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Review

# Artificial Intelligence for Assessing Maximum Oxygen Consumption: Scoping Review

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## Abstract

Maximum oxygen consumption (VO<sub>2</sub>max) is the ability to absorb, transport, and use oxygen in the body to produce useful energy for muscle activation in a unit of time. For years, devices have been developed to estimate physical performance, including VO<sub>2</sub>max. In view of the above, it can be considered that the use of artificial intelligence can facilitate interpretation and even generate estimates based on available data. In this regard, this study aims to review the use of artificial intelligence in the assessment of maximum oxygen consumption. A scoping review was conducted in accordance with the following stages: (i) identification of the research question: What would be the use of AI to predict VO<sub>2</sub>? (ii) identification of relevant studies: searching academic databases and AI search engines; (iii) selection of studies: the PRISMA ScR protocol was applied, selecting 50 studies; (iv) graphing the data in the results (v): finding studies published since 2009 with a higher publication rate in countries in the Americas and Asia; it is concluded that the use of deep learning fed with validated algorithms allows for a more accurate estimation of VO<sub>2</sub>max and that its evaluation requires the use of explainable AI training, starting with the linear regressions available in the literature and continuing with decision trees, to predict performance and offer a classification of it.

**Keywords:** artificial intelligence; VO<sub>2</sub> max; aerobic test; sports

## 1. Introduction

Maximum oxygen consumption (VO<sub>2</sub>max) is defined as the ability to absorb, transport, and use oxygen in the body to produce useful energy for muscle activation in a unit of time. In this way, oxygen is used in cellular respiration to produce adenosine triphosphate (ATP) by accepting electrons and combining with the hydrogen produced in glycolysis, beta oxidation of fatty acids, and Krebs cycle reactions. In short, VO<sub>2</sub>max indicates a person's ability to synthesize ATP aerobically, because although intensities higher than VO<sub>2</sub>max can be achieved, when the demand for ATP exceeds the production generated aerobically, it will be supplied by other metabolic pathways, such as glycolysis in a non-oxidative state and phosphagen reserves (to a lesser degree and very limited).

Tests to measure VO<sub>2</sub>max require exercises that activate large muscle groups, considering sufficient intensity and duration to reach the maximum level of aerobic energy production for a given time. To obtain accurate and reliable value, it is necessary to carry out a standardized test. There are multiple exercises where different tests can be performed, such as walking (running, marching, or walking). (Andersen et al., 2008; K. Cooper, 1968; Leger & Lambert, 1982), riding a bicycle (Anagnostopoulos et al., 2026; Jalanko et al., 2026), swimming (de Matos et al., 2022), rowing (Godfrey et al., 2019), skiing (Broussouloux et al., 1996) or skating (Lozada-Medina et al., 2013); These exercises can be performed using calibrated ergometers such as treadmills, cycle ergometers, rowing ergometers, step ergometers, or hand crank ergometers, as well as through field tests where the exercise is performed in an appropriate setting, such as athletic tracks, courts, swimming pools, ski slopes, or skating rinks. However, to determine the VO<sub>2</sub>max value, either in relative units of ml-

1.kg.min<sup>-1</sup> or absolute units of L.min<sup>-1</sup>, It can be measured using metabolic analyzers with Breath-by-Breath systems, with normal mixture or mixed chambers. (Cosmed, 2023; García-Tabar et al., 2018; Ward, 2018), with fixed devices in the laboratory (ADInstrumentos, 2022; ADInstruments, 2011; Cosmed, 2021, 2025; Srivastava et al., 2024) or portable (Cosmed, 2022; Kim et al., 2025; Winkert et al., 2020), while for its estimation it is necessary to apply, in addition to the standardized test protocol either in the field or in the laboratory, a prediction equation developed according to population characteristics, age, sex, training status, and in some cases even body composition, each formula requires data such as weight, height, level achieved during the test, either in stages or in final speed reached. Some of the most used field tests involve running 20-meter sprints (Andersen et al., 2008; Leger et al., 1988; Leger & Lambert, 1982), running on an athletic track (K. H. Cooper, 1968; Giovanelli et al., 2019) or in open fields (Ortiz-Pulido, 2018), in the lab, they can be performed on different ergometers such as treadmills. (Koutlianos et al., 2013), cycle ergometer (Silva, A et al., 2005), hand ergometer (Brown et al., 2015) and step boxes (Neshitov et al., 2023; Padilla-Alvarado & Lozada-Medina, 2012), and whose results should be evaluated according to the same characteristics populations considered for their development, and in some cases they can be divided by age groups and even by degree of maturity (Padilla-Alvarado et al., 2025).

