

1 **Kinetics of muscle carnosine decay after β -alanine supplementation: a sixteen-**
2 **week washout study**

3 **Running title:** Sixteen weeks of muscle carnosine washout

4

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25 **ABSTRACT**

26 **Purpose:** To describe the kinetics of carnosine washout in human skeletal muscle over
27 16 weeks. **Methods:** Carnosine washout kinetics were studied in fifteen young,
28 physically-active omnivorous men randomly assigned to take $6.4 \text{ g} \cdot \text{d}^{-1}$ of β -alanine
29 (n=11) or placebo (PL, n=4) for 8 weeks. Muscle carnosine content (M-Carn) was
30 determined before (PRE), immediately after (POST) and 4, 8, 12 and 16 weeks after
31 supplementation. High-intensity exercise tests were performed at these same time
32 points. Linear and exponential models were fitted to the washout data and the leave-
33 one-out method was used to select the model with the best fit for M-Carn decay data.
34 Repeated measures correlation analysis was used to assess the association between
35 changes in M-Carn and changes in performance. **Results:** M-Carn increased from PRE
36 to POST in the β -alanine group only ($+91.1 \pm 29.1\%$; PL: $+0.04 \pm 10.1\%$; $p < 0.0001$). M-
37 Carn started to decrease after cessation of β -alanine supplementation and continued to
38 decrease until week 16 (POST4: $+59 \pm 40\%$; POST8: $+35 \pm 39\%$; POST12: $+18 \pm 32\%$;
39 POST16: $-3 \pm 24\%$ of PRE M-Carn). From week 12 onwards, M-Carn was no longer
40 statistically different from PRE. Both linear and exponential models displayed very
41 similar fit and could be used to describe carnosine washout, although the linear model
42 presented a slightly better fit. The decay in M-Carn was mirrored by a similar decay in
43 high-intensity exercise tolerance; M-Carn was moderately and significantly correlated
44 with TWD ($r=0.505$; $p=0.032$) and TTE ($r=0.72$; $p < 0.001$). **Conclusion:** Carnosine
45 washout takes 12-16 weeks to complete, and it can be described either by linear or
46 exponential curves. Changes in M-Carn appear to be mirrored by changes in high-
47 intensity exercise tolerance. This information can be used to optimise β -alanine
48 supplementation strategies.

49 **Keywords:** carnosine; washout; β -alanine; human skeletal muscle.

51 INTRODUCTION

52 β -alanine supplementation has been consistently shown to increase muscle
53 carnosine content (M-Carn) by approximately 60-80% on average following typical
54 dosing regimens ($\sim 3\text{-}6\text{ g}\cdot\text{d}^{-1}$ for $\sim 4\text{-}10$ weeks) (1, 2). Carnosine (β -alanyl-L-histidine) is
55 primarily a cytoplasmatic dipeptide that is thought to play important physiological roles,
56 including acid-base regulation (3-5), protection against oxidative damage (6, 7), protein
57 glycation and carbonylation (8), detoxification of reactive aldehydes (9) and regulation
58 of intramuscular calcium transients (10, 11). β -alanine supplementation has become a
59 popular nutritional strategy among athletes to improve performance (12), due its well-
60 demonstrated ergogenic effects, especially in high-intensity exercises where the
61 increased buffering capacity brought about by increased M-Carn improves
62 intramuscular pH regulation (13-16). In contrast with the large number of studies
63 consistently showing that almost all individuals respond to chronic β -alanine
64 supplementation by increasing M-Carn (>20 studies with ~ 500 participants in total),
65 much less is known about how M-Carn responds when β -alanine supplementation
66 ceases. Precise information on how M-Carn responds to β -alanine cessation could
67 provide valuable knowledge about the mechanisms controlling M-Carn in skeletal
68 muscle as well as the basis for applying more effective supplementation strategies.

69 To date, only three studies have evaluated muscle carnosine washout (17-19),
70 with conflicting data being reported. Harris et al. (19) were the first to study carnosine
71 washout; using chromatographic carnosine determination in muscle biopsy samples,
72 they reported an exponential decay for carnosine with a half-life ($t_{1/2}$) of 8.6 weeks after
73 β -alanine supplementation ($6.4\text{ g}\cdot\text{d}^{-1}$ for 4 weeks). Subsequently, Baguet et al. (17)
74 supplemented $4.8\text{ g}\cdot\text{d}^{-1}$ of β -alanine for 5-6 weeks and, using hydrogen magnetic
75 resonance spectroscopy ($^1\text{H-MRS}$) to quantify muscle carnosine, they reported linear

