

## Cold Exposure Protocol

*Evidence-based cold water immersion — session by session*

### BEFORE THE SESSION

- Hydrate — drink 250-500ml water**  
*30 min before, not immediately before*
- Set a timer — start at 60 seconds**  
*Build to 3 min over 2-4 weeks*
- Target temp: 10-15C (50-59F)**  
*Colder is not better; this range is optimal*
- Note baseline mood/energy (1-10)**  
*Tracks adaptation over time*

### DURING THE SESSION

- Breathe slowly — nasal if possible**  
*Urge to gasp passes in ~30 seconds*
- Keep torso submerged — not just limbs**  
*Core cooling drives the hormonal response*
- Stay still — movement warms the water**  
*Thermocline effect reduces stimulus*
- Track time, not sensation**  
*Discomfort is not a signal to stop*

### AFTER THE SESSION

- Reheat passively — move, do not towel**  
*Active thermogenesis drives brown fat activation*
- Avoid hot shower for 10 minutes**  
*Thermal contrast blunts the dopamine peak*
- Note mood/energy 30 min post**  
*NE peak typically 15-30 min after immersion*

### FREQUENCY

3-5 sessions/week optimal for adaptation.  
Daily use blunts the hormetic stimulus.  
Morning: norepinephrine peak aids focus.  
Post-workout: wait 4h — blunts hypertrophy.

### THE EVIDENCE

Norepinephrine: Cold at 14C raises NE 300% (Siems et al., 1994).

Dopamine: 250% increase sustained 2-4 hours post-immersion (Sussman et al., 2022).

Inflammation: CWI reduces IL-6 and CRP in athletes (Bleakley et al., 2012).

Fatigue: Cold showers reduced fatigue 54% over 90 days (Buijze et al., PLOS ONE, 2016).

### PROGRESSION SCHEDULE

Week 1	60 sec	15C / 59F
Week 2	90 sec	14C / 57F
Week 3	2 min	13C / 55F
Week 4+	3 min	10-12C / 50-54F

### CONTRAINDICATIONS

- Raynaud's disease or peripheral neuropathy
- Cardiovascular disease (consult physician)
- Open wounds or active skin infections
- Pregnancy
- Immediately post-exercise (30 min wait)