TRAININGSMYTHEN

SANDRO GALLI

28.11.2025
SAMM-KONGRESS 2025

evidenzbasiert – interdisziplinär – unabhängig

personal-training.ch
ON A HIGHWAY TO HEALTH

Herzlich Willkommen

“I honestly believe
it iz better tew know nothing
than tew know what ain't so.”

Josh Billings (1818 –1885)

Bild: Houghton Library, Public domain, via Wikimedia Commons, Zugriff am 20.11.2025

UZEPS

Balgrist

Universitätsklinik

Universitäres Zentrum für
Prävention und Sportmedizin

seit 2011

Sporttherapie

Ambulante kardiale Rehabilitation

28.11.2025

GRÜNDER

personal-training.ch

seit 2015

Evidenzbasiertes Training, u.a. in den eigenen 4 Wänden

trainingstherapeutische Weiterbetreuung ermöglichen nach Ende der KK-Leistungspflicht

Ursache für Trainingsmythen?

28.11.2025

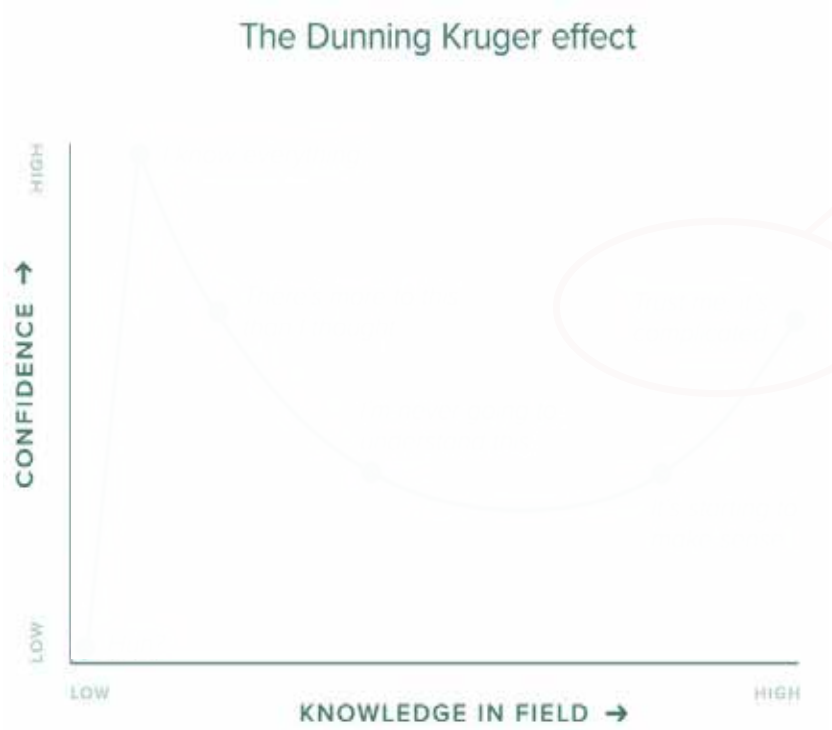
Mögliche Ursachen für Trainingsmythen

- Missinterpretierte Literatur
- Unbekannte, neue Evidenz
- Nicht-lineare Zusammenhänge
- Kontraintuitive Effekte
- Fehlendes Differenzierungsvermögen
- Echo-Kammern

Vorsicht bei undifferenzierten Empfehlungen

28.11.2025

Dunning Kruger Effekt



Grafik: https://mungfali.com/explore/Dunning-Kruger-Chart, Zugriff am 01.11.2025

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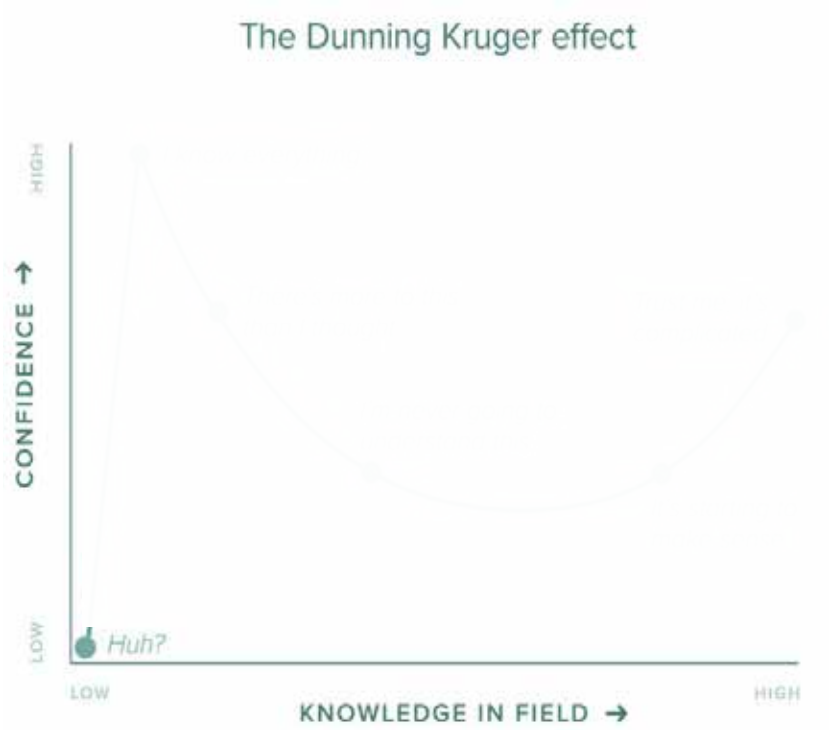

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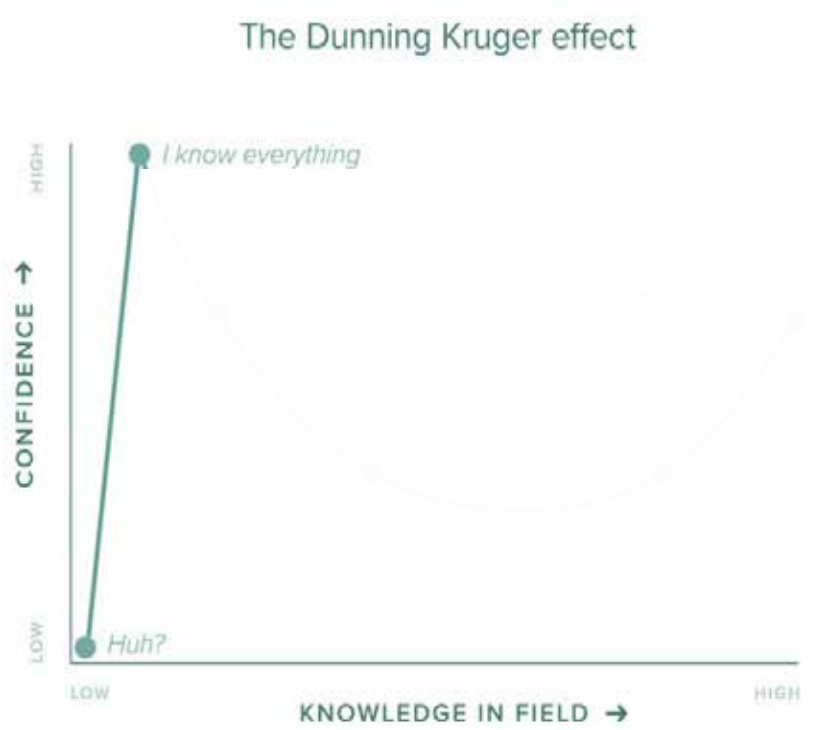

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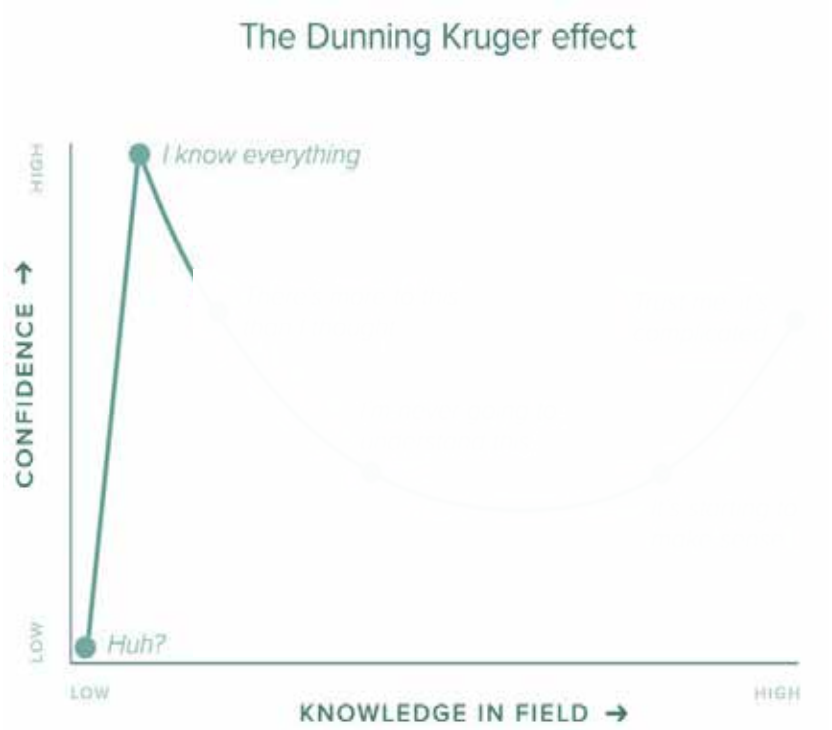

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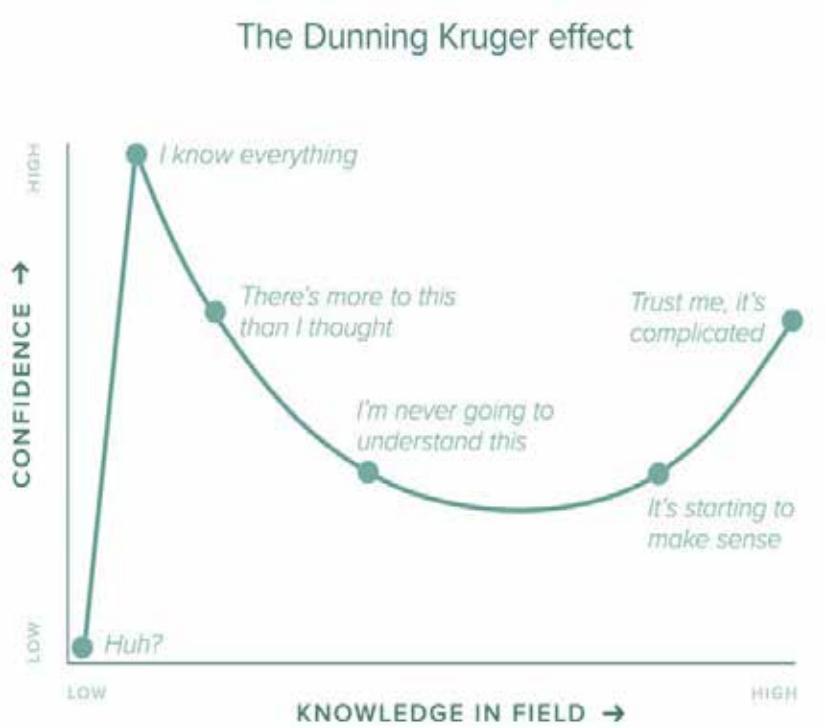

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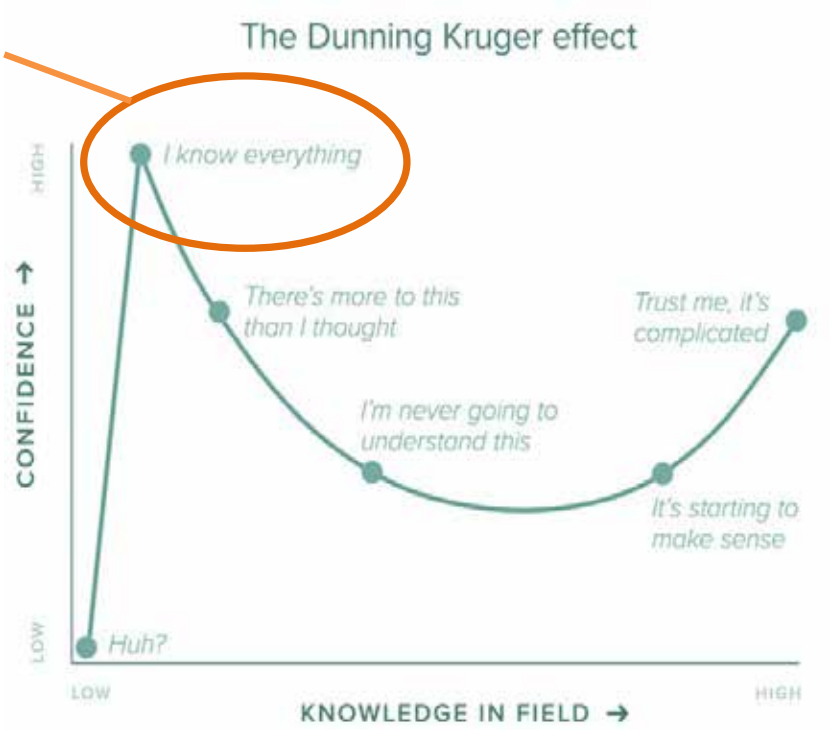
Dunning Kruger Effekt

Peak of Mount Stupid



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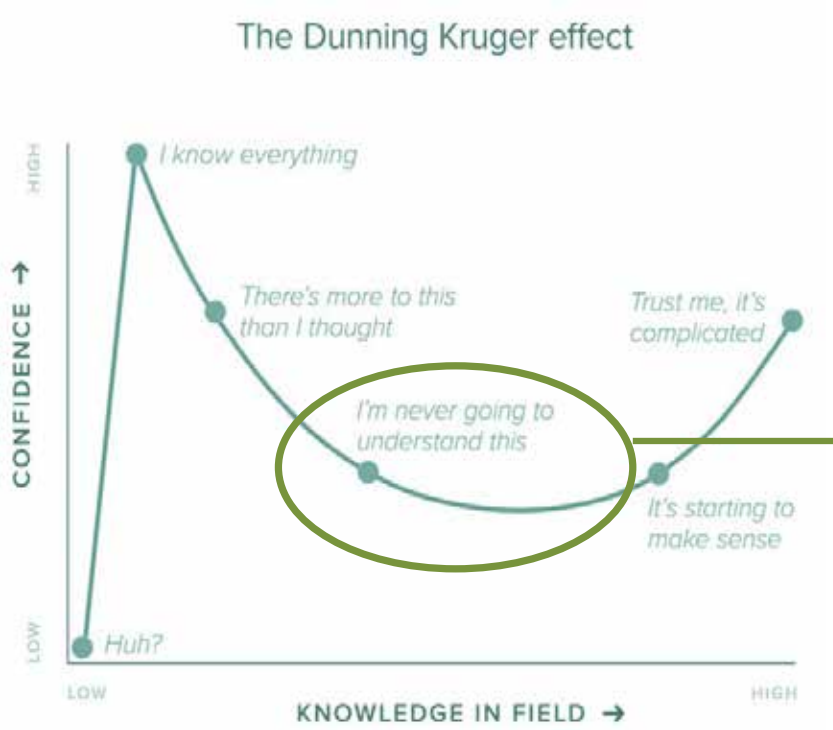
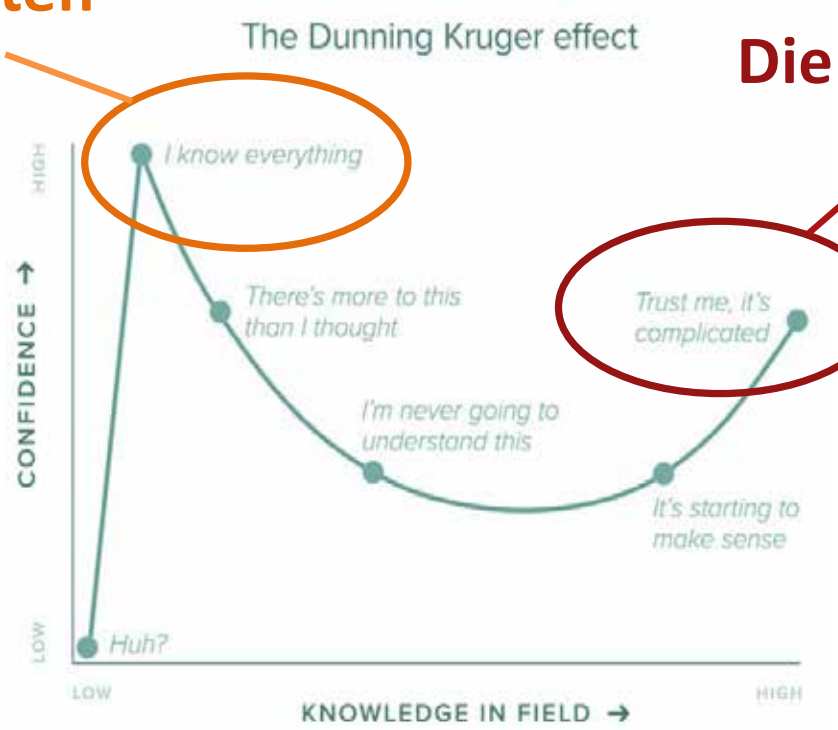