In this regard, the tests require the intervention of qualified personnel. However, for years, devices have been developed to estimate physical performance, providing metrics that, based on the regression equations mentioned above, allow VO<sub>2</sub> max to be estimated, (Carrier et al., 2023), In consideration of the above, it can be considered that the use of big data, machine learning, and artificial intelligence can facilitate interpretation and even generate estimates of variables based on available data. In this regard, this study aims to review the use of artificial intelligence in the assessment of maximum oxygen consumption.

### *Methodology*

Following the best practices of a scoping review (Arksey & O'Malley, 2005) the following steps were taken: (i) identification of the research question, (ii) identification of relevant studies, (iii) selection of studies, (iv) graphing of data in the results, (v) collation, summary, and communication of the results in the discussion.

#### *Stage 1: Identifying the research question*

The research question covers a population, namely people who engage in physical activity and sports. The concept is the estimation of VO<sub>2</sub>, and the context is the use of AI for assessment in physical activity and sports. This raises the question for analysis: What would be the use of AI for predicting VO<sub>2</sub>?

## **2. Materials and Methods**

Following the best practices of a scoping review (Arksey & O'Malley, 2005) the following steps were taken: (i) identification of the research question, (ii) identification of relevant studies, (iii) selection of studies, (iv) graphing of data in the results, (v) collation, summary, and communication of the results in the discussion.

#### *Stage 1: Identifying the research question*

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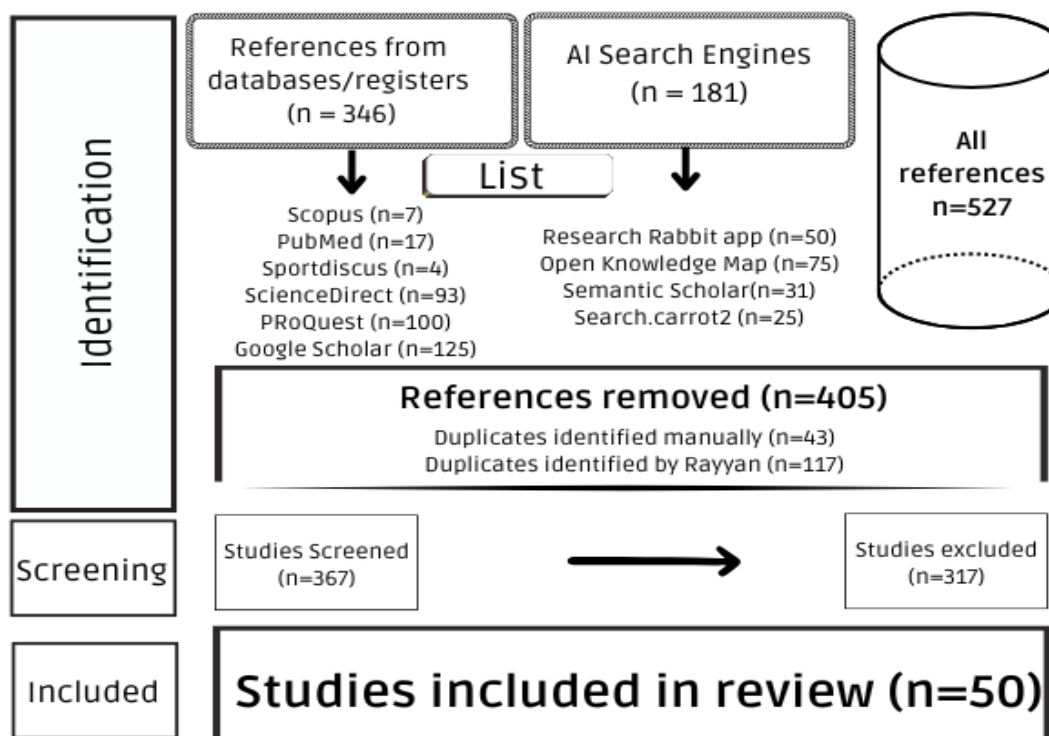
#### *Stage 2: Identifying relevant studies: Data sources and search strategy*

