

1 **Assessing Maximum Oxygen Uptake Through a Motor-Cognitive Reactive Agility Test in**
2 **Team Ball Sports Athletes**

3

4 Hülzdünker, T.^{1,2}, Bahdur, K.^{1,2}, Flammang, L.¹, Naclerio, F.³, Sondermann, Y.⁴, Mierau, A.^{1,2},
5 Karsten, B.^{3,5}

6

7 ¹Department of Sport, LUNEX, Differdange, Luxembourg

8 ²Luxembourg Health & Sport Sciences Research Institute (LHSSRI), Differdange,
9 Luxembourg

10 ³Institute for Lifecourse Development, School of Human Sciences, Centre for Exercise Activity
11 and Rehabilitation, University of Greenwich, London, United Kingdom

12 ⁴Karlsruhe Institute of Technology, Institute of Sports and Sports Science, Karlsruhe, Germany

13 ⁵Cologne University of Applied Sciences, Faculty of Health, Pedagogy & Social Science,
14 Cologne, Germany

15

16 **Corresponding author:**

17 Thorben Hülzdünker

18 Department of Sport

19 LUNEX

20 4671 Differdange, Luxembourg

21 Email: thuelsduenker@lunex.lu

22 **Abstract**

23 Conventional laboratory and field tests often underestimate VO_{2max} and fail to reflect the
24 reactive agility, multidirectional demands of team ball sports. To examine whether a motor-
25 cognitive Reactive Agility (RA) Test can elicit a true VO_{2max} response and serve as a sport-specific
26 alternative for assessing VO_{2max} in team sport athletes.

27 Fifty-three team ball sports athletes performed an exhaustive incremental treadmill test and a
28 motor-cognitive RA Test. The RA Test was performed on the SKILLCOURT and contained four all-
29 out reactive agility runs of 150 m with an intermittent break of 30 s. VO_{2max} was determined in both
30 tests using a portable gas analyzer. Dependent t-tests, Blant-Altman analysis, concordance
31 correlation coefficient (CCC), intraclass correlation coefficient (ICC) and correlation analyses

32 The mean difference in VO_{2max} between the tests was $0.25 \text{ ml}\times\text{kg}^{-1}\times\text{min}^{-1}$ (0.5%, $p=0.55$) with
33 upper and lower 95% limits of agreement at 6.02 (11%) and -5.53 (10%) $\text{ml}\times\text{kg}^{-1}\times\text{min}^{-1}$,
34 respectively. CCC ($p_c=0.94$), ICC (0.943) and correlation analysis ($r=0.94$) revealed a strong
35 agreement and relation between VO_{2max} in the treadmill and RA Test.

36 The RA Test reliably elicits a true VO_{2max} response and offers a valid and more sport-specific option
37 when compared to laboratory treadmill assessment for measuring VO_{2max} in team ball sport
38 athletes.

39

40 Keywords: aerobic performance, ball sport, team sport, reactive agility, physiological profile,
41 endurance

42 **Introduction**

43 The maximum oxygen uptake ($\text{VO}_{2\text{max}}$) is widely recognized as a key indicator for athlete's
44 aerobic performance[1]. In football, for instance, a high level of aerobic fitness is essential for
45 rapid recovery between high-intensity efforts, sustaining performance during competitive
46 matches, and covering greater total distances during the game[2, 3]. Furthermore, aerobic
47 capacity has been consistently shown to correlate with overall performance in team ball
48 sports[4, 5], making it a fundamental component of performance assessments[6, 7].

49 Although aerobic endurance assessments conducted in the lab or on-court, are reliable and
50 provide valuable information in team ball sports, they often fail to capture the full multifactorial
51 and dynamic nature of actual match performance.

52 Game sports involve not only physical capabilities, but also decision-making and reactive
53 responses in constantly changing game contexts requiring intermittent high-intensity efforts[8,
54 9]. As a result, some researchers have questioned the relevance and ecological validity of
55 commonly used endurance, strength and sprint performance assessments, for example, in
56 football, and even argued that many current physical performance tests lack sufficient scientific
57 evidence to support their use[10].

58 Considered the gold standard[11–13] for assessing aerobic capacity, $\text{VO}_{2\text{max}}$ is typically
59 measured using incremental treadmill ramp tests performed to exhaustion. However, this
60 approach has been criticized for its low ecological validity as the movement characteristics in
61 a treadmill ramp test (continuous linear running) do not reflect the intermittent and
62 multidirectional activity pattern typical of team ball sports such as football[14]. Therefore, the
63 objective should be to develop a test protocol for aerobic capacity assessment that incorporates
64 the intermittent change-of-direction (CoD) and reactive agility demands of team ball sports
65 while still eliciting a true $\text{VO}_{2\text{max}}$ response for direct physiological measurement.

66 In football alternative field-based tests, such as the Yo-Yo Intermittent Recovery (IR) tests[15],
67 have been developed to better reflect the sport's demands. Nearly half of elite football
68 practitioners reported assessing aerobic capacity using the YoYo-IR1 (22%) and YoYo-IR2
69 (24%), whereas only 15% use treadmill-based VO_{2max} assessments[6]. The Yo-Yo IR test
70 consists of repeated 2x20 m shuttle runs interspersed with 10-sec active recovery periods with
71 running speed increasing from 10 $km \cdot h^{-1}$ (IR1) or 13 $km \cdot h^{-1}$ (IR2) until exhaustion. VO_{2max} is
72 estimated from the total distance covered showing moderate-to-strong correlations with
73 treadmill-measured VO_{2max} ($r=0.43-0.87$)[16].