Valley of Despair

Grafik: https://mungfali.com/explore/Dunning-Kruger-Chart, Zugriff am 01.11.2025

Dunning Kruger Effekt

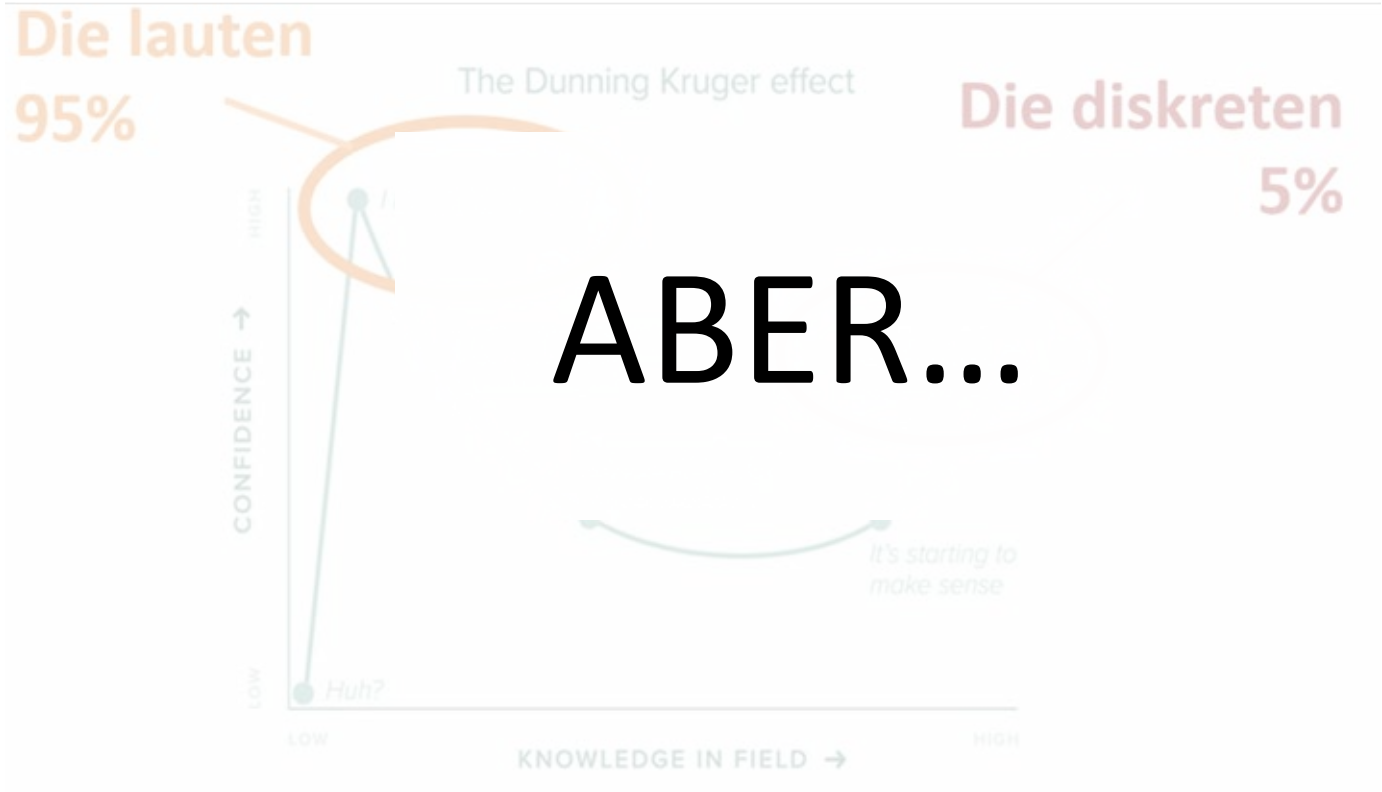
Die lauten
95%



Die diskreten
5%

Grafik: https://mungfali.com/explore/Dunning-Kruger-Chart, Zugriff am 01.11.2025

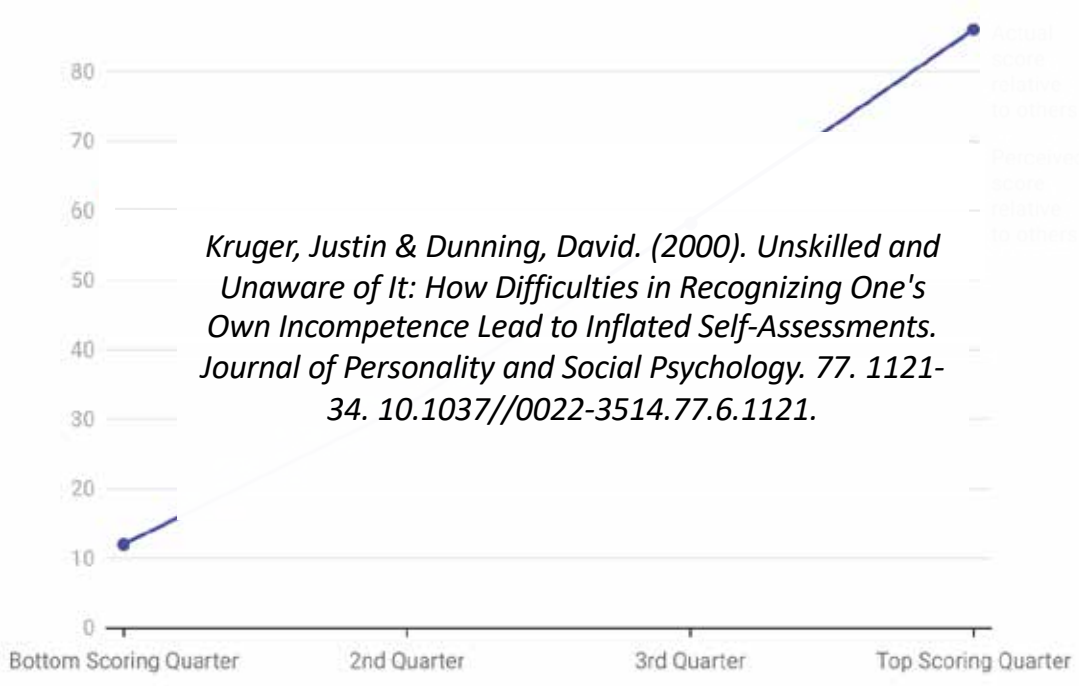
DUNNING KRUGER EFFEKT



ABER…

Grafik: https://mungfali.com/explore/Dunning-Kruger-Chart, Zugriff am 01.11.2025

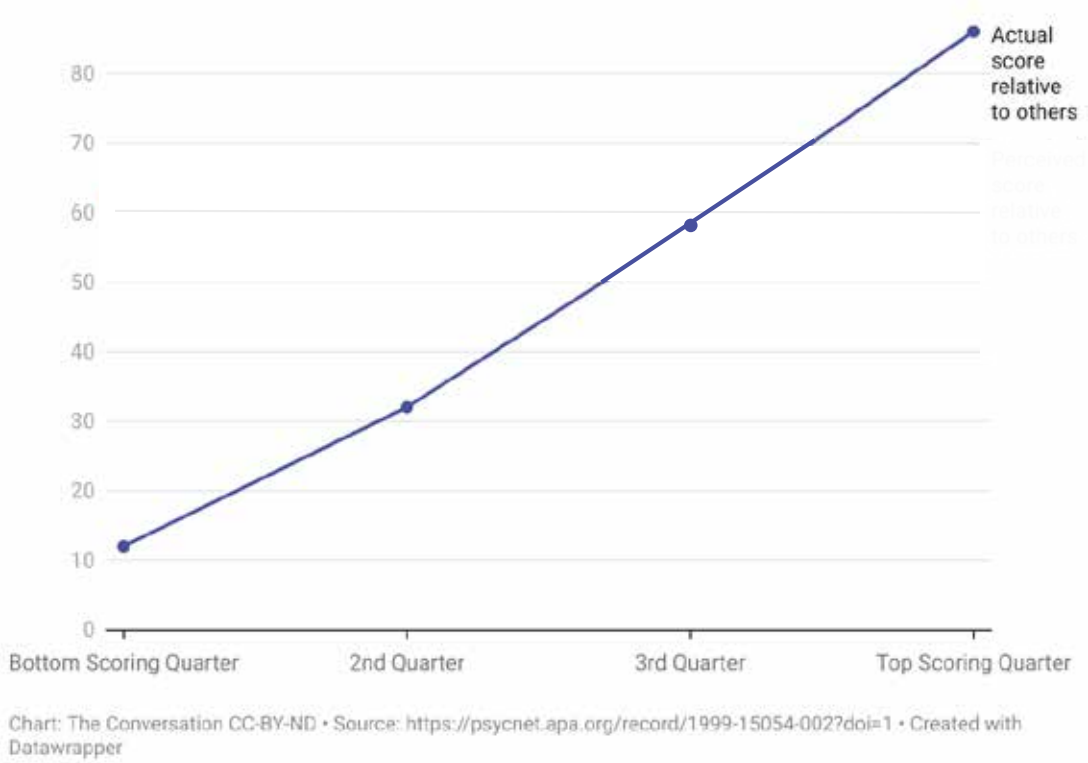
Der Echte Dunning Kruger Effekt



Kruger, Justin & Dunning, David. (2000). Unskilled and Unaware of It: How Difficulties in Recognizing One's Own Incompetence Lead to Inflated Self-Assessments. Journal of Personality and Social Psychology. 77. 1121-34. 10.1037//0022-3514.77.6.1121.

Grafik: https://mungfali.com/explore/Dunning-Kruger-Chart#preview-0-1764089330068, Zugriff am 25.11.2025

Der Echte Dunning Kruger Effekt



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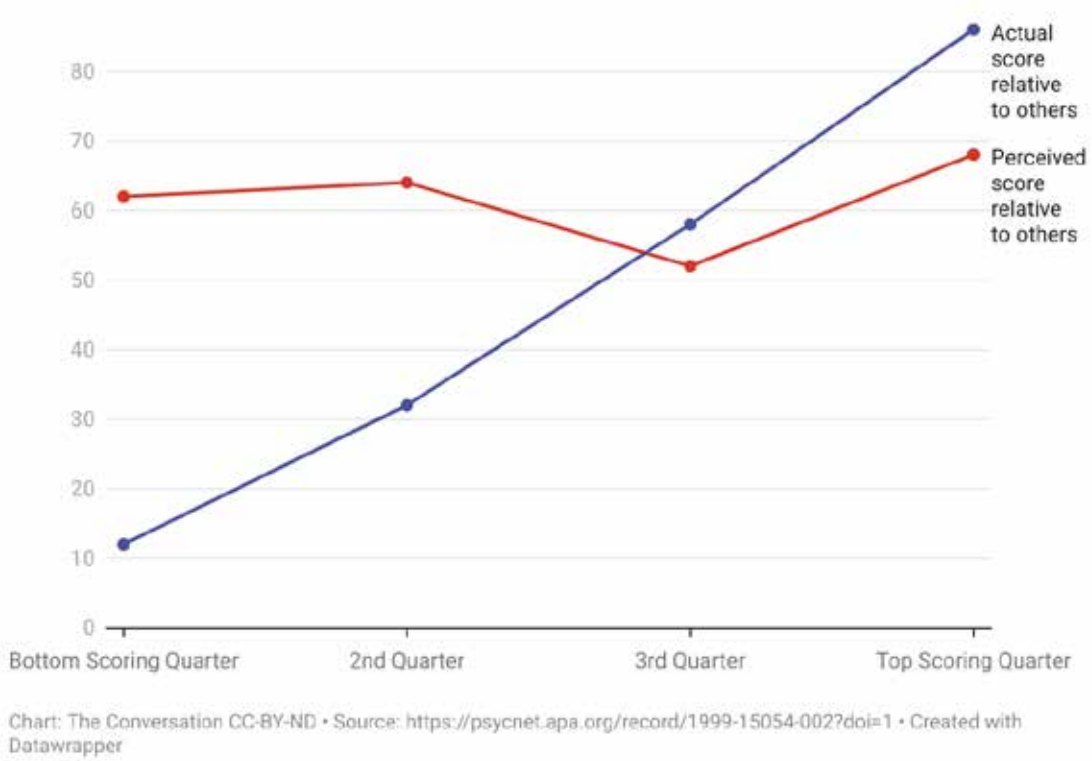

