

Sport Sciences and Health Research



The comparison of the lifestyle of vaccinated versus unvaccinated elite athletes during the Covid-19 pandemic: A multi-country comparison

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Article Info	Abstract				
Original Article	Background: The COVID-19 pandemic has resulted in global home confinement and quarantine, leading to the vaccination of societies worldwide. However,				
Article history: Received: 19 July 2021 Revised: 10 August 2021 Accepted: 25 August 2021 Published online: 01 November 2021	 Aim: This study aimed to compare the lifestyle of vaccinated versus unvaccinated international elite athletes during the COVID-19 pandemic. Materials and Methods: From March to October 2021, an online survey was conducted, including socio-individual information of athletes, the International Physical Activity Questionnaire (IPAQ), the Rapid Eating Assessment for Participants (REAP-S), and the Petersburg Sleep Quality Questionnaire (PSQI) A total of 581 elite athletes from 4 continents 				
Keywords: COVID-19, dietary behaviors, elite athletes,	(Europe, Asia, Africa, and America) and different countries, aged 18-35 years, were voluntarily recruited. Data analysis was performed using U-Mann-Whitney and Wilcoxon signed-rank tests, with the level of significance set at alpha <i>P</i> <0.05.				
sleep quality, vaccination, physical activity.	Results: The results indicated that there was a significant difference between the level of physical activity and eating behavior of vaccinated versus unvaccinated elite athletes (<i>P</i> <0.001). However, no significant difference was found between the quality of sleep among vaccinated and unvaccinated elite athletes (<i>P</i> =0.270).				
	Conclusion: It was shown that, despite the unvaccinated status of some elite athletes (49.9%), their physical activity levels were higher than those of vaccinated elite athletes during the COVID-19 pandemic. Additionally, the eating behavior of vaccinated elite athletes was better than that of unvaccinated elite athletes during the COVID-19 pandemic, but there was no significant difference in the quality of sleep between the groups.				
Cite this article: Ashouri M, Taheri M, Irandoust Kh, Mirmoezzi M. "The comparison of the lifestyle of vaccinated versus					

unvaccinated elite athletes during the Covid-19 pandemic: A multi-country comparison". Sport Sciences and Health Research. 2022, 14(2): 189-199. doi: 10.22059/SSHR.2023.357170.1082.



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1. Introduction

The first patient infected with coronavirus disease (COVID-19) was reported in Wuhan, Hubei province, China on 12 December 2019. The cause of this disease was a new type of genetically modified virus from of corona virus's family so-called Covid-19 [1, 2]. It is highly contagious pathogenic viral infection which spread rapidly around the whole world less than four months due to onward transmission [3, 4].

Studying the impact of COVID-19 on athletes is crucial for understanding the potential health risks and performance implications of the virus in this population, as well as informing strategies for prevention, management, and safe return to play."Covid-19 home confinement had a negative effect on sports activities [5] and psychological and emotional disorders, as well as sleep quality and nutrition behavior in all people over the world especially in athletes [6]. As a result, sports events at all levels (recreational, professional and elite levels) were all affected by the viral outbreak such as the cancellation and postpone of 2020 Olympics. Regarding the athlete vaccination during the pandemic, there was no definite guideline compared to general population. That's was why most athletes refused to be vaccinated due to its possible side effects [7].

Since, there was a possibility of its side effects (e.g., reduced sporting performance, nutritional and sleep cycle disruption) on sports performance, many athletes refused to inject vaccine [7, 8]. The vital role of nutrition in maintaining and promoting the immune system and the vital role of micronutrients in the optimal functioning of immune system have been well documented [9, 10]. Quarantine has probably affected the perceived food habits and behaviors of athletes during the pandemic [11]. In this regard, dietary habits are defined as "the habitual decisions of individuals or a group of people regarding what foods they eat" [12].

On the other hand, it has been reported that production and also the closure of food manufacturing companies during the pandemic has affected people's eating behaviors [13].