76 (i.e. zero order) washout kinetics in M-Carn with a ~30% reduction in M-Carn
77 occurring in the third week of washout; by the ninth week, mean carnosine had returned
78 to pre-supplementation levels. However, the individuals who were considered high
79 responders (i.e., those whose M-Carn had increased by more than 30%, n=3) still
80 exhibited elevated M-Carn in the ninth week, and were predicted to reach pre-
81 supplementation levels only in the fifteenth week. The low-responders (i.e., those whose
82 M-Carn had increased by less than 30%, n=5), on the other hand, required only 6.5
83 weeks to return to the pre-supplementation levels. Also using ¹H-MRS, Stellingwerff et
84 al. (2012) (18) reported a longer washout time after an 8-week β-alanine
85 supplementation period (1.6 or 3.2 g·d⁻¹). The authors predicted that ~15-20 weeks
86 would be required for the complete washout of M-Carn, along with a calculated decay
87 rate of ~2% per week. This was 40% slower than the decay rate reported by Baguet et
88 al. (2009) (17). More recently, Dmitry & Harris (2018) (20) used the available data
89 from these studies (17-19) to propose a mathematical model for carnosine washout
90 assuming an exponential decay described by first-order kinetics, leading to the
91 assumption that the rate of carnosine decay is dependent upon M-Carn levels.

92 The studies investigating M-Carn washout kinetics have some methodological
93 limitations in addition to equivocal findings. The allotted time for washout may not
94 have been sufficiently long to return M-Carn levels to the pre-supplementation values
95 (6-9 weeks, with a predicted washout time of ≥15 weeks) (17). Two studies (17, 18)
96 used nuclear magnetic resonance spectroscopy to quantify M-Carn, a method that has
97 been shown to have limited validity (21). Only two carnosine measurements were made
98 across the washout period in these studies, which renders it impossible to describe the
99 kinetic profile of washout.

100 Since more precise information on the kinetics of carnosine washout can offer
101 insightful physiological information of the mechanisms controlling the synthesis and
102 degradation of carnosine in skeletal muscle, as well as help practitioners to better design
103 β -alanine supplementation strategies, we studied the kinetics of carnosine washout in
104 human skeletal muscle by measuring M-Carn monthly over a longer period (16 weeks),
105 and using a reference method for carnosine quantification. M-Carn decay was described
106 using a Bayesian modelling approach. A secondary aim of this study was to examine
107 whether changes in high-intensity exercise capacity mirrors changes in M-Carn content,
108 as this would serve as a confirmation of previous data suggesting an association
109 between M-Carn and high-intensity exercise performance (22).

110

111 **METHODS**

112

113 **Participants**

114 Physically active (participation in exercise activities for ≥ 150 min \cdot week⁻¹),
115 healthy, omnivorous men aged 18-35 years were eligible to participate. Exclusion
116 criteria were: current or previous use of β -alanine (for 6 months before the study) or
117 creatine (for 3 months before the study); current or previous use of any other dietary
118 supplement 3 months before the study; smoking and admitted use of anabolic steroids or
119 any other performance enhancing drugs. One-hundred and twelve participants were
120 initially screened for eligibility, of which 27 (age: 28 ± 4 y, height: 1.74 ± 0.08 m, body
121 mass: 76.0 ± 17.3 kg) were deemed eligible and randomly allocated to receive either β -
122 alanine (n=18) or placebo (dextrose; PL, n=9) in a 2:1 ratio. Although unbalanced
123 allocation ratios can reduce the statistical power of between-group interactions, this
124 effect is small when ratios are below 3:1 and it may be advantageous to gain more

125 experience on a treatment whose effects are not well known (23). We thus opted for a
126 2:1 randomization ratio to maximize the number of participants receiving β -alanine,
127 since our primary goal was descriptive and did not depend upon comparisons with the
128 PL group. Twelve participants (7 from the β -alanine group and 5 from the placebo
129 group) dropped out the study after allocation for various reasons and were not included
130 in the analyses (figure 1); therefore, 15 participants completed the study (β -alanine:
131 $n=11$; PL: $n=4$) (Table 1). All participants were requested to maintain their habitual
132 dietary intake, as well as their habitual levels of physical activity throughout the study.
133 Compliance with these requests were verbally confirmed with the participants several
134 times throughout the study. They were also fully informed of the risks associated with
135 participation and gave their signed informed consent prior participation. The study was
136 approved by the Ethics Committee of the School of Physical Education and Sport of the
137 University of Sao Paulo (1.942.548) and complies with the standards established by the
138 Declaration of Helsinki.

