The striatum drives the ergogenic effects of caffeine

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Meet the Author's Guidelines

Ana Cristina de Bem Alves graduated with BSc in physical therapy from the Federal University of

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adenosinergic system. Ana studied the potential of adenosine A_{2A} receptors ($A_{2A}R$) antagonism

in managing fatigue in the past two years. She researched new therapeutic options for

neurological patients to improve their quality of life.

Abstract

Caffeine is one of the main ergogenic resources used in exercise and sports. Previously, we reported the

ergogenic mechanism of caffeine through neuronal $A_{2A}R$ antagonism in the central nervous system [1].

We now demonstrate that the striatum rules the ergogenic effects of caffeine through neuroplasticity

changes. Thirty-four Swiss (8-10 weeks, 47 ± 1.5 g) and twenty-four C57BL/6J (8-10 weeks, 23.9 ± 0.4 g)

adult male mice were studied behaviorly and electrophysiologically using caffeine and energy

metabolism was studied in SH-SY5Y cells. Systemic (15 mg/kg, i.p.) or striatal (bilateral, 15 μg) caffeine

was psychostimulant in the open field ($p < 0.05$) and increased grip efficiency ($p < 0.05$). Caffeine also

shifted long-term depression (LTD) to potentiation (LTP) in striatal slices and increased the

mitochondrial mass ($p < 0.05$) and membrane potential ($p < 0.05$) in SH-SY5Y dopaminergic cells. Our

results demonstrate the role of the striatum in the ergogenic effects of caffeine, with changes in

neuroplasticity and mitochondrial metabolism.

Keywords: caffeine; dopamine; grip strength; mitochondria; neuroplasticity; striatum

1 INTRODUCTION

Exercise fatigue is one of the main barriers to exercise and sports performance. Caffeine (1,3,7-trimethyl

xanthine) is a non-selective antagonist of adenosine A_1 and A_{2A} receptors (A_1R and $A_{2A}R$) that exhibit

psychostimulant and ergogenic effects (i.e., increases physical performance) [1]. It is one of the most

popular ergogenic aids in exercise and sports, available in coffee, tea, caffeinated soft and sports drinks,

sports supplements, and other beverages and foods [2–5]The gastrointestinal system rapidly absorbs

caffeine, distributed throughout the body fluids, reaching plasma peak concentrations of 2-15 μM (100

mg caffeine) with a half-life of 2.5-10h [6, 7]. The World Anti-Doping Agency (WADA) detected caffeine

in 73.8% of 20,686 urine samples from elite athletes between 2004 and 2008 [8], a percentage close to

that reported by Van Thuyne et al. [9]: 73.6% in 11,361 samples between 1993 and 2002. The

International Society of Sports Nutrition recommends the oral consumption of caffeine in an anhydrous

form in doses between 3-6 mg/kg (100-300 mg) [10]. Larger doses (> 9 mg/kg) do not enhance the

ergogenic effect and are unsafe as they can trigger adverse effects problematic for athletic performance,

such as restlessness, gastrointestinal discomfort, nausea, insomnia, anxiety, and chest pain [10].

Several of the central effects of caffeine can explain the ergogenic effects of caffeine. In fact,

caffeine-enhancing effects include improved neurological functions such as typing speed, simple

reaction time, sustained attention, memory, and logical reasoning during rest [11]. The physiological

targets of caffeine for micromolar concentrations achieved with dietary consumption are A_1 and A_{2A}

adenosinergic receptors [6, 7]. Davis first demonstrated that the adenosine receptor agonist 5⍰-N-

methyl carboxamide adenosine (NECA), injected into the rat ventricles, increases running performance

[12]. We then demonstrated the role of endogenous extracellular adenosine in the development of

fatigue in mice [13] and the pivotal role of neuronal $A_{2A}R$ in the mouse forebrain for the ergogenic

effects of caffeine [1, 14]. Caffeine increases performance expectancy in cyclists [15], reinforcing the

findings of Sun et al. [16] on the role of $A_{2A}R$ in the *nucleus accumbens* (*NAc*) on early fatigue associated

with exertion in mice or effort-based cost-benefit decision-making (E-CBDM). Accordingly, the

overfunction of $A_{2A}R$ [17, 18] is a hypothetical mechanism for the fatigue symptom (E-CBDM) in

neurological diseases [19].

Fatigue recruits corticostriatal loop connections that reduce performance [20] and impairs long-

term potentiation (LTP) and long-term depression (LTD) [21]. This exercise-induced alterations of

adenosine signaling [1, 13] and of neuroplasticity [20, 21] are candidate mechanisms responsible for the

central component of fatigue. In this work, we investigated the striatal neuroplasticity of caffeine

ergogenicity.

MATERIALS AND METHODS

Four different experiments were conducted in three different laboratories. First, caffeine was

administered *in vivo* through systemic (i.p., experiment #1) or local treatment via stereotaxy (striatum,

experiment #2) to assess their impact on animals' fatigue and motor control (Swiss mice, Labioex/UFSC,

Brazil). Extracellular electrophysiology analyzed neuroplasticity in striatal slices treated with caffeine

(experiment #3, C57BL/6J mice, CNC/U Coimbra, Portugal), and experiment #4 evaluated *in vitro* the

effects of caffeine on the mitochondrial metabolism of SH-SY5Y human neuroblastoma cell lines

(UFGRS/Brazil).