There are evidences suggesting that sleep is a major component in cognition [14], learning and memory consolidation [15], well-being [16] cell growth and repair [17], glucose metabolism leptin [18] and ghrelin secretion [19] and immune system function [20]. Apparently, improved quality of sleep in athletes is of utmost importance for recovery and energy conservation objectives [21]. It has been reported that athletes are faced with lower sleep quality and mental health status during the pandemic [22]. Furthermore, it was shown that elevated sleep disturbance was found during the pandemic suggesting the presence of chronobiologic disorder [22]. This disorder would probably increase nutrition behavior and also metabolism [18]. It has been well proven that physical activity is a main neuroprotective and antidepressant factor [23].

During the exercise, stimulation of factors originating in the brain is occurred. It consists of neurotrophic factors derived from the brain and endorphins which potentially have a positive effect on the functioning of the nervous system [24]. Infectious diseases would possibly lead to, increased risk of infarction, heart failure and arrhythmias [25]. As regular exercise improves circulation and breathing processes, it is believed that physical activity is necessary during the pandemic [24].

The optimal functioning of blood affects improvement circulation of pulmonary functions leading to making anti-inflammatory reactions [26, 27]. The impact of vaccination on global health is well understood. Except for clean water healthy water, no other method has had such a major impact on reducing mortality and population growth [28]. However, some people like elite athletes had refused to inject it due to reasons such as reluctance to receive the vaccine, concern about possible side effects and safety as well as lack of trust in the vaccine production process. Therefore, it was aimed to compare the lifestyle of vaccinated versus unvaccinated elite athletes.

Also, since the outbreak of the Corona virus, there has been no research that examines the lifestyle of vaccinated and unvaccinated elite athletes during the quarantine of this virus. Therefore, the purpose of this study was the comparison of the lifestyle of vaccinated and unvaccinated elite athletes during the Covid-19 pandemic.

2. Materials and Methods

A cross-sectional study design was carried out. A convenience non-probabilistic and snowball sampling method was employed to compare the lifestyle of vaccinated and versus unvaccinated international elite athletes during the covid-19 pandemic.

2.1. Participants

The research participants included 581 elite athletes (athletes whose income is only from sports and participated in the highest level of competitions; 68.67% men, 31.33% women) in 4 different continents, including Turkey (Ankara), Brazil (Sao Paulo, Curitiba and Rio de Janeiro), UAE (Abu Dhabi), Malaysia (the city of Kuala Lumpur), Tunisia (the city of Tunis) and Iran (the cities of Karaj, Tehran and Qazvin) in 2021. They were surveyed based on convenience and snowball sampling.

The inclusion criteria were as follows: a) Age≥18 years; b) Quarantine experience during the pandemic (at least one week); c) Financial independency from sports. Table 1 shows the demographic characteristics of the participants. The ethical considerations were regarded based on declaration of Helsinki in the research.

2.2. Research instruments

An online survey was conducted from March to October 2021. The questionnaires consisted of socio-individual information of participants including International Physical Activity Questionnaire (IPAQ), Rapid Eating Assessment for Participants (REAPS) and Petersburg Sleep Quality Questionnaire (PSQI). Questionnaires were provided through google doc form to the elite athletes.

2.3. PSQI sleep quality

PSQI examines people's attitude about sleep quality in the last four weeks and has seven points. Each scale of the questionnaire gets a score from zero to three. The internal consistency of the questionnaire using Cronbach's alpha has been measured as 0.83 [29]. In the Iranian version of this questionnaire, validity was 0.86 and reliability was 0.89 [30].

2.4. IPAQ

This questionnaire aims to get information about the physical activities that people do as part of their daily life. Questions will be about the times you were physically active during the past seven days. It takes into account the activities you do at work, or as part of housework and yard (gardening), going from one place to another, sports training, and activities you do as fun in your free time, which fall into three categories. 1. Style, 2. Moderate, 3. Severe. The validity of this questionnaire is 0.96 within the range of 0.46 and the reliability is $\rho = 0.30$ [31].

