

**Inspiratory muscle training in conjunction with creatine monohydrate supplementation enhances  
inspiratory muscle strength in healthy humans**

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**Background:** Training-induced improvements in locomotor muscle size and strength can be enhanced with concurrent creatine monohydrate (Cr) supplementation; however, whether inspiratory muscle training (IMT) elicits greater improvements in inspiratory muscle strength when combined with Cr remains to be determined. **Aim:** To test the hypothesis that IMT + Cr results in greater improvements in inspiratory muscle strength in comparison to IMT alone. **Method:** Twenty-nine healthy active males (age:  $21 \pm 1$  yrs; BMI:  $23 \pm 3$  kg/m<sup>2</sup>) with normal lung function ( $FEV_1 > 80\%$  pred) completed 4-weeks of IMT (POWERbreathe®) (30 breathes, twice daily, at an inspiratory load equivalent to 50% of maximum inspiratory pressure [P<sub>I</sub>max]), either alone (IMT: n= 15) or with Cr (IMT + Cr: n= 14). Cr was administered as 20g.d<sup>-1</sup> for 7-days (loading phase) and 3g.d<sup>-1</sup> for 21-days (maintenance phase). Inspiratory muscle measurements were obtained pre and post IMT. **Results:** Baseline P<sub>I</sub>max was comparable between groups (P=0.554). P<sub>I</sub>max increased 18% post IMT ( $123 \pm 28$  cmH<sub>2</sub>O to  $145 \pm 28$  cmH<sub>2</sub>O; P<0.001) and by 33% post IMT + Cr ( $117 \pm 28$  cmH<sub>2</sub>O to  $156 \pm 20$  cmH<sub>2</sub>O; P<0.001). The increase in P<sub>I</sub>max post IMT + Cr was greater in comparison to IMT (condition-time interaction effect: P=0.031). **Conclusion:** IMT + Cr led to greater (+17cmH<sub>2</sub>O) and potentially clinically meaningful improvements in P<sub>I</sub>max compared with IMT alone. Future research should focus on the therapeutic potential of Cr (+/- IMT) as a treatment modality

for pathological conditions characterised by respiratory muscle dysfunction and establish whether the underlying mechanisms are directly linked to improved muscle fibre function.