

Table I - Summary of articles according to the order of appearance in the text

Authors	Sample description	Results
Abe <i>et al.</i> (2010) [7]	n=19 (4M e 15W). Intervention: 6 weeks. K-walk: n=11, walking: 20 min., 67m/min, 5x/week, with BFR. Control: n=8, no exercise.	- Strength: K-walk: ↑ isometric (11%); ↑ isokinetic (7% extension, 16% flexion). - Muscle size: K-walk: cross-sectional area: ↑ 5.8% thigh and 5.1% leg; K-walk: ultrasound: ↑ 6% total mass and 10.7% thigh. - Functional capacity: K-walk: ↑ (timed up and go test).
Libardi <i>et al.</i> (2015) [9]	n=25. Intervention: 12 weeks. CT: n=8, aerobic: 2x/week, 30-40 min, 50-80% VO _{2peak} and resistance: 2x/week, 4x10 reps, 70-80% de 1-RM. BFR-CT: n=10, like CT, but, with BFR. CG: n=7, control group, no exercise.	- Quadriceps cross-sectional area: CT: ↑ 7,3%; BFR-CT: ↑ 7,6%. - 1-RM: CT: ↑ 38,1%; BFR-CT: ↑ 35,4%. - VO _{2peak} : CT: ↑ 9,5%; BFR-CT: ↑ 10,3%.
Ozaki <i>et al.</i> (2011) [11]	n=23. Intervention: 10 weeks BFR-W: 20 min., 4x/week, 45% of HRR. CON-W: like BFR-walk, but, without BFR.	- Maximum strength (knee joint): BFR-W: ↑ ± 15%. - Cross-thigh area: BFR-W: magnetic resonance: ↑ 3%. - Carotid artery compliance: BFR-W: 50% improvement. CON-W: 59% improvement.
Clarkson <i>et al.</i> (2017) [12]	n=19 (11M e 8W). Intervention: CON: walking: 4x/week, 10 min, 4 km/h, for 6 weeks. BFR-W: like CON, but, with BFR.	Sit-and-stand test for 30s: BFR-W: 3.5x more. Queens College Bank Test: BFR-W: ≅ 4x more. Six-minute walk test: BFR-W: 4.5x more. Sit-and-stand test: BFR-W: ≅ 2.5x more.
Staunton <i>et al.</i> (2015) [13]	n=24M (11 young and 13 elderly) Intervention: 2 sessions. CON: resistance: leg press, 1x30 reps + 3x15 reps, 20% 1-RM and aerobic: treadmill, 4km/h, 4x2 min. BFR: like CON, but with BFR.	Arterial pressures (systolic, diastolic, and mean): BFRE > CON. Cardiac Output: BFR like CON, however, with ↑ HR and ↓ SV in aerobic. Note: similar hemodynamic responses in young and elderly people with BFR.

Ferreira <i>et al.</i> (2016) [14]	n=21 (8M e 13W). Intervention: 3 sessions. LL: treadmill at 40% VO_{2max} . HL: treadmill at 70% VO_{2max} . LL+BRF: like LL, but, with BFR.	R-R intervals and HR: HL:> reduction in recovery. Blood pressure: HL:> during recovery. LL-BFR: ↑ rest vs. recovery. Double Product: LL-BFR: ↑ rest vs. recovery. HL:> at rest.
Barili <i>et al.</i> (2018) [15]	n=16W hypertensive. Intervention: 3 sessions. HIAE: treadmill at 50% VO_{2max} . LIAE: treadmill at 30% VO_{2max} . LIAE+BRF: like LIAE, but, with BRF.	Lipid peroxidation: LIAE + BRF: ↑ recovery vs. rest. Glutathione-S-Transferase: LIAE + BRF: ↑ recovery vs. rest. Superoxide Dismutase: LIAE + BRF: ↑ recovery vs. rest. Non-Protein Thiols: LIAE + BRF: ↑ rest vs. recovery. LIAE: ↑ recovery vs. other groups. Hemodynamic responses (blood pressure and HR) LIAE + BRF: ≅ HIAE
Ozaki <i>et al.</i> (2017) [16]	n=7W. Intervention: acute: 20 min. and chronic: ≅ 6 months. BFR-walk: 20 min., 45% of HRR, with BFR. COM-walk: like BFR-walk, but, without BFR.	- Insulin: ↑ over time and ↑ BFR-walk. - GH: ↑ over time. - Noradrenaline: ↑ over time and ↑ BFR-walk. - Muscular hypertrophy: No correlation with the ↑ of the hormones.

M = Men; W = Women; BFR = Blood Flow Restriction; RM = Repetition Maximum; HRR = Heart Rate Reserve; HR = Heart Rate; SV = Stroke Volume; GH = Growth Hormone