In identifying relevant studies, the following formula with Boolean operators was used: (VO<sub>2</sub> max OR maximum oxygen consumption OR maximum oxygen uptake) AND (New test) AND (artificial intelligence OR Software) AND (prediction) AND (evaluation OR Assessment); This formula was used in the academic databases: SportDiscus, ProQuest, ScienceDirect, PubMed, Scopus, and Google Scholar. Searches were also conducted in AI search engines: Research Rabbit app, Open

Knowledge Map, SemanticScholar, and Search.carrot2 The Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA ScR) protocol was applied to identify relevant studies (McGowan et al., 2020; Tricco et al., 2018), through the support of the Rayyan platform (Rayyan, 2025), which facilitates and automates the review stages shown in Figure 1.

#### Stage 3: Study selection

References were imported from the databases and AI search engines, eliminating duplicates in the first instance. In the next round, the data was reviewed using the following keywords as inclusion criteria: VO2, artificial intelligence, machine learning, neural network, software, people, artificial neural networks, humans, device, smartwatch, wearable devices. Studies involving animals and gas emissions related to environmental issues were excluded. Once the selection was made, the final extraction of the full-text works began, with 50 works included (Figure 1).

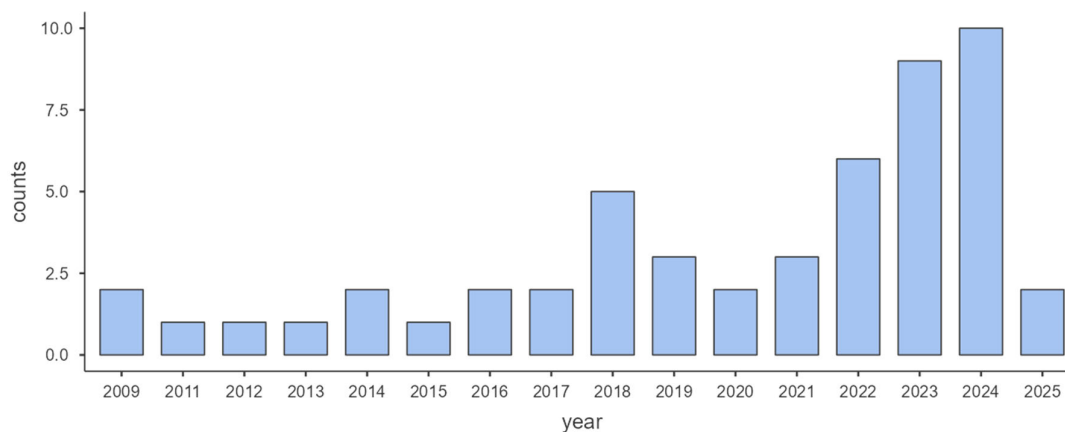


**Figure 1.** Preferred Reporting Items for Systematic Reviews and Meta-Analyses, Scoping Review (PRISMA-ScR).

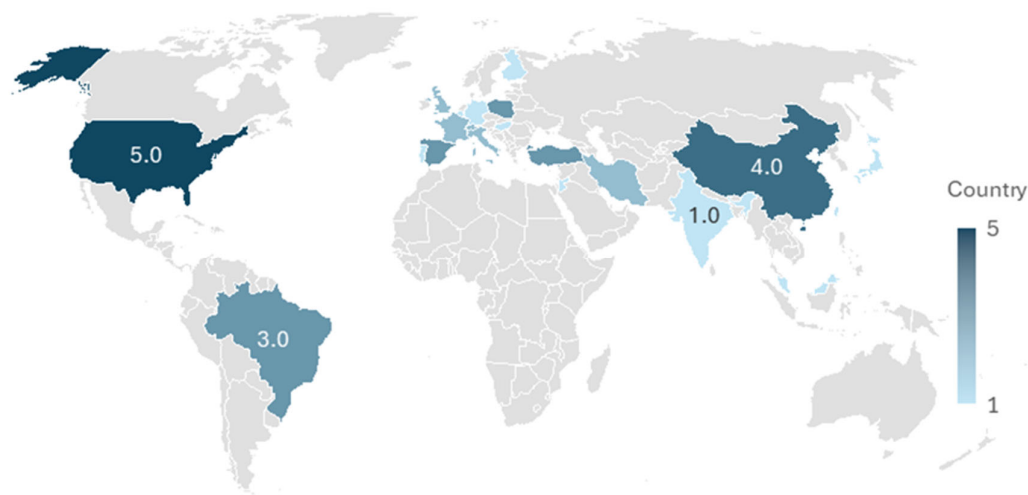
### 3. Results

#### Stage 4: Charting the data

Below are the main results of the review, beginning with the frequency of publications by year, identifying an increase in related production between 2023 and 2024. It should be noted that the topic has been addressed since 2009.



**Figure 2.** Frequency of publications per year in which VO<sub>2</sub> was measured or estimated with the intention of evaluating the results using AI.



**Figure 3.** Geographic density of the selected studies.

It can be observed that the highest density of publications related to AI and VO<sub>2</sub>max is found in the Americas and Asia, with no records of related studies for Africa (Figure 3).

