



25-Hydroxyvitamin D Serum Levels Linked to Single Nucleotide Polymorphisms (SNPs) (rs2228570, rs2282679, rs10741657) in Sports Performance in CrossFit® Elite Athletes⁺



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Abstract: Vitamin D substantially influences sports performance and post-exercise recovery because 23 it offers anti-inflammatory, antioxidant, and cellular protective properties. However, deficient lev-24 els of 25-hydroxyvitamin D 25(OH)D (25(OH)D) (<30 ng/mL) could expose the health of individuals 25 , lead to musculoskeletal disorders, and decrease athletic performance. Therefore, it would be ap-26 propriate to know the interactions between genes and vitamin D. We evaluated 25(OH)D a possible 27 connection between the presence of certain SNPs in CYP2R1 (rs10741657) GC (rs2282679), and mus-28 cle VDR (rs2228570) genes, with serum 25(OH)D concentrations and the degree of WOD perfor-29 mance in highly trained CrossFit® practitioners. Knowing these relationships could be instrumental 30 for personalized vitamin D supplementation and training strategies. Using a standardized commer-31 cial enzyme-linked immunosorbent assay procedure, the concentrations of 25(OH)D were deter-32 mined and the genotyping procedures for each SNPs were done by specific assays with the KAS-33 par® test. 25(OH)DA performance level in grades was established based on the CrossFit® Total 34 score (sum in kilograms of 1 Repetition Max Squat, Press, and Deadlift). Significant differences 35 (p<0.05) in 25(OH)D concentration were found between each of the SNPs of CYP2R1 and GC with 36 25(OH)D . We discovered statistically significant weak positive correlations (p<0.05) between 37 25(OH)D and AA-alleles of the CYP2R1 and VDR genes, and TT-alleles of the GC gen. Additionally, 38 AA (rs10741657 and rs2228570) and TT (rs2282679) have a probability between 2 and 4 of having 39 major concentrations of 25(OH)D. 25(OH)D25(OH)D Conversely, GG alleles present a probability 40 of suboptimum values of 25(OH)D of 69%, 34%, and 24% for VDR, GC, and CYP2R1 respectively. , 41 showing a strong moderate positive correlation (r=0.41) between the degrees of sports performance 42 and 25(OH)D25(OH)D plasma levels. The different polymorphisms of our 3-candidate gen 43 CYP2R1 (rs10741657), GC (rs2282679), and VDR (rs2228570) disturb 25(OH)D concentration and 44 play a critical role sports performance in elite CrossFit® practitioners . These results could highlight 45 that the evaluation of genetic factors is key to designing a vitamin D supplementation strategy to 46 improve sports performance. 47

Keywords: sports performance; 25-OH vitamin D; SNPs; genetics; elite athletes

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1. Introduction

CrossFit® is a gimmicky exercise very high-intensity interval exercise (HIIT) (1), per-51 formed through the so-called "Workouts of the Day" (WODs) (1), that allow training with 52 standardized routines (2). The extreme physical and energetic demands of CrossFit® 53 training necessitate high nutritional requirements. CrossFit® athletes seem to take their 54 bodies to the physical limit and achieve maximum sports performance requires supple-55 mentation with nutrients, vitamins, and minerals (3–5). Consequently, nutritional prac-56 tices must be implemented allowing to cover the specific requirements of CrossFit® prac-57 titioners. (3). 58

In this way, vitamin D is of particular importance to athletes (6) because of its multi-59 modal role in the nervous, immune, muscular, and skeletal systems (7). Especially optimal 60 levels, vitamin D seems to acquire a more relevant role, in CrossFit® athletes, by protect-61 ing bone, immune, and muscle health (6). Athletes who are deficient in vitamin D and 62 perform high-intensity and duration training are at high risk of musculoskeletal injuries, 63 immunosuppression, or arthritis (8,9). In addition, optimal levels of serum 25-hy-64 droxyvitamin D (25(OH)D) correlate positively with sports performance, including 65 strength and power, running, endurance and aerobic abilities(10). These physical capaci-66 ties and physiological demands correspond to CrossFit® (11). 67