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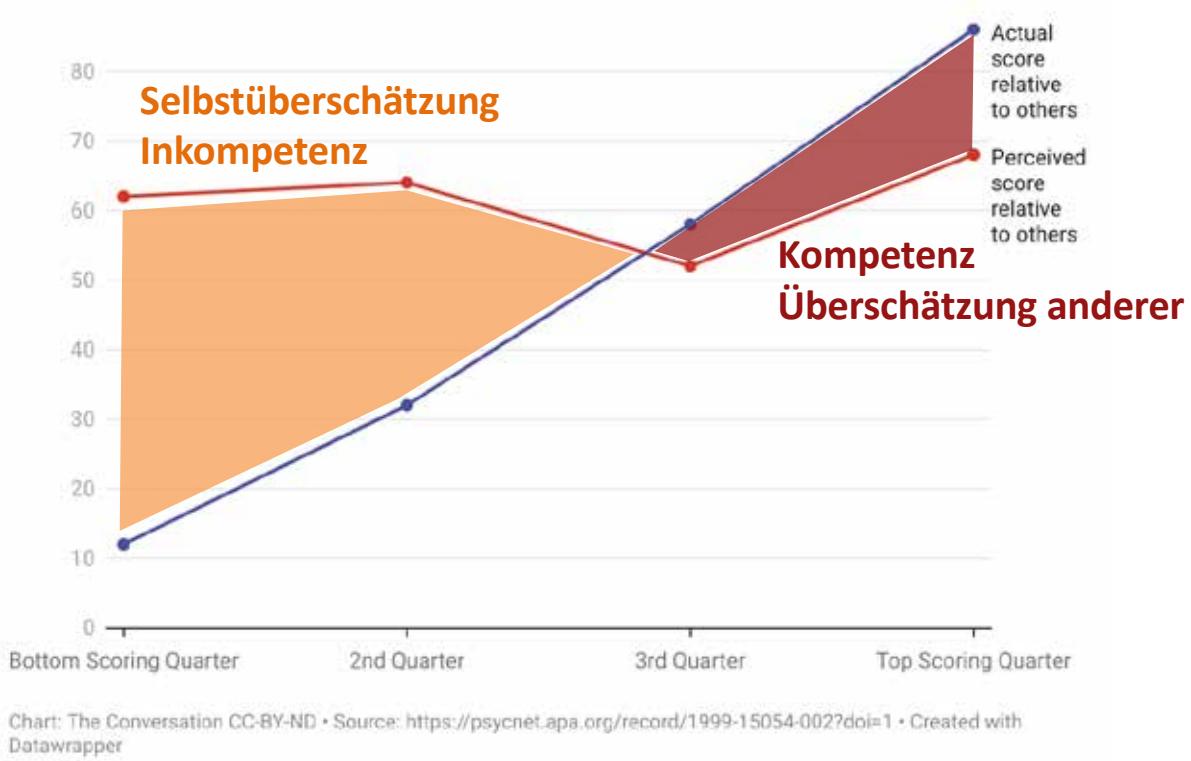

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Mythos

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Es braucht niedrige Trainingsgewichte, um Blutdruckanstieg zu vermeiden

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Hämodynamische Effekte von Krafttraining

- 2016, ACSM Journal
- 15 Koronargefäss Patienten (11 m, 4 w)
- Stent oder Bypass, mindestens 6 Monate vor der Studie
- Keine Krafttrainings Erfahrung
- Fingermanschetten Messung des peripheren arteriellen BD's
- 3 Sätze mit 15RM* oder 4RM

*15RM = 15 Repetition Maximum = Widerstand, der maximal 15 Reps ermöglicht

GJOVAAG, T. F. et al. Med. Sci. Sports Exerc., Vol. 48, No. 4, pp. 581–588, 2016. *Hemodynamic Responses to Resistance Exercise in Patients With Coronary Artery Disease*

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Hämodynamische Effekte von Krafttraining

	Time (s)	SBP (mm Hg)
Preexercise values	NA	131 ± 10
4th rep–15RM load	7.3 ± 0.9	148 ± 17**
4th rep–4 RM load	7.5 ± 1.0	147 ± 12**

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*$P < 0.01$, **$P < 0.001$; Preexercise versus fourth rep–15RM load, preexercise versus fourth rep–4RM load, and preexercise versus 15th rep–15RM load. ***$P < 0.001$; fourth rep–15RM load versus 15th rep–15RM load. ****$P < 0.05$, *****$P < 0.001$; fourth rep 4RM load versus 15th rep 15RM load.

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HAEMODYNAMIC EFFECTS

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Last repetition

*$P < 0.01$, **$P < 0.001$; Preexercise versus fourth rep–15RM load, preexercise versus fourth rep–4RM load, and preexercise versus 15th rep–15RM load. ***$P < 0.001$; fourth rep–15RM load versus 15th rep–15RM load. ****$P < 0.05$, *****$P < 0.001$; fourth rep 4RM load versus 15th rep 15RM load.

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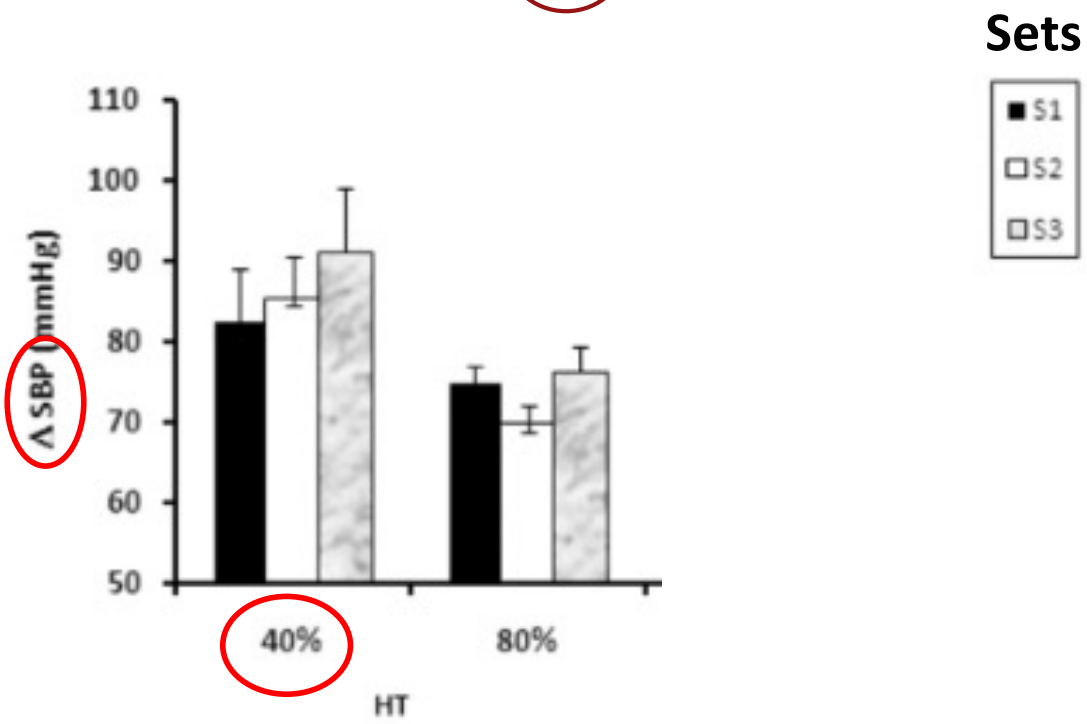
Hämodynamische Effekte von Krafttraining

- 2010, Blutdruckpatienten
- intraarterielle Blutdruckmessung, gold-standard
- 10 hypertensive Probanden, ø46y, BMI 25
- 10 normotensive Probanden, ø39y, BMI 25
- 40% and 80% of 1RM
- Bereinigt für «Gewicht x Reps»

Nery SS et al. *Intra-arterial blood pressure response in hypertensive subjects during low- and high-intensity resistance exercise*. Clinics. 2010;65(3):271-7

Hämodynamische Effekte von Krafttraining



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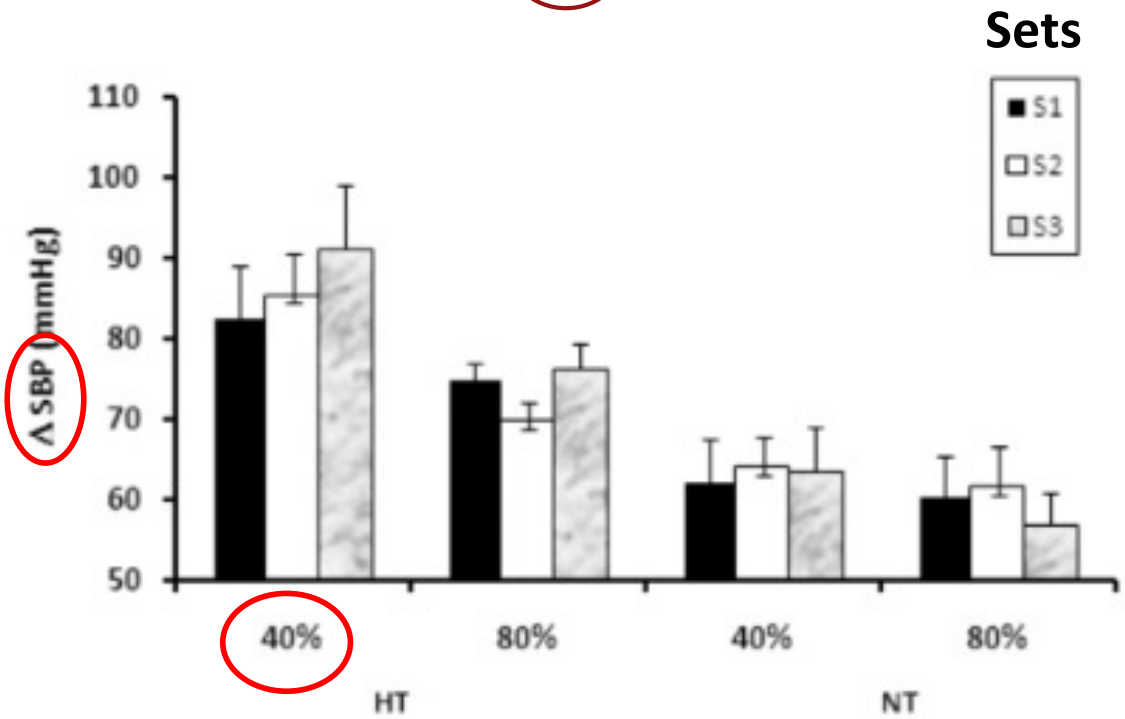
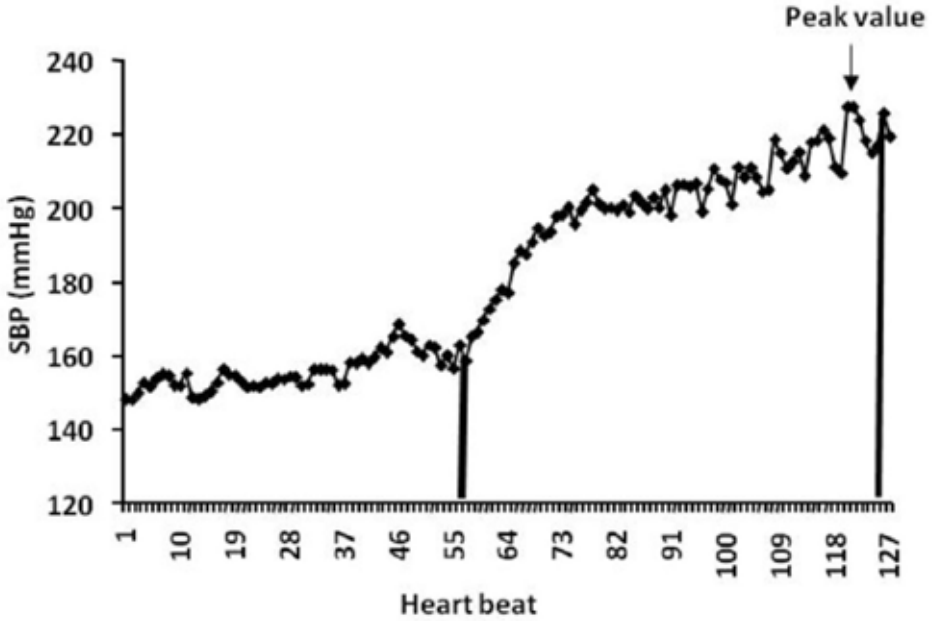


Nery SS et al. *Intra-arterial blood pressure response in hypertensive subjects during low- and high-intensity resistance exercise*. Clinics. 2010;65(3):271-7

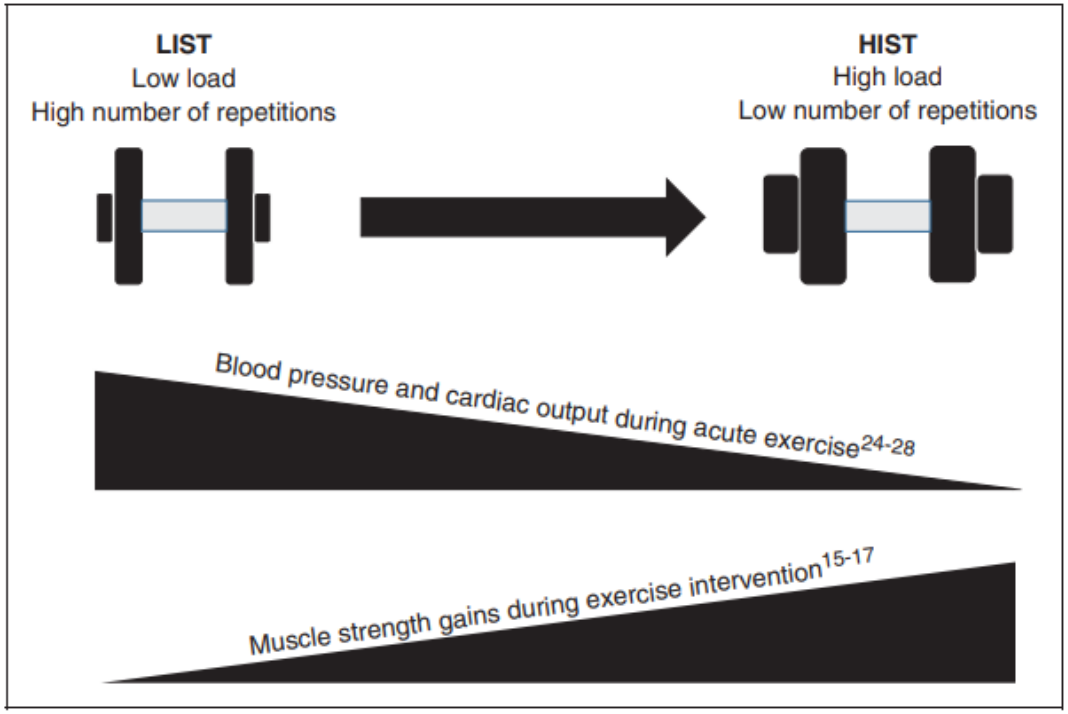
Hämodynamische Effekte von Krafttraining

time under tension, nicht Intensität als Modulator



Nery SS et al. *Intra-arterial blood pressure response in hypertensive subjects during low- and high-intensity resistance exercise*. Clinics. 2010;65(3):271-7

Vorteile High Intensity Strength Training



Hansen D et al. Dynamic strength training intensity in cardiovascular rehabilitation: is it time to reconsider clinical practice? A systematic review. Eur J Prev Cardiol. 2019;26(14):1483–1492.doi:10.1177/2047487319847003

Mythos

Es braucht niedrige Trainingsgewichte, um Blutdruckanstieg zu vermeiden

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Training im Fettverbrennungspuls ist wichtig für Gewichtsreduktion

