PLIZGA, Jakub, JAWORSKI, Arkadiusz, GRAJNERT, Filip, GLUSZCZYK, Agnieszka, SURMA, Alicja, CECOT, Jakub, PARFIANOWICZ, Agnieszka, ZARZECKI, Konrad, MANDRYK, Milosz and HOLDUN, Nazar. High-Intensity Interval Training - health benefits and risks - literature review. Quality in Sport. 2024;18:53359. eISSN 2450-3118.

https://dx.doi.org/10.12775/QS.2024.18.53359 https://apcz.umk.pl/QS/article/view/53359

The journal has been 20 points in the Ministry of Higher Education and Science of Poland parametric evaluation. Annex to the announcement of the Minister of Higher Education and Science of 05.01.2024. No. 32553.

Has a Journal's Unique Identifier: 201398. Scientific disciplines assigned: Economics and finance (Field of social sciences); Management and Quality Sciences (Field of social sciences).

Punkty Ministerialne z 2019 - aktualny rok 20 punktów. Załącznik do komunikatu Ministra Szkolnictwa Wyższego i Nauki z dnia 05.01.2024 r. Lp. 32553. Posiada Unikatowy Identyfikator Czasopisma: 201398.

Przypisane dyscypliny naukowe: Ekonomia i finanse (Dziedzina nauk społecznych); Nauki o zarządzaniu i jakości (Dziedzina nauk społecznych).

© The Authors 2024;

This article is published with open access at Licensee Open Journal Systems of Nicolaus Copernicus University in Torun, Poland

Open Access. This article is distributed under the terms of the Creative Commons Attribution Noncommercial License which permits any noncommercial use, distribution, and reproduction in any medium, provided the original author (s) and source are credited. This is an open access article licensed under the terms of the Creative Commons Attribution Non commercial license Share alike. (http://creativecommons.org/licenses/by-nc-sa/4.0/) which permits unrestricted, non commercial use, distribution and reproduction in any medium, provided the work is properly cited.

The authors declare that there is no conflict of interests regarding the publication of this paper.

Received: 10.07.2024. Revised: 25.07.2024. Accepted: 26.07.2024. Published: 27.07.2024.

# High-Intensity Interval Training - health benefits and risks - literature review

Arkadiusz Jaworski; Healthcare Team "County Hospital" in Sochaczew, Batalionow Chlopskich 3/7, Sochaczew 96-500, Poland; https://orcid.org/0000-0002-1913-9518 arkadiusz.jaworski.lek@gmail.com

Filip Grajnert, 4th Military Clinical Hospital, ul.Rudolfa Weigla 5, 50-981 Wrocław, Poland https://orcid.org/0009-0003-0912-2557 f.grajnert@icloud.com

Jakub Plizga, 4th Military Clinical Hospital, ul. Rudolfa Weigla 5, 50-981 Wrocław, Poland https://orcid.org/0009-0001-1172-9919 jakubplizga?@gmail.com

Agnieszka Głuszczyk, 4th Military Clinical Hospital, ul. Rudolfa Weigla 5, 50-981 Wrocław, Poland https://orcid.org/0009-0003-5552-4186 gluszczyk.agnieszka@gmail.com

Alicja Surma, Provincial Hospital in Sochaczew, ul. Batalionów Chłopskich 3/7, 96-500 Sochaczew, Poland https://orcid.org/0009-0009-3921-478X asurma96@gmail.com

Jakub Cecot, J. Mikulicz-Radecki University Clinical Hospital, ul. Borowska 213, 50-556 Wrocław, Poland https://orcid.org/0009-0005-3096-7153 jakubcecot1@gmail.com

Agnieszka Parfianowicz, District Hospital in Sochaczew, ul.Batalionów Chłopskich 3/7, 96-500 Sochaczew, Poland https://orcid.org/0009-0009-8415-6478 parfianowiczagnieszka@gmail.com

Konrad Zarzecki, 4th Military Clinical Hospital, ul. Rudolfa Weigla 5, 50-981 Wrocław, Poland; https://orcid.org/0009-0008-2632-4333 konradzarzecki2@gmail.com

Miłosz Mandryk, 4th Military Clinical Hospital, ul. Rudolfa Weigla 5, 50-981 Wrocław, Poland; https://orcid.org/0009-0009-8621-7756 milosz.mandryk@gmail.com

Nazar Holdun; Provincial Specialist Hospital in Wroclaw, ul. Kamienskiego 73a, 51-124 Wroclaw, Poland; goldun.n@gmail.com https://orcid.org/0009-0000-8745-693X

#### 1. Abstract

High-Intensity Interval Training (HIIT) has become a prominent exercise modality known for its efficiency and effectiveness in improving various health outcomes. This review critically examines the positive and negative health aspects of HIIT, focusing on its impact on cardiovascular health, metabolic function, weight management, psychological well-being, and life expectancy. Evidence suggests that HIIT significantly enhances cardiovascular health by improving VO2 max, reducing blood pressure, and enhancing endothelial function. Metabolically, HIIT improves insulin sensitivity, glucose metabolism, and lipid profiles, while effectively reducing visceral fat and enhancing mitochondrial function. In terms of weight management, HIIT promotes fat loss and muscle maintenance, contributing to favorable body composition. Psychologically, HIIT has been shown to reduce symptoms of anxiety and depression, improve cognitive function, and enhance overall mental health. It has also a positive effect on chronic pain conditions.