Genetic determinants that may influence circulating 25-(OH)D should be considered 68 (12). Recently Fernández-Lázaro et al. has described that single nucleotide polymor-69 phisms (SNP) influence nutrients, including the behavior of vitamin D (12), and could 70 specifically condition each athlete's healthy state and sports performance. (13). There-71 fore, certain SNPs could modulate (increase or decrease) the concentration of bioactive 72 nutrients in plasma(14). Regarding vitamin D, SNPs in CYP2R1 gene have an impact on 73 vitamin D metabolism. CYP2R1 codes for the hepatic 25-hydroxylase of the cytochrome 74P450 family (15), responsible for the first hydroxylation to the active form of vitamin D. 75 In addition, SNPs in the GC gene coding for vitamin D-binding protein (VDBP) have an 76 influence in vitamin D transport. VDBP is a protein belonging to the albumin family, is 77 the main carrier of vitamin D in blood (16,17). Finally, SNPs in the vitamin D-receptor 78 (VDR) gene influence vitamin D biological activity in many tissues, being muscle of par-79 ticular interest in sport performance 25(OH)D(16–20). 80

In view of the foregoing information, we conducted a pilot study to assess a possible 81 connection between the presence of certain SNPs in CYP2R1 (rs10741657), GC (rs2282679), 82 and muscle VDR (rs2228570) genes, with serum 25(OH)D concentrations and the degree 83 of WOD performance in highly trained CrossFit® practitioners. Knowing these relationships could be instrumental for personalized vitamin D supplementation and training 85 strategies. 25(OH)D25(OH)D2. Material and Methods 86

2.1. Study design

A multicenter epidemiological, observational, longitudinal, pilot study was con-88 ducted in 2 CrossFit® Box and we report it here according to the Strengthening the Re-89 porting of Observational Studies in Epidemiology (STROBE) statement (21). Study's 90 participants involved were highly trained CrossFit® athletes (n = 126) training CrossFit® 91 Box in Spain (Figure 1). The study was approved by the Clinical Research Ethics Commit-92 tee (CREC) of Valladolid Clinical Hospital (PI-19-1350) (Spain). Following the Declaration 93 of Helsinki and the 2013 Fortaleza Revision (22), the informed consent document was 94 drafted that all CrossFit® practitioners read, accepted, and signed. 95

2.2. Inclusion Criteria

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Healthy adults of legal age made up the study sample of highly trained CrossFit® 97 athletes in 2 CrossFit® Box in Salamanca (Spain) and Soria (Spain). Our athletes met the 98 following criteria: i) \geq 20 months of experience training CrossFit®; ii) \geq 2 participations in 99 CrossFit® competitions in the last season; iii) completed "Fran" WODs < 250 seconds; iv) 100 pass a pre-study medical exam to rule out pre-existing illnesses or injuries; v) Do not use 101 products or drugs from "The List of Prohibited Substances and Methods of 2023" estab-102 lished by the World Anti-Doping Agency (WADA), including vitamin D supplementa-103 tion;; vi) Know and sign the informed consent where the potential benefit/risk of our pilot 104 study was exhaustively explained.2.3. Data collection 105

Table 1. shows the sociodemographic data, anthropometric measurements, sports performance parameters, and dietary evaluation of CrossFit® practitioners.106107participants.107