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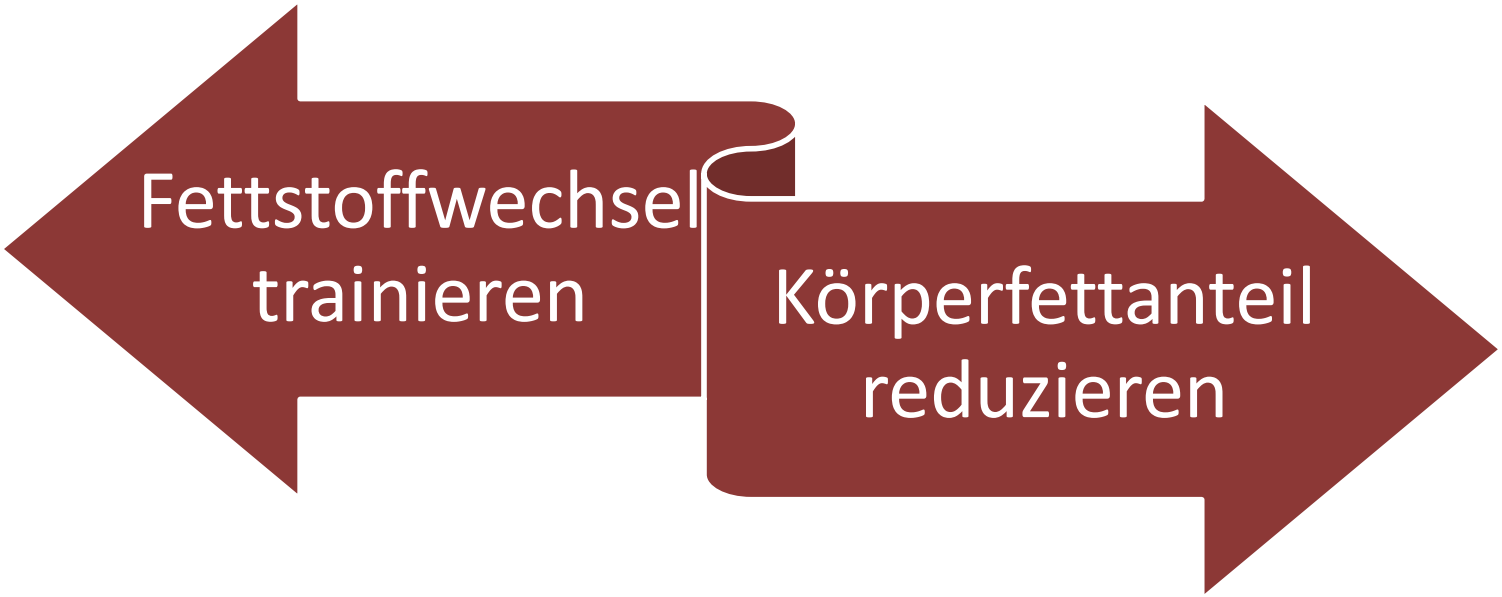
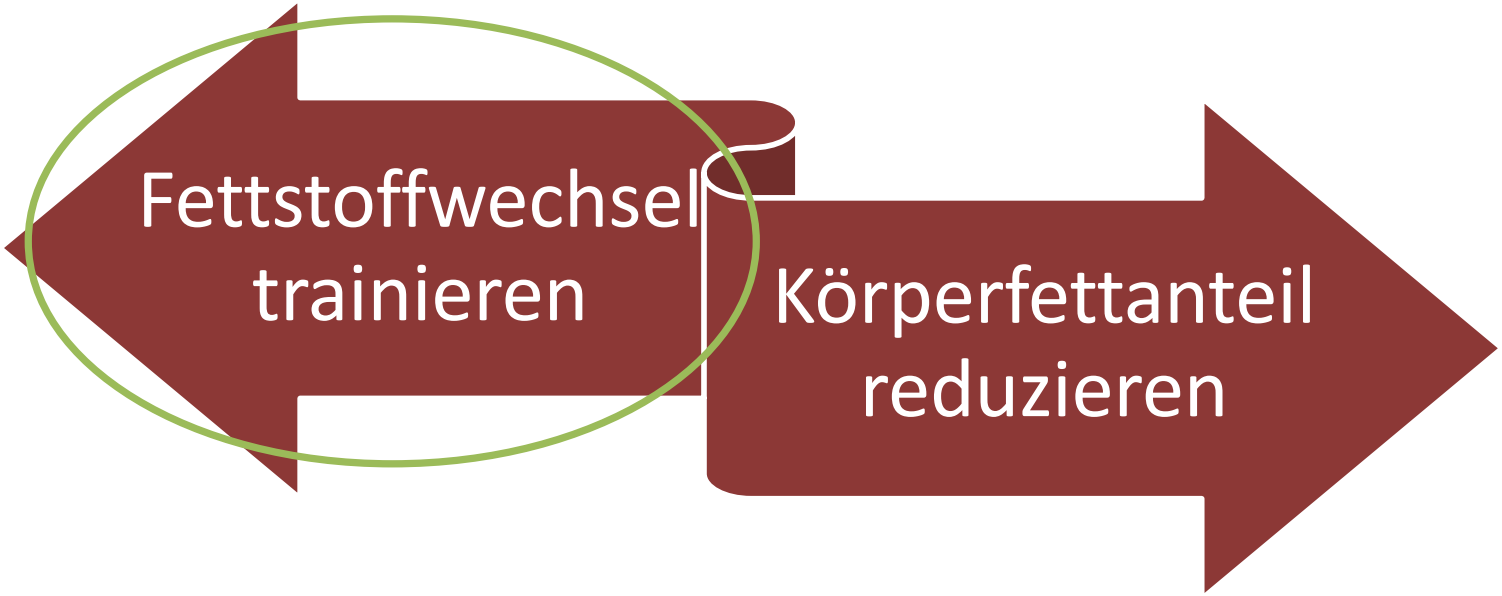
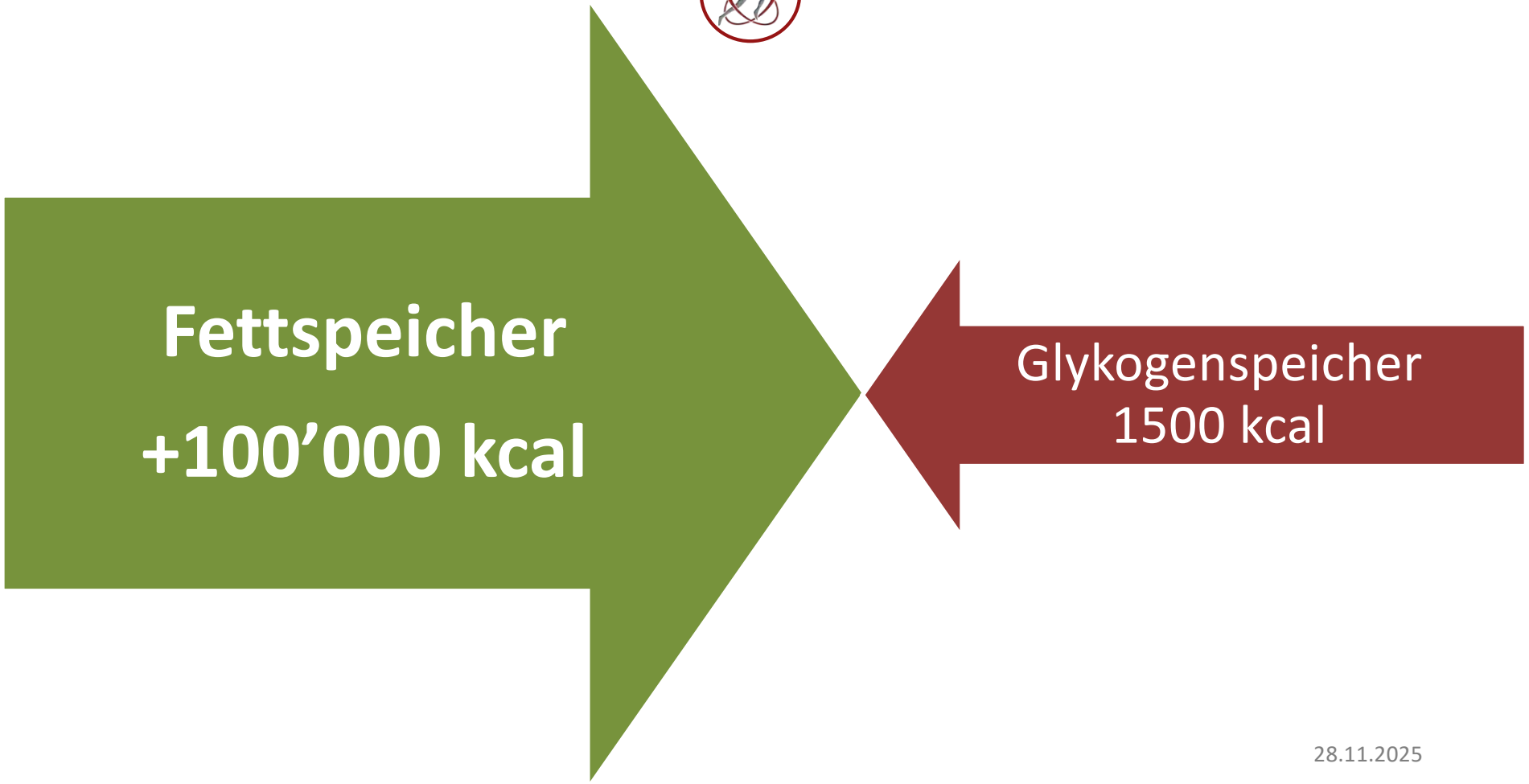
Differenzieren



GRUNDLAGENAUSDAUER



Ausflug in die Speicherkapazitäten



PERSPEKTIVENWECHSEL

Fettverbrennungspuls

PERSPEKTIVENWECHSEL

Fettverbrennungspuls

«Glykogenspeicher Schonungspuls»

SCHONUNG DER GLYKOGENSPEICHER

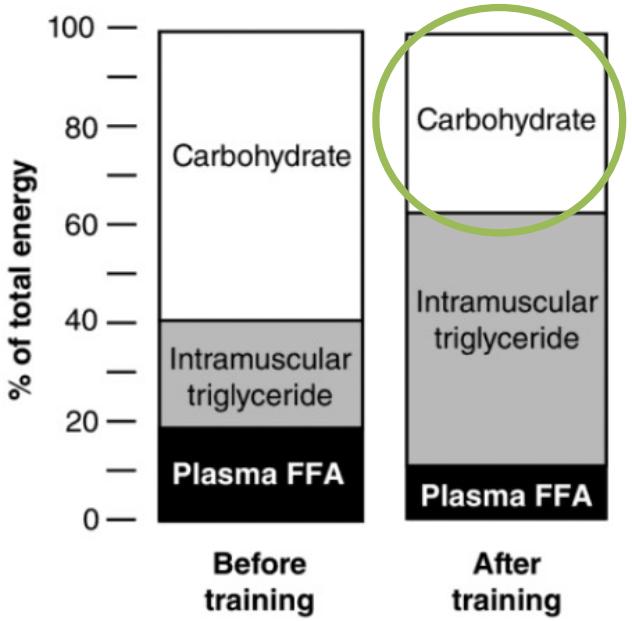
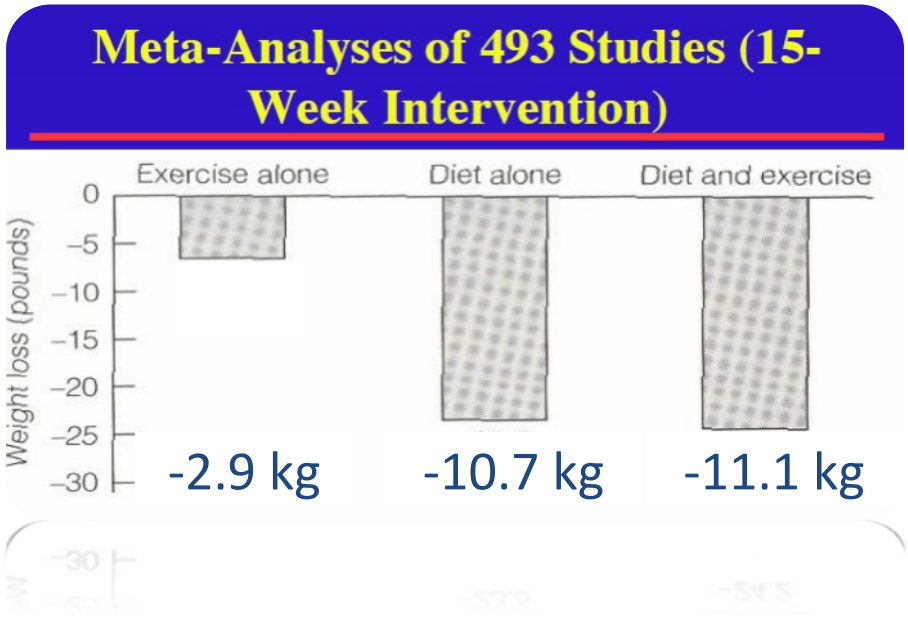


Figure 1.6 Change in fat reliance after endurance training.

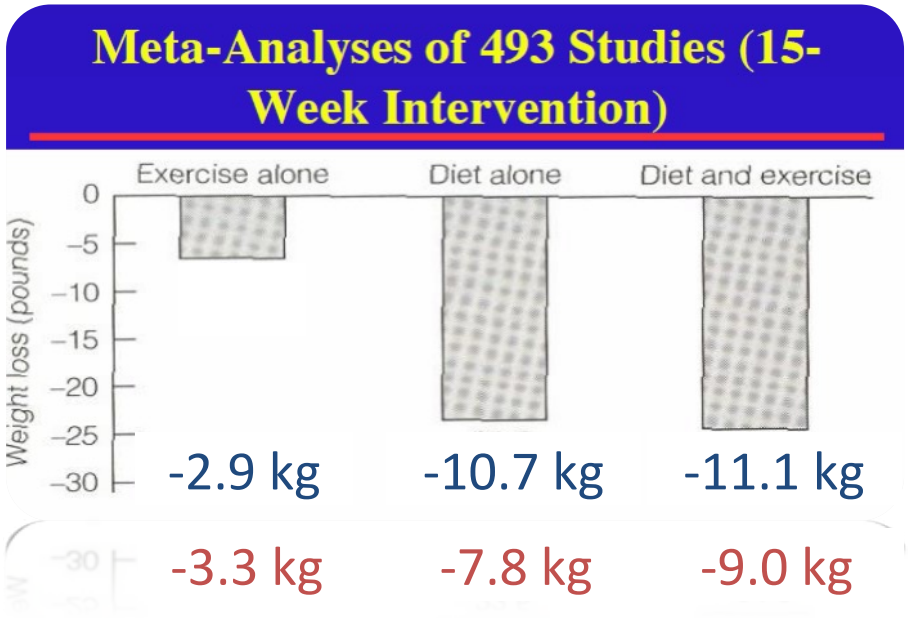
Martin, W H 3rd et al. “Effect of endurance training on plasma free fatty acid turnover and oxidation during exercise.” The American journal of physiology vol. 265,5 Pt 1 (1993): E708-14. doi:10.1152/ajpendo.1993.265.5.E708

Gewichtsreduktion abhängig von Intervention



Miller, W., Koceja, D., & Hamilton, E. (1997). A meta-analysis of the past 25 years of weight loss research using diet, exercise or diet plus exercise intervention. International Journal of Obesity, 21(10), 941–947. doi:10.1038/sj.ijo.0800499