Experimental designs #1 and #2

Animals, caffeine, and stereotaxy

We used 34 Swiss naïve male adult mice (8-10 weeks, 47 ± 1.5 g). The animal housing had controlled

lighting and temperature (12h light-dark cycle, lights on at 7:00 and off at 19:00, and room temperature

of 21±1°C) and *ad libitum* access to food and tap water. Housing and handling of the animals followed

the current Brazilian legislation (National Council for the Control of Animal Experimentation - CONCEA)

and received bioethical approval (CEUA 1503210519). The allocation of animals to the experimental

groups was random. Systemic treatment (in a volume of 10 ml/kg) with caffeine (15 mg/kg, i.p.) or saline

(NaCl 0.9%, i.p.) was performed 15 min before the behavior and exercise tests.

Another group of mice were anesthetized with ketamine/xylazine, and two cannulas were

implanted, one in the right striatum (AP 0.5 mm; ML 2 mm and DV -3 mm) and other in the left striatum

(AP 0.5 mm; ML -2 mm and DV -3 mm) [22]. One week after surgery, 4 µL of caffeine (15 µg) or saline

(0.5 µg) was injected into conscious animals using an infusion pump (2 µL/minute, Bonther®, Ribeirão

Preto, Brazil) immediately before behavioral tests. The caffeine dose (15 µg) was selected through pilot

studies and literature data [23, 24]. The mortality rate was 30% (N=9).

Behavioral analysis

The behavioral experiments were performed during the light phase of the circadian cycle, after 1 hour of

habituation, between 9:00 and 16:00, under controlled temperature (22±1ºC) and luminosity (10 lux).

All equipment was cleaned with EtOH 20% after each animal test.

Open field

We manually recorded crossings and rearings in the circular open field test (diameter 58 cm × height 50

cm, Insight® EP154C, Ribeirão Preto, Brazil) for 5 minutes [25].

Rota rod

The Rotarod test (Insight® EFF411) was used to evaluate motor coordination. The primary inclusion

criterion was remaining in the stationary cylinder (0 RPM) for 30 seconds and rotating (5 RPM) for 90

seconds [26]. After 30 minutes, the latency to fall was evaluated in the accelerated cylinder (0.1

RPM/second) with an initial rotation of 5 RPM. Three falls excluded the animal from the evaluation stage. All pieces of equipment were cleaned after each animal test.

Grip strength meter

The grip strength meter test (Bonther® 5 kgf) graded the strength and time of the front paw grip. Each mouse was placed individually in the grip meter bar, and after both paws were holding the bar, the experimenter gently pulled the tail in the opposite direction of the bar. We performed 4 trials with 10 seconds each and 1-minute intervals between trials, and we considered the average of 3 best trials (3 out of 4) [27–29]. The equipment measures the force applied and the grip time, and the software provides the maximum and submaximal values. The decrease in physical performance is one of the characteristics of fatigue, evaluated in this behavioral test by the decrease in strength and grip time. We finalized the fatigue assessment by calculating the impulse by integrating the force x grip time curve.

Experimental design #3

Electrophysiology

Twenty-four naïve C57BL/6J mice (male, 23.7 $\pm$ 0.5 g, 8–10 weeks old) were euthanized through cervical dislocation, and the brain was quickly removed (within 1 min) and placed in ice-cold, oxygenated (95% O_2 and 5% CO_2) artificial cerebrospinal fluid (ACSF; in mM: 124 NaCl, 4.5 KCl, 1.2 Na_2HPO_4, 26 $NaHCO_3$, 1.2 $CaCl_2$, 1 $MgCl_2$, 10 glucose). Striatal slices (400 µm thick) were obtained using a Vibratome 1500 (Leica, Wetzlar, Germany) and allowed to recover for at least 90 min before being transferred to a submerged recording chamber and superfused at 3 mL/min with oxygenated ACSF kept at 30.5ºC. Corticostriatal transmission was assessed with the stimulating electrode placed in the corpus callosum and the recording electrode filled with ACSF (2–5 MΩ) placed in the dorsolateral aspect of the striatum. The neuronal stimulus was delivered with a Grass S44 stimulator (Grass Technologies, RI), and

the recordings were obtained by using an ISO-80 amplifier (World Precision Instruments, Hertfordshire,

England) and digitized with an ADC-42 system (Pico Technologies, Pelham, NY). Three consecutive

population spike responses were averaged and quantified using the Win LTP software v. 2.20b (WinLTP

Ltd., Bristol, UK). The relationship between dendritic responsiveness and the synaptic input was

determined based on input/output curves in which the population spike amplitude was plotted *versus*

the stimulus intensity before and after administering different concentrations of caffeine in the ACSF

solution. Stimulation intensity was then selected to yield 40%–50% of the maximum response.

Corticostriatal slices were treated with 1 μM, 3 μM or 10 μM caffeine in ACSF oxygenated solution for

twenty minutes before the high-frequency stimulation (HFS). HFS consists of three trains each with 100

Hz pulses for 1 s with 10-s intervals between trains. The amplitude of synaptic plasticity was evaluated

by the alteration of population spike amplitude 30 min after HFS for each concentration of caffeine [30–

32]. Importantly, the tested concentrations of caffeine only act through the antagonism of adenosine

receptors to impact of synaptic transmission [32].

Experimental design #4

Cell culture and evaluation of mitochondrial metabolism

Human neuroblastoma SH-SY5Y cells were maintained in DMEM/F12 supplemented with 10% FBS, 100

units/mL penicillin, 100 μg/mL streptomycin at 37ºC, with 5% CO_2, under standard conditions. Cells were

incubated with PBS or caffeine in concentrations (1 μM, 3 μM or 10 μM) selectively acting as an

adenosine receptor antagonist [6, 7]. An MTT assay (see below) evaluated the viability of cells 20

minutes after caffeine exposure [33]. Mitochondrial mass and membrane potential were analyzed using

green and red mitotracker [34].