Characteristics	CrossFit ®	Athletes	
Sample size (n)	50		
Age (years)	35.7 ± 1	11.3	
$C_{\text{exp}} \approx (9/)$	Male	50 (100)	
Gener n (%)	Female	0 (0)	
Nationality n (0/)	Spanish	38 (76)	
Nationality n (%)	Other	12 (24)	
Body mass (kg)	77.6 ± 10.9		
Fat Mass (kg)	9.7 ± 2.9		
Fat Mass (%)	12.5 ± 2.3		
Free Fat Mass (kg)	67.9 ± 4.1		
Free Fat Mass (%)	65.2 ± 2.6		
Height (cm)	171.5 ±	5.6	
VO2 max (ml/kg/min)	43.5 ±	4.4	
Crossfit® experience (months)	35.3 ±	11.7	
Fran ¹ WODs (seconds)	231±	15	

Data are expressed as mean ± standard deviation (SD). Abbreviations = SD: standard deviation;109WODs: Workouts of the day; VO2max: maximum amount of oxygen; n: sample size; %: percentage;110kg: kilograms; cm: centimeters; ml: milliliters; min: minutes. 1 Three rounds of thrusters and pull-111ups for 21, 15, and 9 repetitions.112

2.4. Sociodemographic and anthropometric

Gender, age, nationality (Spanish or other), body mass, fat mass, free fat mass, and 114 height were included as sociodemographic and anthropometric characteristics. Bioelectrical impedance (BC-730; Tanita, Japan) was used to assess body mass, fat mass, and free 116 fat mass (23). The height was measured with a tape measure from the base of the floor to 117 the measurement marked on the wall. Read and record height to the nearest millimeter. 118

2.5. Physical Performance

Fran and CrossFit® Total WODs, and maximum amount of oxygen (VO2max) were assessed as physical performance variables. Fran and CrossFit® Total tests were evaluated following the CrossFit® training guide by Glasman (1,2). VO2max was determined by a modified Bruce treadmill protocol (24).

2.6. Dietary Assessment

The nutritional evaluation was carried out following our planned studies in elite athletes (25,26). 125

2.6.1. Quantification of plasma 25(OH)D concentration level

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Quantification of plasma 25(OH)D concentration level of DNA was carried out fol-128 lowing the methodology of our previous studies (12). According to Larson-Mayer et al. 129 (8), which establishes 5 levels and reference ranges of based on 25(OH)D level for ath-130 letes: i) < 20 ng/mL deficiency; ii) < 30-32 ng/mL insufficient; iii) > 30-32 ng/mL sufficient; 131 iv) 40-100 ng/mL optimum; v) > 150 ng/mL + hypercalcemia toxic. 132

2.6.2. Single Nucleotide Polymorphism (SNPs) determination by DNA Isolation and Genotyping

We evaluated 3 SNPs of the genes rs10741657 to CYP2R1, rs2282679 to GC and 135 rs2228570 to VDR. The 3 candidate genes, CYP2R1, GC and VDR with all their biallelic 136 varieties have an influence on the bioactive concentration of 25(OH)D (16,18). Isolation 137 and genotyping of DNA was carried out following the methodology of our previous stud-138 ies (12). 139

2.6.3. CrossFti® Total Level

CrossFit® Total degree was evaluated following the CrossFit® training guide level 1 141 by Glassman (1,2), which establishes level: i) < 270 kg beginner; ii) 271-360 kg intermedi-142 ate; iii) 361-450 kg advance; iv) ≥ 451 kg elite. Mandatory requirement to be able to com-143 pete locally and amateur in CrossFit[®] \ge 360 kg is the cut-off point in CrossFit[®] Total (27). 144

2.6.4. CrossFit Training

The training routine consisted of non-consecutive days of the week (Monday, 146 Wednesday, Friday, and Saturday). The 80-minute CrossFit® training consisted of 4 parts: 147 specific warm-up of the working muscle groups, a technique part based on strength and 148 skills, the main part of WODs, and cool down through muscle stretching. All training is 149 planned and led by a certified CrossFit® trainer with a Grade I or II certificate. 150

