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1 **Central fatigue theory and endurance exercise: toward an interoceptive model**

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Abstract

We propose a model of exercise-induced central fatigue based on interoception and motivation. Predictions of the expected sensory feedback are fed forward by the dorsolateral (DL) prefrontal cortex (PFC) to the anterior insula cortex (AIC). During exercise, the AIC receives feedback from lamina I lateral spinothalamic and nucleus tractus solitarii medullothalamic pathways. The feedback is compared to the predictions in order to generate a current awareness state, which is forwarded to the anterior cingulate cortex (ACC), ventromedial (VM)PFC and lateral (L)PFC. The LPFC integrates the information and makes a decision as to whether to continue or stop. The decision is dependent upon interaction with the substantia nigra pars compacta and ventral tegmental area dopamine (DA), and locus coeruleus (LC)-norepinephrine (NE) systems. Phasic activation of DA and NE neurons appears to be necessary for maintenance of goal-related action but the VMPFC and ACC, which project to the LC, induce tonic NE activity when the rewards are thought to be not worth the cost thus fatigue is perceived.

Key words: 5-hydroxytryptamine: insula cortex: anterior cingulate cortex: dorsolateral prefrontal cortex: ventrolateral prefrontal cortex: ventromedial prefrontal cortex: substantia nigra pars compacta, ventral tegmental area: locus coeruleus, dopamine: norepinephrine: motivation

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37 **1. Introduction**

38 Fatigue is an encompassing term which includes impairments in the ability to perform
39 physical tasks or to produce muscle force as well as sensations that relate to tasks being more
40 difficult or taking more effort than expected (Taylor & Gandevia, 2008). Fatigue can originate
41 from both ‘peripheral’ and ‘central’ mechanisms. The nature of peripheral fatigue, i. e.
42 force reductions occurring due to processes distal to the neuromuscular junction (Carroll et al.,
43 2017), has received much attention (see Allen et al., 2008; Kent-Braun et al., 2012; Debold et al.,
44 2016 for reviews) and is relatively well understood . However central fatigue, which has been
45 defined as the inability of the brain to maintain the drive necessary to produce the desired force
46 or power output (Davis & Bailey, 1996) and refers to processes within motoneurons and the
47 central nervous system (Carroll et al., 2017), is perhaps less well-understood. In particular, and
48 as noted previously (Taylor & Gandevia, 2008), the study of exercise-related ‘central’ fatigue
49 has, historically, focused on the performance of the motor system, and less on the more cognitive
50 aspects of fatigue. Yet, anecdotal evidence, often in the form of “ghosted autobiographies” of
51 athletes, shows that the role of cognition or central fatigue during endurance exercise has been
52 known to be very important for many years. Its relationship with peripheral fatigue is less clear.

53 In sub-section 1.1, we briefly describe the role of the brain in motor control, while in
54 section 2 we outline and critique the major neurochemical theories of central fatigue. In section 3
55 we examine the major psychophysiological theories. These theories have been developing over a
56 number of years although comparatively recent research into the neuroanatomy of feedback from
57 peripheral afferents to the brainstem and higher centers of the brain (Craig, 1995; 2003; 2004a;

2004b) has led to some interesting developments with regard to the mechanisms thought to account for central fatigue (see Hilty et al. 2011; Robertson & Marino, 2016). In section 4, we elaborate on these mechanisms and suggest how the nature of Craig's (2002; 2015) interoception theory provides a viable explanation of the causes of central fatigue. To Craig, interoception is not merely a neuroanatomical phenomenon but is an emotional response which is heavily influenced by motivation. Therefore, we include in our model an account of the role of catecholamines in motivation, particularly with regard to maintaining goal directed behavior, but also how this is affected by exercise-induced alterations in brain catecholamines concentrations. The interaction between exercise and brain catecholamines concentrations does not only affect motivation but also the whole process of central fatigue, as dopamine (DA) and norepinephrine (NE) are vital for activation of the prefrontal cortex (PFC), which is thought to control central fatigue (Klass et al., 2016; Robertson & Marino, 2016).

1.1. Overview of the role of the brain in motor control

Insert Figure 1 about here

Figure 1 provides a schematic of the roles of the different regions of the brain during motor control. The decision to undertake physical exercise is thought to be initiated by the dorsolateral (DL)PFC and may come from internal or external input. The supplementary motor area (SMA) is mostly concerned with internal factors, while the premotor cortex (PMC) is more readily activated by external stimuli. The SMA and PMC make direct connections with the spinal cord via the cortico-spinal tract or indirectly via connections with the primary motor cortex (M1) and brainstem. The pre-motor and motor regions of the brain, and indeed most of the cerebral cortex, feedforward to the basal ganglia (BG) and cerebellum, forming the cerebral-BG-thalamo-cerebellar pathway. Moreover, regions projecting forward to the cerebellum, via this

81 pathway, receive ascending feedback from the cerebellum. These closed-loop connections
82 between the BG and cerebellum play a major role in motor control (Doya, 2000; Shadmehr &
83 Krakauer, 2008).

84 The feedforward to the cerebellum is in the form of corollary discharge. The
85 somatosensory cortex also receives corollary discharge from M1 (Enoka & Stuart, 1992).
86 Corollary discharge informs the cerebellum and somatosensory cortex of the expected sensory
87 consequences of performing the movement correctly. When movements are performed very
88 slowly, corollary discharge can be compared with the actual sensory feedback and changes to the
89 action can be made. Afferent feedback to the somatosensory cortex is via the dorsal column-
90 lemniscal pathway, which consists of large dynamiter sensory fibers from the skin, muscles and
91 joints, and the ventral spinothalamic pathway, which originates in lamina V and lamina V I I. In
92 most cases, feedback arrives too late for the individual to use it to control on-going movement.
93 The problem is overcome due to the plasticity of the cerebellum. Through experience, the
94 cerebellum learns to anticipate errors and alter subsequent movements rather than try to alter the
95 on-going movement. In other words, it develops internal templates that predict the sensory
96 outcomes of motor commands and corrects motor commands through internal feedback. This
97 results in smooth coordinated actions. Although this is probably the most common mechanism
98 used by the cerebellum to control movement, it is generally agreed that when possible, mixed
99 feedforward and feedback control is the best strategy, combining the efficiency of anticipatory
100 action with feedback control (Herreros & Verschure, 2013).

101 The above briefly outlines the brain mechanisms involved in motor control in non-
102 fatiguing actions. However, as we will see in the following sections, there is some disagreement
103 between theorists as to the part played by corollary discharge and afferent feedback to the

104 somatosensory cortex, with regard to central fatigue. In the next two sections, we examine the
105 major central fatigue theories.

106

107 **2. Neurochemical theories of central fatigue**

108 *2.1. Serotonin hypothesis*

109 It has long been acknowledged that ‘central’ factors play a role in the development of
110 fatigue (see Gandevia, 2001 for seminal review) and that during sustained muscle contraction,
111 the maximal effort that can be achieved voluntarily is less than that which can be achieved when
112 the muscle is activated directly by electrical stimulation of the motor nerve (e.g. Asmussen,
113 1979) . These observations led the Oxford University biochemist, and marathon runner, Eric
114 Newsholme, to propose that the neuromodulator 5-hydroxytryptamine (5-HT), also known as
115 serotonin, might be a prime candidate for explaining central fatigue (Newsholme et al., 1987).
116 Given the mechanisms by which Newsholme et al. (1987) perceived 5-HT to act on the brain
117 during fatiguing exercise, they termed the theory, the tryptophan-5-HT-central fatigue theory. It
118 is now more commonly known as the serotonin theory.

119 Newsholme et al. (1987) were aware of the commonly held belief that 5-HT induces
120 lethargy and sleepiness. Moreover, they were also aware that the precursor of 5-HT, tryptophan,
121 more readily crosses the blood-brain barrier during exercise than at rest. Tryptophan is found in
122 plasma either bound to albumin or unbound. Unbound or free tryptophan readily crosses the
123 blood-brain barrier. During exercise, free fatty acids displace tryptophan from binding with
124 albumin, therefore there is an increase in free tryptophan. This crosses into the brain and forms
125 5-HT (Blomstrand, 2006; Hawkins et al., 2006). Some albumin-bound tryptophan also crosses
126 the blood-brain barrier probably due to a dissociation mechanism that takes place at the surface

127 of the brain capillary endothelium (Pardridge, 1998). However, Fernstrom and Fernstrom (2006)
128 questioned the role of free fatty acids and unbinding of tryptophan from albumin as the cause for
129 exercise-induced increases in 5-HT concentrations but did agree that exercise likely induces
130 increased brain concentrations of 5-HT.

131 Having crossed the blood-brain barrier, tryptophan is hydroxylated to 5-
132 hydroxytryptophan (5-HTP), under the influence of tryptophan hydroxylase. It is further broken
133 down by aromatic amino acid decarboxylase (AADC) into 5-HT. This process takes place in the
134 raphe nuclei. This is the only place that 5-HTP is thought to be found. 5-HT is stored in vesicles,
135 mainly the parafollicular cells of the thyroid (Lefebvre et al., 2001). Tryptophan hydroxylase is
136 the rate-limiting enzyme for 5-HT synthesis and is not fully saturated under normal conditions,
137 therefore increases in brain concentrations of tryptophan will facilitate 5-HT synthesis.