Emerging studies indicate that HIIT may reduce mortality risk and extend life expectancy by improving cardiovascular and metabolic health. Despite these benefits, HIIT also presents risks such as a higher incidence of musculoskeletal injuries, potential adverse cardiac events in high-risk individuals, and the risk of overtraining and burnout. Special populations, including older adults, children, adolescents, and individuals with chronic conditions, can benefit from HIIT, but modifications and precautions are necessary to ensure safety and effectiveness. The review underscores the importance of individualized HIIT program design, thorough assessment, and continuous monitoring to maximize benefits while minimizing risks. Future research should focus on long-term effects, optimal protocols for diverse populations, and personalized HIIT approaches to enhance safety and efficacy.

## 2. Introduction

# **Background Information**

High-Intensity Interval Training (HIIT) is a form of exercise that involves short bursts of intense activity alternated with periods of low-intensity exercise or rest. It can also be referred to as high-intensity interval exercise (HIIE). However, HIIE is sometimes used to specifically emphasize the exercise aspect rather than a training program. The HIIT method has garnered significant attention for its efficiency and effectiveness in improving various health parameters. The concept of HIIT dates back to the early 20th century when it was initially used to enhance athletic performance. It gained popularity in the mid to late 20th century, especially for its application in training Olympic athletes (1, 2).

## **Definition and History of High-Intensity Interval Training (HIIT)**

HIIT is defined as a training regimen that alternates short periods of intense anaerobic exercise with less-intense recovery periods. A typical HIIT session involves repeated bouts of high-intensity efforts, generally lasting from 20 seconds to several minutes, interspersed with recovery phases of similar or shorter duration (3). This method contrasts with traditional moderate-intensity continuous training (MICT), where exercise is performed at a constant, moderate pace.

The roots of HIIT can be traced back to the early 1900s, but its scientific basis and widespread adoption emerged later. Swedish coach Gösta Holmer developed a systematic approach known as "Fartlek" or "speed play" in the 1930s, which laid the groundwork for modern HIIT protocols. This approach was further refined and popularized by Dr. Izumi Tabata and colleagues in the 1990s through studies demonstrating significant aerobic and anaerobic benefits from short, high-intensity workouts (4).

# Overview of HIIT's Popularity in Modern Fitness Regimes

In recent years, HIIT has surged in popularity, becoming a staple in many fitness programs and regimes. Its appeal lies in its time efficiency and versatility, allowing individuals to achieve significant health benefits in a shorter time compared to traditional exercise methods. HIIT has been shown to improve cardiovascular fitness, metabolic health, and body composition, making it an attractive option for both athletes and the general population (5, 6).

The fitness industry has embraced HIIT due to its adaptable nature. It can be customized for various fitness levels and performed with minimal equipment, making it accessible for home workouts, gym classes, and even outdoor sessions. Furthermore, the rise of digital fitness platforms has contributed to HIIT's widespread adoption, offering guided sessions that can be easily followed by users globally (7).

Despite its benefits, HIIT is not without drawbacks. Concerns about the potential for increased injury risk and overtraining highlight the importance of appropriate program design and individualization. Additionally, while HIIT can be highly effective, it may not be suitable for everyone, particularly individuals with certain medical conditions or low baseline fitness levels (8).

# **Purpose of the Review**

The purpose of this review is to critically analyze and summarize the positive and negative health aspects of HIIT. By examining both the benefits and potential risks, this review aims to provide a comprehensive understanding of HIIT's impact on health.

# Scope

This review focuses on adult populations, including both healthy individuals and those with certain health conditions. It examines the short-term and long-term effects of HIIT on various health outcomes, providing insights into its applicability and effectiveness across different demographics.

#### 3. Methods

# **Literature Search Strategy**

To compile a comprehensive review of the positive and negative health aspects of High-Intensity Interval Training (HIIT), a literature search was conducted using several key databases. These databases include:

PubMed NCBI Cochrane Library Google Scholar

The search was performed using a combination of the following keywords: "High-Intensity Interval Training," "HIIT," "health benefits," "health risks," and "exercise physiology."

## **Inclusion and Exclusion Criteria**

## **Inclusion Criteria:**

Peer-reviewed articles Clinical trials Meta-analyses Systematic reviews

## **Exclusion Criteria:**

Non-peer-reviewed sources Case reports Studies with small sample sizes

## **Data Extraction**

The data extraction process involved summarizing key findings related to the health benefits and risks associated with HIIT. The following aspects of each study were taken into account:

**Study Design**: The type of study conducted (e.g., randomized controlled trial, observational study).

**Population**: The characteristics of the study population, including age, health status, and sample size.

**Duration**: The length of the intervention or follow-up period.

**Outcomes**: The primary and secondary outcomes measured, focusing on health benefits and risks.

Only the most relevant articles to this topic were included.

# 4. Positive Health Aspects of HIIT

## Cardiovascular Health

High-Intensity Interval Training (HIIT) has been shown to significantly improve cardiovascular health. Studies have documented notable enhancements in VO2 max, an important marker of cardiovascular endurance, indicating improved aerobic capacity and overall cardiovascular function (3, 8). Additionally, HIIT has been associated with reductions in both systolic and diastolic blood pressure, as well as lower resting heart rates, contributing to better heart health and reduced cardiovascular risk (2, 9). It improved ejection fraction in individuals with heart failure. In patients with metabolic syndrome it enhanced stroke volume, mitral annular excursion, ejection velocity, and systolic mitral annular velocity (10). Furthermore, research indicates that HIIT can significantly improve endothelial function, which is crucial for maintaining vascular health. Improved endothelial function leads to better vasodilation and reduced arterial stiffness, contributing to overall cardiovascular health (9).