2.6.5. Statistical analysis

Statistical analyses were performed using StataCorp. 2023. Stata Statistical Software: 152 Release 18. College Station, TX: StataCorp LLC. We calculated means and standard devi-153 ations (continuous variables) and frequencies and percentages (categorical variables) in 154 the descriptive statistical analyzes. . A general univariate linear test of fixed factors was 155 performed comparing each SNP of the 3 genes and 25(OH)D. Subsequently, a Bonferroni 156 post-hoc test correction was applied to determine the differences between the polymor-157 phisms. Spearman's rank correlation coefficient was used to obtain correlations between 158 polymorphisms and 25(OH)D. 159

Analyzes were performed to determine odds ratios (OR) and 95% confidence inter-160 vals (CI) to quantify the association between the different variables and each SNP evalu-161 ated and 25(OH)D. We considered a two-sided p-value less than 0.05 to be considered 162 statistically significant. Regression models were used and the Pearson correlation coeffi-163 cient (r) was calculated according to the coefficient of determination (R2), for the different 164 sports levels of CrossFit and 25(OH)D. . P values less than 0.05 were considered statisti-165 cally significant. .

3. Results

3.1. CrossFit® athlete's characteristics and dietary assessment

The sociodemographic and anthropometric characteristics, physical performance 169 and nutritional characteristics are shown in Table 1. Table 2 recorded the energy and mi-170 cronutrient consumption in CrossFit® athletes. 171

 Table 2. Macronutrients, energy and micronutrient consumption in CrossFit®
 athletes. 172

CrossFit [®] Athletes	n = 50

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Energy (kcal/kg)	40.3±4.8
Proteins (g)	141.3±37.9
Fats (g)	134.3±43.2
Carbohydrates (g)	341.2±97.6
Ca (mg)	1026.3±224.1
Mg (mg)	544.3±97.2
P (mg)	2120.6±67.1
Fe (mg)	23.1±3.6
Zn (mg)	13.4±1.1
Vitamin A (µg)	1862.3±1177.1
Vitamin E (mg)	16.0±1.8
Vitamin B ₁ (mg)	2.9±0.4
Vitamin B ₂ (mg)	2.6±0.3
Vitamin B (mg)	40.9±6.1
Vitamin B6 (mg)	4.3±0.5
Vitamin B ₉ (mg)	637.2±172.1
Vitamin B ₁₂ (μg)	9.6±2.7
Vitamin C (µg)	351.1±140.2

Data are expressed as mean ± standard deviation. Abbreviations = kg; kilograms; g; grams; mg; mil-173 ligrams; µg: micrograms; Kcal: kilocalories. 174

3.2.25(. OH)D plasma level

25(OH)D plasma level of highly trained male CrossFit® was 34.7 ± 5.2 ng/mL and 176 68.0 % had 25(OH)D level sufficiency described in Table 3. 177

Table 3. Distribution of CrossFit® athletes according to 25-hydroxy vitamin D ranges for sports 178population. 179

Age (years)	Sample	(n) 25-OH/D (ng/mL) mean (SD)	¹ Deficiency n (%) < 20 ng/mL	¹ Insufficiency n (%) < 30-32 ng/mL	¹ Sufficiency (%) > 30-32 ng/mL	¹ Optimum (%) 40 -100 ng/mL	¹ Toxic (%) > 150 ng/mL + hypercalcemia
< 35	19	36.2 (4.3)	-	2 (10.5)	14 (73.7)	3 (15.8)	-
> 35	31	33.1 (6.8)	-	6 (19.3)	20 (64.5)	5 (16.2)	-
35.7 (11.3)	50	34.7 (5.2)	-	8 (16.0)	34 (68.0)	8 (16.0)	-

Values are expressed as mean (standard deviation) for quantitative variables and as frequency (per-180 centage) for categorical variables. Abbreviations = SD: standard deviation; ng: nanograms; mL: 181 milliliters; %: percentage. ¹Characterization of 25-hydroxy vitamin D levels and ranges in athletes' 182 populations by Larson-Mayer et al. (25). 183