MTT assay

SH-SY5Y cells were seeded into 96-well plates in DMEM-F12 with 10% FBS (1×10^4 cells/well). After

caffeine treatment, the cells were incubated with 0.5 mg/mL of MTT for 2 h at 37 °C. The cell viability

was measured by quantifying the activity of cellular dehydrogenases that reduce MTT (3-4,5-dimethyl

thiazolyl-2,5-diphenyl-2H-tetrazolium bromide, Sigma Inc.) to a purple formazan salt [35]. The formazan

salt formed was dissolved in dimethyl sulfoxide (DMSO), and the absorbance was quantified in a

spectrophotometer (Spectra Max 190, Molecular Devices, Sunnyvale, CA, USA) at 540 nm [34].

Mitotracker Flow Cytometry Protocol

Mitotracker Green FM (Invitrogen) (MTG) or Mitotracker Red (MTR) are used for staining mitochondria

of live cells depending, respectively, on the organelle lipid content (mitochondrial mass) and oxidative

activity (mitochondrial membrane potential). Briefly, after caffeine treatment, SH-SY5Y cells were

washed on PBS saline and harvested using trypsin. Then, cells were resuspended and incubated for 20

min in the dark with 100 nM of MTG and MTR diluted into pre-warmed (at 37 °C) DMEM F-12. Emitted

fluorescence was measured (FL1 'green' 530 nm/30; FL3 'red' 670 nm long pass) in a FACSCalibur using

CellQuest Pro software (Becton Dickinson, Franklin Lakes, NJ, USA) and data from 10.000 events were

acquired using a log scale for all parameters. The fluorescence mean intensity of FL1-H and FL3-H was

evaluated to estimate mitochondrial mass and potential, respectively. All flow cytometry analyses were

performed using the FCS Express 4 software (De Novo, Pasadena, CA, USA) [34].

Statistical Analyses

Statistical analysis was performed using GraphPad Prism version 6.0 for Windows (GraphPad Software,

San Diego, California, USA, www.graphpad.com). A one-tailed Student's t-test analyzed the open field

test, rotarod, and grip strength meter; the Cohen's effect size (*d*) was calculated as small (0.2), medium

(0.5), large (0.8), and very large (1.3) [36]. A one-way ANOVA analyzed electrophysiological and

mitochondrial assays; Cohen's effect size (η^2) was calculated as small (0.01), medium (0.09), and large

(0.25) (1.3) [37]. Differences were considered significant when $p < 0.05$.

Data Availability

This work makes open data available under the creative commons license (CC BY) [38].

RESULTS

Systemic and striatal treatment with caffeine is ergogenic

Systemic caffeine increased crossings ($t_{22} = 2.16$, $p < 0.05$, $d = 1.0$; Fig.1A) and rearings ($t_{22} = 2.84$, $p < 0.05$,

$d = 1.2$; Fig.1B) in the open field, and motor coordination in the rotarod ($t_{28} = 3.08$, $p < 0.05$, $d = 0.45$;

Fig.1C). Caffeine did not alter grip strength peak ($t_{22} = 1.37$, $p = 0.09$; Fig.1D) but increased grip time ($t_{22} =$

3.31, $p < 0.05$, $d = 1.13$; Fig.1E). Figure 1F' shows the Area Under Curve (AUC) from strength *vs.* time

results to demonstrate that ergogenic effects of caffeine are due to impulse magnitude ($t_{22} = 2.14$, $p <$

0.05, $d = 0.81$; Fig.1F-F').

Figure 2A (top) shows the coordinates of the mice striatum according to Paxinos and Franklin

[39], and Fig.2A (bottom) shows a coronal brain view of a mouse brain, confirming that cannulas were

implanted in the expected localization, as previously done [40, 41]. Caffeine injected directly into the

striatum enhanced the number of crossings ($t_8 = 9.81$, $p < 0.05$, $d = 1.82$; Fig. 2B) and rearings ($t_8 = 3.66$, $p <$

0.05, $d = 1.50$; Fig. 2C) in the open field. Similarly, as occurred for its systemic treatment, the direct

intra-striatal caffeine administration did not alter peak strength ($t_8 = 0.85$, $p = 0.20$; Fig. 2D) but improved

time grip time ($t_8 = 4.08$, $p < 0.05$, $d = 1.56$; Fig. 2E) in the grip strength meter test. The ergogenic effect

on impulse magnitude (Fig.2F) was also observed after the intra-striatal direct administration of caffeine

($t_8 = 3.50$, $p < 0.05$, $d = 1.48$; Fig. 2F').

Caffeine changes LTD to LTP in striatum slices

Fig.3A shows the location of the stimulus electrode (top) in the corpus callosum and of the recording electrode (bottom) in the dorsolateral region of the striatum in a coronal brain slice. The first input/output curve (Fig.3B) shows that all slices have a similar pattern of induced excitability during the pre-treatment period without caffeine. After 20 min of caffeine treatment, none of the tested concentrations of caffeine (1-10 μM) significantly altered basal synaptic transmission of corticostriatal synapses ($F_{3,16}$=0.47, p=0.7, Fig.3C). The second input/output curve (Fig.3.D) performed after 20 min of exposure to caffeine shows an increased excitability with the higher concentration of caffeine (10 μM), as would be expected based on the ability of caffeine to antagonize A_1 receptors controlling basal synaptic transmission [32]. High-frequency stimulation (HFS, black arrow, $F_{29,864}$=4.26, p< 0.05, η^2=0.21, Fig.3E) triggered an LTD in control slices (without any treatment), as well as in slices treated with 3 and 10 μM caffeine, whereas the exposure to 1 μM caffeine changed the response to HFS from an LTD to an LTP ($F_{3.20}$ = 11.2, p< 0.05, η^2=0.62, Fig.3F).