139

140 **Experimental design**

141 This was a double-blind, randomized, placebo-controlled, parallel-group study.
142 Randomization was performed in a 2:1 ratio (β -alanine:placebo) in blocks of 3 or 6
143 participants, with the groups matched for maximum cycling power output (W_{max} ; β -
144 alanine= 264.6 ± 47.1 W; PL= 250.7 ± 61.7 W) using the block randomization method and
145 a random sequence generator (www.random.org). The random allocation sequence was
146 generated by a researcher who was not directly involved with, and therefore blinded to,
147 the experimental sessions. After the completion of preliminary tests, the individuals
148 were supplemented for 8 weeks with either β -alanine (SR-CarnoSyn®, Natural

149 Alternatives International, Inc., Carlsbad, CA) or placebo (maltodextrin, Natural
150 Alternatives International, Inc.).

151 All participants were requested to attend the laboratory on 11 different
152 occasions. During the first visit, cycling maximal power output (W_{max}) was determined.
153 During the 2nd and 3rd visits, the participants were familiarized with the cycling capacity
154 test at 110% of their individual W_{max} (CCT_{110%}). During the 4th visit (before
155 supplementation – PRE) and in the 5th visit (after supplementation – POST), participants
156 were assessed for CCT_{110%} and M-Carn content. The 6 remaining visits were carried out
157 1, 2, 4, 8, 12 and 16 weeks after the end of supplementation (POST1, POST2, POST4,
158 POST8, POST12 and POST 16) where M-Carn was determined. CCT_{110%} was also
159 determined at POST4, POST8, POST12 and POST16. Due to the large number of
160 muscle biopsies required, several participants did not agree to partake in the POST1 and
161 POST2 trials; hence, these two data sets were excluded from the mixed model analysis,
162 although were included in the mathematical modeling of washout kinetics. Figure 2
163 illustrates the experimental design and the final number of samples analyzed in each
164 time point.

165

166 **Supplementation protocol**

167 Two 800-mg tablets of either β -alanine or PL were taken 4 times per day at 3-4 h
168 intervals, totaling 6.4 g·d⁻¹. Both β -alanine and PL tablets were indistinguishable and
169 identical in size and overall appearance. The participants were instructed to consume
170 their tablets along with main meals (i.e., breakfast, lunch, dinner) and before sleep.
171 They were also requested to complete a log sheet to verify compliance with
172 supplementation (β -alanine = 95±4%; PL= 97±2%). We defined *a priori* that any
173 participant not meeting a minimum of 90% compliance with the supplementation

174 protocol would be excluded from the study, which has been verified after 4 and 8 weeks
175 of supplementation. The efficacy of blinding procedures was verified by asking the
176 participants whether they believed to have received β -alanine or PL at the end of the
177 supplementation period. A Fisher's exact test showed no significant differences for the
178 frequency of correct identification of groups from what was expected from random
179 guesses ($p = 0.6564$).

180

181 **Preliminary tests and main trials**

182 In the first visit, height was measured to the nearest 0.01 m using a stadiometer,
183 and body mass was measured to the nearest 10 g in a digital scale (100 CH, Welmy, São
184 Paulo, Brasil). Participants then performed a graded cycling capacity test to exhaustion
185 to determine individual W_{max} . In the 2nd and 3rd visits, the participants were familiarized
186 with the CCT_{110%}, which was performed on the same cycle ergometer.

187 The participants were free to choose the most convenient period of day
188 (morning, afternoon or evening) for undertaking the tests; this was recorded and
189 replicated individually in all remaining visits. All participants were instructed to abstain
190 from alcohol intake and heavy exercise in the 24 hours prior to the main trials, and to
191 abstain from caffeine intake in the 16 hours prior to the main trials. Compliance with
192 these requests was verbally confirmed in all visits. They were also requested to arrive in
193 a well-fed and well-hydrated state, but avoiding large meals in the 2 hours prior to the
194 main trials. In all main trials, food intake was assessed at the participants' arrival,
195 followed by the muscle biopsy, and then by the CCT_{110%}. *Ad libitum* water intake was
196 allowed throughout all trials.

197

198 **Maximal incremental cycling test**

199 All participants performed a maximal incremental exercise test on an
200 electromagnetically braked cycle ergometer (Lode Excalibur®, Lode B.V. Germany) to
201 determine their individual maximum power output (W_{max}). The ergometer position and
202 saddle height were recorded for each individual during the preliminary tests and
203 replicated in all upcoming experimental sessions. Participants started the test by
204 pedaling at a load of 100 W, which was increased by 6 W every 15 s (24). The
205 participants pedaled at a constant, self-selected pedal cadence (60 – 100 rev·min⁻¹)
206 throughout the test until volitional exhaustion. Strong standardized verbal
207 encouragement was provided in all tests. Exhaustion was deemed to have occurred
208 when the cadence could not be maintained above 60 rev·min⁻¹. W_{max} was determined by
209 the last completed stage added to the proportion of the last stage not completed
210 multiplied by 6.