74 The available evidence supports the use of the Yo-Yo test to estimate VO_{2max} in team ball sports;
75 however this relationship is characterized by substantial variability, with only about 50% of
76 the variance explained (based on an average correlation of $r \approx 0.7$ between Yo-Yo test
77 performance and VO_{2max} across studies) [16]. Importantly, the YoYo test protocol does not
78 allow directly measuring VO_{2max} as oxygen uptake at exhaustion is significantly lower when
79 compared to VO_{2max} reached in a treadmill assessment[17, 18]. Accordingly, while the running
80 profile in a YoYo test better resembles the intermittent activity in team ball sports, it does not
81 elicit a VO_{2max} response. More promising results have been reported for an agility-like test
82 developed by Born et al.[19]. Instead of 2x20 m linear runs with a 180° turn as in the YoYo
83 test, participants performed 40 m of reactive agility (RA) runs with multidirectional CoD and
84 intermittent breaks of 10 s to better reflect the multidirectional CoD profile and RA demands
85 in team ball sports[20, 21]. In this study VO_{2max} values were closer although still approximately
86 3.1% lower to those measured during treadmill-based VO_{2max} . Further, the correlation between
87 VO_{2max} measured in the agility-like test and the treadmill test was comparatively low ($r=0.59$)
88 suggesting high variability and low agreement. From a methodological perspective it also needs
89 to be considered that although the agility-like test enhanced the sport-specificity of endurance

90 assessments, the use of incremental speed increases does not accurately reflect the nature of
91 ball sports, which are characterized by frequent bouts of high- or maximal-intensity efforts[22].
92 Building on the findings of Erdogan et al. (2024) which demonstrated that VO_2 values
93 exceeding 80% of VO_{2max} can be achieved during a single 100 m RA run, an intermittent RA
94 test incorporating multidirectional CoD movements was developed using the SKILLCOURT
95 technology. This RA Test accounts for the motor and cognitive demands, multidirectional CoD
96 movements and high intensity profile characteristics of team ball sports. In our laboratory, the
97 RA Test has shown good correlations between total running time and treadmill-determined
98 VO_{2max} ($r=-0.800$ [$r^2=0.64$; 95% CI: $-0.571, -0.913$]) (Karsten et al. 2025 – under review),
99 which are comparable with results reported for the YoYo-test ($r=0.43-0.87$)[16]. However, it
100 remains unclear whether VO_{2max} can truly be reached, or if the RA Test underestimates VO_{2max} ,
101 as has been previously observed for the YoYo test [17, 18] and the incremental agility-like
102 test[19].

103

104 To the best of our knowledge no endurance test protocol currently exists for team ball sport
105 athletes that combines an intermittent, all-out RA running pattern while eliciting a VO_{2max}
106 response comparable to that achieved in a ramp-based treadmill test. While current intermittent
107 and more sport-specific protocols do not reach VO_{2max} and only provide estimations with
108 limited validity treadmill-based tests lack sport-specificity. Therefore, the present study aimed
109 to evaluate whether a directly measured VO_{2max} can be attained during a RA test in team ball
110 sport athletes, by comparing it to VO_{2max} values obtained from a gold-standard, ramp-like
111 treadmill protocol. In addition, VO_{2max} was estimated from RA test running time according to
112 the prediction model proposed by Karsten et al. (2025 – under review). Based on the available
113 literature, we hypothesized that VO_2 values measured or estimated in the RA Test, will not
114 differ significantly from VO_{2max} determined via the treadmill assessment. Furthermore, we

115 expected strong correlations and agreement between VO_{2max} values directly measured in the
116 RA Test and treadmill test as well as between the estimated and directly measured VO_{2max}
117 values. The results may provide athletes and coaches in team ball sports additional options for
118 directly assessing VO_{2max} using a more sport-specific RA running protocol.

119 **Methods**

120 **Sample size estimation**

121 An a priori power analysis was conducted using G*Power (version 3.1.9.3)[23] to determine
122 the minimum number of participants required to detect a potential difference in VO_{2max} between
123 the treadmill and RA test. Assuming a paired-samples t-test, a two-tailed α level of 0.05,
124 statistical power ($1-\beta$) of 0.90, and a small-to-moderate effect size ($d \leq 0.5$), the analysis
125 indicated a minimum sample size of 44 participants (critical $t = 2.02$, $df = 43$). With 53
126 participants included in the final analysis, the study exceeded this requirement, achieving an
127 actual power of 0.90 and a minimum detectable effect size of $d = 0.41$, thus ensuring sufficient
128 power to detect meaningful differences in VO_{2max} between protocols.

129 **Participants and ethics**

130 Sixty participants from the sport science student community of the university and local sport
131 clubs were initially recruited for the study. Seven were excluded from the analysis due to
132 missing data, failure to complete both tests, and, due to not reaching VO_{2max} during the
133 treadmill test. The final sample contained 53 participants (27 females, 26 males) The
134 participant characteristics are summarized in table 1.