2.5. REAPS

REAPS is a self-report questionnaire designed to assess the eating behaviors of individuals. The validity and reliability of the REAPS have been evaluated in several studies, with generally positive results. In terms of validity, the REAPS has been found to have good convergent validity, meaning that it correlates well with other measures of eating behaviors and attitudes. The test-retest reliability of the REAPS was acceptable, with an intraclass correlation coefficient of 0.76. Additionally, the REAPS was originally developed for use with college students, so its validity and reliability in other populations may be less well-established [32].

2.6. Statistical analysis

To assess the normality of the sample distribution, the Kolmogorov-Smirnov (K-S) test was employed, and to assess the equality of variance, Levene's test was used., respectively. All the data in tables and text is presented as frequency, percentage, mean, and standard deviation. Independent t-test and chi-square were also compare used to the demographic information of vaccinated versus unvaccinated elite athletes. The Mann Whitney U test was used to compare the physical activity levels between two independent groups of vaccinated and unvaccinated athletes. The Wilcoxon Rank Sum test was used to compare the physical activity levels within one group. These tests were employed to assess the impact of vaccination status on the physical activity levels of athletes. The level of significance was set at alpha *P*<0.05. All statistical analyses were computed utilizing SPSS v. 23 (IBM Corporation; Armonk, NY, USA) and Excel spreadsheet (Microsoft Corporation; Redmond, WA).

3. Results

According to the findings, 581 elite athletes were respondents, 182 (31.3%) wrer female and 399 (68.7%) were male. Among elite athletes, 36% of male are unvaccinated. About 41% of athletes have been infected with Covid-19, of which 59% were not vaccinated. Among the vaccinated athletes, 75.2% had received the first dose of vaccine, 24.4% had received the second doses of vaccine, 21.9% had received the third doses of vaccine, and 0.9% had received the fourth dose of vaccine. 18.1% of vaccinated athletes had side effects after vaccination. Most of the unvaccinated elite athletes believed that vaccination could have a negative effect on their sports performance (10.2%); vaccination increases the risk of injury (9.3%) and has many side effects (6.9%). Most elite athletes have used Sinopharm vaccine in the first (41.5%), second (38.4%) and third (18.8%) doses. 31.8% of unvaccinated elite athletes spent one to two months in home confinement and 28.6% of vaccinated athletes spent only one week in home confinement. 50.4% of elite athletes expressed their activity level as intense active after the corona pandemic, while 63.3% were intense active before the corona pandemic. 37.2% of elite athletes trained at home and 17.2% had access to sports clubs (muscle strengthening/ resistance exercises). 71.3% of elite athletes had no children. 22% of elite athletes considered the situation somewhat stressful. Individual characteristics of elite athletes are described in more detail in Table 1.

Figure 1 shows the descriptive data relating to the quality of sleep in vaccinated and unvaccinated elite athletes during Covid-19 shown by the sub-scales of the PSQI.

Physical activity level (before and during covid-19) and dietary behavior for vaccinated and unvaccinated elite athletes during the pandemic are shown in Figure 2.

Kolmogorov-Smirnov test indicates that the physical activity level D(581)=6.84, P= 0.001, sleep disorders D(581)= 2.03, P<0.001 and eating behavior D(581)= 3.80, P= 0.001 do not follow a normal distribution. The Mann Whitney U and the Wilcoxon Rank Sum Tests were used for inter-group versus intra-group comparisons of physical activity of vaccinated and unvaccinated athletes, respectively.

Median physical activity level before covid-19 in vaccinated and unvaccinated elite athletes were 212.4 and 371.5; the distributions in the two groups differed significantly (Mann–Whitney U= 19084.5, n1= 294, n2= 287, P<0.001). Median physical activity level during covid-19 in vaccinated groups and unvaccinated elite athletes were 195.8 and388.5: The distributions in the two groups differed significantly (Mann–Whitney U= 14207.5, n1=294, n2=287, *P*<.001).

