

# Blood Pressure Reactivity During Isometric Handgrip Exercise Between Adults With and Without Obesity

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## INTRODUCTION

- High blood pressure (BP) reactivity during exercise predicts higher future cardiovascular disease risk.<sup>1</sup>
- Previous studies indicate that individuals with stage 3 obesity (body mass index [BMI]  $\geq 40$  kg/m<sup>2</sup>) have elevated BP reactivity, but it is unclear whether stage 1-2 obesity (BMI 30-40 kg/m<sup>2</sup>) has a similar effect on BP reactivity.<sup>2</sup>
- Understanding whether milder forms of obesity influence BP reactivity during exercise can help inform cardiovascular disease prevention strategies.

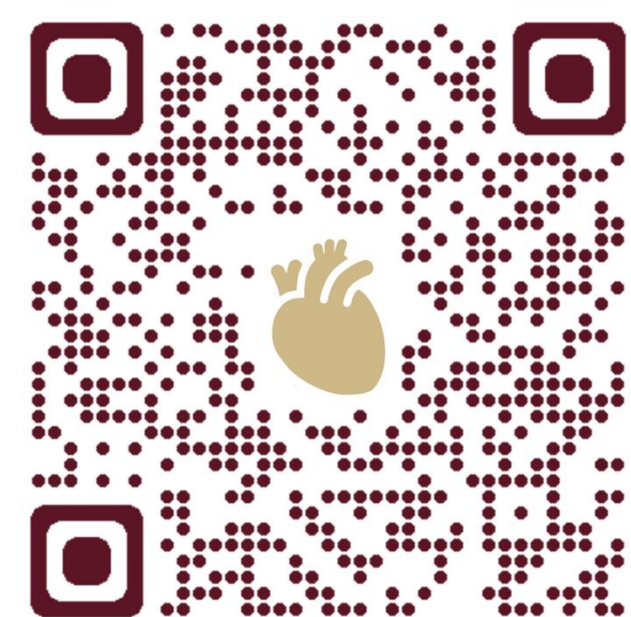
## PURPOSE

- To test the hypothesis that adults with stage 1-2 obesity exhibit higher BP reactivity than adults without obesity during isometric handgrip exercise.

## EXPERIMENTAL DESIGN

- Screening information was compared between those with and without obesity using unpaired, two-tailed t-tests for normally distributed data or the Mann-Whitney U test for non-normally distributed data (Table 1).
- We measured heart rate via electrocardiogram (ECG) and beat-to-beat hemodynamics via finger photoplethysmography.
- The protocol consisted of a 10-minute baseline measurement followed by a 2-minute bout of isometric handgrip exercise at 40% of maximal voluntary contraction (MVC).
- We analyzed differences ( $\Delta$ ) between baseline and the final minute of handgrip (handgrip-baseline) using unpaired, two-tailed t-tests for normally distributed data and Mann-Whitney U test for non-normally distributed data (Figure 1).
- Given that absolute force production can influence BP reactivity, additional analyses were conducted using ANCOVA with statistical adjustment for MVC (Figure 1).
- All statistical analyses were performed with an  $\alpha < 0.05$  for significance.

## QR CODE AND FUNDING SOURCES



Florida State University Graduate School Legacy Fellowship (CD), National Institutes of Health K01HL160772 (JCW), and American Heart Association 23CDA1037938 (JCW).

## RESULTS

Table 1. Participant screening information

Characteristic	Without Obesity	With Obesity	p	Effect Size
Number of Participants	15	15	>0.99	-
Biological sex	7 Female/8 Male	6 Female/9 Male	>0.99	-
Age (years)	24 [6]	22 [7]	0.11	0.60
Body mass index (kg/m <sup>2</sup> )	23 $\pm$ 2	34 $\pm$ 3	<0.0001	2.50
Systolic BP (mmHg)	121 $\pm$ 10	124 $\pm$ 11	0.28	0.30
Diastolic BP (mmHg)	76 $\pm$ 8	78 $\pm$ 9	0.32	0.25

We present data as median [IQR] or mean  $\pm$  SD. We compared groups using Fisher's exact test (proportion of female & male adults), a Mann-Whitney test (age), and unpaired, two-tailed t-tests.

