonstrate the importance of future research optimising 349 isothermic methods so that a greater consistency of protocol administration, and potentially consistency of 350 Hsp72 mRNA transcription is achieved. A larger sample size may reduce the variability in the protocol 351 administration, and may strengthen the observations of the Hsp72 mRNA particularly trends towards reductions 352 in FIXED which may become statistically different given prolonged acclimation (i.e. +10 days) or a greater 353 sample size. It was observed that Hsp72 mRNA Post day 5 (p = 0.100) and post day 10 (p = 0.082) reduced non 354 significantly in comparison to day 1, an observation not true of ISOCONT (Post day 1 vs. Post day 5 p = 0.998; 355 Post day 1 vs. Post day 10 p = 1.000) or ISOPROG (Post day 1 vs. Post day 5 p = 1.000; Post day 1 vs. Post day 356 10 p = 0.677). An explanation for this may relate to the variability in the change in FIXED, physiologically this 357 might be rationalised by individual differences in acclimation rate, and thus endogenous criteria using this protocol; an element that might be further clarified by a larger sample size. 358

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Future work could involve tissue viability/*ex vivo* experiments to quantify the increased thermotolerance induced between HA methods alongside the measurement of the HSP72 protein, the absence of which is a 362 limitation of the present experiment. Analysis of the acute Hsp72 mRNA response to the first session of 363 progressive isothermic HA would allow analysis of increased hyperthermia from 38.5°C to 39°C to be 364 quantified, although the measurement of mRNA presents a limitation in itself as no data is available to confirm 365 intracellular HSP72 increases, with differential HA methods eliciting different gains in total protein which may 366 in itself augment a changing mRNA/protein ratio. Cellular thermotolerance is unlikely to be explicit to HSP72 367 alone, with a number of genes associated with the cellular stress response to hyperthermia. Therefore a wider 368 genomic and molecular analysis would facilitate further insight into the adaptive mechanisms (Sonna et al. 369 2002). Data suggests an endogenous threshold/minimum criteria may exist for Hsp72 mRNA or HSP72 protein 370 increases as proposed by others (Amorim et al. 2008; Morton et al. 2009; Magalhães et al. 2010b; Périard et al. 371 2012; Gibson et al. 2014). Further investigation of precise endogenous signals leading to greatest intracellular 372 Hsp72 mRNA and HSP72 increases in leukocytes and muscle is warranted to enable links between HA and 373 thermotolerance, to be further examined. This could be facilitated by extended HA durations beyond ten 374 sessions to determine whether in FIXED further diminished endogenous strain would see a continued 375 attenuation of the post session mRNA transcription, or via an experiment where either lower isothermic 376 temperatures are targeted, or changes from baseline implemented to elicit graded minimum thresholds. 377 Individual variability associated with metabolic heat production and retention and the respective effects they 378 may have on Hsp72 mRNA expression could be eliminated by modifying the isothermic method to administer 379 the exercise based upon a fixed relative rate of heat production (Cramer and Jay 2014), further optimising 380 acquired cellular thermotolerance through repeated exercise-heat stress at an optimised asymptote of core 381 temperature increase.

382

383 Perspectives

384 Continuous and progressive isothermic HA elicit and sustain similar endogenous systemic strain. This is in 385 contrast to fixed intensity HA which elicits less varied, but diminishing thermoregulatory strain following the 386 procurement of STHA and LTHA adaptations. Hsp72 mRNA transcription, a marker of the cellular stress 387 response to hyperthermia and an important component of thermotolerance, demonstrated equal sessional 388 increases utilising all HA methods. The equal Hsp72 mRNA increases occurring after equal, reduced or 389 increased core temperature following STHA and LTHA suggest that as long as a minimum endogenous criteria 390 is surpassed, additional endogenous thermoregulatory strain is not of further benefit, nor is continual exercise 391 load crucial so long as hyperthermia is present. These data give confidence that all reported HA methods 392 increase Hsp72 mRNA and are capable of eliciting adaptations towards thermotolerance.