135 -----Table. 1 about here -----

136 Participants were trained team ball sport athletes (football, handball, volleyball, hockey,
137 basketball) corresponding to tier 2 and tier 3 according to the classification of McKay [24].

138 Participants had on average 12.1 (± 6) years of training experience, performed 4.1 ± 1.6 training
139 sessions per week with a weekly training load of $6.8 (\pm 3.1)$ hours. Participants with muscular
140 injuries, cardio-vascular diseases or any other limitation on the test day (e.g. sickness) were
141 excluded. Participants were informed about the experimental protocol, and written consent was
142 obtained prior to testing. The study was approved by the Luxembourgish national research
143 ethics committee (Nr. 202207/01 v2.0) and conducted in accordance with the Declaration of
144 Helsinki.

145 **Experimental protocol**

146 Participants visited the lab on two occasions with at least 48 h between. To avoid influence of
147 circadian rhythm tests were performed at the same time of the day ± 3 h. Participants were
148 instructed to abstain from alcohol and caffeinated drinks at least 24 h prior to testing and
149 maintain their habitual diet. Moreover, there should be no intense training on the day before
150 the lab visit.

151 On day 1, participants completed an exhaustive treadmill VO_{2max} test followed by a
152 familiarization trial with the RA Test on the SKILLCOURT to minimize potential learning
153 effects. On day 2, they performed the RA Test. During all tests, gas exchange was continuously
154 measured breath-by-breath using a validated mobile MetaMax 3B analyzer (CORTEX
155 Biophysik GmbH, Leipzig, Germany)[25]. The gas analysis system was calibrated according
156 to the manufacturer guidelines using reference gas and ambient air calibration as well as flow
157 sensor volume calibration with a 3l calibration syringe. Heart rate (HR) was continuously
158 measured using a H10 sensor (Polar Elektro, Kempele, Finland). Rate of perceived exertion
159 (RPE; 6 to 20) was obtained according to Borg's scale. Blood lactate samples were taken at the
160 earlobe and analyzed using a Biosen C-Line lactate analyzer (EKF-diagnostic GmbH,
161 Barleben, Germany).

162 **Treadmill ramp test**

163 The ramp-like incremental test was performed on a treadmill (h/p/cosmos®, Pulsar®,
164 Nussdorf, Germany). To account for differences in performance, participants started either at 6
165 $\text{km}\times\text{h}^{-1}$ or $8 \text{ km}\times\text{h}^{-1}$ with a 1% incline [26]. The decision was taken based on training
166 experience, number of weekly training sessions, training load, previous performance tests (if
167 available) and personal rating of performance status. The protocol for the treadmill test is
168 illustrated in figure 1(A). Participants warmed up for 3 min at the starting velocity. This was
169 followed by a speed increase of $0.5 \text{ km}\times\text{h}^{-1}$ every 30 s up to a velocity of $16 \text{ km}\times\text{h}^{-1}$.
170 Afterwards, inclination was increased by 1% per minute. Participants were verbally encouraged
171 throughout the test. RPE and lactate were determined prior to and immediately after the test.
172 VO_2 and HR were continuously recorded. The average test duration was $10.7 (\pm 2.2)$ min. A 30s
173 moving average was applied to the raw data and $\text{VO}_{2\text{max}}$ was defined as the highest VO_2 value.
174 $\text{VO}_{2\text{max}}$ was considered as valid if the VO_2 increase during the last minute did not exceed 150
175 ml indicating a levelling-off [27]. Alternatively, two of the four criteria must be met. 1)
176 $\text{RER} \geq 1.1$, 2) blood lactate concentration $\geq 8 \text{ mmol}\times\text{l}^{-1}$, 3) $\text{HR} \geq 95\%$ of maximum HR ($220 -$
177 age) or 4) $\text{RPE} \geq 18$ [19, 28]. Participants, neither reaching the primary (levelling-off) nor
178 secondary criteria, were excluded from the analysis.

179 **Reactive Agility Test**

180 On test day 2, participants performed the RA Test on the SKILLCOURT (Skillcourt GmbH,
181 Schweinfurt, Germany). The test contains four all-out 150 m reactive agility runs with 30 s of
182 rest in between runs that were performed on a 4 x 4 m court. The test protocol for the RA Test
183 is illustrated in figure 1 (B). Participants started with a warm-up comprising 3 min of moderate,
184 self-paced treadmill running followed by 5 min of stretching. Afterwards, two RA runs of 50
185 m were performed on the SKILLCOURT. Participants were asked to perform the runs at 60%

186 and 80% of their individual maximum performance. The intensities were chosen to increase
187 the physiological demands following the general warm-up and prepare participants for the
188 maximum intensity all-out RA runs. After 2.5 min recovery, the first run started. Participants
189 had to run to one out of eight target fields as indicated on the device screen. Once a field was
190 reached the next showed up. The sequence was randomized, and distance was automatically
191 calculated by the system using a LiDAR (Light Detection and Ranging). Participants were
192 instructed to perform each run as fast as possible and received verbal encouragement
193 throughout the test. To ensure consistency in effort and time, in the event of a RA error run, the
194 test proceeded, and participants continued to the next target field. As for the treadmill test, RPE
195 and lactate were determined prior to and immediately after the test. VO₂ and HR were
196 continuously recorded during both tests. The test time for the RA Test was 8.2 (±0.5) min (6.2
197 minutes running time + 4 x 30 seconds break). As for the treadmill test, a 30s moving average
198 was applied to the raw data and the highest VO₂ was considered as VO_{2max}.

