

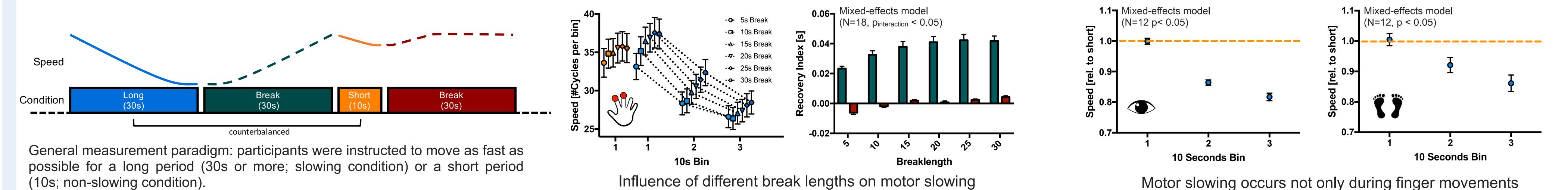
## Motor fatiguability in humans is associated with a shift from mesial to lateral premotor-motor interactions and changes in motor cortex inhibition

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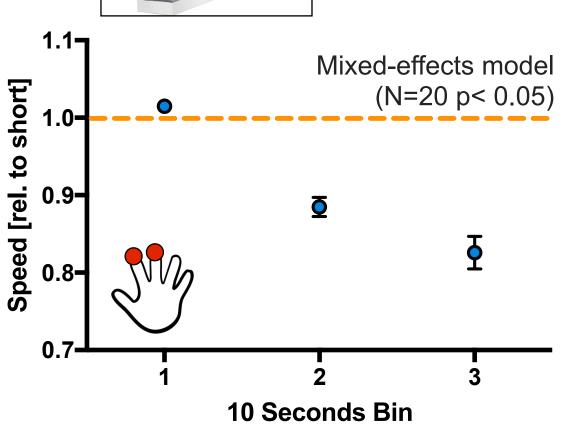
Motor fatiguability as indexed by motor slowing is a decrease in performance over time which generalises across effectors and repetitive tasks

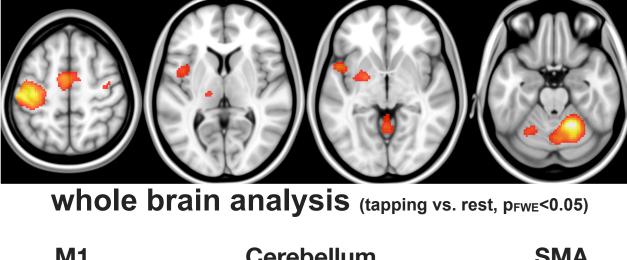


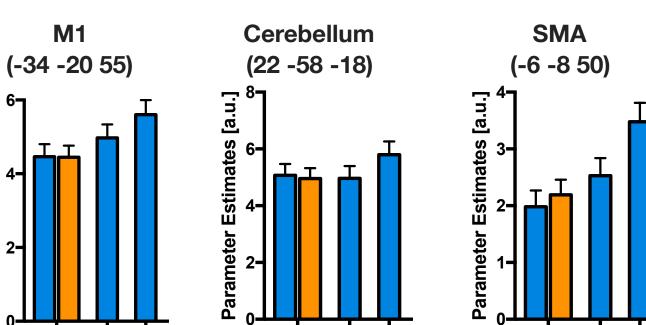
(10s; non-slowing condition).

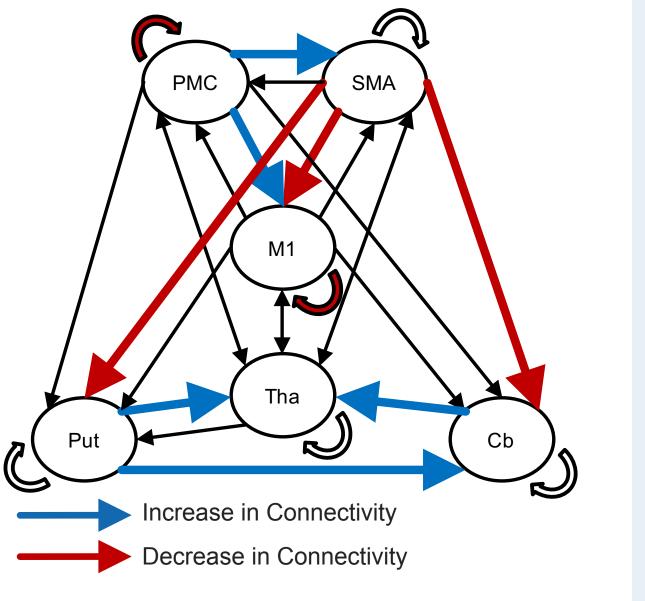
Increase in hemodynamic response and changes in effective connectivity during slowing