## **Metabolic Benefits**

HIIT has also demonstrated significant metabolic benefits, particularly in enhancing insulin sensitivity and glucose metabolism. This type of training can improve the body's ability to regulate blood sugar levels, which is crucial for preventing and managing conditions like type 2 diabetes (11). Furthermore, HIIT positively impacts lipid profiles by increasing HDL (good cholesterol) and reducing LDL (bad cholesterol) and triglycerides, which are critical factors in preventing metabolic syndrome and cardiovascular diseases (12). Additional studies have found that HIIT can reduce visceral fat, which is more metabolically active and associated with higher risks of metabolic diseases compared to subcutaneous fat. These reductions in visceral fat are particularly beneficial in lowering the risk of metabolic syndrome and improving insulin sensitivity (8). Studies also show that HIIT can enhance mitochondrial function, thereby improving cellular energy production and metabolic efficiency. Finally, this training method was shown to reduce the liver inflammation (13).

## Weight Management

One of the most well-recognized benefits of HIIT is its efficacy in reducing body fat percentage and improving muscle mass. Studies have shown that HIIT can effectively promote fat loss while preserving lean muscle, making it an efficient exercise regimen for weight management (14, 15). This combination of fat reduction and muscle maintenance contributes to a more favorable body composition and overall metabolic health. Additionally, HIIT's impact on appetite-regulating hormones such as ghrelin and leptin suggests potential benefits in appetite control and long-term weight management. The combination of HIIT and intermittent fasting nutritional intervention (IF) may have even more pronounced, enhanced benefits on weight loss, hormones, glucose tolerance/insulin resistance, liver steatosis/inflammation, FA oxidation, and lipogenesis (16). However, more future studies are needed.

# **Psychological and Neurological Benefits**

The psychological benefits of HIIT are equally significant. Research indicates that HIIT can positively impact mental health by reducing symptoms of anxiety and depression (12, 17). Furthermore, improvements in overall mood and cognitive function have been reported, highlighting the mental health advantages of incorporating HIIT into regular exercise routines (18). Evidence suggests that HIIT can also enhance executive function and reduce psychiatric symptoms in older adults, making it beneficial for maintaining mental acuity throughout the lifespan. Buzdagli et al. (19) compared the effect of moderate-intensity continuous exercise (MICE) and HIIT on improving cognitive performance and neuroprotection in a healthy, athlete population. They concluded that HIIE is considered more effective than MICE for improving neuroprotection and cognitive performance. Additionally, some studies demonstrated improvements in motor learning in healthy individuals and the retention of motor skills after a stroke. It may be explained by the increases in cortico-spinal excitability and brain-derived neurotrophic factor (10, 20).

## **Impact on Life Expectancy and Mortality**

Emerging evidence suggests that HIIT may play a role in reducing mortality risk and potentially extending life expectancy. By improving cardiovascular and metabolic health, HIIT can lower the risk of premature death from various chronic diseases (21). Jaureguizar et al. found that HIIT significantly improved functional capacity and quality of life in patients with coronary artery disease compared to moderate continuous training (MCT), with no increase in cardiovascular risk. Improved functional capacity is closely linked to lower mortality rates (22). Another study found that HIIT resulted in substantial clinical improvements in patients with coronary artery disease and heart failure, including better peak oxygen uptake and ventricular function, both of which are important prognostic factors for survival (2). Stensvold et al. (23) found that HIIT did not significantly differ from moderate-intensity continuous training (MICT) in reducing all-cause mortality among older adults. However, there was a trend towards lower mortality with HIIT, suggesting potential benefits for life expectancy. Moreover, HIIT improved long-term survival in heart failure patients by increasing VO2 peak and decreasing left ventricular end-systolic diameter, both critical factors for reducing mortality (24).

The combination of enhanced heart health, better metabolic control, and improved physical and mental well-being contributes to the overall longevity benefits of HIIT.

## 5. Negative Health Aspects of HIIT

While HIIT is popular for its efficiency and health benefits, there are potential negative health aspects associated with this type of training. Findings from various studies demonstrate the negative impacts of HIIT.

# **Risk of Injury**

High-Intensity Interval Training (HIIT) is associated with a higher incidence of musculoskeletal injuries compared to moderate-intensity exercise. This increased risk is due to the intense and rapid movements required during HIIT sessions, which can strain muscles and joints, leading to injuries such as sprains, strains, and tendonitis (12). Common types of injuries include muscle pulls, joint sprains, and stress fractures. To mitigate these risks, it is essential to employ proper warm-up routines, ensure correct technique, and incorporate adequate rest and recovery periods between sessions (5). Additionally, tailoring HIIT programs to individual fitness levels can help reduce the likelihood of injuries.