Caffeine improved mitochondrial metabolism in SH-SY5Y cells

Caffeine acutely increased the mass and membrane potential of the mitochondria of SH-SY5Y cells. Cell viability was not modified after exposure to any tested concentration of caffeine (1 μM, 3 μM or 10 μM), as analyzed by the MTT assay ($F_{3,68}$ = 0.58, p= 0.6, η^2 = 0.03; Fig.4A). Caffeine (1 μM) increased mitochondrial membrane potential ($F_{3,10}$ = 14.99, p< 0.05, η^2 = 0.83; Fig.4B) and mitochondrial mass ($F_{3,11}$= 20.87, p< 0.05; Fig.4C) of SH-SY5Y cells. Fig.4F shows a fluorescence shift to the right upon exposure to 1 μM caffeine.

DISCUSSION

This work demonstrates that the ergogenic effect of acute systemic and striatal caffeine on grip strength is associated with a change LTD to LTP in the striatum, probably with an increase of the mass and membrane potential of mitochondrial in neurons. Our behavioral data reinforce the evidence that systemic caffeine administration is ergogenic [2–5, 12, 25]. However, we emphasize that this previous knowledge analyzed treadmill running performance, and we demonstrate here for the first time that caffeine increases (grip) muscle strength in mice, an effect also observed in humans [42, 43]. Additionally, we demonstrated for the first time that direct caffeine administration in the striatum reproduces the ergogenic effects upon systemic treatment with caffeine. Statistical effect sizes were large (systemic) and very large (intrastriatal) for caffeine ergogenicity. The modification of force performance was on impulse the grip strength size did not change. Once again, we demonstrate that caffeine modifies a time-derived index of physical performance (force $\times$ time), as we have previously demonstrated with running power (force $\div$ time) [25].

Overall, we have been building a body of evidence to unravel the neurological mechanisms of the ergogenic effects of caffeine. The ergogenic effects of caffeine depend on the antagonism of neuronal $A_{2A}R$ in the rodent CNS [1, 12], and we now show that they involve a local neuroplasticity effect in the striatum, a brain region dense in $A_{2A}R$ [44]. Thus, caffeine improves motor coordination (in the rota rod) and grip time while shifting striatal neuroplasticity from an LTD to a LTP. This joins previous findings that caffeine injected into rat brain ventricles improves treadmill performance, an effect that disappears upon administration of the adenosine receptor agonist NECA [12]. Our results correspond to acute effects of caffeine in naïve animals; importantly, previous evidence suggests additional benefits when caffeine is consumed chronically, namely an increased resistance to stress [45, 46], from social [47] to cold stress [48]. In humans, the ergogenic effects of caffeine do not disappear with chronic consumption [2–5]. However, caffeine might increase anxiety [47]which is associated with impaired exercise performance due to reduced processing efficiency, including attention, and increased physiological cost

[49, 50]. However, caffeine does not impair exercise performance; on the contrary, it enhances it. The

key to understand this apparent paradox might be the arousal effect of caffeine [51]. Physiological

arousal in exercise bolsters performance when limited by awareness of exertion [49, 50]. Accordingly,

caffeine decreases the rating of perceived exertion [52–54].

Our results strengthen the hypothesis about the ergogenic mechanism of caffeine involve an

antagonism of the adenosine modulation system in the central nervous system [12–14, 25]. Central $A_{2A}R$

are linked to behavioral responses to exertion [16, 55, 56], such as fatigue and decision making, while

$A_{2A}R$ antagonists such as caffeine and SCH58261 increase running performance [12, 25], and caffeine-

treated forebrain $A_{2A}R$ knockouts mice did not demonstrate this ergogenic effect [25]. Indeed, exertion

fatigue and ergogenic effects of caffeine are associated with $A_{2A}R$ [16, 25, 55, 56]. As the striatum

displays a particularly high density of $A_{2A}R$ [44], we injected caffeine directly into the dorsolateral

striatum of mice, which triggered psychomotor and ergogenic effects. The psychomotor effects of

caffeine in the striatum are associated with allosteric modulation of $A_{2A}R$-D_2R heteromers and

presynaptic control of glutamatergic neurotransmission [57]. Striatal $A_{2A}R$ facilitate neuronal activity in

the striatum by increasing dopaminergic signaling, more by controlling the availability of D_2 and D_3

receptors than by influencing dopamine release [58]. Thus, the $A_{2A}R$-D_2R allosteric interaction modulates

psychostimulant responses, which we believe to be involved in the ergogenic effect of caffeine, as

discussed above.

Regarding electrophysiological findings, repetition of exercise can modify corticostriatal

neuroplasticity, where LTD predominates, which plays an essential role in motor control [59, 60]. Ma et

al. [21] demonstrated that exercise-induced fatigue impairs corticostriatal N-methyl-D-aspartate (NMDA)

receptor-dependent LTP and endocannabinoid-dependent LTD (eCB-LTD). We observed that caffeine

(1.0 µM) modified *ex vivo* corticostriatal neuroplasticity from LTD to LTP, although this *in vivo* effect

remains to be confirmed. Conversely, the increased mitochondrial metabolism observed in cells

supports increased neuronal activity at the site, as previously demonstrated in APPsw transgenic mice

[61] and neuroblastoma cells [62].