Körperfettreduktion abhängig von Intervention



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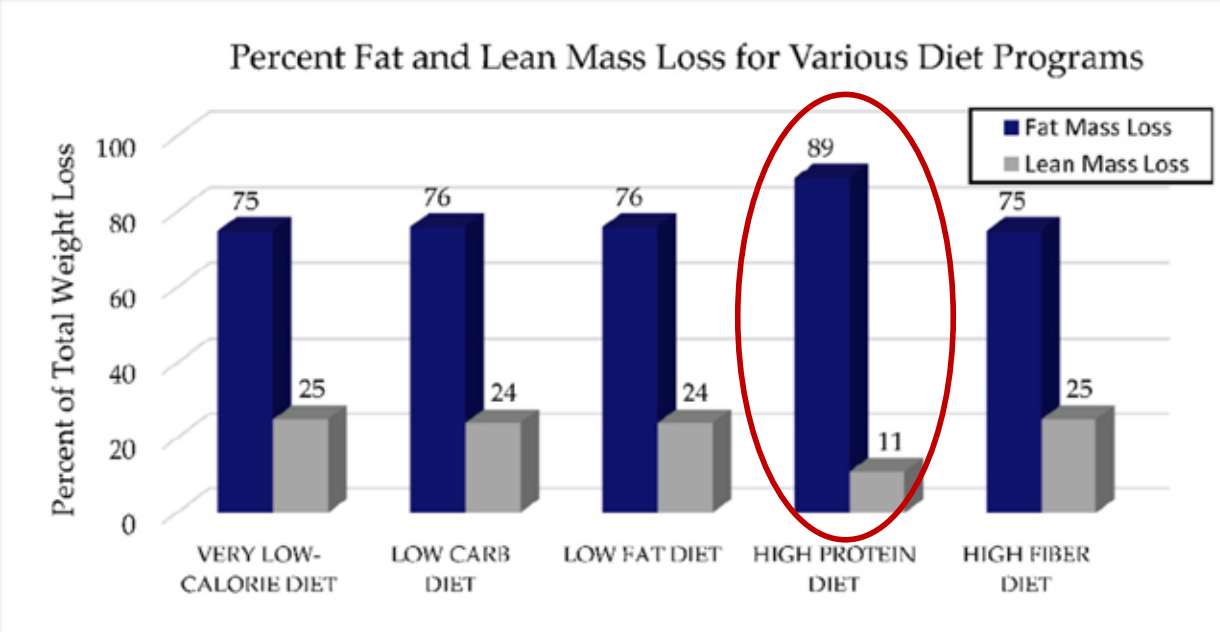
Vorteile von genügend Proteinzufuhr



Willoughby DS. Effects of resistance training on physiological and molecular adaptations. Nutrients. 2018;10(12):1876. doi:10.3390/nu10121876

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Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Hohe Gewichte sind notwendig für Krafttraining

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

KRAFT VS HYPERTROPHIE TRAINING

Krafttraining VS Hypertrophie Training

Wie

Hohe Widerstände

MODULATOR

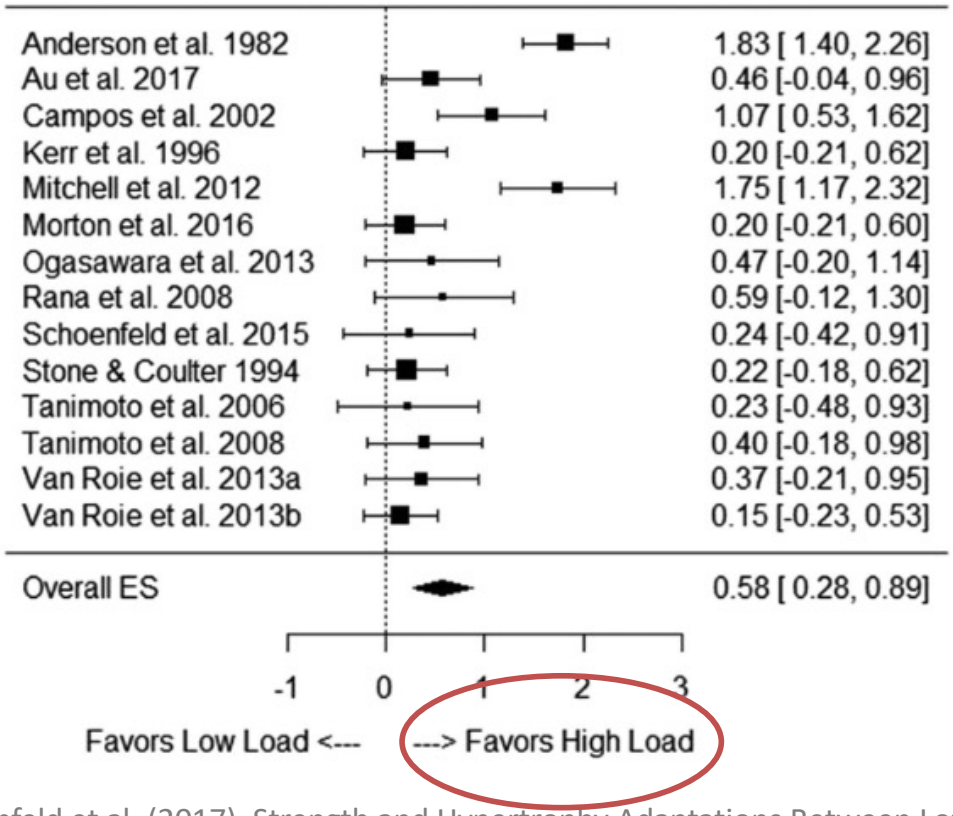
Muskelspannung

EFFEKTE

Neuromuskulär

28.11.2025

KRAFT VS HYPERTROPHIE TRAINING



Veränderungen Maximalkraft(1RM)

Vergleicht «low load» mit «high load*» Krafttraining

*>60% 1Repetition Maximum

Schoenfeld et al.,(2017). Strength and Hypertrophy Adaptations Between Low- vs. High-Load Resistance Training. Journal of Strength and Conditioning Research, 31(12), 3508–3523. doi:10.1519/jsc.0000000000002200

Kraft VS Hypertrophie Training

Krafttraining VS Hypertrophie Training

Krafttraining

Wie
Hohe Widerstände

MODULATOR
Muskelspannung

EFFEKTE
Neuromuskulär

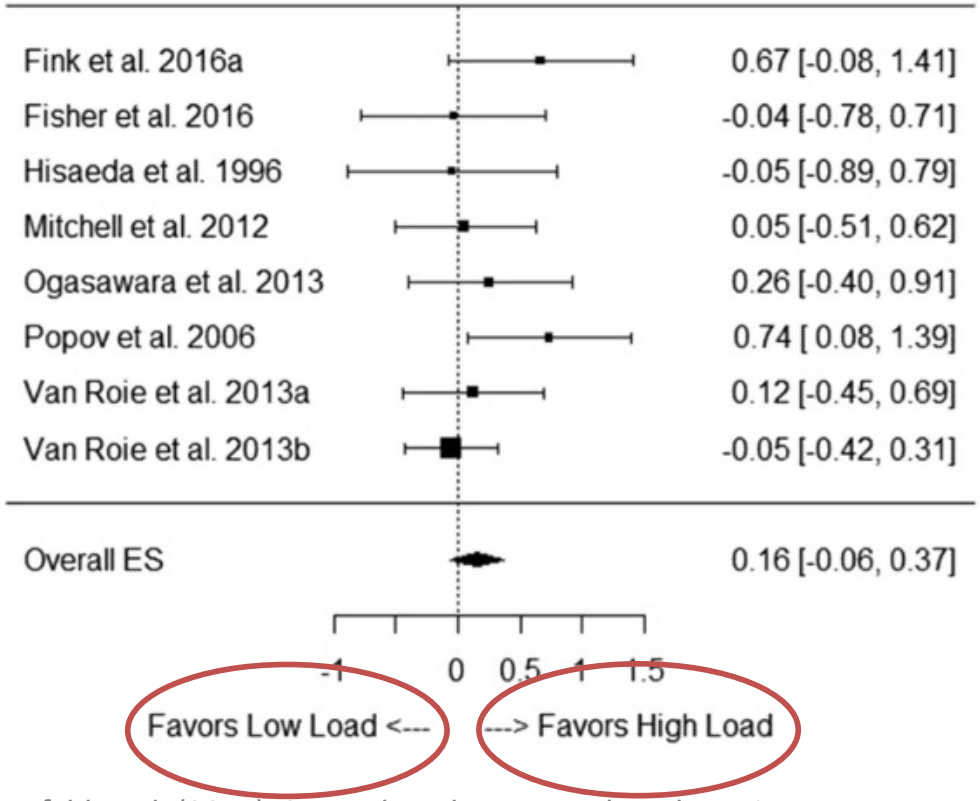
Hypertrophie Training

Wie
Hohe/niedrige Widerstände

MODULATOR
Volumen, Muskelermüdung

EFFEKTE
Muskelmasse, MPS

KRAFT VS HYPERTROPHIE TRAINING



Veränderungen Hypertrophie

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Hohe Gewichte sind notwendig für Krafttraining

Ja, aber …

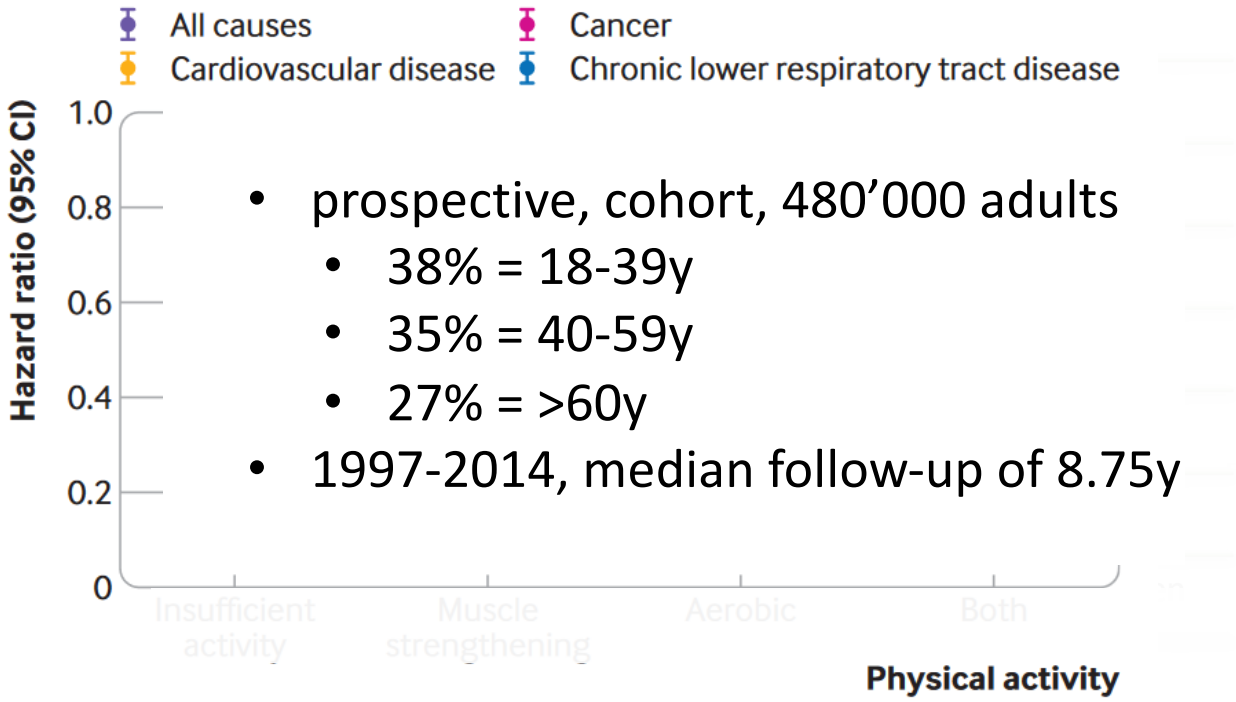
Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Es braucht Kardiotraining für Adaptionen am Herzmuskel

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

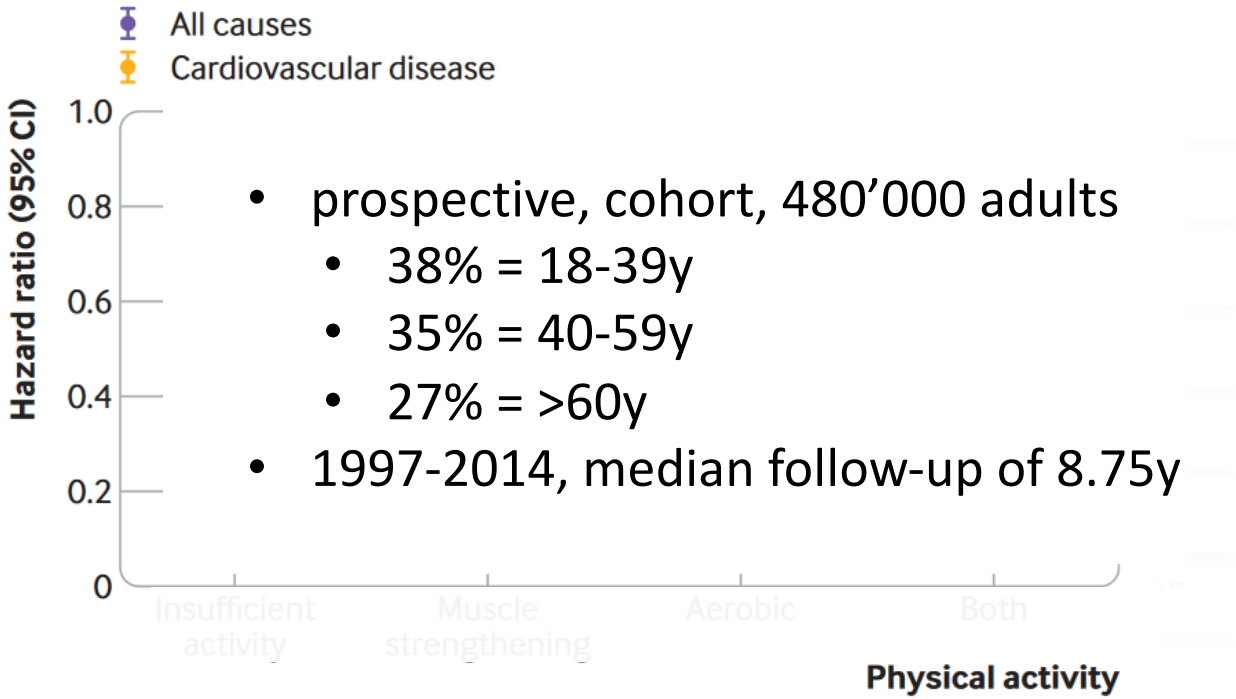
Physical Activity and Mortality



- prospective, cohort, 480’000 adults
  - 38% = 18-39y
  - 35% = 40-59y
  - 27% = >60y
- 1997-2014, median follow-up of 8.75y

Zhao et al.,*Recommended physical activity and all cause and cause specific mortality in US adults: prospective cohort study,*BMJ 2020;370:m2031,http://dx.doi.org/10.1136/bmj.m2031

Physical Activity and Mortality



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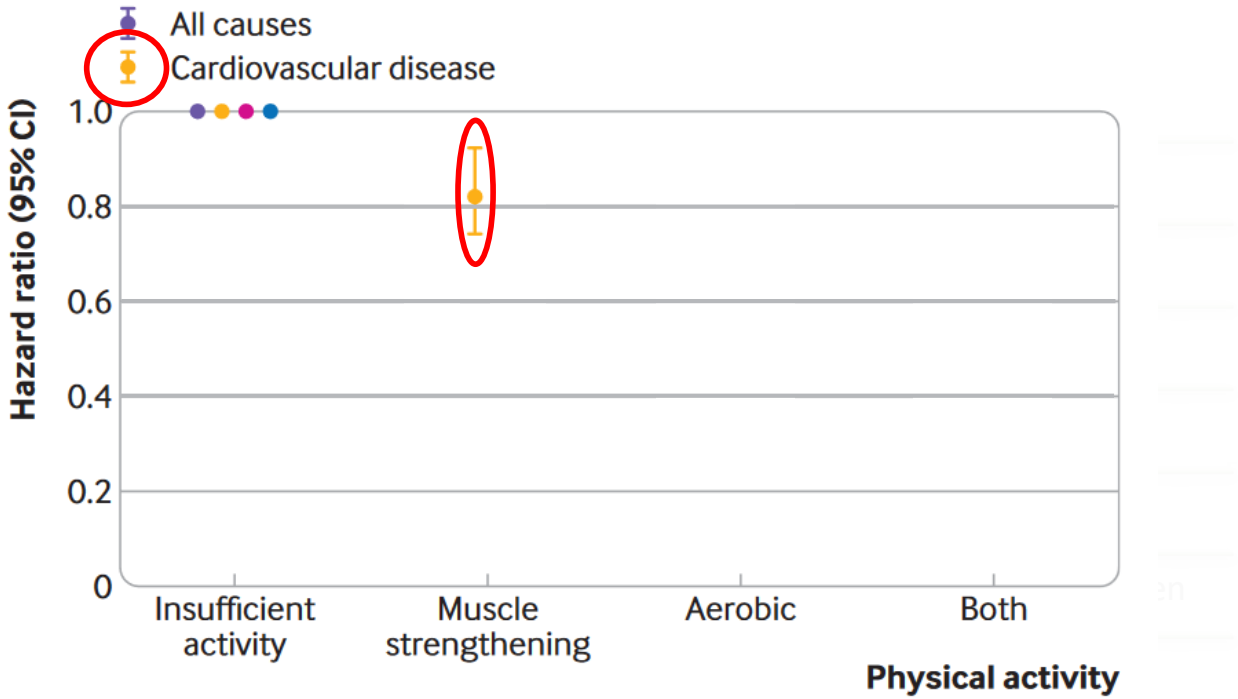
Physical Activity and Mortality