211

212 **High-intensity exercise tolerance test (CCT_{110%})**

213 The CCT_{110%} was performed on the same electromagnetically braked cycle
214 ergometer (Lode Excalibur®, Lode B.V. Germany). The test began with a 5-min warm
215 up at 100 W, followed by a 3-minute resting interval, where the participants remained
216 seated on the ergometer. The CCT_{110%} commenced at 80% of the previously determined
217 W_{max} for the first 15 seconds, followed by 95% of W_{max} for 15 seconds and 110% of
218 W_{max} for the rest of the test, until exhaustion. The participants pedaled at a constant,
219 self-selected pedal cadence (60 – 100 rev·min⁻¹) throughout the test, with exhaustion
220 occurring when they could not maintain cadence above 60 rev·min⁻¹. Strong verbal
221 encouragement was given in all trials. Time to exhaustion (TTE) and total mechanical
222 work done (TWD) were recorded and used as performance measurements. Test-retest

223 coefficient of variation between the two familiarization sessions was 3.8% for TTE and
224 4.7% for TWD which is in accordance with previous reports (24).

225

226 **Muscle Biopsies**

227 Muscle biopsies were obtained with a 6-mm biopsy needle (Northern Hospital
228 Supplies, Edinburgh, UK), using the Bergstrom method (25) with suction. The samples
229 were taken from the mid-portion of the *m. vastus lateralis* of the dominant leg, under
230 local skin anesthesia (3 ml lidocaine 1%), as previously described (25). Samples of ~60-
231 100 mg were immediately frozen in liquid nitrogen and stored in the vapor phase of
232 liquid nitrogen until analysis. Due to the repeated biopsies over time, the location was
233 slightly changed across visits (~1 cm inward and upward), as illustrated in the
234 Supplemental Digital Content 1.

235

236 **Quantification of M-Carn content**

237 M-Carn content was determined in a liquid chromatographer connected to a UV
238 diode array detector (Shimadzu®, Prominence UFLC 20AD, Tokyo, Japan) using the
239 method described by Mora et al. (2007) (26). Skeletal muscle samples were freeze-
240 dried, dissected free of visible blood and connective tissue and powdered.
241 Approximately 3 mg of the powdered dry muscle was deproteinized with perchloric
242 acid and subsequently neutralized with potassium bicarbonate as previously described
243 (27). Muscle extracts were filtered with syringe filters (Hexis® – PVDF, 13 mm, 02
244 µm) and injected into the chromatographer via an auto sampler using the cut injection
245 method (total aspirated volume of 5 µl). All samples and standards were analyzed in
246 duplicates. Standard curves for carnosine were performed prior to each batch of analysis
247 using known concentrations of 50, 100, 500, 1.000 and 2.500 µmol·l⁻¹ of carnosine

248 (coefficient of linearity $r^2 > 0.99$). Separation was performed at room temperature using
249 an Atlantis HILIC silica column (4.6 × 150 mm, 3 μm, Waters, Milford, MA, USA)
250 attached to an Atlantis Silica column guard (4.6 x 20 mm, 3 μm) under the following
251 conditions: linear gradient from 0 to 100% of mobile phase A (ammonium acetate 0.65
252 mmol·l⁻¹ in water:acetonitrile 25:75 v/v, pH 5.5) to mobile phase B (ammonium acetate
253 4.55 mmol·l⁻¹ in water:acetonitrile 70:30 v/v, pH 5.5) at a flow rate of 1.4 ml·min⁻¹.
254 Separation was monitored using a UV detector at 214 nm. The column was equilibrated
255 for 5 min under the initial conditions before each injection. Quantification was
256 performed using peak areas and the obtained concentration adjusted to each sample
257 weight. The intra-assay CV of carnosine measurement between the duplicate injections
258 was 3.6%. All samples were analyzed with the experimenters being blind to the group,
259 time point and the participant.

260

261 **Dietary Intake**

262 Dietary intake was assessed by a trained nutritionist using 3-day food diaries at
263 the following time points: PRE, POST, POST4, POST8, POST12 and POST16. All
264 participants were instructed by a nutritionist on how to complete a diary. All diaries
265 were verified with the participant upon their return, with any inconsistencies being
266 resolved individually whenever necessary. Data were calculated using nutrition software
267 containing nutrient information of Brazilian food (Avanutri® Online, Rio de Janeiro).
268 Total caloric intake as well as carbohydrate, protein and fat intake were calculated. The
269 dietary intake of β-alanine was estimated based on data available in the literature (3,
270 28).