This work is a proof of concept developed in naïve animals that reinforces our working

hypothesis that $A_{2A}R$ in the corticostriatal pathway play a key ergogenic role [1, 13, 14]. However, some

limitations of our work need to be considered. The experiments were carried out in males, a limitation

[63] since there is evidence demonstrating that the ergogenic effects of caffeine and $A_{2A}R$ antagonists

are similar [1, 64–67] or lesser in females [67–69], while the adverse effects are more significant[70].

Moreover, future investigations should evaluate the tolerability developed by regular consumption of

coffee and caffeine on ergogenicity. Finally, it should be noted that the present evidence was gathered

using different models, whereby behavior was assessed in Swiss mice, slice electrophysiology in

C57BL/6J mice and metabolism in human neuroblastoma SH-SY5Y cells. The few studies on the

ergogenicity of caffeine do not yet allow us to conclude on the eventual existence of differences

between mouse strains, whereas the use of cell culture is expected to allow unveiling metabolic

determinants of brain metabolism underlying the ergogenic effect of caffeine.

In summary, our results demonstrate that striatal $A_{2A}R$ contribute to the neurophysiology of the

ergogenic effects of caffeine.

DECLARATIONS

Ethical Approval

The ethics committees approved animal experiments in Brazil (Federal University of Santa Catarina,

CEUA 1503210519) and Portugal (University of Coimbra, ORBEA 138-2016/1507201) according to

specific legislation.

Competing interests

RAC is a scientific consultant for the Institute for Scientific Information on Coffee (ISIC). ASAJr is the co-

founder of Cannabisports, a sports supplement company. All other authors declare no conflict of

interest.

Authors' contributions

6 ASAJr, JO, and RAC designed the experiment and provided funding. The experiments were performed by

7 ACABA, AES, HRF, NSS, GP, APT, LMM, and ART. ACBA, AES, JO, ART, and AJASr performed the statistics.

8 ACBA, AES, HRF, ART, and ASAJr built the graphics. ACBA, AES, HRF, and ASAJr wrote the manuscript. All

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16 9).

21 **REFERENCES**

1   1.   AS Aguiar ASPCRC, Aguiar Jr AS, Speck AE, et al (2020) Neuronal adenosine A2A
2   receptors signal ergogenic effects of caffeine. Sci Rep 10:13414.
3   https://doi.org/10.1038/s41598-020-69660-1

4   2.   Jackman M, Wendling P, Friars D, Graham TE (1996) Metabolic, catecholamine, and
5   endurance responses to caffeine during intense exercise. J Appl Physiol.
6   https://doi.org/10.1152/jappl.1996.81.4.1658

7   3.   Spriet LL, MacLean DA, Dyck DJ, et al (1992) Caffeine ingestion and muscle metabolism
8   during prolonged exercise in humans. Am J Physiol Endocrinol Metab.
9   https://doi.org/10.1152/ajpendo.1992.262.6.e891

4.   Grgic J, Mikulic P (2017) Caffeine ingestion acutely enhances muscular strength and
power but not muscular endurance in resistance-trained men. Eur J Sport Sci.
https://doi.org/10.1080/17461391.2017.1330362

5.   Van Soeren MH, Sathasivam P, Spriet LL, Graham TE (1993) Caffeine metabolism and
epinephrine responses during exercise in users and nonusers. J Appl Physiol.
https://doi.org/10.1152/jappl.1993.75.2.805

6.   Fredholm BB (1995) Adenosine, Adenosine Receptors and the Actions of Caffeine *.
Pharmacol Toxicol 76:93–101. https://doi.org/10.1111/J.1600-0773.1995.TB00111.X

7.   Fredholm BB (1979) Are methylxanthine effects due to antagonism of endogenous
adenosine? Trends Pharmacol Sci 1:129–132. https://doi.org/10.1016/0165-
6147(79)90046-4

8. del Coso J, Muñoz G, Muñoz-Guerra J (2011) Prevalence of caffeine use in elite athletes following its removal from the World Anti-Doping Agency list of banned substances. Appl Physiol Nutr Metab 36:555–561. https://doi.org/10.1139/h11-052

9. van Thuyne W, Delbeke FT (2006) Distribution of caffeine levels in urine in different sports in relation to doping control before and after the removal of caffeine from the WADA doping list. Int J Sports Med 27:745–750. https://doi.org/10.1055/S-2005-872921/ID/25

10. Goldstein ER, Ziegenfuss T, Kalman D, et al (2010) International society of sports nutrition position stand: Caffeine and performance. J Int Soc Sports Nutr

11. Costenla AR, Cunha RA, De Mendonça A (2010) Caffeine, adenosine receptors, and synaptic plasticity. S25–S34. https://doi.org/10.3233/JAD-2010-091384

12. JM Davis ZZHSKMJBGH, Davis JM, Zhao Z, et al (2003) Central nervous system effects of caffeine and adenosine on fatigue. Am J Physiol Regul Integr Comp Physiol 284:399–404. https://doi.org/10.1152/ajpregu.00386.2002

13. Aguiar AS, Speck AE, Canas PM, Cunha RA (2021) Deletion of CD73 increases exercise power in mice. Purinergic Signal 17:393–397. https://doi.org/10.1007/S11302-021-09797-4/FIGURES/1

14. Aguiar JAS, Speck AE, Canas PM, et al (2018) Oral communication: The ergogenic effects of caffeine depend on A2A receptors. Purinergic Signal. https://doi.org/10.1007/s11302-018-9637-0

15. Franco-Alvarenga PE, Brietzke C, Canestri R, et al (2019) Caffeine improved cycling trial performance in mentally fatigued cyclists, regardless of alterations in prefrontal cortex activation. Physiol Behav. https://doi.org/10.1016/j.physbeh.2019.02.009