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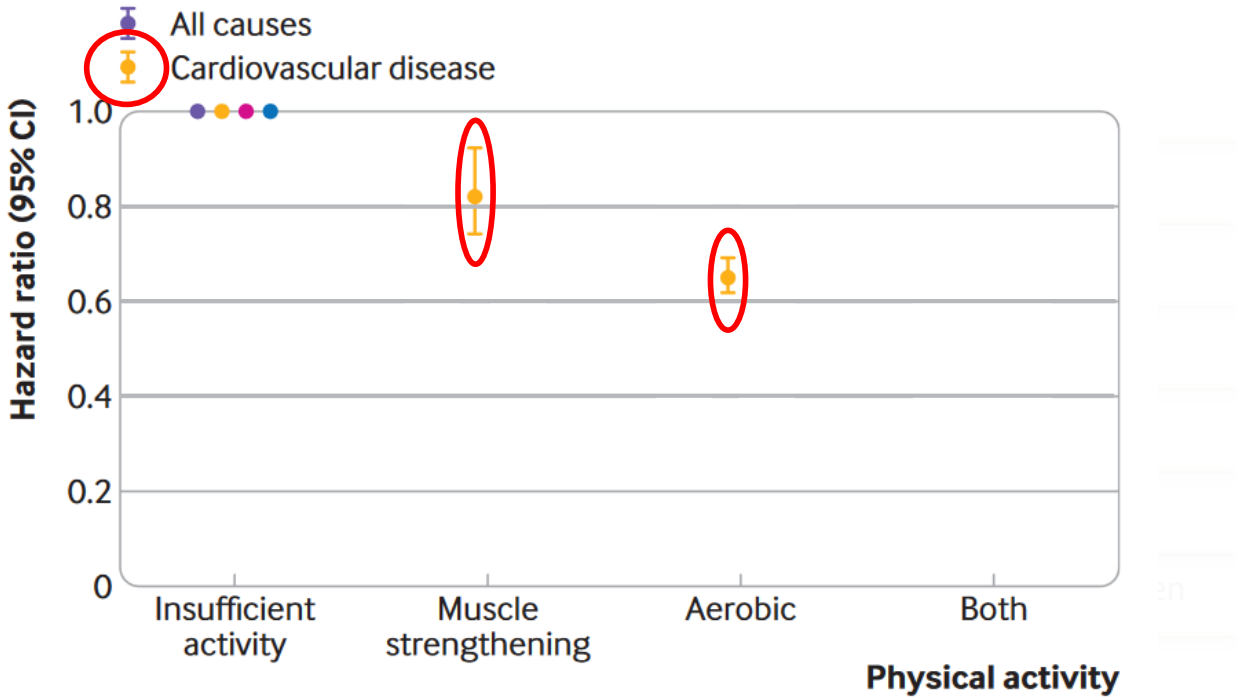

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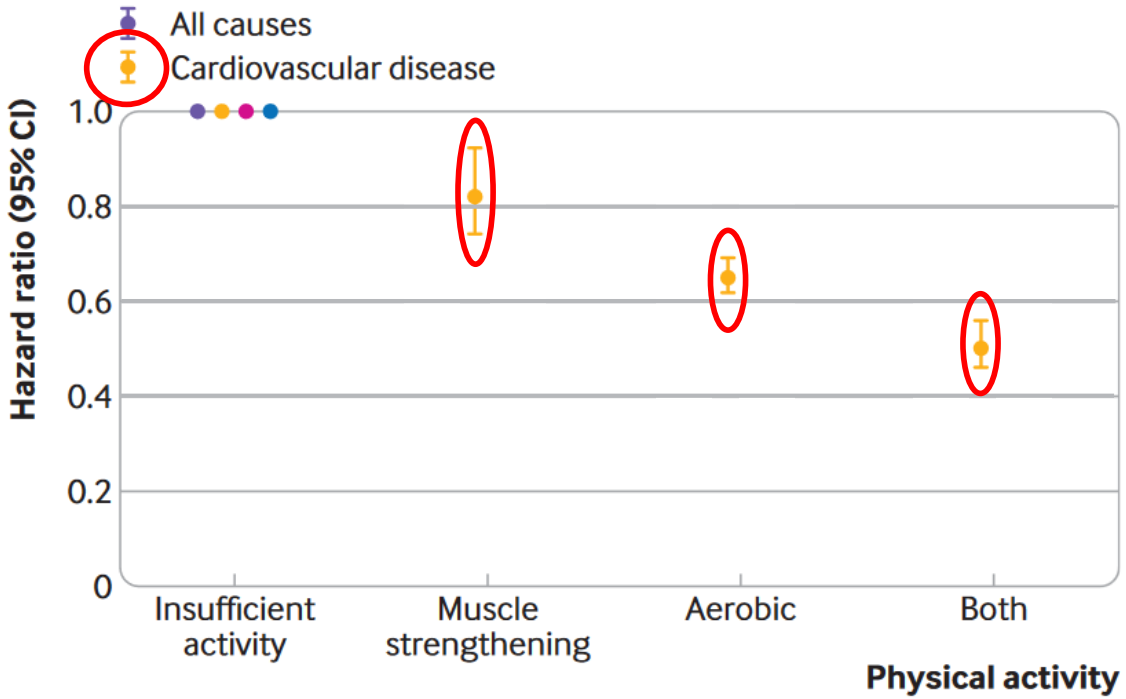

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Metaanalyse von 7 Echo-Studien

Table 1 Results of the meta-analyses of athletes and matched controls

	n	Controls	Athlete	p Value
B. Strength athletes				
Age (years)	7	24.5 (1.49)	24.5 (1.29)	NS
HR (b/min)	7	67.2 (2.06)	62.3 (1.77)	NS

Fagard RH. Athlete's heart: a meta-analysis of the echocardiographic experience. Int J Sports Med 1996;17(suppl 3):S140–4.

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$LVID_d$ (mm)	7	51.9 (1.07)	53.2 (0.99)	<0.01
$IVST_d$ (mm)	7	8.9 (0.28)	10.3 (0.48)	<0.05
PWT_d (mm)	7	8.4 (0.31)	9.5 (0.55)	<0.05
LVM (g)	7	159 (6.3)	198 (7.7)	<0.01

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ATHLETENVERGLEICH

	Runners	Cyclists	Strength Athletes
$LVID_d$ (mm)			
MWT_d (mm)			
h/R			
LVM (g)			

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ATHLETENVERGLEICH

	Runners	Cyclists	Strength Athletes
$LVID_d$ (mm)	+ 10.0 %+	+ 9.1 %*	+ 2.5 %**
MWT_d (mm)	+ 17.6 %+	+ 29.4 %**	+ 14.7 %*
h/R	+ 7.8 %*	+ 18.7 %*	+ 12.0 %*
LVM (g)	+ 48 %+	+ 64 %**	+ 25 %*

Fagard RH. Athlete's heart: a meta-analysis of the echocardiographic experience. Int J Sports Med 1996;17(suppl 3):S140–4.

Es braucht Kardiotraining für Adaptionen am Herzmuskel

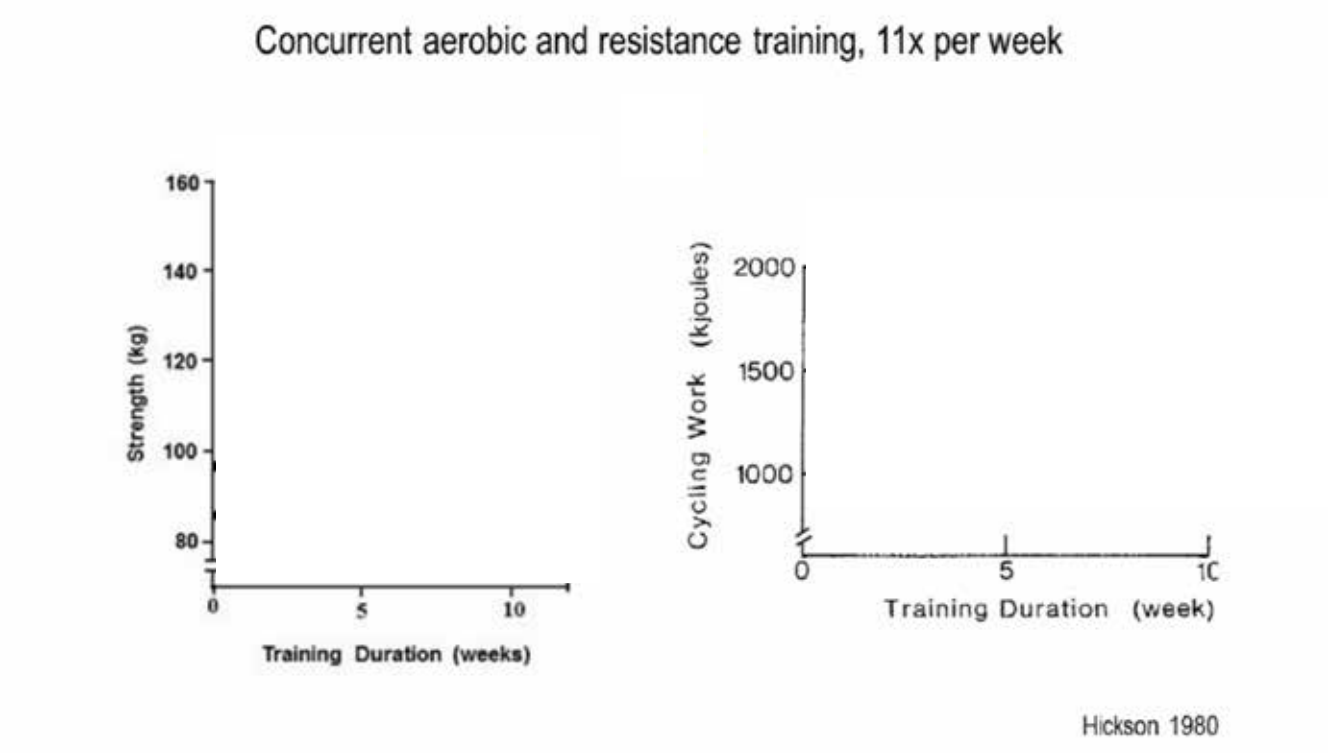
Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Es gibt Interferenzen bei kombiniertem Kraft- und Ausdauertraining

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

HICKSON 1980



Hickson RC. Interference of strength development by simultaneously training for strength and endurance. Eur J Appl Physiol Occup Physiol. 1980;45(2-3):255-63. doi: 10.1007/BF00421333. PMID: 7193134.

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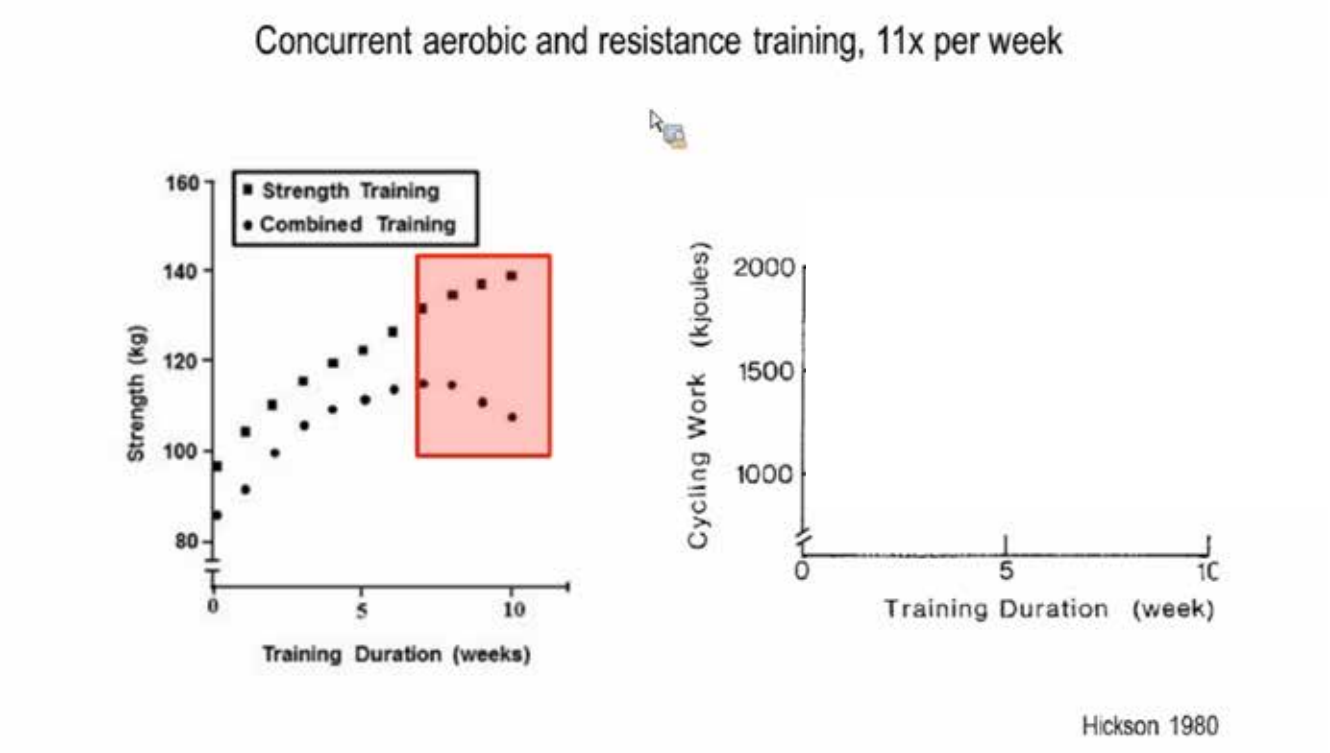