199 In addition to its direct measurement, VO_{2max} was estimated through an equation (Eq1)
200 established from a previous study, which investigated the relationship between total running
201 time in the RA Test and treadmill-based VO_{2max} (Karsten et al. 2025 – under review).

202 Eq1: $estimated\ VO_{2max} = -0.1681 \times RA\ Run\ Total\ Time\ (s) + 115.65$

203 All metrics for the treadmill and RA Test are presented in table 2.

204 -----Table 2 about here -----

205 -----Fig. 1 about here -----

206 **Statistical analysis**

207 Data was analyzed in JASP (version 0.19.0.3) and SPSS (version 29.0.2.0). Shapiro-Wilk tests
208 were used to test for normal distribution and non-parametric tests were used in case of normal

209 distribution violation. Control analyses tested for differences in resting state HR, LA, RPE and
210 test duration.

211 Agreement between treadmill VO_{2max} and RA Test VO_{2max} was assessed using Limits of
212 Agreement (LoA) according to Bland and Altman[29]. Lin's concordance correlation
213 coefficient (CCC) for paired measurements[30] and Pearson correlation coefficient were used
214 for correlation analysis between VO_{2max} measured in the RA Test and treadmill VO_{2max} . A
215 dependent t-test was applied to test for significant differences in measured VO_{2max} between the
216 treadmill and RA Test. The intraclass correlation coefficient (ICC) was calculated based on a
217 two-way mixed effects model with single measurement and absolute agreement [31] according
218 to the classification of McGraw and Wong [32] to determine the degree of similarity in VO_{2max}
219 between the treadmill and RA Test. The same set of analyses was performed to compare the
220 treadmill VO_{2max} to the predicted VO_{2max} values based on the overall running time in the RA
221 Test. To account for potential sex differences, all analyses were carried out separately for male
222 and female participants.

223 Effect sizes were considered small ($d=0.2$, $r=0.1$), medium ($d=0.5$, $r=0.3$) or large ($d=0.8$,
224 $r=0.5$). CCC was considered nearly perfect ($p_c>0.99$), substantial ($p_c>0.95$),
225 moderate ($p_c>0.9$) or poor ($p_c\leq 0.9$). The significance threshold was set to $p<0.05$.

226

227 **Results**

228 Control analyses did not reveal differences in physiological measures (HR, La, RPE) between
229 the two test days ($p\geq 0.122$). With a duration of $8.2 (\pm 0.6)$ minutes, the RA Test was significantly
230 shorter when compared to the treadmill test (10.7 ± 2.2 ; $p<0.001$).

231 ***Measured VO_{2max}***

232 No significant difference was found between VO_{2max} values obtained from the RA Test and the
233 treadmill protocol ($t = 0.606$, $p = 0.547$, $d = 0.083$). Bland–Altman analysis showed a mean
234 bias of $0.25 \text{ ml}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$, with 95% LoA of $+6.02$ ($\sim 11\%$) and $-5.53 \text{ ml}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$ ($\sim 10\%$),
235 indicating a negligible underestimation ($<0.5\%$) of VO_{2max} in the RA Test. The Lin’s
236 concordance correlation coefficient ($\rho_c = 0.94$) demonstrated moderate agreement between
237 methods. Similarly, a very strong Pearson correlation was observed ($r = 0.94$, $p < 0.001$), and
238 the intraclass correlation coefficient (ICC = 0.943; 95% CI 0.907–0.966) confirmed excellent
239 consistency between treadmill and RA Test VO_{2max} measurements. The findings from the
240 overall (whole-group) analysis are depicted in Figure 2

241 ***Estimated VO_{2max}***

242 LoA analysis between estimated and measured VO_{2max} on the treadmill revealed a difference
243 of $1.33 \text{ ml}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$ (3.9%) with upper and lower 95% LoA of 12.8 (24%) and -10.1 (19%)
244 $\text{ml}\cdot\text{kg}^{-1}\cdot\text{min}^{-1}$, respectively. There was no significant difference between VO_{2max} measured on
245 the treadmill and predicted from the running time in the RA Test ($t=1.610$, $p=0.114$, $d=0.228$).
246 Strong correlations were observed between the estimated VO_{2max} in the RA Test and the
247 measured treadmill VO_{2max} ($r=0.74$, $p<0.001$). However, with a coefficient of concordance of
248 $\rho_c=0.736$, the agreement was rather poor. Also, the ICC of 0.674 indicated only moderate
249 similarity between measured treadmill VO_{2max} and estimated values from the RA Test. Results
250 are presented in Figure 3.

251 ***Male vs. female team ball sport athletes***

252 Results for the subgroups of male and female athletes are summarized in table 3. The findings
253 from the overall analyses were consistent across subgroups, particularly for the directly
254 measured VO_{2max} in the RA test. While for the predicted VO_{2max} , there was a significant
255 difference between the treadmill and RA test only for the male group ($t=2.457$, $p=0.022$,

256 d=0.491). and ICC and CCC where lower in absolute numbers in the male when compared to
257 the female participants, effect sizes for the t-test as well as ICC and CCC values were not
258 significantly different ($p \geq 0.171$).