138 Newsholme et al. (1987) received contemporary support from rodent studies, which
139 demonstrated significant increases in brain 5-HT concentrations and/or concentrations of the 5-
140 HT metabolite 5-hydroxyindoleacetic acid (5-HIAA) following exercise (Blomstrand et al.,
141 1989; Chauloff et al., 1986; 1987). More recent rodent studies have shown similar results
142 (Caperuto et al., 2009; Chen et al., 2008; Chennaoui et al., 2001; Gomez-Merino et al., 2001;
143 Langfort et al., 2006; Meeusen et al., 1996; Meeusen et al., 2001; Meeusen & De Meirleir,
144 1995). Moreover, Blomstrand et al. (2005) examined the brain uptake of tryptophan during
145 prolonged exercise (3 h at 200 ± 7 W, on a cycle ergometer) in humans by calculating the
146 arterial-venous difference (*a-v* diff) multiplied by plasma flow. They found large increases in
147 cerebral uptake. However, as reported in a short but succinct recent review (Meeusen &
148 Roelands, 2017), results from studies with humans, in which diet was manipulated to attempt to
149 alter brain concentrations of tryptophan, have failed to support the 5-HT hypothesis.

150 The methods used in these nutrition studies were tryptophan ingestion and the increase of
151 dietary uptake of branched-chain amino acids (BCAA). Tryptophan ingestion should lead to
152 increased brain tryptophan concentrations, as it crosses the blood-brain barrier. Theoretically,
153 this should induce earlier onset of fatigue. Dietary uptake of BCAA results in a lowering of brain
154 concentrations of tryptophan. BCAA and tryptophan utilize the same blood-brain barrier
155 facilitative transporter L1 (Hawkins et al., 2006), therefore following increased BCAA intake,
156 there is more competition for the free-tryptophan (i.e. unbound from albumin) to access L1 in
157 order to cross the blood-brain barrier. As a result, there will be less 5-HT synthesized by the
158 raphe nuclei. Hence the inhibitory effect of 5-HT should be attenuated. That the studies failed to
159 support the serotonin hypothesis led Davis and Bailey (1996) to examine a possible interaction
160 between 5-HT and DA as causes of central fatigue.

161 2.1.1. 5-hydroxytryptamine-dopamine interaction effects

162 Based on the positive roles of DA in arousal, motor control and motivation, Davis and
163 Bailey (Bailey et al., 1993; Davis & Bailey, 1996; Davis et al., 2000) hypothesized that a low
164 ratio of brain 5-HT to DA favors improved performance but a high ratio of 5-HT to DA would
165 lead to a lowering of arousal, loss of motor coordination and motivation. This they claimed was
166 what caused central fatigue (Davis et al., 2000). This was based on the findings of Bailey et al.
167 (1993), who examined the effect of exercise to exhaustion on the turnover of 5-HT and DA in the
168 midbrain, striatum, hypothalamus and hippocampus of rodents. The authors included the effect
169 of the use of selected drugs, but here we report only results for the placebo trials as our interest is
170 in central fatigue in normal rather than pharmaceutically engineered situations. Measures were
171 taken from rodents sacrificed after one hour as well as those sacrificed following exhaustion. 5-
172 HT and its metabolite 5-HIAA demonstrated significant increases from rest to one hour in all

173 four brain regions measured and further increases in midbrain and striatum following exhaustion.
174 This was similar to the results of Blomstrand et al. (1989) and Chauloff et al. (1986), using
175 similar methods. Results for DA and its metabolite 3,4 dihydroxyphenylacetic acid (DOPAC)
176 were more complex, however. DA was increased after one hour in the midbrain and striatum
177 only. At exhaustion it had returned to resting levels in the midbrain but remained higher than at
178 rest in the striatum, although this was significantly lower than concentrations after one hour. In
179 the midbrain, DOPAC was significantly higher than at rest after both one hour and exhaustion.
180 Concentrations following one hour and exhaustion did not differ significantly from one another.
181 In the striatum, after one hour, DOPAC was significantly higher than at rest and following
182 exhaustion, while concentrations at exhaustion were significantly greater than at rest. There were
183 no significant differences in the hypothalamus and hippocampus.

184 In the Abstract to their article, the authors stated “Brain dopamine (DA) and 3,4-
185 dihydroxyphenylacetic acid (DOPAC) were higher at 1 h of exercise ($P < 0.05$) but were similar
186 to resting levels at fatigue” (Bailey et al., 1993, p. 3006) and it is the implications of this
187 comment which have tended to be used as support for a monoamine hypothesis of central
188 fatigue. As we saw in the previous paragraph, the data suggest that the situation was not that
189 straightforward and there is evidence of increased turnover of DA in the midbrain and striatum at
190 exhaustion. Furthermore, Heyes et al. (1985) provided contradictory evidence regarding DA
191 turnover at exhaustion. These authors examined the effect of exercise to exhaustion on
192 concentrations of DA, DOPAC and another metabolite of DA, 4-hydroxy 3-methoxyphenylacetic
193 acid also known as homovanillic acid (HVA), as well as 5-HT and 5-HIAA in the striatum,
194 brainstem, and hypothalamus of rodents. They found increased concentrations of DA, DOPAC
195 and HVA in the striatum and brainstem of exhausted rats. There were no significant effects in the

196 hypothalamus. 5-HIAA concentrations were increased in striatum but 5-HT concentrations were
197 unaffected in all three brain regions. Blomstrand et al. (1989) demonstrated increased DA and 5-
198 HT in the brainstem and hypothalamus, and 5-HIAA in the hippocampus and striatum of mice, at
199 exhaustion. More recently, Hu et al. (2015) have shown increased extracellular DA and 5-HT in
200 the subthalamic nucleus of rats at exhaustion. Observation of the data supplied by Hasegawa et
201 al. (2008) suggests that DA concentrations in the hypothalamus at exhaustion were similar to
202 those at rest, although the authors did not statistically compare concentrations at rest to those at
203 exhaustion. Moreover, pharmacological and electrophysiological research into the interactions
204 between 5-HT and DA neurons in non-exercise conditions has produced somewhat contradictory
205 results (see Barnes & Sharp, 1999; Fink & Göthert, 2007; Olijslagers et al., 2006, for reviews),
206 which may explain the issues with the 5-HT-DA interaction during exercise (see below).

207 That there is not strong support for the Bailey et al. (1993) theory may be due to the
208 effects of different 5-HT or serotonergic receptors on DA synthesis and release. 5-HT modulates
209 DA release in the substantia nigra pars compacta (SNc) and ventral tegmental area (VTA), and in
210 their projection areas, the striatum and, the nucleus accumbens (NAc) and PFC respectively
211 (Fink & Göthert, 2007). The 5-HT_{1A}, 5-HT_{1B}, 5-HT_{2A} and 5-HT_{2C} serotonergic receptors, in
212 particular, interact directly and/or indirectly with DA neurons (Olijslagers et al., 2006) in these
213 brain regions. Pharmacological and electrophysical studies with rodents tend to show that the 5-
214 HT₁ serotonergic receptors have an indirect facilitative effect on DA synthesis and release in
215 these areas (Barnes & Sharp, 1999; Fink & Göthert, 2007). 5-HT₁ receptors couple to G_i/G_o
216 guanosine triphosphate (GTP)-binding proteins and inhibit activation of the second messenger
217 cyclic adenosine monophosphate (cAMP), thus dampening the effects of neuronal activity.
218 However, 5-HT_{1B} receptors are probably located on inhibitory γ -aminobutyric acid (GABA)

219 interneurons rather than on DA projection terminals (Barnes & Sharp, 1999), while 5-HT_{1A}
220 receptors are probably located at the presynaptic terminals of GABAergic neurons
221 (Katsurabayashi et al., 2003). Therefore, they negatively affect the release of the inhibitory
222 neurotransmitter GABA, resulting in an indirect facilitation of DA release. 5-HT_{1A} neurons in the
223 dorsal raphe nucleus open K⁺ channels but do not appear to affect the inhibition of cAMP,
224 therefore they also have a direct facilitative effect on DA release (Clarke et al., 1996).

225 The situation with the 5-HT₂ family is less clear. These receptors couple to G_{αq}/G_{βγ} GTP-
226 binding proteins and activate phospholipase C, resulting in an excitatory effect on 5-HT (Barnes
227 & Sharp, 1999). However, they have been shown to have an inhibitory effect on DA release in
228 the medial (m)PFC. This is because of neurons that are located on inhibitory GABAergic
229 interneurons, which probably activate GABA_B receptors thus inhibiting DA release (Santiago et
230 al., 1995). The same process does not occur in the striatum where 5-HT_{2A} neurons do not appear
231 to affect DA release. Why and how this occurs is unsure and a matter of some debate (see Fink &
232 Göthert, 2007). Despite the inhibitory effect of 5-HT_{2A} receptors on mPFC DA release, 5-HT_{2A}
233 receptors in the mPFC have been shown to facilitate DA release in the VTA (Bortolozzi et al.,
234 2005; Puig et al., 2003). This may be due to activation of 5-HT_{2A} neurons that are located on
235 excitatory, glutamergic pyramidal projection neurons rather than on GABAergic receptors. These
236 neurons project to the VTA area (Bortolozzi et al., 2005). It appears that the effects of 5-HT_{2A}
237 neurons on DA release depend on the brain region involved and the localized positioning of the
238 neurons. The situation with regard to 5-HT_{2C} is far more clear. These receptors are localized on
239 GABAergic interneurons in the dorsal raphe nucleus, therefore inducing an indirect tonic
240 inhibitory control on the DA release in both the NAc and the striatum.

241 The contradictory empirical results outlined above and the pharmacological and
242 electrophysiological literature concerning the interaction between 5-HT receptors and DA release
243 question the assertion that central fatigue is the result of 5-HT inducing reductions in brain DA
244 release and metabolism. Meeusen and colleagues (e.g., Meeusen et al., 2001; Meeusen & De
245 Meirleir, 1995) decided that the interaction between exercise, 5-HT, DA and central fatigue was
246 incomplete and effects of the neurotransmitter NE, also known as noradrenaline, required
247 investigation.