## Cardiovascular Risks

While HIIT can provide significant cardiovascular benefits, it also carries potential risks, particularly for individuals with pre-existing heart conditions. There is a potential for adverse cardiac events such as arrhythmias, myocardial infarction, or sudden cardiac arrest, especially in high-risk individuals (25). Therefore, it is crucial to conduct thorough screening and monitoring before and during HIIT programs. Recommendations include pre-exercise cardiovascular evaluations, continuous monitoring during exercise, and gradual progression of intensity to ensure safety (26). Recent studies advocate for the use of wearable technology to monitor heart rate and detect any abnormalities during HIIT sessions.

## **Overtraining and Burnout**

HIIT can lead to overtraining, psychological stress, and burnout if not appropriately balanced with recovery periods (27). Signs and symptoms of overtraining syndrome include persistent fatigue, decreased performance, mood disturbances, and increased susceptibility to infections due to a compromised immune system (18, 28). HIIT can lead to detrimental effects on metabolic health, such as impaired glucose metabolism and increased oxidative stress, when the intensity and volume of training exceed optimal levels (29). To prevent burnout, it is important to incorporate adequate recovery time, ensure varied training intensities, and listen to the body's signals. Balancing high-intensity sessions with lower-intensity or rest days can help maintain long-term adherence and prevent the negative effects of overtraining (17). Implementing periodized training plans can also aid in optimizing performance and recovery. Ultimately, not all individuals respond positively to HIIT. Factors such as age, fitness level, and genetic predisposition can lead to variable responses, with some individuals experiencing adverse metabolic and cardiovascular responses (30).

**6. HIIT in Special Populations Older Adults** 

HIIT offers numerous benefits to older adults, but it must be approached with caution. HIIT has been shown to improve functional capacity, muscle power, and physical performance in healthy older adults. It can enhance cardiovascular health, muscle strength, and overall physical function, which are critical in reducing fall risk and improving quality of life (31). However, older adults are at a higher risk of injuries and adverse events. Therefore, HIIT protocols should be modified to ensure safety, including longer warm-up and cool-down periods, lower intensity intervals, and close monitoring during exercise sessions (5). Recent research suggests that supervised HIIT programs specifically designed for older populations can maximize benefits while minimizing risks. In relation to neurogenesis and cognitive enhancement, a Cochrane review found that aerobic physical activities that enhance cardiorespiratory fitness do not appear to confer any significant cognitive benefit in healthy older adults (32).

## Children and adolescents

Overall, training in child populations focuses on promoting physical activity and skill development in a way that is effective and enjoyable. Research highlights the importance of incorporating age-appropriate exercises that enhance motor skills, strength, and endurance while considering the developmental stages of children. Programs should emphasize variety to keep children engaged and motivated, ensuring a positive attitude toward lifelong fitness and introducing good routines. To prevent injuries and foster a supportive environment for growth and development, proper supervision and guidance from trained professionals should be applied (33). Long-term HIIT can enhance cardiorespiratory fitness in children and adolescents with overweight or obesity (34). Furthermore, HIIT positively influences cardiometabolic risk factors in obese children and adolescents. Compared to MICT, HIIT is more effective in improving cardiorespiratory fitness and systolic blood pressure. Studies exhibit that the specific components of the HIIT protocol play a crucial role in its effectiveness for managing childhood obesity (35). In summary, children and adolescents benefit significantly from HIIT; however, it is important to remember to take appropriate breaks for regeneration (36).

## **Individuals with Chronic Conditions**

HIIT has proven effective for individuals with various chronic conditions, such as diabetes, obesity, and cardiovascular diseases. For patients with type 2 diabetes, HIIT has been shown to improve insulin sensitivity, glucose metabolism, and cardiovascular fitness, making it a valuable component of diabetes management (37). In individuals with obesity, HIIT can significantly reduce body fat and improve metabolic health (38). For those with cardiovascular diseases, HIIT has demonstrated superior benefits compared to moderate-intensity continuous training, improving cardiorespiratory fitness, endothelial function, and overall cardiovascular health (26).

Given the increased risk associated with high-intensity exercise, HIIT programs for individuals with chronic conditions should be tailored to their specific health status and conducted under medical supervision. This ensures that the exercise intensity is appropriate and that any potential adverse effects are promptly managed.

Regular monitoring and adjustments to the HIIT protocol can help maximize benefits while minimizing risks (39).

Emerging evidence suggests that HIIT can be beneficial for patients with chronic diseases. For instance, individuals with cardiovascular disease have shown improved functional capacity and quality of life through HIIT, without increasing medical risks. Compared to moderate continuous training (MCT), HIIT has been found to significantly enhance left ventricular ejection fraction while reducing left ventricular end-diastolic and end-systolic volumes. Although research on HIIT in patients with pulmonary disease and Type 2 Diabetes (T2D) is limited, HIIT appears to be at least as effective as MCT in improving functional capacity and quality of life in pulmonary disease patients. Additionally, HIIT may offer advantages such as peripheral muscle changes leading to reduced negative training symptoms like dyspnea and leg discomfort. In the case of T2D patients, HIIT programming is equally effective as MCT in reducing body fat percentage and enhancing peak power output. HIIT should be considered either in combination with or as a supplement to MCT in the treatment plan for patients with chronic diseases, particularly for those who cannot tolerate high-intensity continuous exercise. Patient preference for the exercise protocol is crucial, as it can impact adherence to the intervention. Future studies with larger sample sizes are needed to determine the most effective HIIT protocols for optimal exercise responses and training adaptations in patients with various chronic diseases. While using HIIT with chronic disease patients raises concerns about safety, following prescribed exercise protocols can mitigate risks. Overall, the literature reviewed here underscores the growing scientific support for the safety and efficacy of HIIT in stable patients with chronic diseases (3).