259 -----Table 3 about here -----

260

261

262 **Discussion**

263 This study evaluated if repeated reactive agility sprints can elicit a VO_{2max} response in team
264 ball sport athletes. As the results were not statistically different across parameters between
265 sexes, the following discussion focuses on the group as a whole ($n = 53$). The observed results
266 when directly measuring VO_2 using a gas analyzer revealed close to identical average VO_{2max}
267 values in both tests ($<0.5\%$ difference) and a strong relation and agreement between the
268 treadmill and RA Test. These findings support the use of RA Test protocols to elicit VO_{2max} .
269 The prediction based on overall running time in the RA Test only provided limited validity for
270 VO_{2max} estimation.

271 ***Measured Maximal Oxygen Uptake (VO_{2max})***

272 With a mean difference of $0.25 \text{ ml} \cdot \text{kg}^{-1} \cdot \text{min}^{-1}$, corresponding to about 0.5%, there was a strong
273 agreement in the measured VO_{2max} between the two tests. The agreement achieved in the RA
274 Test was substantially stronger than those reported by Martinez-Luganas and Hartmann[18]
275 who found the Yo-Yo IR1 underestimated treadmill VO_{2max} by 9.4% (95% LoA: -20% to
276 +1.4%) in female football players. Similarly Castagna et al.[17] observed a $2.67 \text{ ml} \cdot \text{kg}^{-1} \cdot \text{min}^{-1}$
277 ($\sim 5\%$) an underestimation in male youth players, with LoA of -14 to $+8.6 \text{ ml} \cdot \text{kg}^{-1} \cdot \text{min}^{-1}$ (-26%
278 to +16%), roughly twice as wide as in the RA Test. Interestingly, the underestimation of VO_{2max}

279 was substantially smaller ($1.7 \text{ ml} \times \text{kg}^{-1} \times \text{min}^{-1}$, 3.1%) in the YoYo-IR2 test as reported by Born
280 et al.[19]. The same applied to the incremental test on the SpeedCourt incorporating a RA
281 component ($1.7 \text{ ml} \times \text{kg}^{-1} \times \text{min}^{-1}$, 3.1%). LoA were substantially larger when compared to the
282 RA Test with about -9 to 9 $\text{ml} \times \text{kg}^{-1} \times \text{min}^{-1}$ (-16% to +16%) for the YoYo-IR2 and -6 to +10
283 $\text{ml} \times \text{kg}^{-1} \times \text{min}^{-1}$ (-10.8% to +18%) for the incremental RA test on the SpeedCourt.

284 Although the LoA in the present study (+11% and -10%) may still be considerable wide, this
285 degree of variability falls within the known biological and technical error of $\text{VO}_{2\text{max}}$ testing.
286 Katch et al. [33] reported a total error of 5.6% across repeated maximal tests. An additional 2%
287 error is attributable to gas-analyser variability[34]. Hence, the combined error margin (~7%)
288 supports the conclusion that the RA Test demonstrates good validity for eliciting $\text{VO}_{2\text{max}}$.

289 The correlation between $\text{VO}_{2\text{max}}$ measured on the treadmill and in the RA Test ($r=0.94$) was
290 very high and significantly stronger when compared to the correlation reported between
291 treadmill $\text{VO}_{2\text{max}}$ and the YoYo-IR1 test by Martinez-Luganas and Hartmann[18] ($r = 0.94$ vs.
292 $r = 0.83$, $p = 0.039$). The study by Castagna et al.[17] observed an even lower correlation
293 between treadmill and YoYo-IR1 $\text{VO}_{2\text{peak}}$ of $r=0.65$. Interestingly, while the agility-like test on
294 the SpeedCourt was closest in reaching the treadmill $\text{VO}_{2\text{max}}$, the correlation between
295 SpeedCourt and treadmill $\text{VO}_{2\text{max}}$ was comparatively low ($r=0.59$)[19]. When considering the
296 strong correlation between the treadmill and RA Test together with the very high concordance
297 correlation coefficient ($\rho_c=0.94$) and ICC (0.94), these findings confirm excellent agreement
298 between $\text{VO}_{2\text{max}}$ values measured during the treadmill and RA Test.

299 In contrast to other field-based protocols, the motor-cognitive RA Test reliably elicits $\text{VO}_{2\text{max}}$.
300 while replicating the reactive multidirectional, and cognitive demands of team ball sports.
301 Accordingly, the RA Test provides a valid, sport-specific, and practically applicable option for
302 assessing aerobic capacity in team ball sport athletes.