Individual characteristics		Vaccinated	Unvaccinated	Total	P-value
Frequency (%)		294(50.6)	287(49.4)	581(100)	0.249
Sex (percentage)	Female	17.9	13.4	31.3	
	Male	32.7	36	68.7	
Age (years)		24.5±6.1	30.5±4.7	28.5 ± 5.8	< 0.001
Height (cm)		181.3±10.2	177.7±13.9	179.5±21	< 0.001
Weight (kg)		75.3±19.9	74.8±10.7	75.1±16	< 0.001
Sports history (years)		15.2±5.9	16.1±6.1	15.2±6.5	< 0.001
Sport category (%)	Individual sport	26.5	43.7	70.2	< 0.001
	Team sport	24.1	5.7	29.8	< 0.001
Marital status (%)	Married	12.9	21.7	36.6	< 0.001
	Single	37.7	27.7	65.4	< 0.001
Education level (%)	No schooling completed	2.2	5.2	7.7	< 0.001
	High school graduate	1.7	13.6	15.3	< 0.001
	Professional degree	17.6	0.2	17.7	< 0.001
	Bachelor's degree	16.2	21.2	37.4	< 0.001
	Master's degree	11.2	9.1	20.3	0.021
	Doctorate degree	0.5	1.2	1.9	< 0.001
Covid-19 infected	Yes	19.6	21.2	40.8	0.604
(%)	No	29.8	29.4	59.2	0.813
Taken all doses (%)	Yes	0.5	37.9	38.4	< 0.001
	No	58.2	12.7	61.6	< 0.001
Smoking (%)	Yes	48	46	94	0.235
	No	2.6	3.4	6	0.249
Financial security (%)	Very secure	3.8	7.9	11.7	< 0.001
	Moderately secure	17.4	15	32.4	< 0.001
	Slightly secure	12.7	21.3	34.1	< 0.001
	Low secure	9	3.3	12.2	< 0.001

 Table 1. Individual characteristics of vaccinated and unvaccinated elite athletes



Figure 1. Sleep quality sub-scales of vaccinated and unvaccinated elite athletes during Covid-19



Figure 2. The IPAQ and REAP-S of vaccinated and unvaccinated elite athletes before and during covid-19

Wilcoxon Furthermore, the Test indicated that the physical activity level in prepandemic period was higher than the pandemic in vaccinated (P<0.001) and unvaccinated athletes (P<0.001). Median sleep disorders in pre pandemic in vaccinated group and unvaccinated groups were 283.5 and 298.7 respectively; the distributions in the two groups differed significantly (Mann–Whitney U= 39976.5, n1= 294, n2= 287, P=0.270). Nevertheless, median eating behavior before covid-19 in vaccinated and unvaccinated groups were 283.5 and 298.7; The distributions in the

two groups differed significantly (Mann–Whitney U= 25371.5, n1= 294, n2= 287, P < 0.001).

4. Discussion

The Covid-19 pandemic has highlighted the importance of implementing effective strategies in critical situations. Given this urgency, it is essential to conduct investigations to identify the most effective strategies. Therefore, it is necessary to consider the impact of the pandemic on elite athletes, who may have unique challenges and needs in this situation. By understanding the specific challenges faced by elite athletes during the pandemic, effective strategies can be developed to support their health and well-being, and to ensure their continued participation in sports. Hence, we sought to compare the lifestyle of vaccinated versus unvaccinated elite athletes during the Covid-19 pandemic. The results suggested that there was a significant difference between the dietary behavior and physical activity level of vaccinated and unvaccinated elite athletes and there is no significant difference between the quality of sleep of vaccinated and non-vaccinated elite athletes. The results showed that the level of physical activity of non-vaccinated elite athletes was higher than the vaccinated and the nutritional behavior of vaccinated athletes was better.