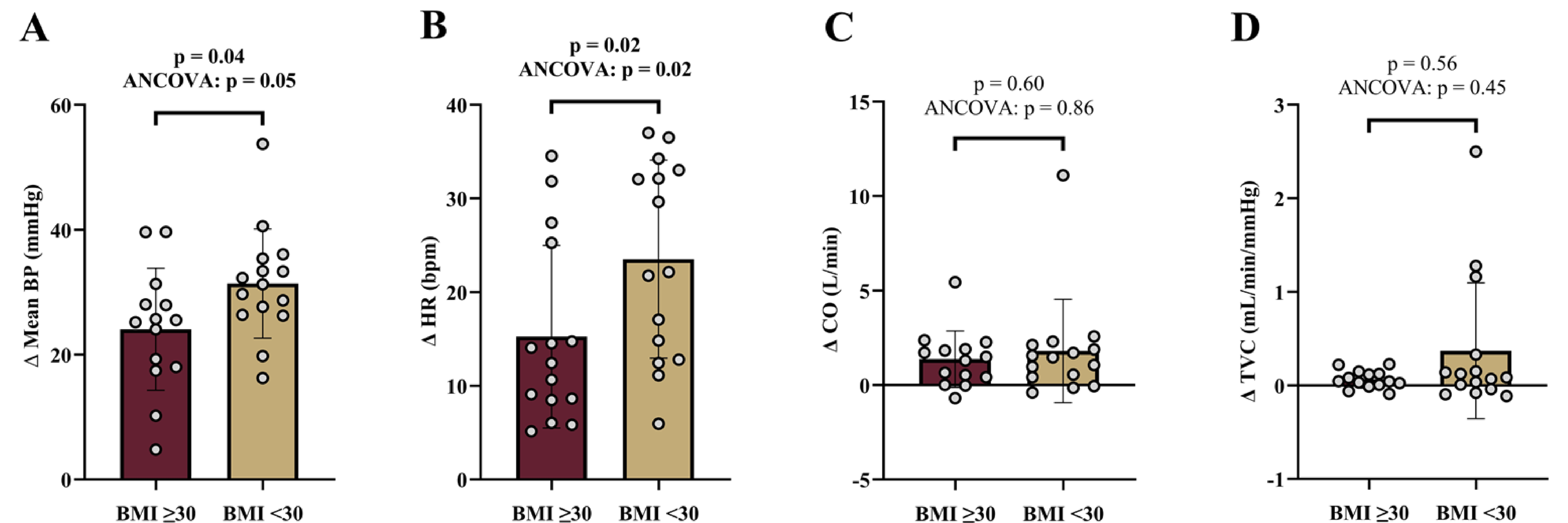


Figure 1. Cardiovascular Responses During Isometric Handgrip Exercise. (A)  $\Delta$ Mean BP was higher in the group without obesity. (B)  $\Delta$ Heart rate (HR) was higher in the group without obesity. (C)  $\Delta$ Cardiac output (CO) and (D)  $\Delta$ Total vascular conductance (TVC) did not differ between groups.

## CONCLUSION

Contrary to the hypothesis, BP reactivity during isometric handgrip exercise was lower in adults with stage 1-2 obesity than in adults without obesity. This suggests a blunted cardiovascular (BP and heart rate) response during exercise for young adults with obesity who are otherwise healthy.

## REFERENCES

1. Kunimatsu, N., Tsukamoto, H., & Ogoh, S. (2024). Exaggerated Blood Pressure Response to Exercise Is a Risk of Future Hypertension Even in Healthy, Normotensive Young Individuals-Potential Preventive Strategies for This Phenomenon?. *Journal of clinical medicine*, 13(19), 5975. <https://doi.org/10.3390/jcm13195975>
2. Rademacher, E. R., Jacobs, D. R., Jr, Moran, A., Steinberger, J., Prineas, R. J., & Sinaiko, A. (2009). Relation of blood pressure and body mass index during childhood to cardiovascular risk factor levels in young adults. *Journal of hypertension*, 27(9), 1766-1774. <https://doi.org/10.1097/HJH.0b013e32832e8cfa>