303 *Estimated VO_{2max}*

304 The predicted VO_{2max} based on the overall running time in the RA Test also did not indicate a
305 significant difference from the directly measured VO_{2max} on the treadmill. The estimation in
306 the RA Test demonstrated greater precision than previously reported for the YoYo test, where
307 the VO_{2max} predicted using the Bangsbo et al.[15] equation underestimated the treadmill-
308 measured VO_{2max} by 17.8% in female football players[18]. Comparable values were reported
309 by Michailidis et al. [35] for male football players where VO_{2max} was underestimated by 14%
310 in the YoYo-IR1. The largest difference was observed by Kramer et al. [36] with an
311 underestimation of 30% when comparing estimated VO_{2max} to measured VO_{2max} in a YoYo-IR1
312 test. Although the prediction of VO_{2max} from the RA Test was on average accurate, the LoA
313 were substantially wider than those observed for directly measured VO_{2max} and comparable to
314 previous findings for the YoYo-test[18]. Considering the wider LoA between 24% and -19%
315 together with the concordance correlation coefficient of $\rho_c=0.736$ and the ICC of 0.68, the
316 estimated VO_{2max} from the RA Test should therefore be interpreted as approximate indicator
317 rather than a precise prediction of VO_{2max}. This interpretation is further supported by the
318 correlation analysis which revealed an association of 0.737, similar to the range typically
319 reported for the YoYo test ($r=0.43$ and $r=0.87$ [16]). Given the RA Test's reactive and
320 multidirectional characteristics, it is plausible that CoD ability and anaerobic energy
321 contributions influence running performance and, consequently, reduced the strength of the
322 correlation. In fact, CoD ability does depend on strength, power and technique which may
323 substantially vary between participants independent of aerobic capacity [37]. Moreover, there
324 was only a moderate correlation ($r=-0.346$) between VO_{2max} overall running time in an 8 x 40
325 m sprint protocol [38]. Therefore, although the running distance was longer in this study (4 x
326 150 m), a substantial contribution of the anaerobic energy metabolism to the overall running
327 time in the RA Test can be assumed.

328 **Practical application**

329 The motor-cognitive RA Test was specifically designed for team ball sport athletes to provide
330 a higher stimulus-correspondence (through external visual cue) and task correspondence
331 (through all-out multidirectional CoD) compared to existing field-based endurance tests.
332 VO_{2max} values closely align with those obtained from treadmill testing and they provide a
333 higher precision and accuracy in obtaining VO_{2max} when compared to established field-based
334 endurance tests. The RA test can therefore serve as an option and alternative for athletes in
335 team ball sports to determine aerobic capacity in a more sport-specific setting. As such, the RA
336 test may qualify as a performance test for evaluating training programmes or athlete selection.

337 With a test duration of 8.2 ± 0.6 min, the RA Test is more time efficient than the treadmill testing
338 (10.7 ± 2.2 min) and comparable in length to the YoYo test[18]. Importantly, 90% of the
339 participants reached their VO_{2max} within the first or second 150-m run interval, suggesting the
340 potential to shorten the protocol to two intervals of 2x150-m in future applications. However,
341 as the RA Test is an all-out test, a 5 min warm-up should be considered. Still, the total testing
342 time was shorter when compared to the incremental agility-like test reported by Born et al. [19]
343 (~18-19 min). Finally, due to distance measurement by the LiDAR and automatic data
344 processing, the test provides a high objectivity, and it is less staff-intensive when compared to
345 e.g. a YoYo-test, although only one athlete can be tested at a time. The estimation of VO_{2max}
346 values based on overall running time may be useful for coaches and athletes when gas analysis
347 is not available but should be interpreted with caution. In this context the same limitations
348 apply to the RA Test as to commonly used field-based VO_{2max} tests.

349 **Limitations and future directions**

350 While the study confirms that the RA Test can obtain a VO_{2max} response, reliability has not
351 been addressed and needs to be confirmed in future research. To support generalizability across

352 performance levels and disciplines, additional studies with different athlete populations are
353 warranted. Further, oxygen kinetics were not considered and should be analyzed to provide an
354 explanation for the higher validity when compared to many existing field-based tests. Future
355 research should also evaluate whether performance in the RA Test is related to physiological
356 on-court performance (e.g. running distance, number of sprints, etc.) as previously indicated
357 for the YoYo-test[15, 39, 40]. Finally, although this study employed SKILLCOURT technology
358 to measure and estimate VO_{2max} , similar RA test protocols could potentially be implemented
359 using other technologies (e.g., reaction lights), which warrants evaluation in future research.

360 **Conclusions**

361 The present study demonstrates that the motor-cognitive RA Test performed on the
362 SKILLCOURT reliably elicits a true VO_{2max} response in team ball sport athletes. VO_{2max}
363 values showed no significant difference and a very strong agreement with those obtained from
364 laboratory treadmill testing. While direct gas analysis remains the preferred method for precise
365 measurement, VO_{2max} estimation from the RA Test provides a practical alternative albeit with
366 greater variability and reduced predictive accuracy. Overall, the RA Test is a valid, objective,
367 and sport-specific tool for assessing VO_{2max} in team ball sports.

368

369 **Ethics statement:** The study was approved by the Luxembourgish national research ethics
370 committee (Nr. 202207/01 v2.0) and conducted in accordance with the Declaration of Helsinki.

371 **Participant consent statement:** All participants provided written informed consent before
372 participating in this study.

373 **Acknowledgements:** The authors thank all athletes for their contribution to the study and
374 motivation during the performance tests.

375 **Funding statement:** No funding was received for this study.

376 **Conflict of interest statement:** no authors have no conflict of interest to declare.

377 **Statement on generative AI:** No generative AI was used for writing this manuscript.

378 **Data availability statement:** Due to ethical considerations regarding privacy and
379 confidentiality of participant information, data will be shared on reasonable request. The
380 request should be directed to the corresponding author.