248 2.1.2. 5-hydroxytryptamine-catecholamines effects

249 DA and NE are part of the catecholamines family of neurohormones, along with
250 epinephrine (Epi: also known as adrenaline), and are known to interact with one another to
251 control activity in many regions of the brain (Arnsten, 2009; Gioanni et al., 1998). As a result,
252 Meeusen's group have undertaken a large amount of research using systematic reviews, research
253 with rodents and more recently pharmacological studies with humans, in order to determine the
254 possible roles of 5-HT, DA and NE in central fatigue. In this sub-section, we examine their work
255 and begin with a summary of their reviews into the effects of acute exercise on brain
256 concentrations of 5-HT, DA and NE in animals.

257 In a recent article, McMorris et al. (2016) summarized Meeusen and colleagues reviews
258 of animal studies (Meeusen et al., 2001; Meeusen & De Meirleir, 1995) as demonstrating
259 increased DA concentrations, particularly in the brainstem and hypothalamus, during and
260 immediately following acute exercise. Moreover, recent research has supported these results by
261 showing increased DA concentrations in the hypothalamus (Kitaoka et al., 2010) and
262 hippocampus (Goekint et al., 2012). Perhaps more importantly, Meeusen and colleagues
263 demonstrated increased concentrations of DOPAC and HVA, particularly in the brainstem and

264 hypothalamus. However, they found that the effect of acute exercise on whole brain
265 concentrations of NE in animals has shown either a decrease or no significant effect. On the
266 other hand, Kitaoka et al. (2010) demonstrated increased NE concentrations in the hypothalamus,
267 but Goekint et al. (2012) found no significant effect on NE concentrations in the hippocampus.
268 However, Meeusen's reviews showed that animal studies have demonstrated increases in brain
269 concentrations of the NE metabolite 3-methoxy 4-hydroxyphenylglycol (MHPG) in most brain
270 regions. One can conclude that acute exercise does induce increased turnover of DA and NE in
271 the brain, but with some regional variations.

272 The studies reviewed, however, were in sub-maximal intensity exercise, while our
273 interest is in the effects of exhaustion. We have seen evidence for increases of DA and its
274 metabolites at exhaustion in some brain regions in the previous sub-section, so here we will
275 examine research into concentrations of NE at exhaustion. Only five studies have examined this
276 (Barchas & Freedman, 1963; Blomstrand et al., 1989; Cicardo et al., 1986; Hasegawa et al.,
277 2008; Moore & Lariviere, 1964). Where drugs were used in these studies, we report only the
278 results for the placebo groups. In two of the experiments (Barchas & Freedman, 1963; Cicardo et
279 al., 1986), whole brain concentrations of NE were decreased in the heat (23° C) but not at a
280 moderate temperature (15° C). Moore and Lariviere (1964) showed significant decreases of NE
281 in the heat (23° C and 37° C), however they did not examine effects in moderate temperatures.
282 Blomstrand et al. (1989) found increased concentrations of NE in the striatum of mice but not in
283 the brainstem, hypothalamus and hippocampus. Although not statistically comparing rest to
284 exhaustion, Hasegawa et al. (2008) showed that NE concentrations in the hypothalamus at
285 exhaustion were similar to those at rest, in a moderate temperature (18° C). MHPG was not
286 measured in any of the studies, so it is difficult to comment on turnover, although Cicardo et al.

287 believed that their results were due to increased turnover. Given the limited research outlined
288 above, we need to examine the neurochemistry literature on the interaction between 5-HT and
289 NE, before we can discuss the possibilities of exercise-induced increases in 5-HT brain
290 concentrations resulting in depletion of brain NE.

291 The processes by which 5-HT affects NE release are very similar to those affecting DA
292 release. 5-HT_{1A} receptors have been shown to stimulate NE release particularly in the
293 hippocampus (Done & Sharp, 1994; Hajo's-Korcsok & Sharp, 1996), frontal cortex (Hajo's-
294 Korcsok & Sharp, 1996), hypothalamus (Suzuki et al., 1995), and VTA (Chen & Reith, 1995). 5-
295 HT_{1A} receptors are probably located at the presynaptic terminals of GABAergic neurons
296 (Katsurabayashi et al., 2003). They are coupled to G_i/G_o GTP-binding proteins and inhibit
297 activation of the second messenger cAMP, thus inhibiting GABA release. As GABA is an
298 inhibitor, this has the net effect of increasing NE release. 5-HT_{2C} receptors have an indirect
299 inhibitory effect on NE release particularly in the PFC and locus coeruleus (LC). They are
300 probably localized on inhibitory GABAergic interneurons and so induce an indirect tonic
301 inhibitory control on NE release (Gobert et al., 2000). The effect of 5-HT_{2A} receptors is
302 somewhat questionable. Gobert et al. raised doubts about any effect at all, but Szabo and Blier
303 (2001) demonstrated an inhibitory effect on NE release from the LC. This, they argued, occurred
304 because although the 5-HT_{2A} receptors are excitatory, they are probably located on GABA
305 terminals, originating from the prepositus hyperglossi nucleus. The excitatory effect of the 5-
306 HT_{2A} neurons leads to an increase of the degree of activation of GABA_A receptors and thus a
307 decrease in NE neuron firing. However, a recent study of central and peripheral neuromuscular
308 function found that GABA_B receptors in the motor cortex were more directly linked with the
309 etiology of incremental peripheral and central fatigue (Goodall et al., 2018). Specifically, an

310 extended cortical silent period was evident with increasing peripheral fatigue, which is
311 associated with GABA_B activation, whereas an extended short-interval intracortical inhibition
312 ratio, a marker of GABA_A activation, did not occur. Long-lasting K⁺-dependent stimulation-
313 induced inhibitory postsynaptic potentials specific to GABA_B activation are thought to be
314 accountable for this result by contrast to the characteristic short-lasting Cl⁻-dependent response
315 of the GABA_A pathway (McCormick, 1992). Goodall et al. claimed that their results and those of
316 previous researchers strongly suggest that GABA_B receptors require a higher GABA
317 concentrations or longer exposure to GABA than do GABA_A receptors for activation. As we
318 saw in 2.1.1, GABA_B receptors inhibit DA activation (Santiago et al., 1995). Thus both DA and
319 NE can be indirectly inhibited by 5-HT₂ receptors. These data offer a plausible link between
320 peripheral and central neuromuscular fatigue, and cognitive fatigue. Nevertheless, given the
321 research outlined above, the situation with regard to exhaustion is far from clear. In order to
322 attempt to clarify the situation, below we examine the results of pharmacological studies in
323 humans.

324 2.1.3. Pharmacological studies in humans

325 Research examining the effects of DA and/or NE reuptake inhibitors or agonists, on time
326 to exhaustion in rodents, shows somewhat equivocal results (Gerald, 1978; Hasegawa et al.,
327 2008; Heyes et al., 1985; Kalinski et al., 2001). However, Roelands and Meeusen (2010) cast
328 some doubt on the strength of evidence with humans in temperate conditions. Administration of
329 5-HT reuptake inhibitors to humans has generally demonstrated no significant effect (Meeusen et
330 al., 2001, Parise et al., 2001; Piacentini et al., 2002; Strachan et al., 2004), while others have
331 shown time to exhaustion to be shortened (Davis et al., 1993 Wilson & Maughan, 1992).
332 Meeusen et al. (1997) demonstrated no significant effect of a 5-HT_{2C} antagonist on performance.

333 Moreover, DA reuptake inhibitors have tended to show no significant effect (Onus et al., 2016;
334 Piacentini et al., 2004; Roelands et al., 2008b; Watson et al., 2005), although a significant
335 increase in time to exhaustion was demonstrated in one study (Swart et al., 2009). Similarly, NE
336 reuptake inhibitors have shown no significant effect in some studies (Onus et al., 2016; Piacentini
337 et al., 2002; 2004; Watson et al., 2005) but significant negative effects have been demonstrated
338 in others (Klass et al., 2012; 2016; Roelands et al., 2008a). Notably the doses used in studies in
339 which a negative effect of NE reuptake was demonstrated were higher than in the other studies.
340 Jacobs and Bell (2004) administered the α_1 -adrenoceptor agonist modafinil and demonstrated a
341 significant increase in time to exhaustion. Although this appears to contradict the findings
342 reported above, it probably does not. Modafinil is thought also to inhibit GABA release in the
343 cerebral cortex, which indirectly results in increased DA levels (Ferraro et al. 1996). We should
344 note that the results, which we outline above, are all from studies undertaken in temperate
345 conditions. Studies examining performance in the heat (30 ° C) have provided different results.

346 DA and DA/NE reuptake inhibitors induced improved behavioral performance in two
347 studies (Roelands et al., 2008b; Watson et al., 2005) but not in a third (Onus et al., 2016).
348 However, in all three studies, thermoregulation was negatively affected by the DA/NE agonists
349 without a negative effect on exercise performance. The authors argued that motivation would
350 appear to have been significantly, positively affected by increased DA and NE uptake and
351 therefore able to overcome the desire to stop exercising. This is a logical conclusion given the
352 nature of the study designs. Interestingly, Onus et al. also presented evidence to show that in the
353 cooler condition, the drugs acted peripherally to alter the twitch characteristics of skeletal
354 muscle. The authors claimed that this latter factor could explain the lack of improvements shown
355 for DA/NE agonists in the temperate conditions in their and other studies. Contrary to these

356 results, the NE reuptake inhibitor reboxetine induced a decrement in outcome performance in the
357 heat (Roelands et al., 2008a). It is possible that high concentrations of NE in the ventromedial
358 (VM) PFC and ACC resulted in tonic firing of LC-NE neurons, which reduces drive to continue
359 the present activity and search for alternatives (Aston-Jones & Cohen, 2005: see 2.1.4 and 4.1.1
360 for discussion of the effects of tonic versus phasic firing of NE neurons).

