

Physical Activity and Hormonal Cycles in Women: The Need for a More Active Life in The Post-Pandemic Era

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To the Editor,

We have read with great interest the article “Menstrual cycle and Exercise.” by Gonzalo Agul S and coworkers (1) and we found it of interest in the field of prevention of cardiovascular disease in women.

Authors reviewed the effects of different exercise and intensity on menstrual cycle.

With reference to the findings reported in the paper, we would like to make the following contribution to the discussion.

Hormonal changes over a woman’s lifetime profoundly affect cardiovascular risk and women’s perception of risk. Since physical exercise is still a milestone in cardiovascular prevention, it is extremely important to understand the relationship between the hormonal cycle and physical exercise. (2,3)

The recent pandemic has shown that men and women react to stress differently. Women who were most affected by stress during the pandemic reacted with an eat to cope with stress response. Several manuscripts show that physical activity decreased during the pandemic especially in women compared to men. At the same time, women have increased their sedentary lifestyle. (4,5,6) Eat to cope, reduced physical activity and increase sedentary habits led to overweight and obesity. The development of obesity and the localization of fat deposits is strongly influenced by the hormonal cycle in women with an increase in visceral obesity with the onset of menopause. (6)

Women engage in less physical activity throughout their lives for various reasons including stereotypes

and socio-economic conditions that lead to underestimating the importance of physical activity in maintaining good health. In recent years in industrialized countries this condition seems to have changed while a great social and religious influence persists in some low-income countries. (7) By including these lifestyle changes in the different phases of the hormonal cycle, it is clear that the recent pandemic has negatively affected women’s health. It is therefore necessary to support a return to a correct and above all more active lifestyle. The reasons that limit physical activity in women are different: low habit of practicing sports, work commitment that adds to the social role of family care, the high cost of sports facilities in our region are just some of the objective limitations, which act by making women less active than men. This gap increases with increasing age and with the parallel increase in responsibilities in women’s lives. Furthermore, the recent identification of Post-Acute Sequelae of SARS-CoV-2 Infection in subjects, even if affected by the asymptomatic infection, has stimulated the interest in physical activity to counteract this long-term damage. (8,9,10) It is therefore essential to increase our knowledge in this direction and the work of Agul and coworkers provides interesting insights into the role that hormones play in the performance of physical activity in women.

Conflicts of Interest: Each author declares that he or she has no commercial associations (e.g. consultancies, stock ownership, equity interest, patent/licensing arrangement etc.) that might pose a conflict of interest in connection with the submitted article.

References

1. Gonzalo Algul S, Alp B, Ozcelik O. Menstrual cycle and Exercise. *Progr Nutr [Internet]* 2022; 24(1):e2022021. Available from: <https://www.mattioli1885journals.com/index.php/progressinnutrition/article/view/11435>.
2. Elder P, Sharma G, Gulati M, Michos ED. Identification of female-specific risk enhancers throughout the lifespan of women to improve cardiovascular disease prevention, *Am J Prev Cardio* 2020; 2, 100028, <https://doi.org/10.1016/j.ajpc.2020.100028>
3. Nasi M, Patrizi G, Pizzi C, et al. The role of physical activity in individuals with cardiovascular risk factors: An opinion paper from Italian Society of Cardiology-Emilia Romagna-Marche and SIC-Sport. *J Cardiovasc Med* 2019; 20(10):631-639. doi: 10.2459/JCM.0000000000000855
4. Coppi F, Nasi M, Farinetti A, et al Physical activity, sedentary behaviour, and diet in menopausal women: Comparison between COVID19 “first wave” and “second wave” of pandemic in Italy. *Progr Nutr* 2021; 23(2), 11755
5. Van den Eynde J, De Vos K, Van Daalen KR, Oosterlinck W. Women and COVID-19: A One-Man Show? *Front Cardiovasc Med* 2020; 7:596583. doi: 10.3389/fcvm.2020.596583
6. Mattioli AV, Sciomer S, Maffei S, Gallina S. Lifestyle and Stress Management in Women During COVID-19 Pandemic: Impact on Cardiovascular Risk Burden *Am J Lifestyle Med.* 2020 Dec 10;15(3):356-359. doi: 10.1177/1559827620981014.
7. Bali S, Dhatt R, Lal A, Jama A, Van Daalen K, Sridhar D. Off the back burner: diverse and gender-inclusive decision-making for COVID-19 response and recovery. *BMJ Glob Health* 2020; 5:e002595. doi: 10.1136/bmjgh-2020-002595
8. Bai F, Tomasoni D, Falcinella C, et al. Female gender is associated with long COVID syndrome: a prospective cohort study. *Clin Microbiol Infect* 2022;28(4):611.e9-611.e16. doi: 10.1016/j.cmi.2021.11.002. Epub 2021 Nov 9.
9. Bisaccia G, Ricci F, Recce V, et al. Post-Acute Sequelae of COVID-19 and Cardiovascular Autonomic Dysfunction: What Do We Know? *J Cardiovasc Dev Dis* 2021;8(11):156. doi: 10.3390/jcdd8110156.
10. Writing Committee, Gluckman TJ, Bhavne NM, Allen LA, et al. 2022 ACC Expert Consensus Decision Pathway on Cardiovascular Sequelae of COVID-19 in Adults: Myocarditis and Other Myocardial Involvement, Post-Acute Sequelae of SARS-CoV-2 Infection, and Return to Play: A Report of the American College of Cardiology Solution Set Oversight Committee. *J Am Coll Cardiol* 2022;79(17):1717-56. doi: 10.1016/j.jacc.2022.02.003. Epub ahead of print.

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