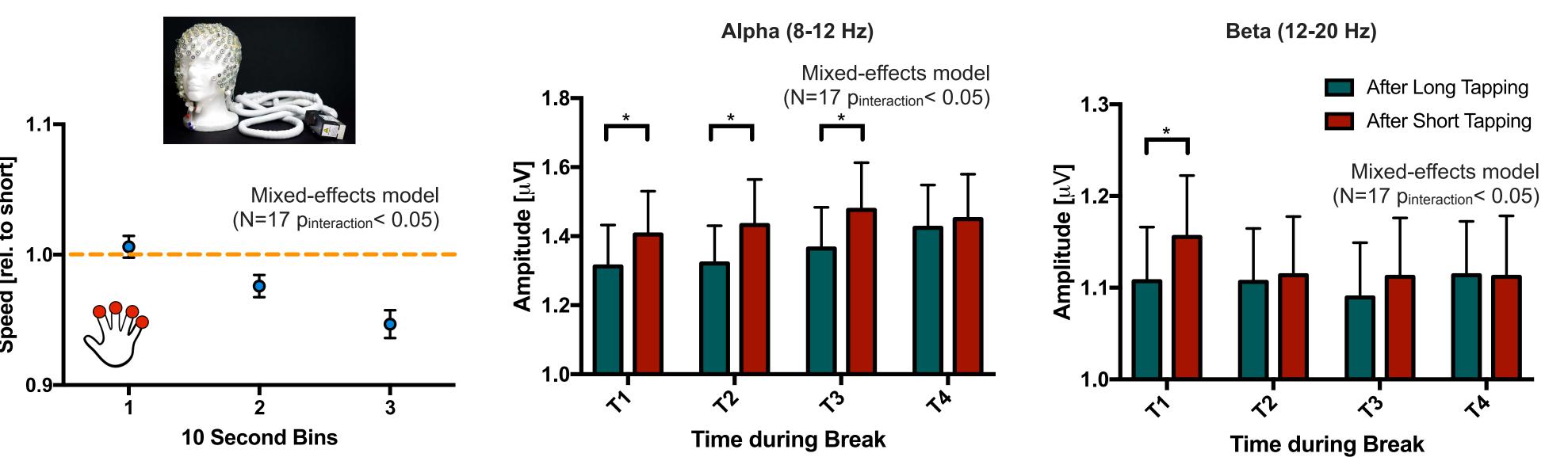








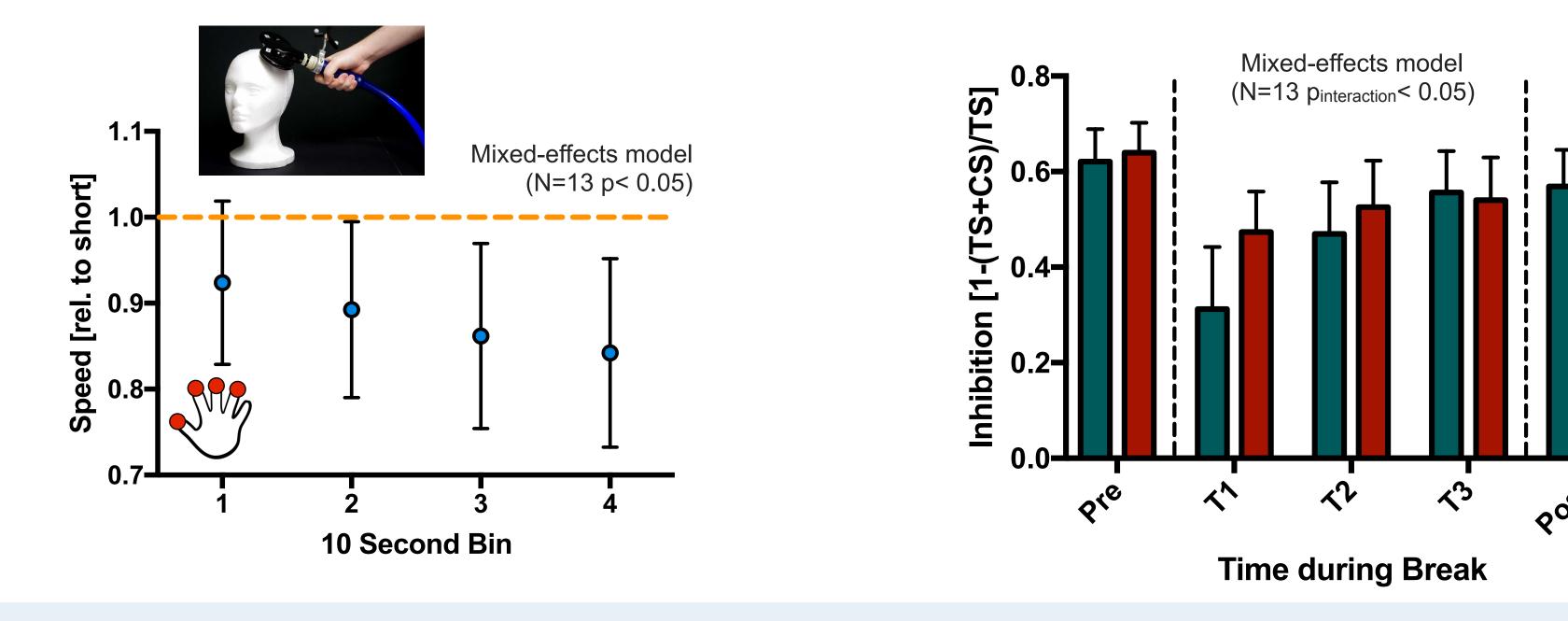
Slower recovery of alpha power and reduced beta rebound after motor slowing