361 2.1.4. Issues with monoamine hypotheses

362 Roelands and Meeusen (2016) stated that the serotonin theory alone can not explain
363 central fatigue but probably plays a large part in it. There is some evidence from
364 pharmacological studies and from the neurochemical literature concerning the interaction
365 between 5-HT neurons and catecholamines release to support the notion that 5-HT, DA and NE
366 do, in fact, interact with one another but the interactions depend on which 5-HT receptors are
367 involved, the regions of the brain in which they are found and more importantly their specific
368 location on GABAergic or glutamergic neurons. Thus, the interactions are complex and are also
369 affected by DA and NE interactions with one another and interactions between catecholamines
370 and the Hypothalamic-Pituitary-Adrenal (HPA) axis hormones. However, we begin our critique
371 by commentating on some much more fundamental issues concerning the interaction between
372 acute exercise and brain catecholamines concentrations.

373 The basic premise of serotonin theory is that exercise induces increased brain
374 concentration of 5-HT and these inhibit the release of DA and NE in the brain (Meeusen et al.,
375 2006). This is seen as being important because the catecholamines neurotransmitters are vital in
376 the whole process of motor control from the decision to act, and the on-line control of that action
377 through to and including the decision to stop (central fatigue itself). Inhibition of DA and NE
378 during this process is seen as being negative and leading to early fatigue. As we have seen above,

379 the inhibitory effects of 5-HT on catecholamines release are probably not as great as originally
380 thought, which may explain why the serotonin theory is not the definitive answer to central
381 fatigue. However, two fundamental issues with regard to the roles of brain catecholamines
382 concentrations have been ignored in the development of this theory. Firstly, exercise per se
383 induces increased brain concentrations of catecholamines (see McMorris 2016); and secondly,
384 catecholamines tend to have an inverted-U effect on control of brain activity particularly in the
385 PFC (Arnsten, 2011; Cools & D'Esposito, 2011).

386 The idea that acute exercise induces increased brain catecholamines concentrations was
387 originally based on the argument that although catecholamines do not readily cross the blood-
388 brain barrier, if circulating concentrations were high, the blood-brain barrier would be
389 compromised (Cooper, 1973). This was supported by the research of Samorajski and Marks
390 (1962), who found that in mice, high concentrations of catecholamines were able to cross the
391 blood-brain barrier in the median eminence at the base of the hypothalamus and in the anterior
392 pituitary gland. More recently, it has been shown that peripherally circulating Epi and NE
393 activate β -adrenoceptor chemoreceptors on the vagus nerve. The excitatory neurotransmitter
394 glutamate mediates synaptic communication between the vagal afferents and the nucleus tractus
395 solitarius (NTS), allowing noradrenergic cells in the NTS, which project to the LC, to stimulate
396 NE synthesis and release to other parts of the brain (Miyashita & Williams, 2006). It was thought
397 that this would occur following the lactate threshold (LT), which marks the beginning of an
398 exponential rise in peripheral blood lactate concentrations (Podolin et al., 1991) and hence
399 significant increases in circulating Epi and NE. Indeed, Soya and associates (Ohiwa et al., 2006;
400 Soya et al., 2007), experimenting with rodents, have shown that acute exercise above LT induces
401 c-Fos expression, which is indicative of neuronal activity, in what Dahlstroem and Fuxe (1964)

402 termed the A1 and A2 noradrenergic neurons in the NTS. Moreover, Ohiwa et al. also
403 demonstrated that exercise below LT can induce similar changes. Activation of the NTS at sub-
404 LT intensities is extremely unlikely to have been the result of circulating plasma catecholamines
405 activating β -adrenoceptors on the vagus nerve. However, afferent signals from
406 mechanoreceptors, or more accurately stretch receptors, in the heart and lungs, are fed back to
407 the NTS via the vagus nerve (Berthoud & Neuhuber, 2000; Moor et al., 2005; Mravec, 2006).
408 Similarly, arterial baroreceptors provide feedback, concerning blood pressure, to the NTS via the
409 glossopharyngeal and vagus nerves (Kougias et al., 2010). Heart rate, tidal volume and blood
410 pressure begin to increase immediately that exercise begins (Watson, 1974), and the feedback
411 allows the hypothalamus to initiate activation of the sympathoadrenal system, culminating in the
412 synthesis and release of catecholamines, in anticipation of increased exercise intensity (Mason et
413 al., 1973; McMorris et al., 2009). Thus, it is not surprising to see c-Fos expression in A1 and A2
414 neurons in the NTS even prior to the LT.

415 Rodent studies have also shown that acute exercise induces c-Fos expression in
416 adrenergic C1 neurons in the rostral ventrolateral medulla (Abbott et al., 2013; Barna et al.,
417 2012). C1 neurons project to the LC (Abbott et al., 2012; Guyenet et al., 2013) and are the most
418 likely to establish glutamergic synapses with the LC, although A1 and A2 neurons also innervate
419 the LC (Holloway et al., 2013; Rinaman, 2011). C1, A1 and A2 neurons also have an indirect
420 effect on the LC via projections to the hypothalamus (Guyenet et al., 2013; Rinaman, 2011),
421 which in turn projects to the LC (Aston-Jones et al., 1986), the main source of NE in the brain.

422 A1, A2, A5 and A6 or LC neurons also project to the VTA (Mejías-Aponte et al., 2009),
423 where they activate α_1 -adrenoceptors. Grenhoff and associates (Grenhoff, & Svensson, 1993;
424 Grenhoff et al., 1993) have shown that stimulation of the α_1 -adrenoceptors by NE release from

425 the LC potentiates the firing of DA neurons in the VTA. This is probably due to α_1 -adrenoceptor
426 activation inducing enhanced glutamate release, which affects the excitability of DA neurons
427 (Velásquez-Martinez et al., 2012). Also, these noradrenergic neurons, along with the adrenergic
428 C1 neurons, project to the retrorubral field (RRF) in the reticular formation and stimulate DA
429 activation there (Rinaman, 2011). The VTA and RRF have projections to the PFC.

430 Given the literature outlined above, it is not surprising to find rodent studies
431 demonstrating exercise-induced increases in brain catecholamines and their metabolites
432 (Meeusen & De Meirleir, 1995; Meeusen et al., 1997; 2001) and this will undoubtedly reduce the
433 effects of 5-HT inhibition of DA and NE release in the brain. Research into serotonin theory has
434 been based on the hypothesis that 5-HT inhibition of DA and NE release would have a negative
435 effect on brain activity, however there is much evidence to show that the catecholamines
436 neurotransmitters affect brain activity in an inverted-U manner (Arnsten, 2011; Clatworthy et al.,
437 2009; Cools & D'Esposito, 2011), which may well mean that 5-HT inhibition of DA and NE
438 concentrations may, in fact, be beneficial to the brain by helping maintain optimal levels of
439 catecholamines. Below, we outline the mechanisms by which catecholamines and their receptors
440 induce an inverted-U effect and return to how this might affect central fatigue in 4.1.1.

441 The roles of DA and NE, and their receptors have been extensively examined in the PFC
442 and it is this region that provides the largest evidence for an inverted-U effect. The dopaminergic
443 D_1 -receptor is common in the PFC. D_1 -receptors couple to G_s and G_{olf} GTP-binding proteins and
444 stimulate cAMP activation, which amplifies the effects of neuronal activity. When DA
445 concentrations are moderate, D_1 -receptors dampen neural 'noise' by increasing GABAergic
446 interneuron release which inhibits firing to non-preferred stimuli (Gorelova et al., 2002).
447 Similarly, when NE concentrations are moderate, the high affinity α_{2A} -adrenoceptors are

448 activated. These are coupled to Gi/Go proteins and activation inhibits adenylyl cyclase activity,
449 and closes hyperpolarization-activated cyclic nucleotide-gated (HCN) channels, which increases
450 the strength of neural signaling in the preferred direction, i.e. enhances the strength of the signal
451 (Wang et al., 2007). Hence D₁-receptors and α_{2A} -adrenoceptors working together strengthen the
452 signal to noise ratio. However, as catecholamines concentrations increase to levels thought to be
453 found in an individual reaching exercise-induced fatigue, the position changes because during
454 exercise high concentrations of NE are thought to activate the lower affinity α_1 - and β -
455 adrenoceptors in the PFC (McMorris, 2016). α_1 -adrenoceptors are coupled to Gq/G₁₁ proteins
456 which activate phospholipase C, causing increased Ca⁺ release and protein kinase A activity in
457 the cell. This inhibits intracellular signaling. β -adrenoceptors are coupled with G_s proteins which
458 increase cAMP activity resulting in the activation of protein kinase A and the dampening of
459 neuronal activity. There is also increased activation of D₁-receptors which increases cAMP
460 activation. Arnsten (2009; 2011) claimed that high levels of cAMP opens HCN channels
461 throughout the dendrite, thus weakening network inputs from all directions. This would mean
462 that the efficiency of the PFC is greatly diminished.

463 Moreover, DA and NE neurons both exhibit two different types of firing, tonic and
464 phasic. In DA neurons, interaction between tonic and phasic discharge affects the PFC, and other
465 brain regions, in an inverted-U manner. Phasic activation occurs during moderate tonic firing and
466 is stimulated by salient stimuli. It is inhibited by faster tonic firing. (Bromberg-Martin et al.,
467 2010). The situation is similar with NE neurons. Tonic rates largely fluctuate according to
468 arousal levels and behavioral states. Phasic bursts are triggered by bottom-up input
469 mechanisms involving novel/salient sensory stimuli and top-down decision-making processes

470 (Devilbiss & Waterhouse, 2011). Phasic firing is most common during moderate tonic discharge
471 and is inhibited by fast tonic discharge (see 4.1.1 for more detail).