Chronic pain is a debilitating condition that can co-occur with various chronic diseases and results in worse quality of life in patients. Drug therapy remains the primary treatment for chronic pain. However, a review by Stefano Palermi et al. suggests that HIIT offers significant benefits for several chronic pain conditions. Consequently, HIIT could serve as a valuable adjunct to conventional pharmacological therapies and may enhance the quality of life for patients suffering from these diseases. Chronic pain conditions such as fibromyalgia (FM), low-back pain, and diabetes are prevalent examples (40). HIIT may also reduce disease symptoms like pain, fatigue and also has been proved to reduce inflammation in patients with axial spondyloarthritis. (41). Due to the complex nature of these conditions, a multidisciplinary treatment approach is often the most effective strategy, with physical activity being a cornerstone of complementary therapies. Physical activity offers significant advantages for patients with chronic pain, as it does not interact with the multiple medications they commonly use. Moreover, exercise can specifically reduce the severity of chronic pain and provide broader benefits, such as improvements in overall physical and mental health, including alleviation of depression and physical deconditioning which are frequently observed in these patients. The positive effects of exercise on chronic pain can be understood at a microscopic level. For instance, exercise increases the production of endogenous opioids, which can lead to transient antinociception and has probably a antihyperalgesic effect. In conclusion, HIIT has demonstrated promising results as a therapeutic exercise for patients with chronic pain conditions.

However, the current quality of evidence is low, and further high-quality studies, such as randomized controlled trials are needed to confirm the encouraging results (40).

## 7. Discussion

## **Summary of Key Findings**

High-Intensity Interval Training (HIIT) has been shown to offer numerous health benefits, including improvements in cardiovascular health, metabolic benefits, weight management, psychological health, and even potential increases in life expectancy. However, it also presents certain risks, such as a higher incidence of musculoskeletal injuries, potential cardiovascular risks for high-risk individuals, and the possibility of overtraining and burnout (2, 5, 8, 26, 38).

## **Comparison with Other Forms of Exercise**

When compared to moderate-intensity continuous training (MICT) and resistance training (RT), HIIT demonstrates several distinct advantages. HIIT often provides greater improvements in aerobic capacity, cardiovascular health, and metabolic function in a shorter amount of time (25, 42). Studies show that HIIT is at least as effective as MICT in improving cardiovascular health, with some research indicating superior benefits in terms of VO2 max, insulin sensitivity, and overall fitness (43, 44). Moreover, HIIT can lead to similar or even greater reductions in body fat and improvements in body composition compared to MICT (45). Resistance training complements HIIT by improving muscle strength and endurance, which can further enhance overall physical fitness (46).

## **Limitations of Current Research**

Despite the promising findings, there are several limitations in the current research on HIIT. Many studies have small sample sizes and short durations, limiting the generalizability of their results. Additionally, there is a lack of long-term studies examining the sustained benefits and risks of HIIT over extended periods. Furthermore, variations in HIIT protocols (e.g., duration, intensity, frequency) make it difficult to standardize recommendations (39). More research is needed to establish optimal HIIT protocols for different populations, particularly older adults and individuals with chronic conditions.

## **Practical Implications**

To safely incorporate HIIT into exercise routines, it is important to tailor the program to individual fitness levels and health conditions. Beginners should start with lower intensity and gradually increase the intensity and duration of their workouts. Incorporating adequate warm-up and cool-down periods is essential to prevent injuries. Health professionals should conduct thorough assessments and provide personalized guidance to ensure the safety and effectiveness of HIIT programs for their patients. Regular monitoring and adjustments to the HIIT protocol can help maximize benefits while minimizing risks (8, 26). The use of technology such as heart rate monitors and fitness trackers can aid in optimizing training and ensuring safety.

#### **Future Directions**

While the current body of research underscores the efficacy of HIIT, there is a pressing need for more comprehensive and long-term studies to better understand its sustained effects and safety profiles.

Future research should focus on addressing the gaps in the literature, such as the long-term impacts of HIIT on diverse populations, the optimal protocols for different age groups and health conditions, and the mechanisms underlying the observed benefits and risks (47, 48). Additionally, there is a need for developing personalized HIIT protocols that consider

individual health status, fitness levels, and specific needs to maximize benefits while minimizing risks. Health professionals should also be equipped with clear guidelines and tools to advise patients on incorporating HIIT into their exercise routines safely and effectively (6). Future research should also focus on the molecular mechanisms underlying HIIT's benefits to provide deeper insights into its physiological effects.

## **Conclusions**

High-Intensity Interval Training has emerged as a highly effective exercise modality that offers numerous health benefits across various populations. The key positive aspects of HIIT include significant improvements in cardiovascular health, metabolic function, weight management, psychological well-being, and potential reductions in mortality risk. However, HIIT is also associated with risks such as higher incidences of musculoskeletal injuries, potential adverse cardiac events in high-risk individuals, and the risk of overtraining and burnout. These benefits and risks highlight the importance of individualized program design and careful monitoring, especially for special populations like older adults and those with chronic conditions.