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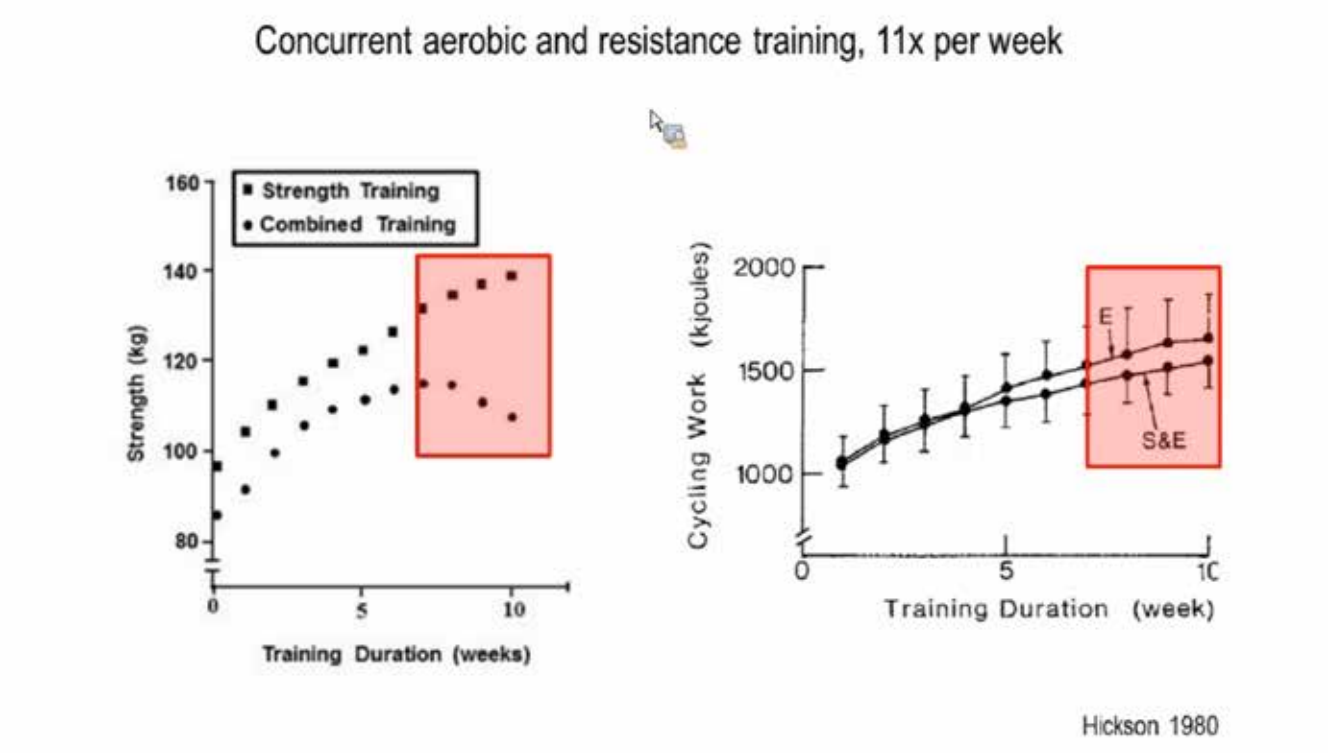

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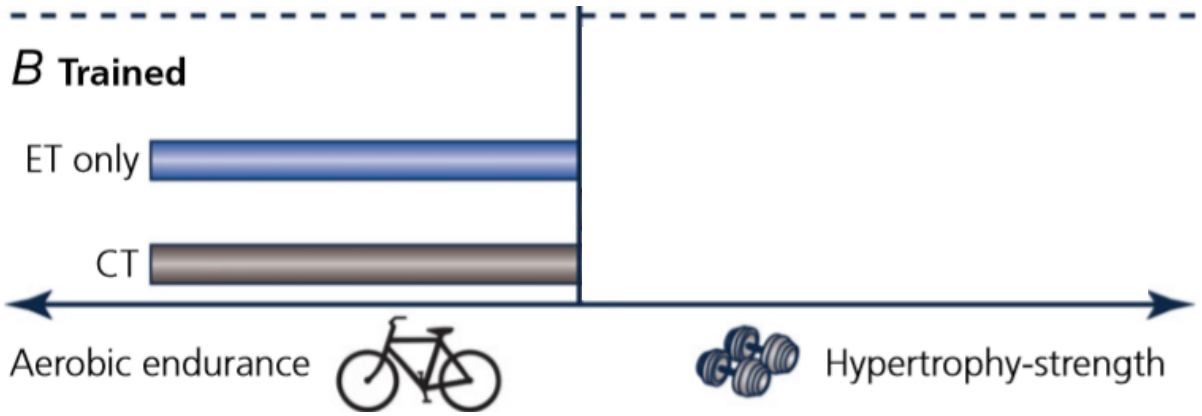
Untrainiert VS Trainiert



Coffey. et al. (2016): Concurrent exercise training: do opposites distract?
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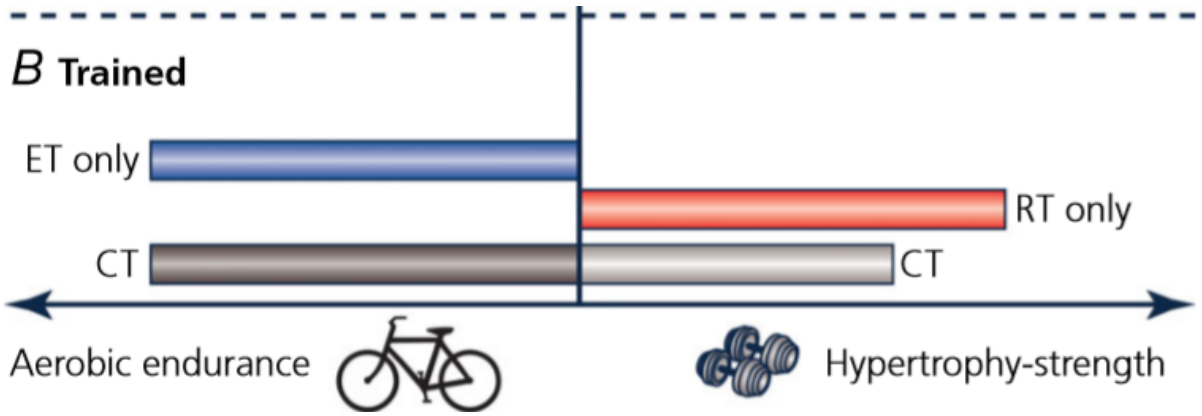

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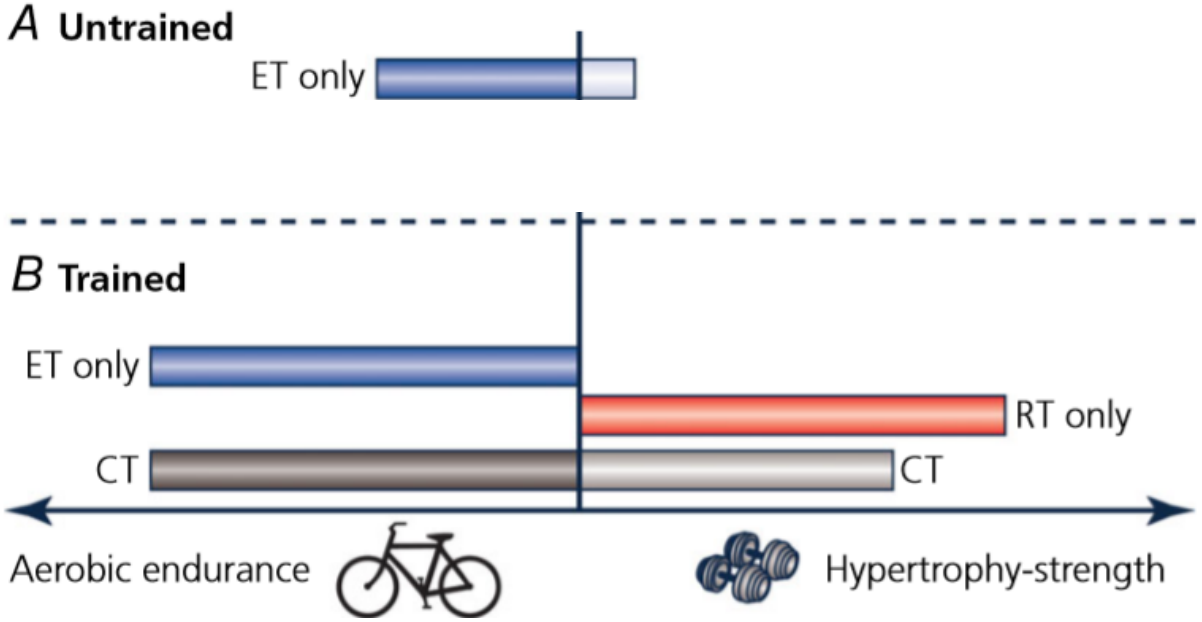

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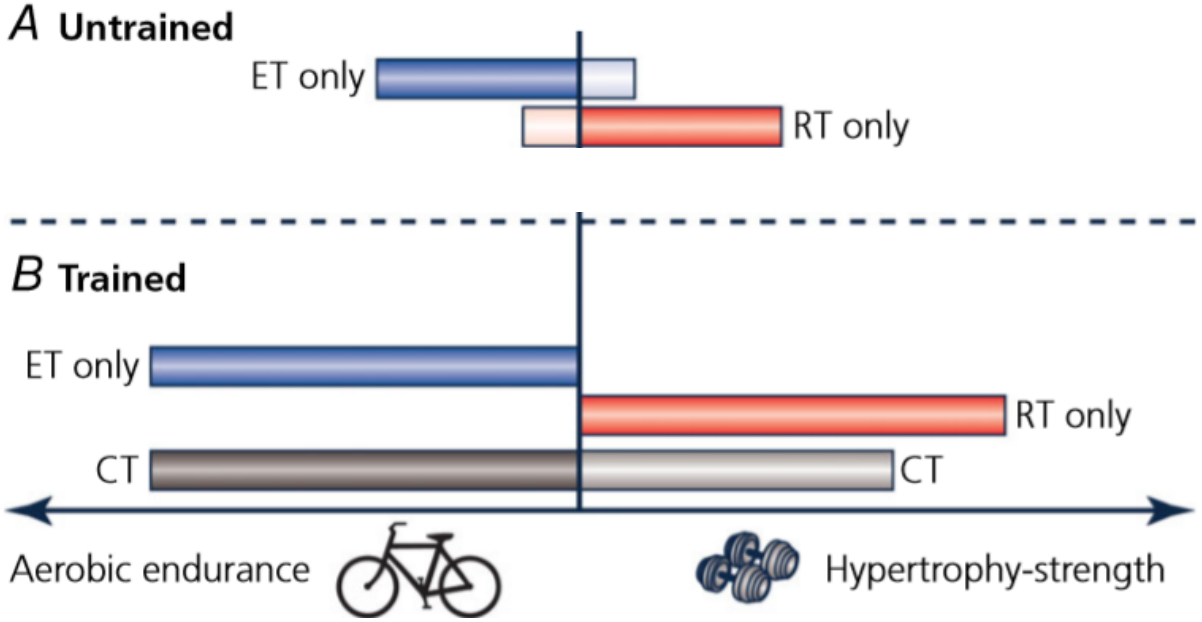

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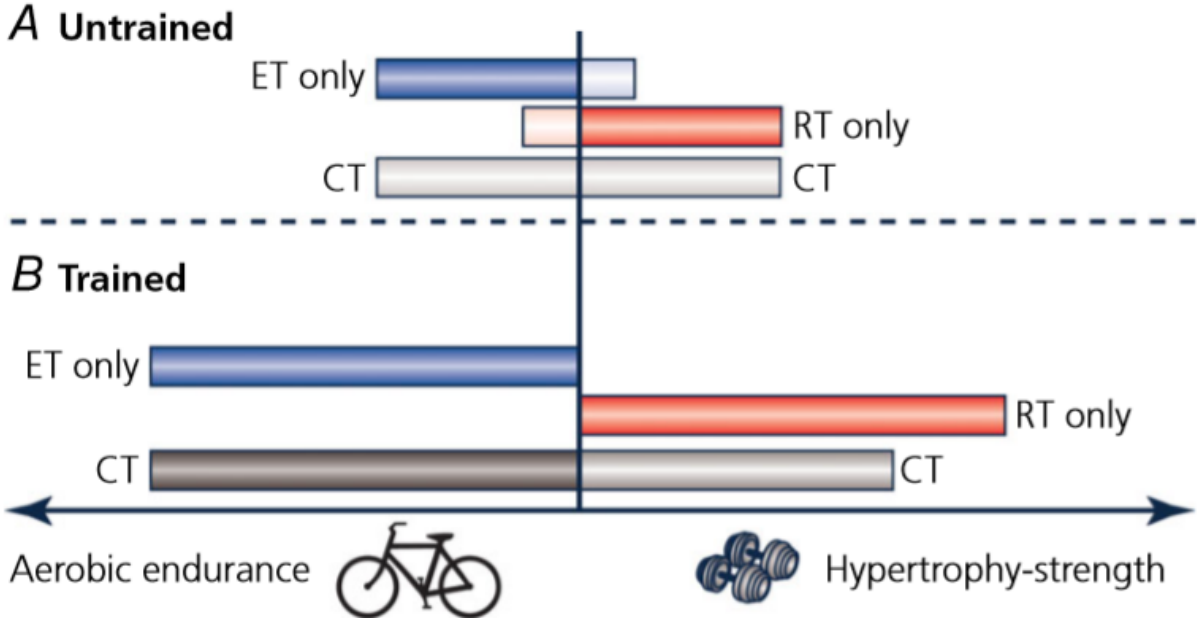

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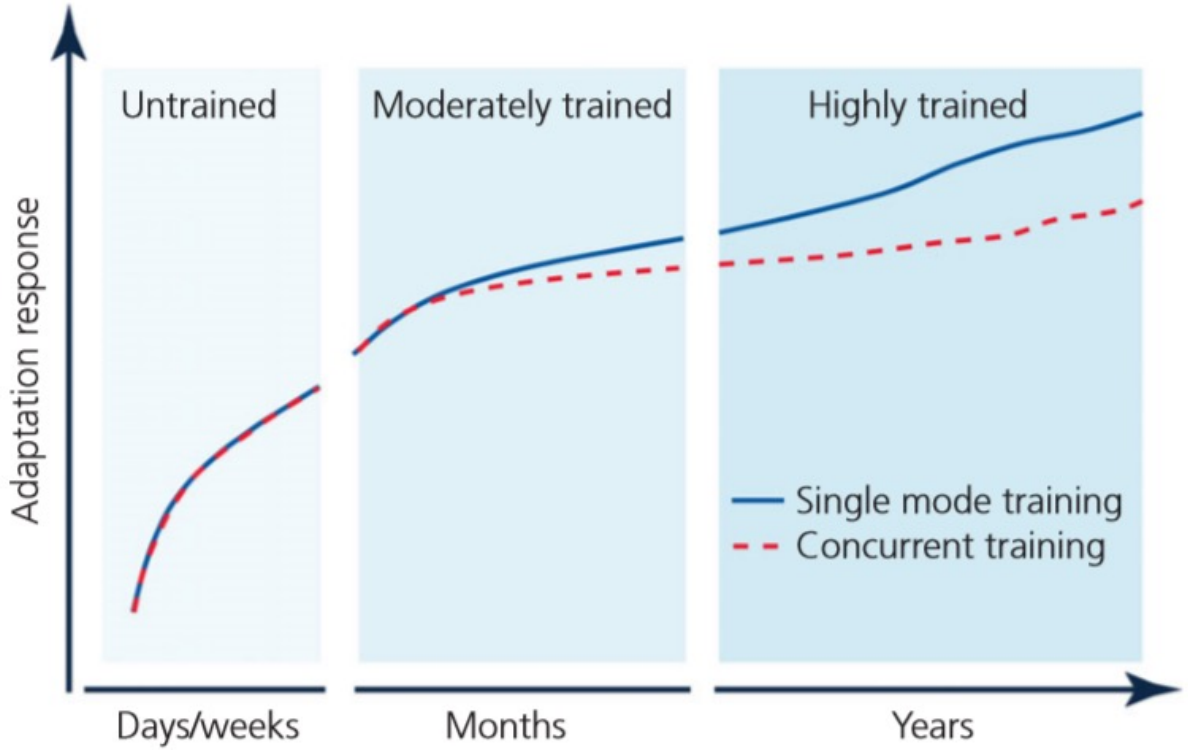