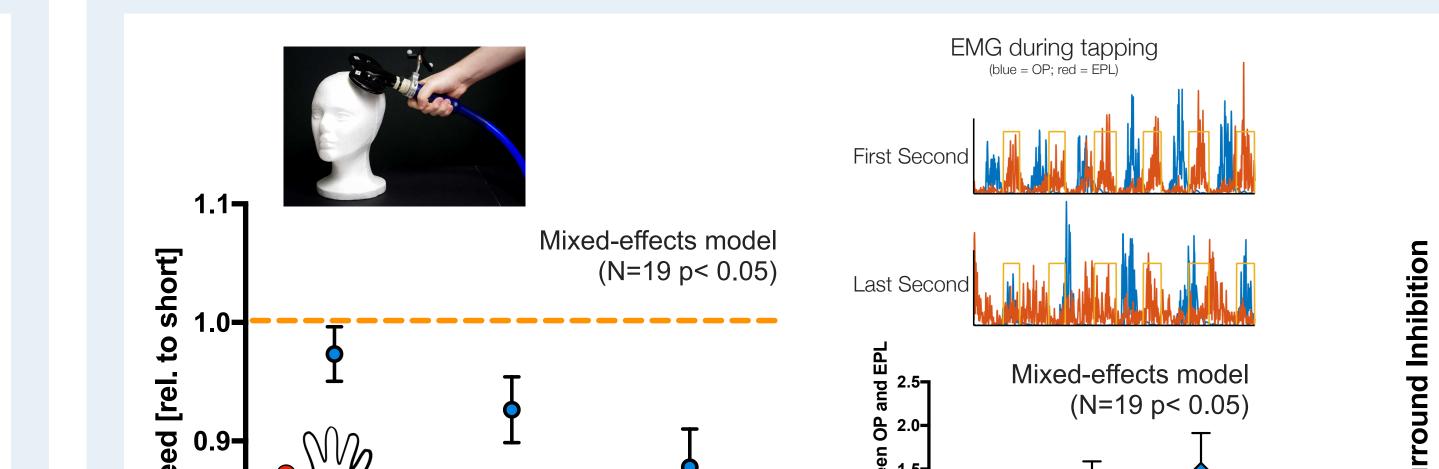


10 Seconds Bin

Tapping Tapping **Dynamic causal modeling** 

### Decreased short-latency intracortical inhibition after motor slowing

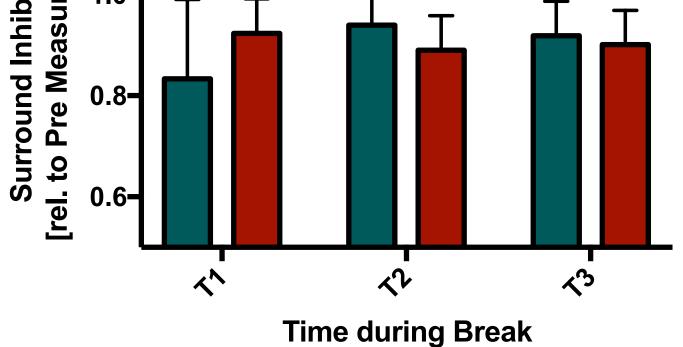




10 Seconds Bin

Decreased surround inhibition after motor slowing

# Mixed-effects model (N=19 p<sub>interaction</sub>< 0.05)



### Conclusions

Repetitive movements lead to motor slowing which is associated with:

An overall increased hemodynamic response in the motor system **(I)** 

#### A shift from mesial to lateral premotor-motor interactions

(III) Slower recovery of spontaneous alpha activity and a decreased beta rebound (IV) Decreased inhibition of the primary motor cortex (V) A decrease of surround inhibition and an increase in cocontraction of agonistic muscle groups.

Our results propose that two mechanisms are involved in motor slowing: (1) fMRI, EEG and SICI data converge to indicate that motor fatiguability is associated with dis-inhibiting motor cortex This decrease in inhibition reflects a break-down of surround inhibition which leads to increased cocontraction of antagonistic muscle groups which ultimately causes motor slowing. (2) Our DCM results reveal that dis-inhibition of motor cortex is associated with reduced effective connectivity from SMA, a key area for intrinsic movement generation.

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