472 The situation is exacerbated by the fact that heavy and long-duration, moderate intensity
473 exercise stimulate the synthesis and release of the HPA hormone cortisol (corticosterone in
474 animals). It is generally thought that exercise needs to be $\geq 80\%$ maximum volume of oxygen
475 uptake ($\dot{V}O_{2MAX}$) (De Vries et al., 2000; Hill et al., 2008; McMorris et al., 2009) or to be of at
476 least 45 mins in duration (Bridge et al., 2003; Jacks et al., 2002; Shojaei et al., 2011) to affect
477 plasma and salivary concentrations of cortisol. Cortisol and corticosterone readily cross the
478 blood-brain barrier and rodent studies have shown evidence of acute exercise-induced increases
479 in corticotropin releasing factor (CRF) mRNA expression in the paraventricular neurons (PVN)
480 of the hypothalamus (Hand et al., 2002; Jiang et al., 2004; Kawashima et al., 2004; Timofeeva et
481 al., 2003; Yanagita et al., 2007). Synthesis and release of CRF is the first stage in the synthesis of
482 cortisol/corticosterone. CRF receptors are found on LC neurons (Van Bockstaele et al., 1996)
483 and this results in increased NE release in the PFC (Höglund et al., 2000). Also, glucocorticoids
484 block the transporters on glia that normally remove catecholamines from the extracellular space
485 (Pruessner et al., 2004). Thus, increased HPA activity can increase NE synthesis and release.

486 Other regions of the brain also show an inverted-U effect of catecholamines activation.
487 Research into the effect of DA on activation of neurons in the striatum demonstrated that
488 pharmacological or iontophoretic administration of DA had a positive effect on human and non-
489 human animals who had low levels of DA at baseline but had a negative effect on those with
490 high levels at baseline (Clatworthy et al., 2009, Vytacil et al., 2014). Unlike with the PFC, where
491 D_1 -receptors are mostly involved, in the striatum the main effect is on D_2 -receptors, which are
492 coupled to G_i/G_o GTP-binding proteins and inhibit adenylyl cyclase activity. The nature of the

493 neural discharge, tonic or phasic also affects striatum efficiency particularly when concerning
494 motivation (Seamans & Yang, 2004)

495 An inverted-U effect was also shown in the ventroposterior medial thalamus and
496 somatosensory cortex (Devilbiss & Waterhouse, 2004; Devilbiss, Page & Waterhouse, 2006),
497 however the inverted-U effect is not always demonstrated in these regions. It is thought that in
498 these regions, facilitation of excitatory responses is mainly mediated by α_1 -adrenoceptors, while
499 suppression of evoked-activity is likely a result of NE acting on postsynaptic α_2 - or β -
500 adrenoceptors (Devilbiss & Waterhouse, 2011). However, CRF can induce tonic firing of LC-NE
501 neurons, which results in suppression of signal transmission within the somatosensory thalamus
502 and cortex (Devilbiss et al., 2012) and this appears to reduce detectability of low-intensity
503 stimuli without affecting high-intensity stimuli (Devilbiss & Waterhouse, 2002; Moore, 2004).
504 Arnsten (2011) claimed that this allowed for quick and accurate detection of stimuli which
505 indicate danger.

506 Although we believe that the failure to take into account the inverted-U effect of
507 catecholamines in the brain, the role of differing monoamine receptors and the tonic versus
508 phasic firing of DA and NE neurons is a weakness in the neurochemical theories, we must
509 acknowledge that evidence for heavy or long-duration, moderate intensity exercise having the
510 same effect on humans as the stress imposed on rodents, during heavy exhausting exercise, is
511 weak. The fact that several authors (Onus et al., 2016; Piacentini et al., 2004; Roelands et al.,
512 2008b; Watson et al., 2005) showed that in temperate conditions, DA reuptake inhibitors did not
513 affect performance and that NE reuptake inhibitors only had an effect when the dose was very
514 high (Roelands et al., 2008a), strongly suggests that maximal intensity exercise in humans does
515 not have the same effects on brain catecholamines as that shown in rodents. This is probably

516 because the rodents need to be forced to exercise at these intensities. Even in sub-maximal
517 exercise with rodents, this has been shown to result in higher concentrations of brain CRF and
518 corticosterone in forced exercise compared to voluntary exercise (Droste et al., 2008).
519 Furthermore, research with animals has shown that in extreme stress, the PFC is taken off-line
520 (Arnsten, 2011), probably due to D₁-receptors, α_1 - and β -adrenoceptors dampening all neural
521 activity in the PFC. If this occurred in humans, central fatigue would not be under PFC control.
522 Moreover, research examining the effect of acute exercise on cognition, while showing optimal
523 effects during moderate intensity exercise, supplies only limited support for a deterioration in
524 central executive activity, which is dependent on PFC activation, and certainly does not show a
525 complete shut-down as stress studies with rodents suggest (McMorris & Hale, 2012). This is
526 important because the proponents of psychophysiological theories of central fatigue claim that
527 the PFC is key to perception of effort and fatigue, and the decision to abort activity (Noakes et
528 al., 2004; Marcora et al., 2009). This could only occur if catecholamines concentrations at
529 exhaustion were at or just over the top of the inverted-U.

530 To summarize this critique, we can say that there is some support for an interaction
531 between 5-HT, catecholamines and HPA hormones during exercise, and that this may be
532 involved in central fatigue. However, alone it most definitely does not provide strong evidence of
533 being the major influence. therefore in the next section, we examine the literature on the major
534 psychophysiological or psychobiological theories of central fatigue.

535

536 **3. Psychophysiological theories**

537 *3.1. 'Central governor' theory*

538 In this sub-section, we examine a theory based in psychophysiology. Noakes and
539 colleagues (Noakes, 2012; Noakes et al., 2004; St. Clair Gibson et al., 2006) have developed
540 what has become known as the ‘central governor’ or ‘central integrative’ theory. Founded on the
541 writings of the nineteenth century Italian physiologist, Angelo Mosso (see Di Giulio et al., 2006;
542 Noakes, 2012) as well as the Nobel Prize winning physiologist A. V. Hill (Noakes & Marino,
543 2009), they claim that the organism attempts to maintain homeostasis, even during exercise, in
544 order to self-protect. During exercise, there is great danger of homeostasis being violated. The
545 physiological needs during exercise, if not checked, could damage the organism, therefore the
546 brain terminates, or regulates, the activity before homeostasis is threatened (Noakes & Marino,
547 2009; Noakes, 2012). Indeed, there are empirical data consistent with this assertion. For instance,
548 Kay et al. (2000) have shown that when participants were instructed to perform a 1 minute
549 maximal sprint at 10 minute intervals during 60 minutes of self-paced cycling in a hot-humid
550 environment, power output and the integrated electromyography signal were reduced in sprints
551 2-5, compared to sprint 1. However, during the final sprint, participants were able to return their
552 power output and the associated integrated electromyography signal to near baseline (sprint 1)
553 values. These data were interpreted as indicating that efferent drive was subconsciously
554 controlled in a manner that maintained a ‘muscle reserve’ during sprints 2-5, which the
555 participants were able to utilize during the final sprint as part of a regulatory process which
556 served to prevent premature fatigue or physiological damage. Likewise, Amann et al. (2006)
557 demonstrated that 5 km cycling time trial performance was impaired with hypoxia and improved
558 with hyperoxia, relative to normoxia, yet peripheral (quadriceps) fatigue was not different
559 between the conditions. This was interpreted as indicating that the locomotor muscle output is

560 determined to a significant extent by the regulation of central motor output to the working
561 muscle, in order that peripheral muscle fatigue does not exceed a critical threshold.

562 In examining how this might occur, Noakes and colleagues (Noakes, 2012; Noakes &
563 Marino, 2009; Noakes et al., 2004; St. Clair Gibson et al., 2006) have drawn heavily on Ulmer's
564 (1996) teleo-anticipation theory of psychophysiological feedback. According to Ulmer, efferent
565 signals feedforward to the spinal cord and muscles to initiate action. In turn, afferent signals
566 from the periphery feedback to a central 'black box' programmer or central governor, which
567 modifies the efferent commands. The programmer, however, does not simply compare the initial
568 efferent feedforward with the afferent feedback, but takes into account the expected end-point of
569 the exercise, past experience of similar activity, fitness level, nutritional status, arousal level and
570 many other aspects even motivation levels (Lambert et al., 2005). Thus the individual can teleo-
571 anticipate the necessary changes to be made to the efferent commands. Noakes and colleagues
572 make many references to the importance of knowledge of the end-point of the exercise or the
573 ability to predict the likely end-point (Lambert et al., 2005; Noakes, 2012; Noakes et al., 2004).
574 This appears to be very important for teleo-anticipation but it does not, however, explain why the
575 individual terminates exercise at any given point, this is thought to depend on the person's
576 perception of fatigue.