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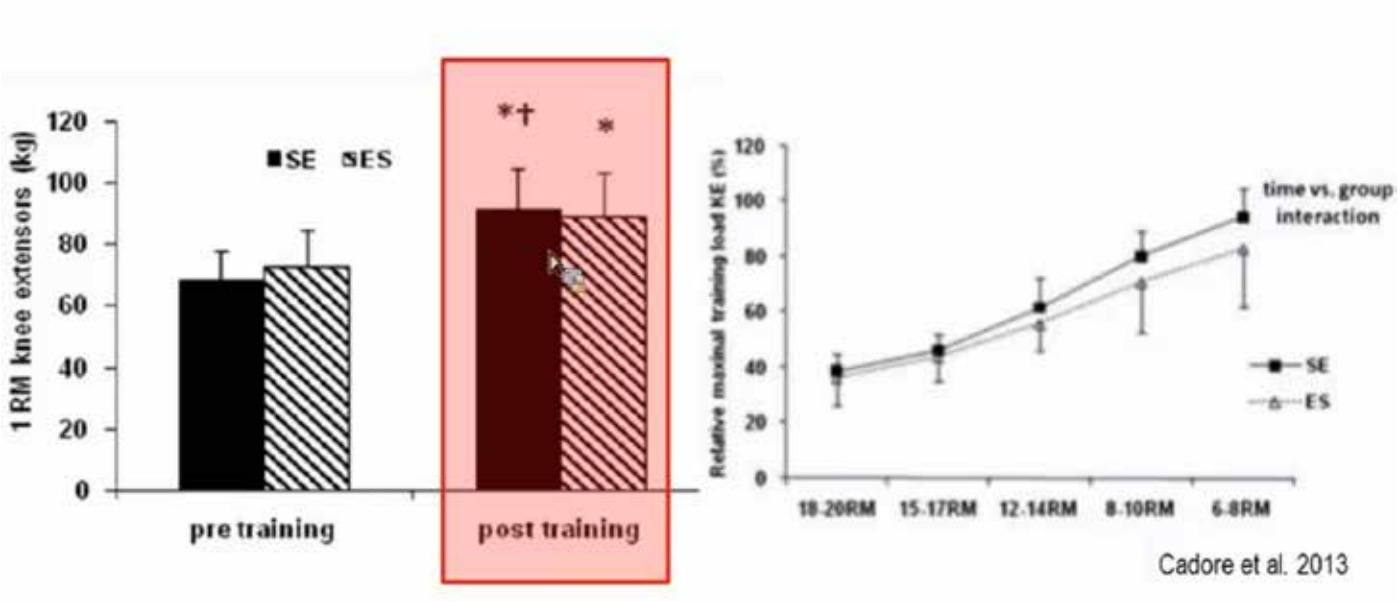
SENIOREN – KRAFT ZUERST



Cadore EL et al. Neuromuscular adaptations to concurrent training in the elderly: effects of intrasession exercise sequence. Age (Dordr). 2013 Jun;35(3):891-903. doi: 10.1007/s11357-012-9405-y. Epub 2012 Mar 28. PMID: 22453934; PMCID: PMC3636398.

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Ja, aber …

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

Mythos

Lebensmittel mit niedrigem Glykämischem Index (GI) sind zu bevorzugen

Grafik generiert mit ChatGPT-5.1, am 18.11.2025

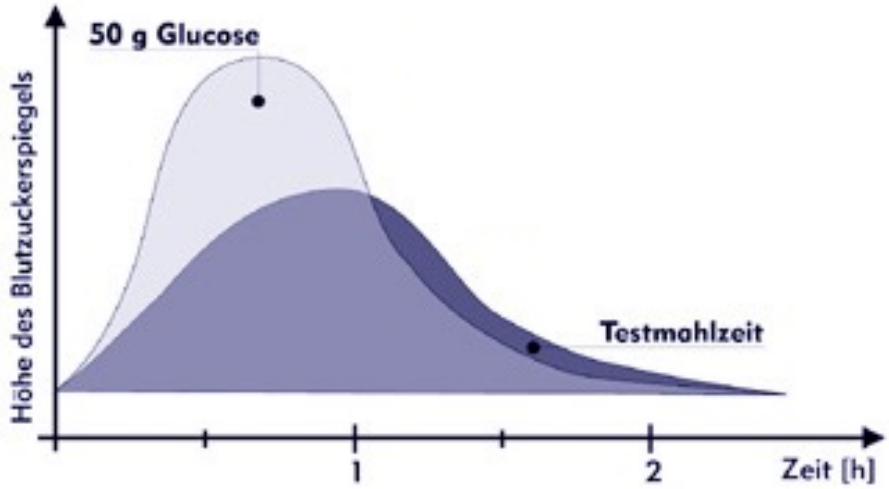
Definition Glykämischer Index

„misst Wirkung eines kohlenhydrathaltigen Lebensmittels auf den Blutzuckerspiegel“

CAVE: keine Aussage über Kaloriengehalt

Bestimmung Glykämischer Index

1) Konsumiert Lebensmittel-Menge mit 50g KH
2) Zeichnet Blutzuckerkurve danach auf
3) Berechnet Fläche unter dieser Kurve
4) Vergleicht Fläche mit Traubenzucker-Fläche



Grafik: https://www.ugb.de/ernaehrungsberatung/was-taugt-glykaemische-index/ | Zugriff am 03.12.2024

Grundlegende Arbeit 1981

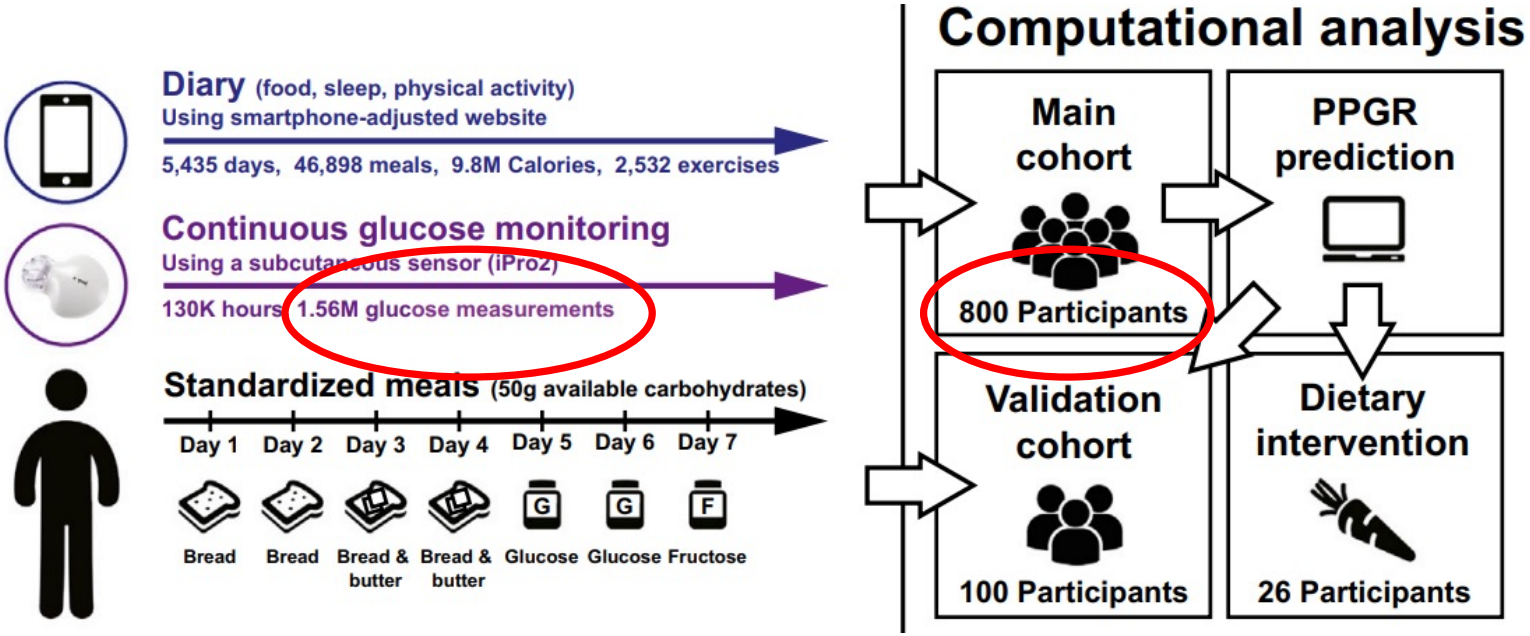
Glycemic index of foods: a physiological basis for carbohydrate exchange[1–3]

David J. A. Jenkins,[4] D.M., Thomas M. S. Wolever,[5] M.Sc., Rodney H. Taylor,[6] M.R.C.P.,

ABSTRACT To determine the effect of different foods on the blood glucose, 62 commonly eaten foods and sugars were fed individually to groups of 5 to 10 healthy fasting volunteers. Blood glucose levels were measured over 2 h, and expressed as a percentage of the area under the glucose response curve when the same amount of carbohydrate was taken as glucose. The largest rises were seen with vegetables (70 ± 5%), followed by breakfast cereals (65 ± 5%), cereals and biscuits (60 ± 3%), fruit (50 ± 5%), dairy products (35 ± 1%), and dried legumes (31 ± 3%). A significant

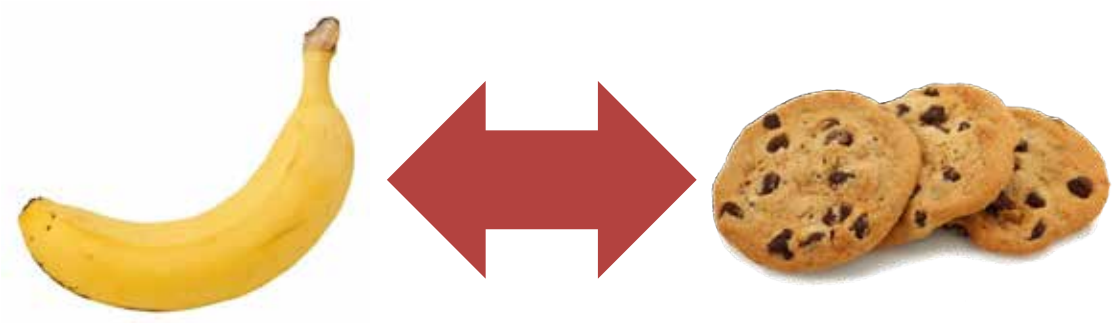
Jenkins, D. J., Wolever, T. M., Taylor, R. H., Barker, H., Fielden, H., Baldwin, J. M., … Goff, D. V. (1981). Glycemic index of foods: a physiological basis for carbohydrate exchange. The American Journal of Clinical Nutrition, 34(3), 362–366. doi:10.1093/ajcn/34.3.362

Studie: Personalized Nutrition



Zeevi, D., Korem, T., Zmora, N., Israeli, D., Rothschild, D., Weinberger, A., … Segal, E. (2015). Personalized Nutrition by Prediction of Glycemic Responses. Cell, 163(5), 1079–1094. doi:10.1016/j.cell.2015.11.001

Unterschiedliche Verstoffwechselung



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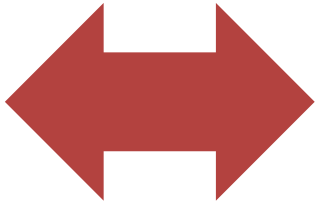

GI 46

GI 42

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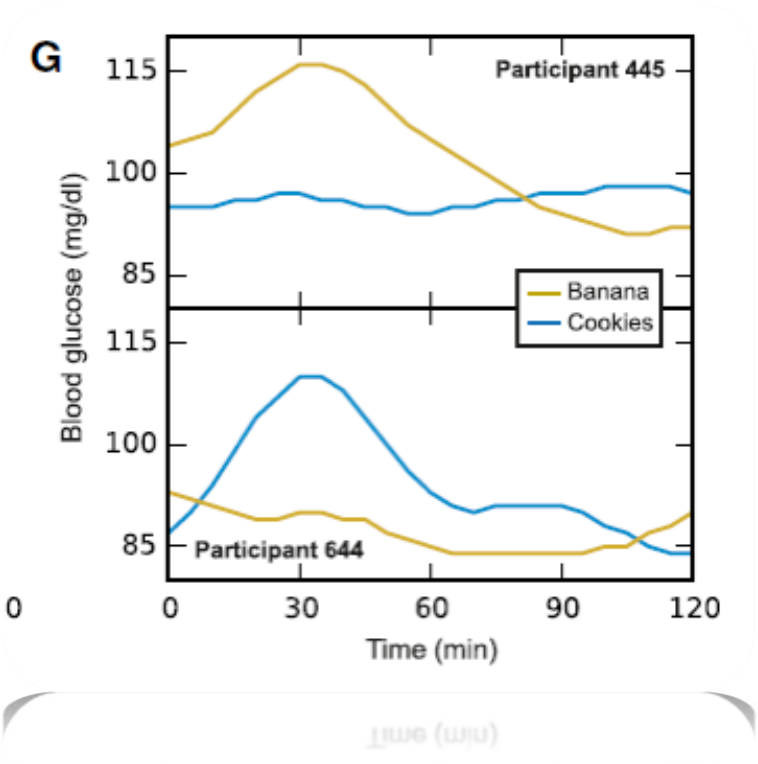

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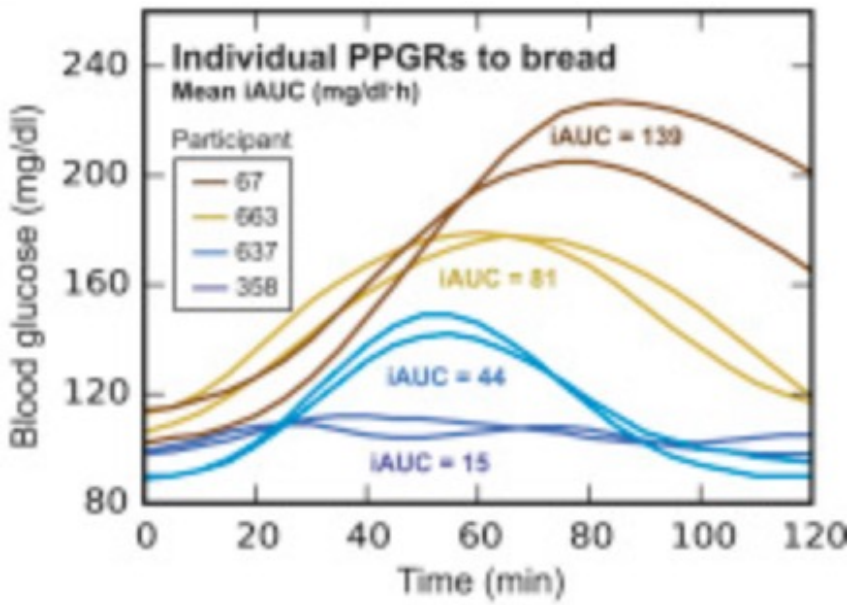
Ergänzungen – Kohlenhydrate



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Grafik generiert mit ChatGPT-5.1, am 18.11.2025


THANK
YOU !

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ON A HIGHWAY TO HEALTH