3.3. CrossFit® Total degrees

The description of the SNPs, 25-OH/ and CrossFit® Total degrees show in Table 4. 185 Seventeen athletes were classified as competitors according to Competition RuleBook 186 CrossFit® Games 2023 (27). 187

Table 4. CYP2R1, GC and VDR genes polymorphism, 25-hydroxy vitamin D plasm level and sports 188performance levels in the CrossFit® Total. 189

			Degrees of CrossFit® Total (Level n) ¹				
Gen SNI	's Allele	n (%)	Beginner (Level 0) < 270 kg	Intermediate (Level 1) 271- 360 kg	Advanced (Level 2) 361-450	Elite (Level 3) ≥ 451	Competitors ² (+360 kg / +1000 lb)

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	AA	17 (34.0)	0	6	8	3	11	
		GA	25 (50.0)	2	18	4	1	5
CYP2R1	rs10741657	GG	8 (16.0)	4	3	1	0	1
		AA/GA	/ 50	6	27	10	4	17
		GG	(100.0)	0	27	15	4	17
		TT	19 (38.0)	1	8	7	3	10
		GT	22 (44.0)	3	15	4	0	4
	CC	9	C	4	C	1	2	
GC	152202079	GG	(18.0)	Z	4	Z	1	3
		TT/GT/0	G 50	6	27	12	4	17
		G	(100.0)	0	27	15	4	
		AA	21 (42.0)	0	11	6	4	10
VDR rs2228570		GA	18 (36.0)	2	10	6	0	6
	rs2228570	GG	11 (22.0)	4	6	1	0	1
		AA/GA	/ 50	6	27	12	4	17
		GG	(100.0)) 0	21	15	Ŧ	17

Values are expressed as frequency (percentage) for categorical variables. *Abbreviations* = SNPs: Single nucleotide polymorphisms; 25(OH)D: 25-hydroxy vitamin D; %: percentage; kg: kilograms; lb: pounds. ¹Glassman G. CrossFit training guide level 1; ²Competition RuleBook CrossFit® Games 2023. 193

3.4. Comparisons between 25-hydroxy vitamin D and single nucleotide polymorphisms of the CYP2R1, GC and VDR genes.

Table 5 shows the existence of significant differences (p < 0.05) in the plasma concen-196tration of 25(OH)D between the 3 biallelic combinations of the SNPs r2228570 (VDR) and197rs2282679 (GC). Furthermore, statistically significant differences (p < 0.05) were observed198in the concentration of 25(OH)D between athletes carrying the GG genotype with respect199to the homozygous bialleles TT [rs2282679 (GC)] and AA [r2228570 (VDR)]. Also, the het-200erozygous biallele GA compared to AA for the SNP r2228570 (VDR) showed significant201differences (p < 0.05) in 25OH/D plasm level.202

Table 5. Comparisons between 25-hydroxy vitamin D and single nucleotide polymorphisms of the
CYP2R1, GC and VDR genes.203
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Gen	SNPs	Alleles	25(OH)D (ng/mL), mean (SD)	p-value
		AA	38.2 (11.2)	_
CYP2R1	rs10741657	GA	26.9 (7.5)	0.076
		GG	21.5 (4.7)	
		TT	42.6 (3.2)	_
GC	rs2282679	GT*	25.4 (5.7)	< 0.05
		GG*	21.6 (5.1)	
		AA	35.9 (8.3)	_
VDR	rs2228570	GA	24.4 (5.6)	< 0.05
		GG\$	18.9 (4.9)	_

Notes: Values are expressed as mean (SD) for quantitative variables. Statistically significant values205at p-value level <0.05. Abbreviations = SNPs: Single nucleotide polymorphisms; 25(OH)D: 25-hy-
droxy vitamin D; ng: nanograms; mL: milliters. The multiple comparisons test is based on the Bon-
ferroni test. *: Significant differences with respect to TT. \$: Significant differences with respect to AA.205