381 **References**

- 382 1. Ranković G, Mutavdžić V, Toskić D, Preljević A, Kocić M, Nedin-Ranković G et al.
383 AEROBIC CAPACITY AS AN INDICATOR IN DIFFERENT KINDS OF SPORTS. *Bosn J*
384 *Basic Med Sci.* 2010; 10(1):44–8.
- 385 2. Bishop D, Edge J, Goodman C. Muscle buffer capacity and aerobic fitness are associated
386 with repeated-sprint ability in women. *Eur J Appl Physiol.* 2004; 92(4-5):540–7.
- 387 3. Helgerud J, Engen LC, Wisloff U, Hoff J. Aerobic endurance training improves soccer
388 performance. *Med Sci Sports Exerc.* 2001; 33(11):1925–31.
- 389 4. Gharbi Z, Dardouri W, Haj-Sassi R, Chamari K, Souissi N. Aerobic and anaerobic
390 determinants of repeated sprint ability in team sports athletes. *Biol Sport.* 2015; 32(3):207–12.
- 391 5. Scanlan AT, Stojanović E, Milanović Z, Teramoto M, Jeličić M, Dalbo VJ. Aerobic Capacity
392 According to Playing Role and Position in Elite Female Basketball Players Using Laboratory
393 and Field Tests. *Int J Sports Physiol Perform.* 2021; 16(3):435–8.
- 394 6. Asimakidis ND, Bishop CJ, Beato M, Mukandi IN, Kelly AL, Weldon A et al. A survey into
395 the current fitness testing practices of elite male soccer practitioners: from assessment to
396 communicating results. *Front Physiol.* 2024; 15:1376047.
- 397 7. Michalsik LB, Madsen K, Aagaard P. Physiological capacity and physical testing in male
398 elite team handball. *J Sports Med Phys Fitness.* 2015; 55(5):415–29.
- 399 8. Fuster J, Caparrós T, Capdevila L. Evaluation of cognitive load in team sports: literature
400 review. *PeerJ.* 2021; 9:e12045.
- 401 9. Young W, Rayner R, Talpey S. It's Time to Change Direction on Agility Research: a Call to
402 Action. *Sports Med Open.* 2021; 7(1):12.

- 403 10. Schwesig R, Miserius M, Hermassi S, Delank KS, Noack F, Fieseler G. Wie valide ist die
404 Leistungsdiagnostik im Fußball? *Sportverletz Sportschaden*. 2016; 30(1):26–30.
- 405 11. Beltz NM, Gibson AL, Janot JM, Kravitz L, Mermier CM, Dalleck LC. Graded Exercise
406 Testing Protocols for the Determination of VO₂max: Historical Perspectives, Progress, and
407 Future Considerations. *J Sports Med (Hindawi Publ Corp)*. 2016; 2016:3968393.
- 408 12. Lundby C, Montero D, Joyner M. Biology of VO₂ max: looking under the physiology lamp.
409 *Acta Physiol (Oxf)*. 2017; 220(2):218–28.
- 410 13. Foster C, Kuffel E, Bradley N, Battista RA, Wright G, Porcari JP et al. VO₂max during
411 successive maximal efforts. *Eur J Appl Physiol*. 2007; 102(1):67–72.
- 412 14. Jemni M, Prince MS, Baker JS. Assessing Cardiorespiratory Fitness of Soccer Players: Is
413 Test Specificity the Issue?-A Review. *Sports Med Open*. 2018; 4(1):28.
- 414 15. Bangsbo J, Iaia FM, Krstrup P. The Yo-Yo intermittent recovery test : a useful tool for
415 evaluation of physical performance in intermittent sports. *Sports Med*. 2008; 38(1):37–51.
- 416 16. Schmitz B, Pfeifer C, Kreitz K, Borowski M, Faldum A, Brand S-M. The Yo-Yo
417 Intermittent Tests: A Systematic Review and Structured Compendium of Test Results. *Front*
418 *Physiol*. 2018; 9:870.
- 419 17. Castagna C, Impellizzeri FM, Belardinelli R, Abt G, Coutts A, Chamari K et al.
420 Cardiorespiratory responses to Yo-yo Intermittent Endurance Test in nonelite youth soccer
421 players. *J Strength Cond Res*. 2006; 20(2):326–30.
- 422 18. Martínez-Lagunas V, Hartmann U. Validity of the Yo-Yo Intermittent Recovery Test Level
423 1 for direct measurement or indirect estimation of maximal oxygen uptake in female soccer
424 players. *Int J Sports Physiol Perform*. 2014; 9(5):825–31.

