



Letter to the editor

Reply to letter to editor: “Effects of high-intensity interval training: Risk of bias by definition”

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Dear Editor,

We appreciate the comments of Dr. Andreato, concerning our recent review and we thank them for the careful reading of our article. This is an opportunity to clarify some issues raised in their letter. The letter wrote by Dr. Andreato on the systematic review by Gomes-Neto et al. [1] argues that 31% (4/13) of studies included in the review present characteristics that become impracticable for their inclusion. We agree with the comments of Dr. Andreato to the study of the Smart and Steele [2]. However the studies of the Iellamo et al. [3] and Iellamo et al. [4] reported that aerobic continuous training group walked continuously at a moderate training intensity (~ 45–60% of heart rate reserve) and patients in the aerobic interval training group warmed-up for 9 min, before walking four 4-min intervals by 2–4 times at 75–80% of heart rate reserve. In addition, Dr. Andreato did not mention what would be the fourth study in this condition.

We agree with Dr. Andreato that HIIT may be characterized by repeated short-to-long bouts of high-intensity exercise interspersed with recovery periods, which generally means attaining an intensity >90% VO₂max or >80% VO₂max for special populations, however, this definition is not consensual and there is no evidence of this. As Dr. Andreato described generally means attaining an intensity 80% VO₂max for special populations, which is not to say that this is the definitive threshold for definition of HIIT. Finally, we analyzed the meta-analysis with the withdrawal from the study of Smart and Steele [2] and did not identify a change in any of the presented results.

References

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- [3] F. Iellamo, V. Manzi, G. Caminiti, et al., Matched dose interval and continuous exercise training induce similar cardiorespiratory and metabolic adaptations in patients with heart failure, *Int. J. Cardiol.* 167 (6) (2013) 2561–2565.
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