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397

398 Conflict of Interest

399 The authors declare that they have no competing interests such as funding or personal financial interest.

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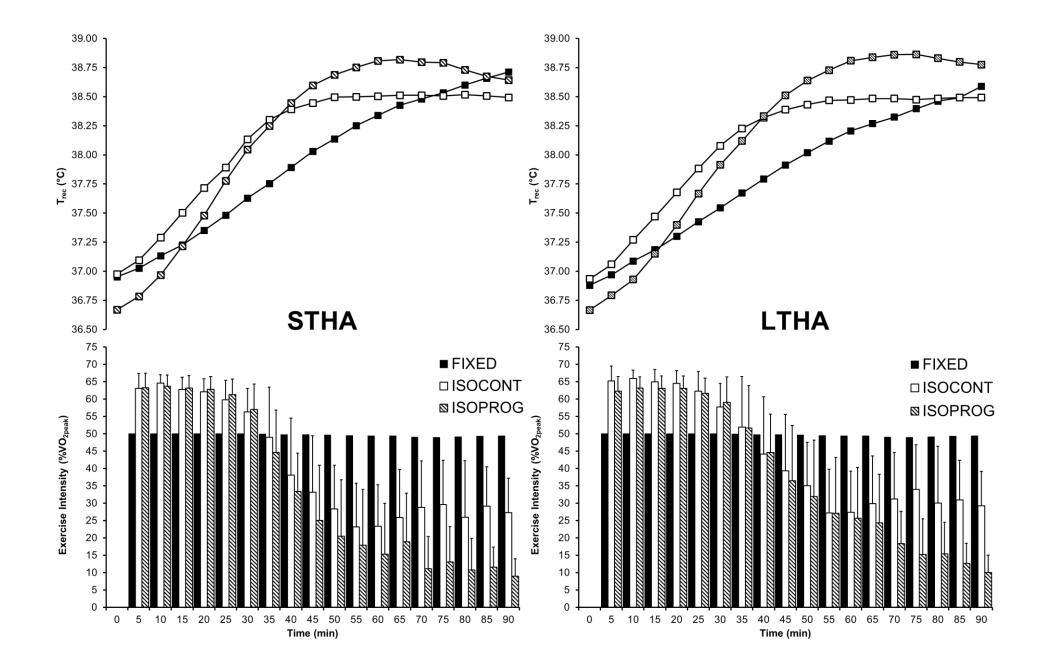
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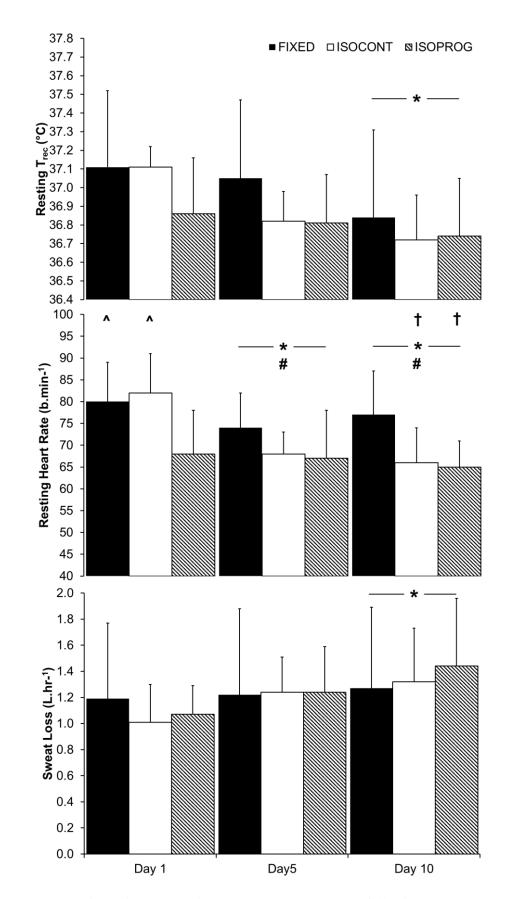
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- Figure 1. Mean \pm SD T_{rec} (top; °C) and exercise intensity (bottom; $\%\dot{VO}_{2peak}$) for the first five sessions (STHA: left) and all ten sessions (LTHA: right) of fixed intensity (FIXED)
- n = 8, continuous isothermic (ISO_{CONT}, n = 8), and progressive isothermic (ISO_{PROG}, n = 8) heat acclimation methods. Error bars have been removed from T_{rec} data for clarity.