- 425 19. Born D-P, Kunz P, Sperlich B. Reliability and validity of an agility-like incremental
426 exercise test with multidirectional change-of-direction movements in response to a visual
427 stimulus. *Physiol Rep.* 2017; 5(9).
- 428 20. Barrera-Domínguez FJ, Almagro BJ, Tornero-Quiñones I, Sáez-Padilla J, Sierra-Robles Á,
429 Molina-López J. Decisive Factors for a Greater Performance in the Change of Direction and
430 Its Angulation in Male Basketball Players. *Int J Environ Res Public Health.* 2020; 17(18).
- 431 21. Kai T, Hirai S, Anbe Y, Takai Y. A new approach to quantify angles and time of changes-
432 of-direction during soccer matches. *PLoS One.* 2021; 16(5):e0251292.
- 433 22. Nygaard Falch H, Guldteig Rædergård H, van den Tillaar R. Effect of Different Physical
434 Training Forms on Change of Direction Ability: a Systematic Review and Meta-analysis.
435 *Sports Med Open.* 2019; 5(1):53.
- 436 23. Faul F, Erdfelder E, Lang A-G, Buchner A. G*Power 3: a flexible statistical power analysis
437 program for the social, behavioral, and biomedical sciences. *Behav Res Methods.* 2007;
438 39(2):175–91.
- 439 24. McKay AKA, Stellingwerff T, Smith ES, Martin DT, Mujika I, Goosey-Tolfrey VL et al.
440 Defining Training and Performance Caliber: A Participant Classification Framework. *Int J*
441 *Sports Physiol Perform.* 2022; 17(2):317–31.
- 442 25. van Hooren B, Souren T, Bongers BC. Accuracy of respiratory gas variables, substrate, and
443 energy use from 15 CPET systems during simulated and human exercise. *Scand J Med Sci*
444 *Sports.* 2024; 34(1):e14490.
- 445 26. Jones AM, Doust JH. A 1% treadmill grade most accurately reflects the energetic cost of
446 outdoor running. *J Sports Sci.* 1996; 14(4):321–7.
- 447 27. TAYLOR HL, BUSKIRK E, HENSCHER A. Maximal oxygen intake as an objective
448 measure of cardio-respiratory performance. *J Appl Physiol.* 1955; 8(1):73–80.

- 449 28. Lucía A, Rabadán M, Hoyos J, Hernández-Capilla M, Pérez M, San Juan AF et al.
450 Frequency of the VO₂max plateau phenomenon in world-class cyclists. *Int J Sports Med.* 2006;
451 27(12):984–92.
- 452 29. Bland JM, Altman DG. Measuring agreement in method comparison studies. *Stat Methods*
453 *Med Res.* 1999; 8(2):135–60.
- 454 30. Lin L, Hedayat AS, Wu W. *Statistical Tools for Measuring Agreement.* New York, NY:
455 Springer New York; 2012.
- 456 31. Koo TK, Li MY. A Guideline of Selecting and Reporting Intraclass Correlation Coefficients
457 for Reliability Research. *J Chiropr Med.* 2016; 15(2):155–63.
- 458 32. McGraw KO, Wong SP. Forming inferences about some intraclass correlation coefficients.
459 *Psychological Methods.* 1996; 1(1):30–46.
- 460 33. Katch VL, Sady SS, Freedson P. Biological variability in maximum aerobic power. *Med*
461 *Sci Sports Exerc.* 1982; 14(1):21–5.
- 462 34. Vogler AJ, Rice AJ, Gore CJ. Validity and reliability of the Cortex MetaMax3B portable
463 metabolic system. *J Sports Sci.* 2010; 28(7):733–42.
- 464 35. Michailidis Y, Chavlis S, Mitrotasios M, Metaxas TI. The use of Yo-Yo intermittent
465 recovery test level 1 for the estimation of maximal oxygen uptake in youth elite soccer players.
466 *TRENDS in Sport Sciences.* 2020; 27(3):167–73.
- 467 36. Kramer M, Sparks M, Coetzee B. Physiological and Sprint Kinetics Associated With the
468 Yo-Yo Intermittent Recovery Test Level 1 Performances in Soccer Players. *Int J Sports Physiol*
469 *Perform.* 2022; 17(9):1382–90.
- 470 37. Brughelli M, Cronin J, Levin G, Chaouachi A. Understanding change of direction ability
471 in sport: a review of resistance training studies. *Sports Med.* 2008; 38(12):1045–63.

- 472 38. Aziz AR, Chia M, Teh KC. The relationship between maximal oxygen uptake and repeated
473 sprint performance indices in field hockey and soccer players. *J Sports Med Phys Fitness*. 2000;
474 40(3):195–200.
- 475 39. Krstrup P, Mohr M, Amstrup T, Rysgaard T, Johansen J, Steensberg A et al. The yo-yo
476 intermittent recovery test: physiological response, reliability, and validity. *Med Sci Sports*
477 *Exerc*. 2003; 35(4):697–705.
- 478 40. Castagna C, Impellizzeri F, Cecchini E, Rampinini E, Alvarez JCB. Effects of intermittent-
479 endurance fitness on match performance in young male soccer players. *J Strength Cond Res*.
480 2009; 23(7):1954–9.

481 Fig. 1 Testing protocols for the (A) the treadmill ramp test and (B) the RA Test

482

483 Fig. 2 (A) Bland-Altman plots indicating difference in means and the 95% limits of agreement,
484 (B) linear relationship between VO_{2max} measured in the treadmill test and RA Test and (C) the
485 T-test results comparing VO_{2max} measured during treadmill test and the RA Test for the whole
486 group (n=51). Error bars indicate 95% confidence intervals.

487

488 Fig. 3 Comparison of the predicted VO_{2max} based on the total running time of the RA Test to
489 the (A) measured VO_{2max} in the treadmill test and (B) measured VO_{2max} in the RA Test. Left
490 column: Bland-Altman plots and 95% limits of agreement, middle column: the relationship
491 between estimated and measured VO_{2max} and right column: T-test comparing the measured and
492 estimated VO_{2max} . Error bars indicate 95% confidence intervals.