#### **Disclosure**

Conceptualization, Arkadiusz Jaworski, and Filip Grajnert

Methodology, Agnieszka Gluszczyk;

Software, Jakub Plizga;

Check, Jakub Cecot, Miłosz Mandryk and Konrad Zarzecki;

Formal analysis, Agnieszka Parfianowicz;

Investigation, Arkadiusz Jaworski;

Resources, Nazar Holdun;

Data curation, Alicja Surma;

Writing - rough preparation, Filip Grajnert;

Writing - review and editing, Nazar Holdun

Visualization, Jakub Plizga;

Supervision, Agnieszka Gluszczyk;

Project administration, Agnieszka Parafinowicz;

Receiving funding, Alicja Surma

All authors have read and agreed with the published version of the manuscript.

## **Funding Statement:**

The study did not receive special funding.

**Institutional Review Board Statement:** 

Not applicable.

**Informed Consent Statement:** 

Not applicable.

**Data Availability Statement:** 

Not applicable.

**Conflict of Interest Statement:** 

The authors declare no conflict of interest.

#### References

1.Feito Y, Heinrich K, Butcher S, Poston W. High-Intensity Functional Training (HIFT): Definition and Research Implications for Improved Fitness. Sports. 2018;6(3):76.

https://doi.org/10.3390/sports6030076

2.Guiraud T, Nigam A, Gremeaux V, Meyer P, Juneau M, Bosquet L. High-Intensity Interval Training in Cardiac Rehabilitation. Sports Medicine. 2012;42(7):587-605.

https://doi.org/10.2165/11631910-0000000000-00000

3Ross LM, Porter RR, Durstine JL. High-intensity interval training (HIIT) for patients with chronic diseases. Journal of Sport and Health Science. 2016;5(2):139-44.

https://doi.org/10.1016/j.jshs.2016.04.005

4.Magalhães RA, Franco TM, Garcia FL, Hunger MS, Delbim L, Rodrigues MF, et al. Benefits arising from the practice of High Intensity Interval Training. International Seven Journal of Health Research. 2023;2(2).

https://doi.org/10.56238/isevjhv2n2-005

5.Marriott CFS, Petrella AFM, Marriott ECS, Boa Sorte Silva NC, Petrella RJ. High-Intensity Interval Training in Older Adults: a Scoping Review. Sports Medicine - Open. 2021;7(1).

https://doi.org/10.1186/s40798-021-00344-4

6.Taylor JL, Holland DJ, Keating SE, Bonikowske AR, Coombes JS. Adherence to High-Intensity Interval Training in Cardiac Rehabilitation: A REVIEW AND RECOMMENDATIONS. Journal of Cardiopulmonary Rehabilitation and Prevention. 2021;41(2):61-77.

https://doi.org/10.1097/HCR.0000000000000565

7.Forbes SC, Candow DG, Smith-Ryan AE, Hirsch KR, Roberts MD, Vandusseldorp TA, et al. Supplements and Nutritional Interventions to Augment High-Intensity Interval Training Physiological and Performance Adaptations—A Narrative Review. Nutrients. 2020;12(2):390.

https://doi.org/10.3390/nu12020390

8.Cassidy S, Thoma C, Houghton D, Trenell MI. High-intensity interval training: a review of its impact on glucose control and cardiometabolic health. Diabetologia. 2017;60(1):7-23. https://doi.org/10.1007/s00125-016-4106-1

9.Karlsen T, Aamot I-L, Haykowsky M, Rognmo Ø. High Intensity Interval Training for Maximizing Health Outcomes. Progress in Cardiovascular Diseases. 2017;60(1):67-77.

https://doi.org/10.1016/j.pcad.2017.03.006

10.Crozier J, Roig M, Eng JJ, Mackay-Lyons M, Fung J, Ploughman M, et al. High-Intensity Interval Training After Stroke: An Opportunity to Promote Functional Recovery, Cardiovascular Health, and Neuroplasticity. Neurorehabilitation and Neural Repair. 2018;32(6-7):543-56.

https://doi.org/10.1016/j.pcad.2017.03.006

11.da Silva DE, Grande AJ, Roever L, Tse G, Liu T, Biondi-Zoccai G, et al. High-Intensity Interval Training in Patients with Type 2 Diabetes Mellitus: a Systematic Review. Current Atherosclerosis Reports. 2019;21(2):8.

https://doi.org/10.1007/s11883-019-0767-9

12.Martland R, Stubbs B, Gaughran F. T147. CAN HIGH INTENSITY INTERVAL TRAINING (HIIT) IMPROVE PHYSICAL AND MENTAL HEALTH OUTCOMES? A META-REVIEW OF THE GLOBAL BENEFITS OF HIIT AND FOCUSED SYSTEMATIC REVIEW OF THE EFFECTS OF HIIT IN MENTAL DISORDERS. Schizophrenia Bulletin. 2020;46(Supplement\_1):S286-S7.

https://doi.org/10.1016/j.jad.2019.11.039

13.Wang Y, Guo Y, Xu Y, Wang W, Zhuang S, Wang R, et al. HIIT Ameliorates Inflammation and Lipid Metabolism by Regulating Macrophage Polarization and Mitochondrial Dynamics in the Liver of Type 2 Diabetes Mellitus Mice. Metabolites. 2022;13(1):14

https://doi.org/10.3390/metabo13010014.