577 St. Clair Gibson et al. (2003) saw fatigue as being a conscious sensation (perception is
578 probably terminologically more accurate than the word "sensation") rather than a physiological
579 occurrence. As we saw in the previous paragraph, during exercise afferent feedback is
580 continuously available to the central governor, allowing for changes to be made to the efferent
581 command. St. Clair Gibson and Noakes (2004) argued that although this process takes place at a
582 sub-conscious level, "the subconscious brain informs the conscious brain of an increasing neural

583 effort” (p. 801) as the individual experiences difficulty in maintaining homeostasis at the given
584 intensity. The brain is thought to interpret this as an “increased sensation of fatigue” (p. 801).
585 The central governor uses this information and other feedback including motivation level, to
586 produce a “homoeostatically (*sic*) acceptable exercise intensity” (p. 797). The calculation is
587 guided by knowledge of the end-point of the exercise. If the end-point is not known, the person
588 must draw on past experience and afferent feedback to teleo-anticipate the required output.
589 Interestingly, St. Clair Gibson et al. (2003) draw on the theory of Damasio (1993) from which
590 Craig (2002) developed his interoception model. More pertinently, Rauch et al. (2005) drew on
591 the neuroanatomy aspects of Craig’s (2002) interoception theory to propose a mechanism
592 involving feedback from type III and IV afferents to the insula cortex via the lamina I
593 spinothalamocortical pathway. Furthermore, they claimed that projections from the insula to the
594 PFC may be used to determine whether to continue at the current pace or to make alterations.
595 Others (Hilty et al., 2011a; 2011b; Robertson & Marino, 2016) also supported the notion of
596 feedback from lamina I afferents via the spinothalamocortical pathway to the insula as being a
597 potential source of information concerning perception of effort and fatigue (see section 4 for
598 more detail).

599 *3.2. Marcora’s psychobiological theory*

600 Disagreement with the claims concerning the role of afferent feedback, posited by
601 proponents of the central governor/integrative theory, led Marcora et al. (2009) to propose an
602 alternative theory which they called psychobiological theory. However, as we will see in this
603 sub-section, there are many similarities between the theories, a point accepted by Pageaux et al.
604 (2014). According to psychobiological theory, there are five key factors involved in central
605 fatigue: “1) Perception of effort; 2) Potential motivation; 3) Knowledge of the distance to cover;

606 4) Knowledge of the distance covered/remaining; 5) Previous experience/memory of perceived
607 exertion during exercise of varying intensity and duration” (Marcora, 2010, pp. 454-455). While
608 perception of effort is seen as vital by both groups, Marcora’s notion of this factor is very
609 different to that of Noakes (2012). Marcora et al. (2009) saw perception of effort as depending
610 not on feedback but rather on corollary discharge, the expected sensory consequences of
611 performing the movement correctly, which is fed forward to the sensory regions of the brain. As
612 the individual tires or for some reason the task becomes more difficult, e.g. running uphill,
613 efferent commands need to be altered in order to meet the demands of the task. The increased
614 effort is consciously detected by the individual but any decisions, as to what to do, are dependent
615 on the other four factors.

616 Marcora (2010) used the term “potential motivation”, rather than simply motivation, as it
617 refers to the amount of effort that the individual is willing to exert in order to be successful in the
618 task. Not surprisingly, it depends on a whole range of factors that determine motive strength at
619 any given point in time. Potential motivation will interact with knowledge of the distance to
620 cover, knowledge of the distance covered/remaining and previous experience/memory of
621 perceived exertion during exercise of varying intensities and durations, in order to decide
622 whether to attempt to continue with the activity or to terminate it. However, it is thought that at
623 this stage, there is conflict between competing responses, i.e. to stop or continue exercising
624 (Pageaux et al. 2014). Several authors (Marcora, 2009 Pageaux et al., 2014; 2015) have argued
625 that this requires activation of the pre-SMA and ACC, and these brain areas have been shown to
626 be activated during exercise.

627 *3.3. Summary of the similarities and differences between the psychophysiological theories*

628 Both theories are in agreement that corollary discharge plays a major role in controlling
629 activity and that it is responsible for setting the initial parameters with regard to expected sensory
630 consequences. To the proponents of the central governor theory (Noakes, 2012; Noakes et al.,
631 2004), afferent feedback provides the brain with the necessary information to be aware when the
632 task is getting difficult. To Marcora (2009), perception of effort is the “conscious awareness of
633 the central motor commands to the locomotor and respiratory muscles” (p. 2061). Marcora does
634 not deny that afferent feedback plays roles in a variety of physiological and perceptual responses,
635 but denies that it has a role in perception of effort. However, there is a great deal of agreement
636 concerning the factors taken into account to determine whether to continue or to terminate
637 activity. Both groups agree that motivation is a key issue and that factors such as distance to be
638 covered and past experience of similar activities are also important in decision making. There is
639 also agreement that when the decision stage is reached, there is conflict between the “stop” and
640 the “continue” responses. There is also some agreement on which brain regions are involved in
641 this decision.

642 Proponents of the central governor theory have cited the insula cortex (Hilty et al., 2011a;
643 Noakes, 2012; Williamson et al., 1999), the ventromedial (VM)PFC including the medial
644 orbitofrontal cortex, the lateral (L)PFC, ACC, PMC, SMA and cerebellum (Hilty et al., 2011a;
645 Mehta et al., 2009; Noakes, 2012; Robertson & Marino; St. Clair Gibson et al., 2003) as
646 interacting with one another to provide information to the central governor to decide whether to
647 continue or stop. Whether it is this interaction that constitutes the central governor or one of
648 these regions acts as the central governor is yet to be decided. Similarly, supporters of Marcora’s
649 psychobiological theory cite the ACC (Marcora, 2009; Marcora et al., 2009; Pageaux et al.,
650 2014; 2015) and insula cortex (Marcora, 2009) but also the pre-SMA (Marcora, 2009 Pageaux et

651 al., 2014; 2015) as key to determine whether to continue or abort the exercise. The main
652 concerns with brain regions in this theory appear to be the roles of these regions in response
653 conflict.

654

655 **4. Toward an interoceptive model of central fatigue.**

656 In sections 2 and 3, we have outlined and critiqued the major neurochemical and
657 psychobiological theories of central fatigue. While we acknowledge that these theories have
658 played a major part in our understanding of this phenomenon, we believe that there are
659 weaknesses that need to be addressed. The neurochemical theories have failed to take into
660 account the differing properties of neuroreceptors and the roles of tonic versus phasic release of
661 DA from the SNc and VTA, and NE from the LC. The inverted-U effect of catecholamines
662 concentrations in the brain have also been ignored but, in fact, may not be as much of a problem
663 as one might think (this is discussed in 4.1.1). The psychobiological theories highlight the role of
664 corollary discharge from M1 but disagree regarding the roles of feedback to the somatosensory
665 cortex. Nevertheless, they agree on the importance of perception of effort and also motivation.
666 Given these issues, we propose a more holistic model based on Craig's (2000) interoception
667 theory, which is dependent on feedback from the whole body concerning homeostasis, muscular
668 activity, emotion and motivation. Moreover, we emphasize the interaction between exercise-
669 induced increases and motivational increases in DA and NE, and the brain regions involved in
670 decision making with regard to central fatigue.

671 *4.1. Interoception and central fatigue*

672 Sherrington (1948) saw interoception as being the perception of the physiological
673 condition of the viscera but more recently it has been re-defined as the perception of "the

674 physiological condition of the entire body” (Craig, 2002, p. 655). These feelings have not only a
675 sensory, but also an affective, motivational aspect (Bubic et al., 2010; Craig, 2002). The
676 motivation to undertake exercise is thought to be controlled largely by the DLPFC (Spielberg et
677 al. 2012) but with input from other frontal regions, particularly the VMPFC (Szatkowska et al.,
678 2008) and ACC (Kounheir et al., 2009). We should, however, remember that the default
679 mechanism in humans is to maintain homeostasis, which may result in aborting an action sooner
680 rather than later. The DLPFC also controls initial top down strategies for achieving the goal
681 (Spielberg et al., 2012) and feeds forward a prediction of the expected sensory feedback to the
682 insula cortex (Craig, 2002). During exercise, we believe that the predicted interoceptive feedback
683 will depend on past experience of similar physical activity, the individual’s perception of their
684 current fitness level, the subjective interpretations of the importance of the activity and whether
685 or not the person believes that their actions will be assessed or evaluated by significant others.
686 Directly competing against others is also most likely to affect the interoceptive predictions. One
687 would expect that the predictions will differ in competitive situations. Also, in training when the
688 individual is attempting to improve performance levels, predictions will have to change if the
689 individual is to move forward. Furthermore, the predictions will be influenced by the
690 individual’s long-term goals, personality, and physical and social development (see Figure 2).

691 *Insert Figure 2 about here*

692 Based on interoception theory, the individual will make prediction errors even when they
693 have a large amount of experience of the task. As with corollary discharge in the cortico-BG-
694 thalamo-cerebellum pathway, the situation can not be predicted perfectly, therefore there has to
695 be continuous processing of afferent feedback (Craig, 2002). However, the interoceptive
696 feedback pathway (see Figure 3) is very different to the somatosensory pathway although it does

697 receive input from the somatosensory system. The situation when the person has no or very
698 limited previous experience of the same or similar tasks, as in increasing distance or time during
699 training, raises an issue for making predictions. The prediction errors would be great in initial
700 trials at a new distance or speed but Paterson and Marino (2004) showed that the individual can
701 comparatively quickly establish an “exertion template”, which is altered “on-line” in subsequent
702 trials and over time refined by the person.