It was also indicated that there was no significant difference between the quality of sleep between vaccinated and unvaccinated elite athletes. The results suggest that the level of physical activity of two groups of vaccinated and unvaccinated elite athletes were decreased during the pandemic compared to pre pandemic condition. Also, the level of physical activity of unvaccinated elite athletes during the Covid-19 was higher than that of vaccinated elite athletes. One of the possible reasons for the higher rate of physical activity of unvaccinated athletes compared to vaccinated athletes related is to psychological fear. Since, those athletes who have fear of getting infected try to follow the principles of social distancing and not being involved in outdoor activities. Obviously, it's logical to have low rate of physical activity during the pandemic. Additionally, their vaccination was also another reason for their caution, but those

athletes who had not been vaccinated did not have this psychological fear.

The reason for the difference in the eating behavior of vaccinated versus unvaccinated elite athletes would be attributed to the values of optimal nutrition considered by vaccinated athletes. Li et al. (2022) found that nutritional sufficiency would increase immune responses to vaccine against infection [33].

It seems that elite athletes suffered from sleep problems during the Covid-19 pandemic. There is no research on the difference in quality of sleep between vaccinated and unvaccinated elite athletes, but research shows that having optimal sleep behavior (quality; duration) in the early days after the vaccine would increase the effectiveness of the vaccine [34].

In general, the results of this research are in line with the results of Frank et al. (2020) [35] and Newbury et al. (2022) [36]. Frank et al. (2020) suggested that eight weeks of detraining leads to a significant decrease in maximal oxygen consumption (VO₂max), endurance capacity, and muscle strength with accompanying decrease which is similar to the consequences of covid-19 [35].

Newbury et al. (2022) analyzed the nutritional intake of adolescent elite swimmers at three different time points: a) before Covid-19, b) during the national quarantine, c) during limited training after the quarantine [36].

A key finding of the research was that adolescent swimmers changed their nutrition based on their modified training needs. Their energy, carbohydrate, protein and fat intakes all were decreased during quarantine conditions and was consequently increased by resuming swimming training. However, reduced dietary intake during quarantine resulted in lower micronutrients intakes compared to Reference Nutrient Intake recommended for British adolescents (15-18 years) [36].

On the other hand, the results of the present study are inconsistent with the results of Woodford and Bussey (2021) [37], and da Silva Santos et al. (2021) [38]. Woodford and Bussey (2021) stated that quarantine provides athletes with a resting period allowing them to reflect on their sports participation and make the necessary changes in their lives that will protect their health during and after quarantine periods [37].

da Silva Santos et al. (2021) suggested that no significant changes were found in the sleep quality of athletes during quarantine [39].

The study limitations were as follows: The small size of the study samples, the lack of accurate assessment" instead of "control", over the sleep status, eating behavior, and sports behavior of the participants. Also, climatic, geographical and time differences would have an effect on the lifestyle of elite athletes.

5. Conclusion

According to the obtained results, the amount of physical activity of elite athletes has been decreased during the pandemic compared to before the pandemic conditions.

Also, the amount of physical activity of unvaccinated elite athletes during the pandemic was higher than that of vaccinated elite athletes. In addition, it was concluded that the nutritional behavior of vaccinated elite athletes during the pandemic was better than that of unvaccinated elite athletes, and quality of sleep was also decreased in some athletes. As a result, the level of physical activity, quality of sleep and eating behavior of these athletes should be considered in order to prevent the injury of elite athletes.

Conflict of interest

The authors declared no conflicts of interest.

Authors' contributions

All authors contributed to the original idea, study design.

Ethical considerations

The authors have completely considered ethical issues, including informed consent, plagiarism, data fabrication, misconduct, and/or falsification, double publication and/or redundancy, submission, etc.

Data availability

The dataset generated and analyzed during the current study is available from the corresponding author on reasonable request.

Funding

This research did not receive any grant from funding agencies in the public, commercial, or non-profit sectors.

Acknowledgment

This paper was taken from the Master's thesis of Imam Khomeini International University.

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