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Figure 2 Mean \pm SD Changes in resting T_{rec}, resting heart rate and sweat rate following STHA (Day 1 to 5) utilising fixed intensity (FIXED), continuous isothermic (ISO_{CONT}), and progressive isothermic (ISO_{PROG}) methods.* denotes significant difference overall from Day 1 (p <0.05). # denotes significant difference within group and Day (p <0.05). ^ denotes significant difference from ISO_{PROG} within group and Day (p <0.05). † denotes significant difference from

565 FIXED within group and Day 1 (p < 0.05).

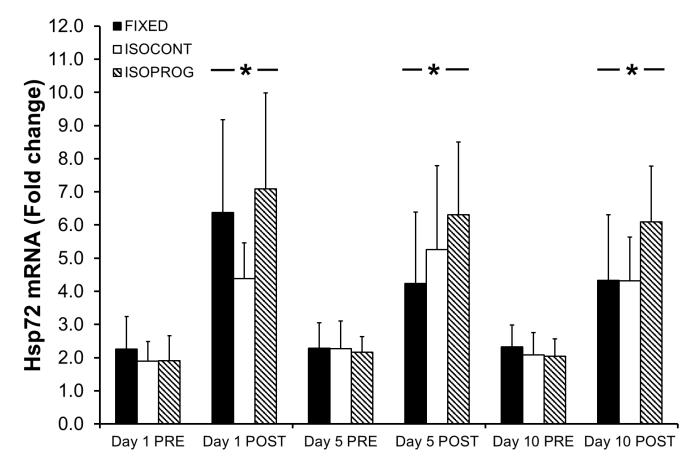


Figure 3 Mean \pm SD Hsp72 mRNA pre and post sessions on Day 1, Day 5 and Day 10 of fixed intensity (FIXED) continuous isothermic (ISO_{CONT}), and progressive isothermic (ISO_{PROG}) methods. * denotes significant Pre to Post difference within session (p <0.05).

578 Table 1. Mean \pm SD Participant characteristics for fixed intensity (FIXED), continuous isothermic (ISO_{CONT}), and 579 progressive isothermic (ISO_{PROG}) heat acclimation methods.

580

31				
2		FIXED	ISO _{CONT}	ISO _{PROG}
3				
4	Age (years)	19.9 ± 1.0	22.6 ± 5.5	$26.1 \pm 4.9*$
5	Height (cm)	179.3 ± 5.8	177.9 ± 5.8	179.5 ± 6.6
6	Body Mass (kg)	79.2 ± 18.3	74.2 ± 6.9	75.1 ± 8.8
7	BSA (m ²)	1.97 ± 0.21	1.92 ± 0.11	1.94 ± 0.11
8	Body fat (%)	14.9 ± 7.7	14.8 ± 2.2	14.1 ± 3.5
9 0	\dot{VO}_{2peak} (L.min ⁻¹)	3.61 ± 0.90	3.62 ± 0.69	3.79 ± 0.55

591 *denotes significantly difference from FIXED (p < 0.05)

Table 2. Mean \pm SD Protocol, thermoregulatory and physiological data characterising exercise – heat stress on day one, day five and day ten of fixed intensity

594 (FIXED), continuous isothermic (ISO_{CONT}), and progressive isothermic (ISO_{PROG}) methods.