271

272 **Statistical analysis**

273 Linear mixed models (proc mixed, SAS University Edition) were used to
274 analyze M-Carn and dietary intake data, with group (β -alanine vs. PL) and time (PRE,
275 POST1, POST4, POST8, POST12 and POST16) being fixed factors, and participants
276 being random factors. Four different covariance matrix structures were tested
277 (unstructured, autoregressive lag-1, toeplitz and compound symmetric) and the
278 Bayesian information Criterion (lowest BIC value) was used to choose the structure that
279 best fit to each data set. Where there were significant group or time main effects, or
280 group-by-time interaction, a hypothesis-driven single-degree of freedom contrast
281 analysis was used to locate within- and between-group differences. The association
282 between carnosine content and performance across time was assessed in β -alanine group
283 using the repeated measures correlation (rmcorr, R 3.5.1) with data at 3 different time
284 points (POST, POST8 and POST16) being used to represent low, medium and high M-
285 Carn before and after supplementation. Cohen's d effect sizes were calculated between
286 groups for our main outcome (*i.e.*, M-Carn) as the mean difference between β -alanine
287 and PL divided by the pooled standard deviation. Baseline participants' characteristics
288 were compared between groups using independent sample t tests with equal variances
289 not assumed (SPSS version 17). The proportion of participants correctly/incorrectly
290 guessing the substance they were taking was tested with the Fischer's exact test. Data
291 are presented as mean \pm standard deviation (with 95% confidence intervals – CI) and
292 the significance level was set *a priori* at $p < 0.05$.

293 Additionally, a linear and an exponential Bayesian fit of the M-Carn content
294 over the washout weeks were performed. First, the data were prepared by removing, for
295 each participant, the M-Carn level before supplementation (*i.e.*, PRE) from all other
296 measurements (*i.e.*, POST to POST16). All following Bayesian analyses were
297 performed with the brms package (29) in the R software (R Core Team, 2018). For the

298 exponential fit (defined as $f(x)=b_1e^{-b_2x}+b_3$), the b_1 prior distribution was based on our
299 group's previous measurements of M-Carn in omnivores. More specifically, the
300 parameters were calculated by subtracting the pre-supplementation M-Carn mean
301 (offset: 20.44 mmol·kg⁻¹ DM) from the post-supplementation M-Carn (34.66±12.85
302 mmol·kg⁻¹ DM), resulting in a normal distribution of 14.22±12.61. For b_2 , a generic
303 normal distribution was used (mean=0, sd=1) and, since the fit was performed after the
304 removal of the offset, b_3 distribution was not relevant. Several other values were tested
305 as priors, but they did not change the overall results. These fits were analyzed and
306 compared using the Leave One Out Information Criteria (LOOIC), where the smaller
307 values are associated with better fits.

308

309 **RESULTS**

310 **Muscle carnosine content**

311 M-Carn significantly increased 91.1±29.1% from PRE to POST supplementation
312 in the β-alanine group (group-by-time interaction: p<0.0001; within-group effect: β-
313 alanine: p<0.0001), but not in the PL group (+0.04±10.1%) (within-group effect:
314 p=0.999; between-group effect: p<0.0001). In the β-alanine group, M-Carn started to
315 decrease after the end of the supplementation period, being significantly lower at all
316 time points in comparison with the previous time point (all p<0.05), indicating a
317 continuous decrease in M-Carn throughout the 16-week washout period. In the PL
318 group, no significant differences were shown between any of the time points (all
319 p>0.05). M-Carn after 12 and 16 weeks of washout were not statistically different from
320 PRE. M-Carn loading and washout data are shown in figure 3, panels A and B. The β-

321 alanine-to-carnosine conversion ratio was $4.4 \pm 2.0\%$, which was calculated assuming
322 that 40% of body mass was muscle mass and that 70% of muscle mass was water.

323

324 **Modelling the kinetics of muscle carnosine washout**

325 The leave-one-out information criterion (LOOIC) was used to estimate the
326 prediction accuracy from two fitted Bayesian models of carnosine decay during 16
327 weeks, where one model was a linear decay and the other model was an exponential
328 decay. LOOIC (lower values indicate better fit) was 395.27 (standard error=9.19) for
329 the linear model and 398.22 (standard error=9.00) for the exponential model, with the
330 difference between models being -2.95 (standard error=4.5). This indicates that both
331 models provide a similar degree of fit with the data set and that the linear model predicts
332 carnosine decay slightly better than the exponential model (figure 3, panel C). The $t_{1/2}$
333 for M-Carn washout in the exponential decay model was calculated to be 4.6 weeks
334 (95% CI:3.2-7.0).

335

336 **Muscle carnosine content and exercise performance**

337 A visual inspection of the absolute changes in performance during the washout
338 period suggests a close association between performance changes with the changes in
339 M-Carn content during the same period (figure 4, panels A and C). Repeated measures
340 correlation analysis revealed a moderate, significant correlation between TWD and M-
341 Carn ($r=0.505$, $p=0.032$; figure 4, panel B) and between TTE and M-Carn ($r=0.72$,
342 $p<0.001$; figure 4, panel D). These data indicate that the increase in M-Carn with β -
343 alanine supplementation followed by the return to the baseline levels after the washout
344 period are mirrored by similar changes in performance.