16. Sun X, Liu M, Xu X, et al (2023) Accumbal adenosine A2A receptor inactivation biases for large and costly rewards in the effort- but not delay-based decision making. Neuropharmacology 222:. https://doi.org/10.1016/j.neuropharm.2022.109273

17. Gomes C V., Kaster MP, Tomé AR, et al (2011) Adenosine receptors and brain diseases: Neuroprotection and neurodegeneration. Biochim Biophys Acta Biomembr 1808:1380–1399. https://doi.org/10.1016/J.BBAMEM.2010.12.001

18. Cunha RA (2016) How does adenosine control neuronal dysfunction and neurodegeneration? J Neurochem 139:1019–1055. https://doi.org/10.1111/JNC.13724

19. Alves AC de B, Bristot VJ de O, Limana MD, et al (2019) Role of Adenosine A2A Receptors in the Central Fatigue of Neurodegenerative Diseases. J Caffeine Adenosine Res 9:145–156. https://doi.org/10.1089/caff.2019.0009

20. Schiff ND (2008) Central Thalamic Contributions to Arousal Regulation and Neurological Disorders of Consciousness. Ann N Y Acad Sci 1129:105–118. https://doi.org/10.1196/ANNALS.1417.029

21. Ma J, Chen H, Liu X, et al (2018) Exercise-induced fatigue impairs bidirectional corticostriatal synaptic plasticity. Front Cell Neurosci 12:14. https://doi.org/10.3389/FNCEL.2018.00014/BIBTEX

22.   Paxinos G, Franklin KBJ (2012) The Mouse Brain in Stereotaxic Coordinates. Springer US

23.   Josselyn SA, Beninger RJ (1991) Behavioral effects of intrastriatal caffeine mediated by
adenosinergic modulation of dopamine. Pharmacol Biochem Behav 39:97–103.
https://doi.org/10.1016/0091-3057(91)90403-O

24.   van Dort CJ, Baghdoyan HA, Lydic R (2009) Adenosine A1 and A2A Receptors in Mouse
Prefrontal Cortex Modulate Acetylcholine Release and Behavioral Arousal. The Journal of
Neuroscience 29:871. https://doi.org/10.1523/JNEUROSCI.4111-08.2009

25.   AS Aguiar ASPCRC (2020) Neuronal adenosine A2A receptors signal ergogenic effects of
caffeine. Sci Rep 10:13414. https://doi.org/10.1038/s41598-020-69660-1

26.   Aguiar Jr. AS, Araújo AL, da-Cunha TR, et al (2009) Physical exercise improves motor and
short-term social memory deficits in reserpinized rats. Brain Res Bull 79:.
https://doi.org/10.1016/j.brainresbull.2009.05.005

27.   Takeshita H, Yamamoto K, Nozato S, et al (2017) Modified forelimb grip strength test
detects aging-associated physiological decline in skeletal muscle function in male mice.
Sci Rep 7:1–9. https://doi.org/10.1038/srep42323

28.   Luca A De (2008) Use of grip strength meter to assess the limb strength of mdx mice.
TREAT-NMD Neuromusclar Network DMD_M.2.2.:1–11

29. Personius KE, Jayaram A, Krull D, et al (2010) Grip force, EDL contractile properties, and
voluntary wheel running after postdevelopmental myostatin depletion in mice. J Appl
Physiol 109:886–894. https://doi.org/10.1152/japplphysiol.00300.2010

30. Leal G, Bramham CR, Duarte CB (2017) BDNF and Hippocampal Synaptic Plasticity, 1st ed.
Elsevier Inc.

31. Paillé V, Picconi B, Bagetta V, et al (2010) Distinct levels of dopamine denervation
differentially alter striatal synaptic plasticity and NMDA receptor subunit composition.
Journal of Neuroscience 30:14182–14193. https://doi.org/10.1523/JNEUROSCI.2149-
10.2010

32. Lopes JP, Pliássova A, Cunha RA (2019) The physiological effects of caffeine on synaptic
transmission and plasticity in the mouse hippocampus selectively depend on adenosine
A1 and A2A receptors. Biochem Pharmacol 166:313–321.
https://doi.org/10.1016/j.bcp.2019.06.008

33. De Oliveira J, Moreira ELG, Mancini G, et al (2013) Diphenyl diselenide prevents cortico-
cerebral mitochondrial dysfunction and oxidative stress induced by hypercholesterolemia
in LDL receptor knockout mice. Neurochem Res 38:2028–2036.
https://doi.org/10.1007/s11064-013-1110-4

34. De Oliveira J, Moreira ELG, Mancini G, et al (2013) Diphenyl diselenide prevents cortico-
cerebral mitochondrial dysfunction and oxidative stress induced by hypercholesterolemia
in LDL receptor knockout mice. Neurochem Res 38:2028–2036.
https://doi.org/10.1007/s11064-013-1110-4

35. Hansen MB, Nielsen SE, Berg K (1989) Re-examination and further development of a precise and rapid dye method for measuring cell growth/cell kill. J Immunol Methods 119:203–210. https://doi.org/10.1016/0022-1759(89)90397-9

36. Sullivan GM, Feinn R (2012) Using Effect Size—or Why the P Value Is Not Enough. J Grad Med Educ 279–282. https://doi.org/10.4300/JGME-D-12-00156.1

37. Sullivan GM, Feinn R (2012) Using Effect Size—or Why the P Value Is Not Enough. J Grad Med Educ 279–282. https://doi.org/10.4300/JGME-D-12-00156.1