703 *Insert Figure 3 about here*

704 The interoceptive feedback pathway begins in the spinal cord. During exercise, the
705 lamina I lateral spinothalamocortical pathway is activated. Small-diameter A δ - and C-type
706 primary afferent fibers, which sense the physiological condition of all tissues of the body and
707 terminate in lamina I of the spinal and trigeminal dorsal horns, relay afferent information in the
708 lateral spinothalamic tract to the main homeostatic integration sites in the brainstem. The latter
709 include regions that also receive vagal and glossopharyngeal afferent feedback via the NTS. The
710 feedback includes information concerning a wide variety of physiological conditions, e. g.
711 temperature, mechanical stress, blood pressure, acidic pH, hypoxia, hypercapnia, hypoglycemia
712 and osmolarity (Craig, 2002, 2015). Both the lamina I lateral spinothalamic and NTS
713 medullothalamic axons terminate in the posterior and basal parts of the ventral medial nucleus of
714 the thalamus (VMpo and VMb respectively) often described as the VMpo + VMb. The VMpo +
715 VMb projects to the insula cortex but before discussing the very important implications of this
716 projection, we should point out two important factors that we have not yet mentioned. Many of
717 the brainstem sites that receive lamina I and NTS inputs provide descending control of the
718 autonomic nervous system and are heavily involved in control of homeostasis. Indeed, Craig
719 (2015) claims that lamina I and NTS connections indicate that their primary function is to

720 provide sensory input to the autonomic, preautonomic and homeostatic cell groups of the spinal
721 cord and brainstem in order to maintain the health of the body. As part of this process, lamina I
722 and NTS axons terminate on regions of the brainstem which contain concentrations of adrenergic
723 and noradrenergic cells, particularly A1-A2 and A5-A7. As we saw in sub-section 2.1.4,
724 activation of these cells can lead to increased NE release from the LC (Holloway et al., 2013;
725 Rinaman, 2011) but also indirectly increased DA release from the SNc and VTA (Grenhoff, &
726 Svensson, 1993; Grenhoff et al., 1993). We also know that exercise increases activity of these
727 cell groups (Ohiwa et al., 2006; Soya et al., 2007).

728 Returning to the VMpo +VMb projection to the insula cortex, the afferent information is
729 mapped firstly in the contralateral anterior insula cortex (AIC) and then, by way of a callosal
730 pathway, a lateralized, second-order re-representation is made on the right AIC. This becomes
731 consciously accessible, allowing the individual to make a subjective, affective perception of their
732 physiological and emotional state. The AIC also receives afferent input from the somatosensory
733 cortex (Gu et al. 2013). The AIC compares the interoceptive feedback with the top-down
734 predictions of interoceptive state, which it received from the DLPFC, in order to generate a
735 current awareness state (Gu et al., 2013). This is forwarded to the ACC, VMPFC and LPFC
736 (Craig, 2002).

737 It is generally thought that the AIC and ACC work in conjunction with one another
738 (Craig, 2002; Medford & Critchley, 2010). Craig described the insula as being a limbic-sensory
739 cortex, because of its association with visceral sensation, and the ACC as a limbic-motor cortex,
740 because of its association with autonomic and emotional control (Devinsky et al., 1995;
741 Mesulam & Mufson, 1982). Similarly, Medford and Critchley (2010) stated that the AIC is
742 responsible for the input and the ACC for the output components of interoception. This

743 interoceptive state is generated by the integrative functions of the AIC and then re-represented in
744 the ACC as a basis for the selection of and preparation for responses to inner or outer events
745 (Craig, 2002; 2015). The ACC is also part of the motivation/reward pathway and contains
746 neurons which are activated by positive motivation (Chudasama et al., 2013). We should note,
747 however, that ACC activation is also linked to aversive processing (Vogt, 2005; Johansen &
748 Fields, 2004).

749 The insula cortex and ACC have bidirectional projections with the VMPFC, which also
750 has connections with amygdala, striatum, and thalamus (Craig, 2002; Holroyd & Coles, 2002;
751 Singer et al., 2009; Williams & Goldman-Rakic, 1998). It is mainly involved in decision making
752 and motivation. It is seen as playing an important part in the maintenance of goal-directed
753 behavior. The VMPFC, particularly the region known as the orbitofrontal cortex which consists
754 of Brodmann's areas 10, 11 and 47 (Kringelbach, 2005), is thought to evaluate choice options
755 and encode outcome expectations (Schoenbaum et al., 2009). The VMPFC projects to the LPFC,
756 as do the insula cortex and ACC (Singer et al., 2009). The LPFC integrates the information
757 received from these regions, as well as information received from the somatosensory cortex via
758 the motor-somatosensory control system (see Figure 1), and is generally thought to be
759 responsible for making decisions concerning what action to take (Cole et al., 2013; Nee &
760 D'Esposito, 2016). These decisions are based on past experience and the motivational state of the
761 individual. Thus the LPFC has responsibility for continuing the action or stopping it. The LPFC
762 is well connected to the pre-SMA, SMA and PMC, which in turn inform M1 of the chosen
763 response. There is some disagreement as to the exact roles of the DLPFC and ventrolateral
764 (VL)PFC. Fehr and colleagues (Figner et al., 2010; Knoch & Fehr, 2007) claimed that the
765 DLPFC implements inhibition, while Aron et al. (2014) argued that the DLPFC determines task

766 rules or parameters, which we believe could set the level of interoceptive feedback that will
767 indicate the need to stop. In line with Aron et al., we believe that it is the right VLPFC via
768 projections to the pre-SMA, SMA and PMC that initiates the motor action of stopping. Writing
769 specifically about central fatigue, Robertson and Marino (2016) took the sensible option and
770 stated that it is the LPFC which controls the decision. Nee and D'Esposito (2016) provide
771 evidence to show that when actions are aborted, the hierarchical control in the PFC is led by
772 Brodmann's areas 45 and 46. Area 45 is in the VLPFC, while 46 is in the DLPFC, hence the use
773 of the encompassing term LPFC is very appropriate. However, the efficiency of this
774 interoceptive system is dependent on its interaction with the dopaminergic midbrain systems, the
775 SNc and VTA, and the LC-NE system, particularly with regard to motivation.

776 4.1.1. Catecholamines

777 Before and during exercise, feedforward from the DLPFC to the hypothalamus initiates
778 activation of the dopaminergic midbrain systems (Ballard et al., 2011; Bjorklund & Dunnett,
779 2007; Bromberg-Martin et al., 2010), although other brain regions receiving feedforward from
780 the DLPFC, such as the mPFC, also project to the VTA (Adell & Artigas, 2004). The
781 connections are bidirectional; and the ventromedial SNc and VTA project to the VMPFC,
782 DLPFC and ACC (Holroyd & Coles, 2002; Williams & Goldman-Rakic, 1998). The DA neurons
783 in these PFC regions carry out a number of very important functions with regard to motivation
784 and interoception. However motivation is also affected by DA neurons in the BG, which also
785 receive input from the SNc and VTA, particularly the dorsal striatum (Haber et al., 2000)
786 including the NAc (Assadi et al., 2009). DA neurons activated in the NAc core are crucial for
787 enabling motivation to overcome response costs such as physical effort; and for an enhancement
788 of general motivation (Cardinal, 2006; Ghods-Sharifi & Floresco, 2010).

789 However, the actions of DA in these regions and its interaction with NE and 5-HT
790 neurons mean that the effects are not straightforward. We have already seen in 2.1.2 that D₁-like
791 and D₂-like dopaminergic neurons are affected differently by activation due to different effects
792 on the second messenger and/or the location of the receptor with regard to GABAergic and
793 glutamergic neurons. However, Bromberg-Martin et al. (2010) have shown that the nature of
794 firing of the neurons also influences their effects. In a comprehensive review, they presented
795 evidence for DA neurons exhibiting two different types of firing, tonic and phasic. Tonic
796 discharge is controlled by a pacemaker conductance, which is a spontaneous, slow depolarizing
797 membrane current that maintains the basal activity state of the neurons (Grace & Bunney, 1983).
798 Phasic discharge, bursts of rapid firing of neurons, occurs in response to salient stimuli but the
799 amplitude of the response depends on the level of tonic activity (Belujon & Grace, 2015). The
800 more neurons that are firing during tonic discharge, the greater the phasic bursts, although not
801 always as increases in extracellular DA during tonic discharge can attenuate the phasic burst
802 firing-driven transient release (Floresco et al., 2003). This is likely to occur during high levels of
803 stress (Arnsten, 2011) and is related to the inverted-U effect. At low levels of stress, firing is
804 slow and tonic, which maintains the baseline level in downstream neural structures in order to
805 ensure normal functioning of the neural circuits. During moderate levels of stress, tonic firing is
806 at a moderate level and phasic bursts rapidly increase or decrease firing of DA neurons for 100-
807 500 ms. This causes large changes in DA concentrations downstream and these last for seconds
808 (Schultz, 1998; 2007). These phasic activations are triggered by reward prediction error. Waelti
809 et al. (2001) showed that during phasic bursts, DA neurons coded the prediction error, which
810 induced greater behavioral and neuronal learning than when predictions were as expected. This
811 may well account for training effects where one would expect greater prediction error as the

812 person moves into uncharted territory. During high levels of arousal or stress, tonic firing is
813 fast with little or no phasic bursts, which has a negative effect on neural activity. Bromberg-
814 Martin et al. (2010) also present evidence to show that one type of DA neurons encode
815 motivational value. These are excited by prediction of reward but inhibited by aversive events. A
816 second type of DA neurons encode motivational salience and are excited by both rewarding and
817 aversive events. According to Bromberg-Martin et al. (2010), motivational value coding neurons
818 project to the VMPFC, NAc shell and the dorsal striatum. Salience coding neurons are claimed
819 to project to the DLPFC and NAc core.