3.5. Correlationsbetween 25-hydroxy vitamin D and single nucleotide polymorphisms of the209CYP2R1, GC and VDR genes.210

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For homozygous AA (rs1074165; rs2228570) and TT (rs2282679) bialleles showed re-211 markably weak positive correlations (p < 0.05). Moreover, mild negative correlations (p < 0.05). 212 0.05) were obtained for all homozygous GG of rs1074165 (r = -0.34; p = 0.016), rs2282679 (r 213 = -0.33; p = 0.012) and rs2228570 (r = -0.43 (p < 0.001) (Table 6). 214

Table 6. Correlations between 25-hydroxy vitamin D and single nucleotide polymorphisms of the 215 CYP2R1, GC and VDR genes. . 216

	Full Cohort			
Gen (SNPs)	(r	n=50)		
	r	<i>p</i> -valor		
CYP2R1 (rs10741657)				
AA	0.17	0.034		
GA	0.089	0.424		
GG	-0.34	0.016		
GC (rs2282679)				
TT	0.29	0.041		
GT	0.07	0.526		
GG	-0.33	0.012		
VDR (rs2228570)				
AA	0.15	0.030		
GA	0.06	0.172		
GG	-0.43	<0.001		

Notes: Bold type equals statistically significant values at p-value level <0.05. Correlations (r) are 217 based on Spearman's rank correlation coefficient. Abbreviations = SNPs: Single nucleotide polymor-218 phisms.

3.6. Single nucleotide polymorphisms of the CYP2R1, GC and VDR genes associated with 25hydroxy vitamin D plasma level.

Table 7 shows the set of results of the multivariate logistic regression analysis to gen-222 erate a diagnostic/predictor model of the plasma concentration of 25(OH)D that consisted 223 of 3 variables that were the 3 SNPs of our study: CYP2R1, GC and VDR. Athletes who 224 include an AA homozygous bialleic genotype (rs10741657 [OR 2.01, 95% CI 0.77-5.48]); 225 (rs2228570[OR 2.88, 95% CI 1.43-5.92]) and TT (rs2282679[OR 3.67 95% CI 2.11-6.41]) could 226 be more prone to have higher levels of 25(OH)D than other genotypes of these SNPs. On 227 the contrary, our results have shown that athletes carrying the homozygous biallele GG 228 (CYP2R1, GC and VDR) were associated with a lower concentration of 25(OH)D. Being more relevant in VDR rs2228570 (OR 0.31, 95% CI 0.12-1.27). 230

Table 7. Participant study characteristics and single nucleotide polymorphisms of the CYP2R1, GC 231 and VDR genes associated with 25-hydroxy vitamin D concentration. Odds Ratio (OR) and 95% 232 confidence intervals (95% CI). 233

	Full Cohort (n=50)			
Variable	$OP(IC 0E^{0})$ Cruck	OR (IC 95%)		
	OK (IC 95%) Crude	Multivariate ¹		
Body mass index (BMI), (kg/m ²)	1.00 (ref)			
VO ₂ max (ml/kg/min)	1.62 (0.81-3.27)	1.77 (0.54-3.65)		
Age (years)	0.91 (0.71-1.18)	0.92 (0.62-1.46)		
Free Fat Mass (kg)	0.97 (0.84-1.191)	1.14 (0.86-1.52)		
CYP2R1 (rs10741657)	1.00 (ref.)			
AA	1.44 (0.74-2.87)	2.01 (0.77-5.48)		
GA	0.93 (0.782-1.05)	1.02 (0.83-1.27)		

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GG	0.83 (0.74-0.93)	0.76 (0.65-0.89)	
GC (rs2282679)	1.00 (ref.)		
TT	3.69 (2.28-5.99)	3.67 (2.11-6.41)	
GT	0.83 (0.68-1.02)	0.76 (0.49-1.21)	
GG	0.67 (0.53-0.85)	0.66 (0.51-0.89)	
VDR (rs2228570)	1.00 (ref.)		
AA	2.93 (1.58-5.47)	2.88 (1.43-5.92)	
GA	1.01 (0.42-2.64)	1.24 (0.29-6.11)	
GG	0.53 (0.23-1.42)	0.31 (0.12-1.27)	
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Notes: Bold letter equals statistically significant values at p-value level <0.05. ¹Multivariate model:234adjusted for all variables in the table. Abbreviations: CI: confidence interval; BMI: body mass index;235OR: Odds Ratio; ref: reference.236