#### *Stage 5: collating, summarizing and reporting the results*

Table 1 shows that most of the studies are original, and that only one was conducted exclusively with females, while 53% of the studies were conducted on both sexes. In terms of the type of population, 74% of the studies were conducted on untrained but healthy individuals, 24% on trained subjects, and 2% on cardiac patients. Regarding the methodology used to generate prediction models, 36% of the studies were developed using machine learning (ML) or artificial intelligence (AI), 38% used maximal exercise testing and direct gas analysis in the laboratory, and 8% used validated field tests. Thirty-four percent of the studies took heart rate (HR) into account using specific monitors, smartphones, and smartwatches.

**Table 1.** Variables and frequencies of the characteristics that make up the selected studies .

Variable	Characteristics	Counts	% of Total
Type-Study	Original	41	82,0%
	Review	9	18,0%
Sex	Female	1	2,0%

Variable	Characteristics	Counts	% of Total
Population (type)	Male	22	43,1%
	Both	27	52,9%
	N/R	1	2,0%
	Heart patient	1	2,0%
	No Trained Healthy	37	74,0%
	Trained	12	24,0%
Methodology	Machine Learning (ML) / Artificial Intelligence (IA)	18	36,0%
	Maximal Exercise Test And Direct Gas Analysis	19	38,0%
	Non-Exercise Prediction Models / ML/ AI	2	4,0%
	Submaximal Exercise Test	2	4,0%
	Submaximal Exercise Test/Direct Gas Analysis	3	6,0%
	Validated Field Tests	4	8,0%
	Validated Field Tests / Direct Gas Analysis	2	4,0%
Wearable used	Accelerometer	1	2,0%
	GPS	1	2,0%
	HR monitor	8	16,0%
	HR monitor, Smartphone	2	4,0%
	Smartphone	2	4,0%
	Smartwacht (HR and other variables)	7	14,0%
	Xbox Kinect	1	2,0%

#### 4. Discussion

This study reviewed the use of artificial intelligence in assessing maximum oxygen consumption. The literature consulted is conclusive in confirming  $VO_{2max}$  as a reliable predictor of health, cardiovascular risk, and aerobic potential, which is consistent given that  $VO_{2max}$  is also considered the most widely used parameter for characterizing the effective integration of the central nervous, cardiopulmonary, and metabolic systems. (Day et al., 2003) reinforcing the role that these variable plays in decision-making for health promotion programs, healthy aging, and sports training. Therefore, the estimation of this variable is required for various contexts and populations. Field or laboratory tests, maximal or submaximal, are usually performed, depending on the need, type of population, and availability of equipment for measuring the variables, either for direct or indirect determination.