38. Speck AE, de Bem Alves AC, Aguiar Jr AS (2022) Open data. https://osf.io/w65eq/

39. Paxinos G, Franklin KBJ (2012) The Mouse Brain in Stereotaxic Coordinates. Springer US

40. Gonçalves N, Simões AT, Cunha RA, de Almeida LP (2013) Caffeine and adenosine A2A receptor inactivation decrease striatal neuropathology in a lentiviral-based model of Machado–Joseph disease. Ann Neurol 73:655–666. https://doi.org/10.1002/ANA.23866

41. Matheus FC, Rial D, Real JI, et al (2016) Temporal Dissociation of Striatum and Prefrontal Cortex Uncouples Anhedonia and Defense Behaviors Relevant to Depression in 6-OHDA-Lesioned Rats. Mol Neurobiol 53:3891–3899. https://doi.org/10.1007/S12035-015-9330-Z/FIGURES/5

42. Delleli S, Ouergui I, Messaoudi H, et al (2022) Acute Effects of Caffeine Supplementation on Physical Performance, Physiological Responses, Perceived Exertion, and Technical-Tactical Skills in Combat Sports: A Systematic Review and Meta-Analysis. Nutrients 14:. https://doi.org/10.3390/NU14142996/S1

43. Grgic J (2022) Effects of caffeine on isometric handgrip strength: A meta-analysis. Clin Nutr ESPEN 47:89–95. https://doi.org/10.1016/J.CLNESP.2021.12.007

44. Gangarossa G, Espallergues J, Mailly P, et al (2013) Spatial distribution of D1R- and D2R-expressing medium-sized spiny neurons differs along the rostro-caudal axis of the mouse dorsal striatum. Front Neural Circuits. https://doi.org/10.3389/FNCIR.2013.00124

45. Fang C, Hayashi S, Du X, et al (2021) Caffeine protects against stress-induced murine depression through activation of PPARγC1α-mediated restoration of the kynurenine pathway in the skeletal muscle. Sci Rep 11:7287. https://doi.org/10.1038/s41598-021-86659-4

46. Kaster MP, Machado NJ, Silva HB, et al (2015) Caffeine acts through neuronal adenosine A2A receptors to prevent mood and memory dysfunction triggered by chronic stress. Proc Natl Acad Sci U S A. https://doi.org/10.1073/pnas.1423088112

47. Ibrahim MK, Kamal M, Tikamdas R, et al (2020) Effects of Chronic Caffeine Administration on Behavioral and Molecular Adaptations to Sensory Contact Model Induced Stress in Adolescent Male Mice. Behav Genet 50:374–383. https://doi.org/10.1007/s10519-020-10003-1

48. Estler CJ, Ammon HP, Herzog C (1978) Swimming capacity of mice after prolonged
treatment with psychostimulants. I. Effects of caffeine on swimming performance and
cold stress. Psychopharmacology (Berl) 58:161–166.
https://doi.org/10.1007/BF00426900

49. Hardy L (1999) Stress, anxiety and performance. J Sci Med Sport 2:227–233.
https://doi.org/10.1016/S1440-2440(99)80175-3

50. Hardy L, Beattie S, Woodman T (2007) Anxiety-induced performance catastrophes:
investigating effort required as an asymmetry factor. Br J Psychol 98:15–31.
https://doi.org/10.1348/000712606X103428

51. Nehlig A, Daval JL, Debry G (1992) Caffeine and the central nervous system: mechanisms
of action, biochemical, metabolic and psychostimulant effects. Brain Res Rev

52. Cole KJ, Costill DL, Starling RD, et al (1996) Effect of caffeine ingestion on perception of
effort and subsequent work production. Int J Sport Nutr Exerc Metab.
https://doi.org/10.1123/ijsn.6.1.14

53. Doherty M, Smith PM, Hughes MG, Davison RCR (2004) Caffeine lowers perceptual
response and increases power output during high-intensity cycling. J Sports Sci.
https://doi.org/10.1080/02640410310001655741

54. Ivy JL, Kammer L, Ding Z, et al (2009) Improved Cycling Time-Trial Performance after
Ingestion of a Caffeine Energy Drink. Int J Sport Nutr Exerc Metab 19:61–78.
https://doi.org/10.1123/IJSNEM.19.1.61

55. Mingote S, Font L, Farrar AM, et al (2008) Nucleus accumbens adenosine A2A receptors regulate exertion of effort by acting on the ventral striatopallidal pathway. J Neurosci 28:9037–9046. https://doi.org/10.1523/JNEUROSCI.1525-08.2008

56. Font L, Mingote S, Farrar AM, et al (2008) Intra-accumbens injections of the adenosine A2A agonist CGS 21680 affect effort-related choice behavior in rats. Psychopharmacology (Berl) 199:515–526. https://doi.org/10.1007/s00213-008-1174-z

57. Ciruela F, Casadó V, Rodrigues RJ, et al (2006) Presynaptic control of striatal glutamatergic neurotransmission by adenosine A1-A2A receptor heteromers. Journal of Neuroscience 26:2080–2087. https://doi.org/10.1523/JNEUROSCI.3574-05.2006

58. Chen JF, Moratalla R, Impagnatiello F, et al (2001) The role of the D2 dopamine receptor (D2R) in A2A adenosine receptor (A2AR)-mediated behavioral and cellular responses as revealed by A2A and D2 receptor knockout mice. Proc Natl Acad Sci U S A 98:1970–1975. https://doi.org/10.1073/PNAS.98.4.1970/ASSET/47A065D8-92E2-4687-BD9E-7E79CF248371/ASSETS/GRAPHIC/PQ0313667005.JPEG