3.7. Correlation of sports level degree in CrossFit® Total and 25-hydroxy vitamin D (25(OH)D) plasma level

Figure 2 shows the correlation of sports level degree in CrossFit® Total and 25(OH)D239plasma level. Figure 2 shows an R2 = 0.23 indicating that at least 23% of the changes in the240CrossFit® Total score are reliable for the 25(OH)D level. In addition, a positive correlation241(r = 0.41) is shown between the sports level degree in CrossFit® Total and 25(OH)D concentration.242



Figure 1. STORBE Flow Diagram for recruitment.



Figure 2. Correlation of sports level degree in CrossFit® Total and 25-hydroxy vitamin D (25(OH)D) plasm levels.

4. Discussion

Vitamin D substantially influences sports performance and post-exercise recovery 250 because it offers anti-inflammatory, antioxidant, and cellular protective properties (28), 251 on muscle cells (9). The pathways described that reveal the effects of vitamin D in restor-252 ing and sustaining the optimal healthy condition of skeletal muscle are genomic and/or 253 non-genomic (29), in the same way as other nuclear steroids (30), through the vitamin D 254 receptor (VDR) based in myocytes (31). Henceforth, adequate expression of VDR is es-255 sential, because vitamin D alone could not control or modulate the mass and/or function-256 ality of skeletal muscle. (32). The loss or decrease in VDR expression is related to muscle 257pathologies and aging (33). However, increases in VDR expression are related to regener-258 ation after muscle damage (34). Thus, the increased expression of VDR and the higher 259 vitamin D plasma levels would favor this interaction (Vitamin D-VRD) (31). In humans, 260 rs2228570 is the only VDR polymorphism that has distinct structural consequences for the 261 VDR protein (35). Also, $25(OH)D \ge 30$ ng/ml induces muscular positive regulation of VDR 262 (31,32) and exogenous vitamin D induces upregulation of VDR in the systemic extracellu-263 lar matrix in primary muscle cells (34,36). 264

We have identified that VDR genotype variants (rs2228570) have significant differ-265 ences (p < 0.05) in blood levels of 25(OH)D. Our results showed a negative correlation (r= 266 -0.43; p < 0.001) were obtained between the total concentration of 25(OH)D and the homo-267 zygous GG biallele. Furthermore, CrossFit® athletes carrying AA (rs2228570) were 3 times 268 more likely (OR 2.88, 95% CI 1.43-5.92) to have higher levels of vitamin D. VDR with the 269 homozygous FokI AA genotype results in increased VDR protein activity compared to 270 GA or GG genotypes (37). Thus, VDR gen's polymorphisms may condition VDR expres-271 sion and protein stability (38). In this sense, the A allele of VDR rs2228570 was associated 272 with VDR mRNA copy number (18,39). Also, VDR expression is elevated acutely (1 to 3 273 hours) after resistance exercise (31). Although low levels of VDR expression in skeletal 274 muscle don't rule out direct actions on its physiological effects (31). Our findings suggest 275 that the A allele is an element that safeguards achieving optimal levels of 25(OH)D (12) 276 and full VDR protein acquisition with optimal physiological functioning (35), which ena-277 bles improved sports performance. In this sense, we identified 12 advanced athletes and 278 4 elite athletes' carriers with the A allele of VDR (rs2228570), which means that 16 athletes 279 were defined as level competitors in CrossFit® games, based on their sports performance. 280