345

346 **Dietary intake**

347 No significant group-by-time interactions were shown for the daily intakes of
348 carbohydrate (p=0.434), protein (p=0.254), lipids (p=0.861), total energy (p=0.915) or
349 β -alanine (p=0.499) (Supplemental Digital Content 2).

350

351 **DISCUSSION**

352 In this study, we investigated the washout kinetics of muscle carnosine for 16
353 weeks after the cessation of β -alanine supplementation using multiple assessments of
354 M-Carn in the washout period; we also used the High-performance liquid
355 chromatography (HPLC), a reference method for muscle carnosine quantification, and
356 parallel assessments of high-intensity exercise performance. In alignment with the
357 existing literature, we confirmed that carnosine washout in skeletal muscle is a slow
358 process, thereby confirming that skeletal muscle carnosine content is relatively stable
359 over time (16-18). In our study, complete washout of carnosine occurred within a mean
360 time of ~12 weeks, although significant individual variation existed. Previous studies
361 predicted both shorter (17) and longer (18) washout periods. We also showed that
362 carnosine washout can be described by a linear decay, although an exponential model
363 can also describe the washout kinetics just as well as the linear model. The calculated
364 $t_{1/2}$ for M-Carn was 4.6 (95%CI: 3.2-7.0) weeks in the exponential decay model in our
365 study, which is not too dissimilar to the 5.8 weeks reported by Baguet et al. (17), but
366 somewhat shorter than the 8.6 weeks reported by Harris et al. (19). We also provided
367 evidence for the association between M-Carn and high-intensity exercise performance
368 following both supplementation and washout.

369 The study of the kinetic properties can reveal important features of biological
370 systems. In the case of carnosine washout, the literature has been controversial as to

371 whether carnosine decay displays a linear or exponential function (17, 20). To address
372 this question, we fitted two Bayesian predictive models and used the LOOIC to select
373 which one better describes the carnosine washout kinetics during the 16 weeks after the
374 cessation of β -alanine supplementation. This approach aimed to make use of the
375 advantages of Bayesian statistics, such as the incorporation of prior information and the
376 capacity of making predictions based upon posterior probabilities, to shed a new light to
377 the carnosine washout dynamic. Our data showed that both models displayed
378 remarkably similar fits. Because the linear model is simpler and uses less terms, it
379 would be mathematically preferred over the exponential model. On the other hand,
380 linear decays are unusual in biological systems as they would predict, in the long-term,
381 that concentrations would fall below zero. In the case of M-Carn, the linear decay can
382 only be assumed to be accurate within a well-defined time period. Thus, we can only
383 affirm that the decay in M-Carn is linear within the 16-week washout period used in this
384 study and up until M-Carn returns to the pre-supplementation levels. In the longer term,
385 an exponential decay would probably better describe M-Carn washout kinetics as M-
386 Carn tends to return to pre-supplementation levels instead of keeping falling
387 indefinitely. Nevertheless, both models indicate that carnosine levels have little
388 influence on the rate of carnosine decay.

389 In our study, 8 weeks of β -alanine supplementation led to a ~90% increase in M-
390 Carn, which is in accordance with other studies using similar total doses of β -alanine
391 (30). The effects of β -alanine supplementation on M-Carn are highly consistent in the
392 literature (1). Carnosine synthesis in skeletal muscle is catalysed by the enzyme
393 carnosine synthase, a ligase that presents lower affinity for β -alanine than for histidine
394 (31, 32) Because the intramuscular concentrations of β -alanine are fairly low (~2
395 $\mu\text{mol}\cdot\text{L}^{-1}$ - (33) and far smaller than those of histidine (~400 $\mu\text{mol}\cdot\text{L}^{-1}$ - (34), the

396 carnosine synthesis rate is thought to be limited by β -alanine availability. Upon the
397 ingestion of typical supplemental doses, β -alanine rapidly reaches the bloodstream and
398 then enters the skeletal muscle, where its concentrations increase \sim 3-fold (33). The
399 higher substrate availability probably leads to a transient increase in the activity of
400 carnosine synthase, thereby increasing carnosine accretion; this increase, however,
401 seems to occur in a saturable fashion (35) and the exceeding β -alanine is likely to be
402 diverted towards oxidation (36). The relatively low catalytic efficiency of carnosine
403 synthase seems to explain the rather slow increases in M-Carn in response to β -alanine
404 supplementation and the mere \sim 5% β -alanine-to-carnosine conversion rates that have
405 been consistently reported in the literature (2, 36).