In this order of ideas, it has been found that hybrid models that combine maximal and submaximal exercise variables with information collected through questionnaires significantly improve  $VO_{2max}$  prediction (Abut & Akay, 2015), Others indicate that predictive accuracy increases when variables such as running speed and exercise time are incorporated (Akay et al., 2017), Some artificial neural networks even allow  $VO_{2max}$  to be estimated while participating in active video games (Barry et al., 2016; Oh et al., 2022), although the limitations of dynamic system models for predicting  $VO_2$  and HR have been reported (Borrer, 2018; Borrer et al., 2019) The integration of machine learning into exercise physiology can improve the analysis of physiological parameters, collecting and interpreting data more efficiently during endurance exercises. In this way, the use of explainable AI tools will favor the interpretability of machine learning models. (Carrier et al., 2023); In this regard, it has been shown that the use of wearable devices to collect data before and during exercise has proven to be valid in athletes. (Carrier et al., 2023; Li et al., 2024), recreational runners (De Brabandere et al., 2018), soccer players (Düking et al., 2024), healthy subjects of both sexes (Liu et al., 2023; Muntaner-Mas et al., 2021; Sant' Ana et al., 2024; Ye et al., 2023) to estimate  $VO_{2max}$ .

Similarly, the studies reviewed agree that hybrid models, artificial neural networks, (Akay et al., 2013, 2017; Ashfaq, 2022; Ashfaq et al., 2022; Barry et al., 2016; Henriques et al., 2017; Shokrollahi, 2012; Zignoli et al., 2020) and machine learning algorithms such as support vector machine (SVM) models (Akay et al., 2017; Alzamer et al., 2021; Cheng et al., 2019; Liu et al., 2023; Schumacher et al., 2024), random forest (RF) models (Akay et al., 2017; Asadi et al., 2023) and deep learning (Szijarto et al., 2023; Watanabe et al., 2024), In addition to improving the accuracy of  $VO_{2max}$  estimation, they

represent a quick way to estimate VO<sub>2</sub>max because they do not require a specific stress test to be performed, but rather the collection of data on the subjects, including variables such as age, sex, body weight, physical activity levels and history, heart rate, running speed during exercise, and even biochemical variables (Grzebisz-Zatońska, 2024). Adapting to different populations, facilitating clinical decision-making and sports training, in short, AI is establishing itself as a decisive tool for estimating VO<sub>2</sub> in different contexts and populations.

It should be noted that traditional tests to measure VO<sub>2</sub>max require a significant amount of time, which makes them impractical for use with large populations. Without wishing to detract from their validity but rather seeking to obtain quality information about a population in the shortest possible time, using alternative prediction models facilitates the estimation of VO<sub>2</sub>max in a larger group and in less time. In this regard, relying on data provided by mobile or wearable devices allows VO<sub>2</sub>max to be assessed outside the laboratory in various contexts (clinical, sports, and public health). Similarly, in contexts or situations where it is not possible to perform a maximal test, AI-based models are a viable and reliable alternative for estimating VO<sub>2</sub>max.

Finally, interdisciplinary collaboration between exercise physiologists, data scientists, and other related and interested professionals can be considered for future studies and technological developments to enhance the optimal development of AI use in VO<sub>2</sub>max estimation and assessment.

## 5. Conclusions

In light of the results of the review, it was evident that the use of AI in VO<sub>2</sub>max estimation still requires further study and development, taking into account the available background information on different populations. Similarly, according to empirical studies, the use of deep learning fed by validated algorithms allows for a more accurate estimation of VO<sub>2</sub>max. For its evaluation, it is necessary to resort to explainable AI training, starting with the linear regressions available in the literature and continuing with decision trees, to predict performance and offer a classification of it.

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