The steps prior to the binding of 1-25OH/D and VDR require the hydroxylation of 281 vitamin D by CYP2R1 (15) and 1-25 OH/D transport to the target VDR, by DBP (16,17). 282

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Both SNPs, GC, and CYP2R1, substantially affect vitamin D status (13). GG genotype of 283 CYP2R1 (rs10741657) was significantly more likely to have inadequate 25(OH)D levels 284 (16) and GG and GT bialleles (GC rs2282679) was associated with lower 25(OH)D concen-285 trations (17). Consistent with these studies (16,17), in our CrossFit® athletes the A allele 286 of CYP2R1 rs10741657 and the T allele of GC rs2282679 were associated with 2-3 times 287 more likely to present higher levels of 1-25OH/D, as in older adult patients (12). In fact, 288 we found that 16 and 14 "competitive" sports-grade athletes carried the A allele 289 (rs10741657) and the T allele (rs2282679) respectively. 290

On the other hand, non-genomic VDR pathways should be considered due to the 291 direct action of vitamin D that optimizes the contractile process of skeletal muscle through 292 greater mobilization of calcium towards the sarcoplasmic reticulum (40,41). Plasma lev-293 els in physiological ranges (> 30 ng/mL of 25(OH)D), as in the athletes in our study, will 294 potentially improve skeletal muscle functionality (42) indirectly, which is key to athletic 295 performance in CrossFit[®]. 296

Optimal 25(OH)D plasma levels of acts by promoting the improvement of neuromus-297 cular function in older people (8,41). In this way, increases in skeletal muscle strength and 298 physical capacity linked to levels in the adequate physiological range of 25(OHD). 299 (12,43). These results are consistent with those reported in our CrossFit® athletes in the 300 strength performance test The influence of the blood concentration of 25(OH)D in the skel-301 etal muscle of our athletes will be responsible for 23 % of the effects on the sports level 302 establishing a moderate positive correlation (r = 0.41) between the CrossFit® Total grade 303 and 25(OH)D plasma levels. In our study, allelic variations in the SNPs GG (rs10741657), 304 GC (rs2282679) and VDR (rs2228570) affect the plasma concentration of vitamin D in 305 CrossFit® athletes, which may condition their level of sports performance. Especially the 306 effects induced by the 1,25OH/D - VDR complex, through genomic and non-genomic 307 pathways, leading to progresses in muscle health, muscle functionality, strength, muscle 308 recovery, and potentially physical work. (41,44). In fact, rs2228570 (FokI) is the only pol-309 ymorphism that perturbs the length and functionality of the VDR protein. Furthermore, 310 deficient (>10 ng/mL) or toxic (>150 mg) levels of 25(OH)D inactivate the biologically ac-311 tive form of VDR (45). Our athletes maintained an adequate plasma concentration of 312 25(OH)D (34.7 ± 5.2 ng/mL), which would not structurally affect the VDR, maintaining its 313 activity mediated by genomic and non-genomic pathways on skeletal muscle. 314

Regarding the possible practical applications of our findings, through SNPs, could 315 allow athletes, coaches and/or sports nutritionists to recognize persons at potential risk of 316 hypovitaminosis D and adjust possible nutritional actions by improving intake or supplementing. With the purpose of improving health, functionality and muscle performance in 318 athletes, these tips are important for precision personalized nutrition and/or supplementation. 320

5. Conclusion

In this research proved those allelic variations in the CYP2R1 (rs10741657), GC 322 (rs2282679), and VDR (rs2228570) SNPs disturb the (OH)D behavior in CrossFit® athletes. Thus, genetic polymorphisms of the genes (CYP2R1, GC and VDR) could be the key 324 elements in the modulation of plasma 25(OH)D concentration. will depend and its availability to modulate the expression of genes involved skeletal muscle performance and/or 326 health, such as VDR. Finally, we stated that the concentration of 25(OH)D has a moderate 327 positive correlation (r = 0.41) with sports level degree in CrossFit® Total. 328

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