14.A. Alahmadi M. High-intensity Interval Training and Obesity. Journal of Novel Physiotherapies. 2014;04(03).

https://doi.org/10.1002/osp4.109

15.Logan GRM, Harris N, Duncan S, Schofield G. A Review of Adolescent High-Intensity Interval Training. Sports Medicine. 2014;44(8):1071-85.

https://doi.org/10.1007/s40279-014-0187-5

16.de Castro-de-Paiva P, Marinho TS, Mandarim-de-Lacerda CA, Aguila MB. Intermittent fasting, high-intensity interval training, or a combination of both have beneficial effects in obese mice with nonalcoholic fatty liver disease. J Nutr Biochem. 2022;104:108997.

https://doi.org/10.1016/j.jnutbio.2022.108997

17.Batrakoulis A, Fatouros IG. Psychological Adaptations to High-Intensity Interval Training in Overweight and Obese Adults: A Topical Review. Sports. 2022;10(5):64. https://doi.org/10.3390/sports10050064

18.Ai J-Y, Chen F-T, Hsieh S-S, Kao S-C, Chen A-G, Hung T-M, et al. The Effect of Acute High-Intensity Interval Training on Executive Function: A Systematic Review. International Journal of Environmental Research and Public Health. 2021;18(7):3593.

https://doi.org/10.3390/ijerph18073593

19.Buzdagli Y, Ozan M, Baygutalp N, Oget F, Karayigit R, Yuce N, et al. The effect of high-intensity intermittent and moderate-intensity continuous exercises on neurobiological markers and cognitive performance. BMC Sports Science, Medicine and Rehabilitation. 2024;16(1).

https://doi.org/10.1186/s13102-024-00831-7

20.Nepveu J-F, Thiel A, Tang A, Fung J, Lundbye-Jensen J, Boyd LA, et al. A Single Bout of High-Intensity Interval Training Improves Motor Skill Retention in Individuals With Stroke. Neurorehabilitation and Neural Repair. 2017;31(8):726-35.

https://doi.org/10.1177/1545968317718269

21.CAMPBELL WW, KRAUS WE, POWELL KE, HASKELL WL, JANZ KF, JAKICIC JM, et al. High-Intensity Interval Training for Cardiometabolic Disease Prevention. Medicine & Science in Sports & Exercise. 2019;51(6):1220-6.

https://doi.org/10.1249/MSS.0000000000001934

22. Villelabeitia Jaureguizar K, Vicente-Campos D, Ruiz Bautista L, Hernández de la Peña C, Arriaza Gómez MJ, Calero Rueda MJ, et al. Effect of High-Intensity Interval Versus Continuous Exercise Training on Functional Capacity and Quality of Life in Patients With Coronary Artery Disease: A RANDOMIZED CLINICAL TRIAL. Journal of Cardiopulmonary Rehabilitation and Prevention. 2016;36(2):96-105.

https://doi.org/10.1097/HCR.0000000000000156

23.Stensvold D, Viken H, Steinshamn SL, Dalen H, Støylen A, Loennechen JP, et al. Effect of exercise training for five years on all cause mortality in older adults—the Generation 100 study: randomised controlled trial. BMJ. 2020;371:m3485.

https://doi.org/10.1136/bmj.m3485

24.Hsu C-C, Fu T-C, Yuan S-S, Wang C-H, Liu M-H, Shyu Y-C, et al. High-Intensity Interval Training is Associated with Improved Long-Term Survival in Heart Failure Patients. Journal of Clinical Medicine. 2019;8(3):409.

https://doi.org/10.3390/jcm8030409

25.Hussain SR, Macaluso A, Pearson SJ. High-Intensity Interval Training Versus Moderate-Intensity Continuous Training in the Prevention/Management of Cardiovascular Disease. Cardiology in Review. 2016;24(6):273-81.

https://doi.org/10.1097/CRD.0000000000000124

26. Wewege MA, Ahn D, Yu J, Liou K, Keech A. High-Intensity Interval Training for Patients With Cardiovascular Disease—Is It Safe? A Systematic Review. Journal of the American Heart Association. 2018;7(21).

https://doi.org/10.1161/JAHA.118.009305

27. Reljic D, Frenk F, Herrmann HJ, Neurath MF, Zopf Y. Low-volume high-intensity interval training improves cardiometabolic health, work ability and well-being in severely obese individuals: a randomized-controlled trial sub-study. Journal of Translational Medicine. 2020;18(1).

https://doi.org/10.1186/s12967-020-02592-6

28.Gibala MJ. Interval Training for Cardiometabolic Health: Why Such A HIIT? Current Sports Medicine Reports. 2018;17(5):148-50.

https://doi.org/10.1249/JSR.00000000000000483

29.Joisten N, Gehlert S, Zimmer P. Is high-intensity interval training harmful to health? Trends Endocrinol Metab. 2022;33(2):85-6.

https://doi.org/10.1016/j.tem.2021.07.003

30. Way KL, Sabag A, Sultana RN, Baker MK, Keating SE, Lanting S, et al. The effect of low-volume high-intensity interval training on cardiovascular health outcomes in type 2 diabetes: A randomised controlled trial. Int J Cardiol. 2020;320:148-54.