59. Gerdeman GL, Ronesi J, Lovinger DM (2002) Postsynaptic endocannabinoid release is critical to long-term depression in the striatum. Nature Neuroscience 2002 5:5 5:446–451. https://doi.org/10.1038/nn832

60. Nambu A, Tokuno H, Takada M (2002) Functional significance of the cortico–subthalamo–pallidal 'hyperdirect' pathway. Neurosci Res 43:111–117. https://doi.org/10.1016/S0168-0102(02)00027-5

61. Dragicevic N, Delic V, Cao C, et al (2012) Caffeine increases mitochondrial function and blocks melatonin signaling to mitochondria in Alzheimer's mice and cells. Neuropharmacology 63:1368–1379. https://doi.org/10.1016/J.NEUROPHARM.2012.08.018

62. Giunta S, Andriolo V, Castorina A (2014) Dual blockade of the A1 and A2A adenosine receptor prevents amyloid beta toxicity in neuroblastoma cells exposed to aluminum chloride. Int J Biochem Cell Biol 54:122–136. https://doi.org/10.1016/J.BIOCEL.2014.07.009

63. AS Aguiar ASIAPCRC, Aguiar AS, Speck AE, et al (2018) The exercise sex gap and the impact of the estrous cycle on exercise performance in mice. 8:10742. https://doi.org/10.1038/s41598-018-29050-0

64. Chen H-Y, Wang H-S, Tung K, Chao H-H (2015) Effects of Gender Difference and Caffeine Supplementation on Anaerobic Muscle Performance. Int J Sports Med 36:974–978. https://doi.org/10.1055/s-0035-1550048

65. Skinner TL, Desbrow B, Arapova J, et al (2019) Women Experience the Same Ergogenic Response to Caffeine as Men. Med Sci Sports Exerc 51:1195–1202. https://doi.org/10.1249/MSS.0000000000001885

66. Butts NK, Crowell D (2013) Effect of Caffeine Ingestion on Cardiorespiratory Endurance in Men and Women. http://dx.doi.org/101080/02701367198510605333 56:301–305. https://doi.org/10.1080/02701367.1985.10605333

1   67.   Grgic J (2021) Effects of Caffeine on Resistance Exercise: A Review of Recent Research.
2   Sports Medicine 2021 51:11 51:2281–2298. https://doi.org/10.1007/S40279-021-01521-
3   X

4   68.   Sabblah S, Dixon D, Bottoms L (2015) Sex differences on the acute effects of caffeine on
5   maximal strength and muscular endurance. https://doi.org/103920/CEP150010 11:89–
6   94. https://doi.org/10.3920/CEP150010

7   69.   Mielgo-Ayuso J, Marques-Jiménez D, Refoyo I, et al (2019) Effect of Caffeine
8   Supplementation on Sports Performance Based on Differences Between Sexes: A
9   Systematic Review. Nutrients 11:. https://doi.org/10.3390/nu11102313

10   70.   Salinero JJ, Lara B, Abian-Vicen J, et al (2014) The use of energy drinks in sport: perceived
11   ergogenicity and side effects in male and female athletes. Br J Nutr 112:1494–1502.
12   https://doi.org/10.1017/S0007114514002189

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CAPTIONS

Fig 1. The behavioral effects of systemic caffeine in mice, namely psychostimulating (A and B), improved

motor coordination (C), no effect on grip strength (D), but increase in grip time (F). Panel F' is the

integral of strength × time (F), representing increased caffeine-induced impulse. Data are mean ± SEM.

N=7-8 animals/group for three independent experiments. *P<0.05 *vs.* saline (Student's t-test).

Fig 2. The behavioral effects of intrastriatal (A) injection of caffeine in mice, namely psychostimulating (B

and C), no effect on grip strength (D), but an increase in grip time (E). Panel F' is the integral of strength

× time (F), representing increased caffeine-induced impulse. Data are mean ± SEM. N=7-8 animals/group

for three independent experiments. *P<0.05 *vs.* saline (Student's t-test).

Fig 3. Extracellular electrophysiological recordings of population spike responses at corticostriatal

synapses in the dorsolateral striatum in brain coronal slices (A). All groups displayed superimposable

input/output curves, indicating similar efficiency of corticostriatal transmission (B). Alteration of basal

synaptic transmission after exposure to different concentrations of caffeine (C). Twenty minutes after

caffeine infusion, only 10 μM caffeine increased synaptic efficiency (D). The induction of synaptic

plasticity by high-frequency stimulation (HFS) caused a long-term depression (LTD) in corticostriatal

synapses (E), which was shifted into a long-term potentiation (LTP) upon exposure to 1 μM caffeine, as

illustrated in the time course (E) and in the average alterations of the amplitude of synaptic plasticity 30-

40   min   after

HFS (F). Data are means ± SEM (n=6 slices/group). One-way ANOVA followed by Newman–Keuls post

hoc tests). aCSF – artificial cerebrospinal fluid. i/o – input and output. PS – pop spike population.

Fig 4. Caffeine improved mitochondrial metabolism in SH-SY5Y cells. Whereas it did not change cell

viability (A), caffeine (1 µM) increased mitochondrial membrane potential (B) and mitochondrial mass

(C). Panels D-H represents the flow cytometry analyses. Data are means ± SEM. One-way ANOVA

followed by Newman–Keuls post hoc tests). MTG - Mitotracker Green. MTR - Mitotracker Red. MTT (3-

(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide).

A MTT 20 min

B MTR 20 min

C MTG 20 min

D Negative Control