406 Although carnosine synthesis rates are not the sole factor that regulates
407 intramuscular carnosine, it appears that higher activity of carnosine synthase induced by
408 increased β -alanine availability predominates over other factors during supplementation
409 periods, thereby leading M-Carn to increase in virtually all individuals. When β -alanine
410 supplementation ceases, this mechanism driving carnosine accretion stops and then an
411 imbalance favouring carnosine degradation/removal from skeletal muscle starts to
412 predominate over carnosine synthesis, ultimately leading to a slow process of returning
413 carnosine to baseline levels. When baseline levels are reached, a balance between
414 carnosine synthesis/degradation and movement in to or out of the muscle cells seems to
415 occur. At least three different mechanisms may account for carnosine washout, namely:
416 intramuscular carnosine degradation by tissue dipeptidases, transport of the intact
417 dipeptide out of muscle cells, and carnosine quenching via reaction with reactive
418 species. However, it is still uncertain whether these mechanisms can occur *in vivo* in
419 human skeletal muscle, except for carnosine quenching by reactive species which have

420 been demonstrated to occur in humans (9, 37), although to an extent that is too low to
421 significantly contribute to carnosine washout.

422 Tissue carnosine dipeptidase 2 (CN2) is the only known enzyme capable of
423 degrading carnosine in skeletal muscle. However, CN2 is non-specific and has low
424 affinity for carnosine (38). Moreover, the literature is controversial as to whether CN2
425 has catalytic activity toward carnosine under physiological conditions. Teufel et al. (39)
426 demonstrated that CN2 can degrade carnosine into its constituent amino acids in
427 alkaline (pH 9.5) conditions but not at a physiologically relevant pH (7.5), leading the
428 authors to suggest that carnosine is not a substrate of CN2 *in vivo*. Different results were
429 reported by Margolis et al. (40), however, who showed that CN2 can hydrolyse
430 carnosine in murine tissues, such as kidney, skeletal muscle and brain at pH 7.5.
431 Interestingly, the catalytic activity in muscle, despite being low, slightly increased under
432 high carnosine concentrations (40). If we were to assume that skeletal muscle CN2
433 operates in a similar fashion in humans, then the slow carnosine decay might be
434 explained by an increase in CN2 activity driven by increased substrate (*i.e.*, higher
435 carnosine levels), which tends to return to its baseline activity by the time that M-Carn
436 reaches pre-supplementation levels. Alternatively, carnosine decay could also be
437 attributed to the activity of dipeptide transporters, mostly by PHT1, which has been
438 shown to be expressed in human skeletal muscle (41) and could result in carnosine
439 being exported from the muscle cells to the bloodstream. While it remains to be
440 experimentally determined whether carnosine can be transported out of muscle cells by
441 PHT1, circumstantial evidence suggests this may occur in conditions such as intensive
442 exercise (37), although other studies did not confirm this mechanism (9).

443 As for the washout mechanism, we therefore propose that, with the cessation of
444 β -alanine supplementation, the reduced β -alanine availability would reduce carnosine

445 synthase activity, thereby leading carnosine synthesis rates to quickly return to baseline
446 levels. Carnosine degradation rates, on the other hand, would be still be above basal.
447 Thus, increased carnosine in muscle would result in higher activity of CN2, therefore
448 explaining the overall imbalance between carnosine synthesis and degradation in favour
449 of degradation. Since the catalytic efficiency of CN2 is poor and the rate of carnosine
450 degradation is subsequently low, the increase in CN2 activity due to the increased
451 substrate availability would be just sufficient to unbalance carnosine homeostasis
452 towards degradation, but not sufficiently fast to result in an observable exponential
453 curve that is clearly distinguishable from a linear curve. The notion that only minor
454 differences between carnosine synthesis and degradation underpin the slow washout
455 pattern, leading to a remarkable similarity between linear and exponential decays, can
456 explain the inconsistencies between previous studies in describing the kinetics of
457 carnosine decay (17-19). The proposed mechanisms underlying carnosine loading and
458 washout are illustrated in figure 5.

459 Since the ergogenic effects of β -alanine supplementation are already well-
460 documented (12), our study design did not prioritize the assessment of the performance-
461 enhancing properties of β -alanine. However, it is particularly interesting to note that we
462 showed a significant association between M-Carn and high-intensity exercise tolerance,
463 suggesting that the performance-enhancing effects of M-Carn are dose-dependent. This
464 seems to strengthen the notion that pH regulation is a major ergogenic mechanism of
465 carnosine (5, 42, 43) and is also is aligned with previous literature indicating an
466 association between M-Carn and performance (12, 44), although further experimental
467 evidence is warranted.