	Day 1			Day 5		Day 10			
	FIXED	ISO _{CONT}	ISO _{PROG}	FIXED	ISO _{CONT}	ISO _{PROG}	FIXED	ISO _{CONT}	ISO _{PROG}
Exercising Duration (min)	90.0 ± 0.0	61.9 ± 10.7 †	56.3 ± 16.6†	90.0 ± 0.0	76.3 ± 15.5*	53.1 ± 10.3†^	90.0 ± 0.0	$78.8 \pm 15.8*$	70.0 ± 9.3* #
Mean Session Intensity (%VO _{2peak})	49.7 ± 0.6	36. 6 ± 5.3†	36.7 ± 11.2†	50.0 ± 0.0	$47.0 \pm 8.3*$	32.3 ± 8.6†^	50.0 ± 0.0	$50.5 \pm 9.5*$	45.8 ± 8.0*#
Mean Exercising Intensity (%VO _{2peak})	49.7 ± 0.6	52.6 ± 8.2	58.8 ± 5.1	50.0 ± 0.0	57.4 ± 4.9	56.8 ± 5.9	50.0 ± 0.0	58.7 ± 7.0	58.9 ± 6.2
Total Work Done (kJ)	656 ± 166	498 ± 81	554 ± 102	673 ± 165	657 ± 100*	500 ± 152	684 ± 164	719 ± 126*	708 ± 176*#
Mean T _{rec} (°C)	38.17 ± 0.17	38.15 ± 0.23	38.21 ± 0.25	$37.85 \pm 0.22*$	38.10 ± 0.19	$38.27\pm0.24\dagger$	37.74 ± 0.19*	$38.04\pm0.23\dagger$	$38.18\pm0.21\dagger$
Peak T _{rec} (°C)	38.92 ± 0.26	38.65 ± 0.32	38.87 ± 0.18	$38.52 \pm 0.43*$	38.66 ± 0.25	38.91 ± 0.24	38.40 ± 0.33*	38.67 ± 0.23	$39.06\pm0.37\dagger$
$\Delta T_{\rm rec}$ (°C)	1.81 ± 0.60	1.53 ± 0.37	2.01 ± 0.33	1.47 ± 0.74	1.74 ± 0.20	2.10 ± 0.42	1.56 ± 0.72	1.95 ± 0.32	$2.32\pm0.61\dagger$
Duration $T_{rec} \ge 38.5^{\circ}C$ (min)	32.5 ± 8.5	28.8 ± 15.1	44.4 ± 21.3	13.1 ± 16.0*	22.5 ± 20.7	51.3 ± 18.5†^	$5.0 \pm 8.0*$	29.4 ± 23.5†	35.6 ± 18.6†
Duration $T_{rec} \ge 39.0^{\circ}C$ (min)	5.6 ± 12.1	0.0 ± 0.0	1.9 ± 3.7	1.3 ± 3.5	2.5 ± 7.1	6.9 ± 14.4	0.0 ± 0.0	0.0 ± 0.0	20.0 ± 16.0#†^
Mean HR (b.min ⁻¹)	159 ± 12	151 ± 13	144 ± 9	149 ± 21	148 ± 9	140 ± 8	146 ± 14	151 ± 8	144 ± 14
Peak HR (b.min ⁻¹)	176 ± 12	183 ± 9	182 ± 11	171 ± 26	172 ± 12	174 ± 8	164 ± 13	174 ± 11	171 ± 13

595 Notes: Exercising duration is cumulative time spent exercising during each of the 90 min sessions. Mean session intensity is calculated from each participant's relative exercise intensity during

596 each five min period including rest periods during the given session. Mean exercise intensity is calculated from each participant's relative exercise intensity during each five min period

597 excluding rest periods during the given session.

598

* denotes difference from Day 1 within respective method (p < 0.05). # denotes difference from Day 5 within respective method (p < 0.05).

600 \dagger denotes difference from FIXED within respective day (p < 0.05). ^ denotes difference from ISO_{CONT} within respective day (p < 0.05).

601