https://doi.org/10.1016/j.ijcard.2020.06.019

31.Elboim-Gabyzon M, Buxbaum R, Klein R. The Effects of High-Intensity Interval Training (HIIT) on Fall Risk Factors in Healthy Older Adults: A Systematic Review. International Journal of Environmental Research and Public Health. 2021;18(22):11809. https://doi.org/10.3390/ijerph182211809

32. Young J, Angevaren M, Rusted J, Tabet N. Aerobic exercise to improve cognitive function in older people without known cognitive impairment. Cochrane Database Syst Rev. 2015;2015(4):Cd005381.

https://doi.org/10.1002/14651858.CD005381.pub4

33. Faigenbaum AD, Kraemer WJ, Blimkie CJ, Jeffreys I, Micheli LJ, Nitka M, et al. Youth resistance training: updated position statement paper from the national strength and conditioning association. J Strength Cond Res. 2009;23(5 Suppl):S60-79.

https://doi.org/10.1519/JSC.0b013e31819df407

34. Deng Y, Wang X. Effect of high-intensity interval training on cardiorespiratory in children and adolescents with overweight or obesity: a meta-analysis of randomized controlled trials. Front Public Health. 2024;12:1269508.

https://doi.org/10.3389/fpubh.2024.1269508

35.Cao M, Tang Y, Li S, Zou Y. Effects of High-Intensity Interval Training and Moderate-Intensity Continuous Training on Cardiometabolic Risk Factors in Overweight and Obesity Children and Adolescents: A Meta-Analysis of Randomized Controlled Trials. Int J Environ Res Public Health. 2021;18(22).

https://doi.org/10.3390/ijerph182211905

36.Eddolls WTB, McNarry MA, Stratton G, Winn CON, Mackintosh KA. High-Intensity Interval Training Interventions in Children and Adolescents: A Systematic Review. Sports Med. 2017;47(11):2363-74.

https://doi.org/10.1007/s40279-017-0753-8

37.Kourek C, Karatzanos E, Raidou V, Papazachou O, Philippou A, Nanas S, et al. Effectiveness of high intensity interval training on cardiorespiratory fitness and endothelial function in type 2 diabetes: A systematic review. World J Cardiol. 2023;15(4):184-99.

https://doi.org/10.4330/wjc.v15.i4.184

38.Botta RM, Palermi S, Tarantino D. High-intensity interval training for chronic pain conditions: a narrative review. Journal of Exercise Rehabilitation. 2022;18(1):10-9.

https://doi.org/10.12965/jer.2142718.359

39. Astorino TA, Hicks AL, Bilzon JLJ. Viability of high intensity interval training in persons with spinal cord injury—a perspective review. Spinal Cord. 2021;59(1):3-8. https://doi.org/10.1038/s41393-020-0492-9

40.Botta R, Palermi S, Tarantino D. High-intensity interval training for chronic pain conditions: a narrative review. Journal of Exercise Rehabilitation. 2022;18:10-9. https://doi.org/10.12965/jer.2142718.359

41.Sveaas SH, Bilberg A, Berg IJ, Provan SA, Rollefstad S, Semb AG, et al. High intensity exercise for 3 months reduces disease activity in axial spondyloarthritis (axSpA): a multicentre randomised trial of 100 patients. Br J Sports Med. 2020;54(5):292-7.

https://doi.org/10.1136/bjsports-2018-099943

42.Fleg JL. Salutary effects of high-intensity interval training in persons with elevated cardiovascular risk. F1000Research. 2016;5:2254.

https://doi.org/10.12688/f1000research.8778.1

43. Schulté B, Nieborak L, Leclercq F, Villafañe JH, Sánchez Romero EA, Corbellini C. The Comparison of High-Intensity Interval Training Versus Moderate-Intensity Continuous

Training after Coronary Artery Bypass Graft: A Systematic Review of Recent Studies. Journal of Cardiovascular Development and Disease. 2022;9(10):328.

https://doi.org/10.3390/jcdd9100328

44.Pearson SJ. High Intensity Interval Training Vs Moderate Intensity Continuous Training in the Management of Metabolic Type Disease. MOJ Anatomy & Physiology. 2015;1(5). https://doi.org/10.15406/mojap.2015.01.00027

45.Normand-Gravier T, Britto F, Launay T, Renfree A, Toussaint J-F, Desgorces F-D. Exercise Dose Equalization in High-Intensity Interval Training: A Scoping Review. International Journal of Environmental Research and Public Health. 2022;19(9):4980. https://doi.org/10.3390/ijerph19094980

46.Gayda M, Ribeiro PAB, Juneau M, Nigam A. Comparison of Different Forms of Exercise Training in Patients With Cardiac Disease: Where Does High-Intensity Interval Training Fit? Canadian Journal of Cardiology. 2016;32(4):485-94.

https://doi.org/10.1016/j.cjca.2016.01.017

47. You Y, Li W, Liu J, Li X, Fu Y, Ma X. Bibliometric Review to Explore Emerging High-Intensity Interval Training in Health Promotion: A New Century Picture. Frontiers in Public Health. 2021;9.

https://doi.org/10.3389/fpubh.2021.697633

48.Hsieh S-S, Chueh T-Y, Huang C-J, Kao S-C, Hillman CH, Chang Y-K, et al. Systematic review of the acute and chronic effects of high-intensity interval training on executive function across the lifespan. Journal of Sports Sciences. 2021;39(1):10-22.

https://doi.org/10.1080/02640414.2020.1803630