468 A limitation of our study is that we were unable to rigidly control the level of
469 physical activity of our participants through the course of the study, although they

470 verbally confirmed to have maintained their regular exercise routines. Since emerging
471 evidence suggests that exercise might play a role in M-Carn homeostasis (37, 45), we
472 cannot rule out the possibility that physical activity had some influence on the rates of
473 carnosine decay. M-Carn homeostasis is also influenced by sex, age and fibre type
474 composition; thus, caution should be exercised when extrapolating our findings to other
475 populations, such as athletes, women, and older individuals. Likewise, our data is
476 limited to mixed muscle (i.e., vastus lateralis) and one should acknowledge that
477 different muscle groups may respond differently. Moreover, we used an 8-week, high-
478 dose, supplementation protocol, providing a total accumulated β -alanine dose of ~ 360 g,
479 which resulted in $\sim 90\%$ increase in M-Carn. Both the total accumulated dose and the
480 carnosine accrual in our study were substantially greater than the doses (~ 90 to 180 g)
481 and the increases in M-Carn (<40 to 60%) shown in previous studies (17-19). This
482 might account, at least in part, for some of the differences between our results and those
483 previously reported (17-19). Another limitation is that most participants refused to have
484 biopsies taken at weeks 1 and 2 during the washout period, which has limited the
485 resolution of our kinetic analysis in the early post-supplementation period.

486 To conclude, we showed that carnosine washout can be explained either by a
487 linear or by an exponential decay over a 16-week washout period. Although the linear
488 decay presents a slightly better fit, the exponential model is more consistent with the
489 physiological processes underlying carnosine homeostasis in skeletal muscle. The total
490 washout time is ~ 12 weeks and the $t_{1/2}$ is 4.6 weeks, although interindividual variability
491 exists. We also showed that changes in M-Carn correlate with changes in performance.
492 From a practical perspective, athletes on β -alanine supplementation should consider that
493 refraining from supplementation may negatively impact exercise performance, and that

494 interrupting supplementation for as long as 12 weeks may bring carnosine levels back to
495 pre-supplementation values, possibly abrogating its ergogenic effects.

496

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634 **Figure 1.** Flow diagram indicating participants' enrollment in the study.

635

636 **Figure 2.** Overview of the study design. The numbers indicate how many participants

637 showed up for muscle biopsies and for the CCT_{110%} at each time point in each group.

638 W_{max} = maximum power output attained in a graded exercise test to exhaustion on a

639 cyclo ergometer. CCT_{110%} = time-to-exhaustion exercise tolerance test on a cycle

640 ergometer at 110% of the W_{max} . BA = β -alanine group. PL = placebo group.

641

642 **Figure 3. Panel A:** individual muscle carnosine responses to 8 weeks of β -alanine or

643 placebo supplementation followed by 16 weeks of washout. **Panel B:** mean \pm standard

644 deviation responses to 8 weeks of β -alanine or placebo supplementation followed by 16

645 weeks of washout. **Panel C:** Linear and exponential fitted models for muscle carnosine

646 decay in the washout period. Gray areas represent the upper and lower limits of the

647 expected values of the posterior predictive distribution.

648 All results are expressed relative to dry muscle weight.

649 * significantly different from the previous time point (within-group effect)

650 # significantly different from PRE (within-group effect)

651 \$ significantly different from β -alanine group in the same time point (between-group

652 effect)

653 \$\$ $p=0.06$ vs. β -alanine in the same time point (between-group effect)

654 ES=between-group Cohen's effect sizes

655

656 **Figure 4.** Absolute changes in muscle carnosine content are mirrored by changes in

657 performance, as assessed by total work (TW, panel A) and time to exhaustion (TTE,

658 panel C). Muscle carnosine content was moderately and significantly correlated with

659 TW and TTE, as depicted in the repeated measures correlation analysis chart (panels C
660 and D).

661

662 **Figure 5.** Illustration of the hypothetical mechanisms underlying carnosine loading
663 during β -alanine supplementation (top illustration) and carnosine washout (bottom
664 illustration). Created with BioRender.com.

665

666 **Supplemental Digital Content 1:** Illustration of the location where the multiple
667 biopsies were taken. In some participants, 6 or 7 biopsies were taken, depending on
668 whether they showed up for biopsies 1 and 2 weeks in the washout period. Created with
669 BioRender.com.

670

671 **Supplemental Digital Content 2:** Daily energy, macronutrient and β -alanine intake in
672 the β -alanine and placebo groups across the study period. Data from the 3-day diaries
673 were averaged and considered as daily intake. Data are presented as mean \pm standard
674 deviation.

675

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691

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702

703 **Authorship:**

704 Study conception and design: GGA, GCY, BG and CS

705 Data collection: GCY, KN, LAR, MLS

706 Sample analyses: MLS, GCY, MHGM

707 Data analyses and modelling: JN, JEC, GBM, GGA

708 Manuscript writing: GGA, LSG, BG, CS, MHGM, GCY

709 Manuscript revision: MLS, JN, JEC, LSG, GBM, KN, LAR