820 The effects of motivation are also dependent on NE synthesis and release primarily from
821 the LC, which receives direct or indirect input from the hypothalamus, ACC, VMPFC, amygdala
822 and NTS. With regard to motivation, it is most likely that top-down projections from the ACC
823 and VMPFC are important in initiating LC release of NE (Aston-Jones & Cohen, 2005). DLPFC
824 will also have an indirect effect via the hypothalamus. As with DA activity, the different families
825 of adrenoceptors affect activity differently due to effects on the second messenger and also the
826 type of neural firing, tonic or phasic. Tonic discharge is across a range of relatively slow rates
827 (0.1–5.0 Hz), which is stochastically determined. Tonic rates largely fluctuate according to
828 arousal levels and behavioral states. Basically it follows a linear pattern. Phasic discharge
829 consists of brief 10–20 Hz bursts of two to three action potentials that is often, but not always,
830 followed by a sustained suppression of spontaneous activity (200–500 ms) (Akaike, 1982). These
831 bursts are triggered by bottom-up input mechanisms involving novel/salient sensory stimuli and
832 top-down decision-making processes (Devilbiss & Waterhouse, 2011). Phasic activity appears to
833 be necessary for maintenance of goal-related action and occurs during moderate tonic activity
834 (Aston-Jones et al., 1999). Thus as with DA neurons, NE neurons are affected in an inverted-U

835 fashion with regard to goal maintenance (but see below). Moreover, research has shown that
836 whereas dopaminergic neurons appear to encode the expected reward and anticipate the effort
837 cost, noradrenergic neurons mobilize resources in order to energize the behavior necessary for
838 successful completion of the task (Bouret et al., 2012; Varazzani et al., 2015). Aston-Jones and
839 Cohen (2005) claim that the VMPFC and ACC, which project to the LC, initiate phasic bursts of
840 NE activation when goal directed behavior is determined to be effective but induce tonic activity
841 when the rewards are thought to be not worth the cost. So as we saw above, phasic activity
842 ensures an inverted-U effect on goal maintenance but tonic activation of NE is believed to be
843 facilitative of searching for alternative goals (Aston-Jones & Cohen, 2005; Usher et al., 1999)
844 when rewards are thought not to be cost worthy. With regard to exercise, we would expect that
845 when this point is reached, the VMPFC and ACC would feedback to the LPFC, which would
846 abort the exercise.

847 With regard to the inverted-U effect, the changes in tonic and phasic firing that Aston-
848 Jones and Cohen (2005) discuss are taking place in non-exercise situations. As we saw in 2.1.4,
849 during exercise, feedback from the glossopharyngeal- and vagal-NTS pathways results in
850 increased release of DA and NE in the PFC (Miyashita & Williams, 2006), thus there would be
851 increased extracellular DA, which has a negative effect on DA phasic firing, while high levels of
852 NE would induce tonic firing of NE neurons in the PFC. Such action would lead to a breakdown
853 in the efficiency of the PFC which would mean that it would not be able to control central
854 fatigue. The research of Roelands and colleagues (Onus et al., 2016; Piacentini et al., 2004;
855 Roelands et al., 2008b; Watson et al., 2005), who showed that DA reuptake inhibitors did not
856 negatively affect central aspects of fatigue and NE reuptake inhibitors did so only when doses
857 were very high (Klass et al., 2012; 2016; Onus et al., 2016; Piacentini et al., 2002; 2004;

858 Roelands et al., 2008a; Watson et al., 2005), strongly suggests that maximal intensity exercise is
859 not the same as high levels of stress. It would appear that at exhaustion, the concentrations of DA
860 and NE are probably beginning to rise, which would increase tonic release at the expense of
861 phasic firing of neurons. This would lead to the LPFC searching for alternatives to continuing the
862 exercise, probably leading to central fatigue.

863 4.1.2. Summary

864 To summarize: our hypothesis differs from previous theories in that it proposes a holistic
865 model which is based on corollary discharge to the insula cortex and feedback from the whole
866 body not just the exercising musculature. It also integrates the roles of brain catecholamines in
867 decision making concerning if and when to stop exercising. Furthermore, it involves the roles of
868 DA and NE in motivation but adds the importance of tonic versus phasic release of DA and NE
869 neurons, and how this impinges on the decisions to continue or stop exercising.

870

871 **5. Implications for chronic fatigue**

872 Several authors have suggested that chronic fatigue, as in chronic fatigue syndrome
873 (CFS) or multiple sclerosis (MS) or Parkinson's disease (PD) or similar diseases, is a form of
874 central fatigue (e.g. Dobryakova et al., 2015; Fukuda et al., 1994). Dobryakova et al. (2015), in
875 what they termed the dopamine imbalance hypothesis, claimed that chronic fatigue was
876 experienced because communication between the striatum and PFC was inhibited due to
877 disruptions in DA signaling between these regions. Unlike with acute central fatigue, they point
878 to low level concentrations of DA as being responsible for chronic fatigue. However, they also
879 highlight the inverted-U effect and suggest that high pharmacologically-induced concentrations
880 of DA may have a negative effect. Although they state that at present, there is no conclusive

881 evidence for high levels of DA to induce feelings of fatigue in individuals with CFS, MS, PD or
882 any other similar disease.

883 The research of Salamone and colleagues (e.g.; Salamone et al., 2003; 2012) examining
884 the effect of DA on motivation to pursue effort-related choice behavior suggests a possible role
885 for low levels of DA having a negative effect and possibly inducing feelings of fatigue,
886 particularly chronic fatigue. They showed that DA in the NAc is inhibited by high concentrations
887 of adenosine. In striatopallidal neurons, adenosine A_{2A} receptors are co-expressed with
888 dopamine D₂ receptors. When adenosine concentrations are increased, D₂ activation is decreased.
889 Moreover, striatal adenosine A₁ receptors have been shown to have an antagonistic effect on
890 dopamine D₁ receptors (Shen & Chen, 2009). This occurs due to receptor-receptor crosstalk and
891 interactions at the intercellular second messenger systems (Canals et al., 2003; Morelli & Pinna,
892 2001). As a result they claimed that motivation to carry out effort-related activity would decrease.
893 Chronic fatigue is thought to induce high levels of striatal adenosine (Dantzer et al., 2014).
894 Indeed, caffeine-induced increases in the brain adenosine:DA ratio have been shown to
895 negatively affect physical-endurance performance (Davis et al., 2003) and Pageaux et al. (2014)
896 have argued that it could be a cause of central fatigue.

897 The interoception model itself could provide an explanation for chronic fatigue. As we
898 have seen above, the insula cortex and ACC receive a wide range of physiological feedback via
899 the lamina 1 lateral spinothalamocortical and NTS medullothalamic pathways. The insula cortex
900 and the ACC are also connected to the amygdala, which store memories of aversive stimuli. This
901 information is forwarded to the VMPFC which also has connections to the amygdala. As we saw
902 above, the VMPFC is thought to evaluate choice options and encode outcome expectations
903 (Schoenbaum et al., 2009). This suggest that aversive memories associated with CFS and other

904 diseases, which are held in the amygdala, will lead to the decision to avoid activity. This will
905 particularly be the case when DA concentrations are low as in CFS, MS, PD and similar diseases
906 (Dobryakova et al., 2015).

907

908 **6. Conclusion**

909 During exercise it would appear that what we have termed the motor-somatosensory
910 control system, consisting of the cerebral-BG-thalamo-cerebellum pathway controls the actual
911 movements but we believe that the key issue to central fatigue is the interoception control
912 system. The DLPFC feeds predictions of the expected interoceptive feedback, in the form of
913 corollary discharge, to the AIC before the exercise begins. These predictions are based on a
914 variety of inputs, most important of which is probably past experience, however the predictions
915 are heavily affected by emotion and motivation. In training situations or in competition, when the
916 individual expects to have to exercise a higher intensity than they have previously experienced,
917 the prediction is less easy to make than when they intend to reproduce a previous speed or
918 intensity. However, even in these latter situations, the person has to continuously monitor the
919 interoceptive feedback and make decisions concerning whether to continue, slow down, go faster
920 or harder, or to stop. These decisions are heavily determined by the level of motivation and this
921 motivation is under the control of the SNc- and VTA-DA, and LC-NE systems.

922 Although very high levels of stress lead to over-activation of D₁-like receptors, α_1 - and β -
923 adrenoceptors in the PFC, dampening all neural activity in the PFC and thus, in fact, taking the
924 PFC off-line (Arnsten, 2011), this does not appear to happen in humans when exercise is the
925 stressor. However, when the individual reaches exhaustion it may be that the catecholamines
926 concentrations in the PFC are such that discharge moves from phasic firing to tonic. This has

927 been shown to lower the desire to maintain the goal-directed activity and induce the search for
928 alternatives (Aston-Jones & Cohen, 2005), such as to stop exercising. On the other hand, it may
929 simply be that during heavy exercise, the interoceptive feedback is at such a level that the person
930 decides that they can not continue any further, or rather that continuing is not worth the cost
931 required. If the individual thinks that further activity may injure them, they will stop. In other
932 words, the levels of brain catecholamines concentrations at maximal intensity exercise may be
933 such that the individual can still make an informed choice. They are probably not over the top of
934 the inverted-U or certainly not far over the top, so the PFC is still working optimally or just-sub-
935 optimally.

936

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- 1506

1507 **Figure legends**

1508 Figure 1. Schematic of the roles of the different regions of the brain during motor control.

1509 DLPFC dorsolateral prefrontal cortex: SMA supplementary motor area: PMC pre-motor cortex:

1510 M1 primary motor cortex: BG basal ganglia: S1 somatosensory cortex.

1511 Figure 2. Factors affecting interoceptive predictions.

1512 Figure 3. Schematic of interoceptive feedback pathway.

1513 DLPFC dorsolateral prefrontal cortex: VLPFC ventrolateral prefrontal cortex: SMA

1514 supplementary motor area: PMC pre-motor cortex: M1 primary motor cortex: VMPFC

1515 ventromedial prefrontal cortex: S1 somatosensory cortex: VMpo posterior ventral medial

1516 nucleus of the thalamus: VMb basal ventral medial nucleus of the thalamus.

1517

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