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Mental fatigue impairs cycling endurance performance and perception of effort,
but not muscle activation

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Running head: mental fatigue and cycling endurance performance

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Abstract.

Mental fatigue is induced by prolonged engagement in cognitively demanding tasks and impairs

endurance performance. The neuropsychophysiological mechanisms underlying this decreased

performance remain unclear, with suggestion that mental fatigue may disrupt motor command and

consequently muscle activation. We aimed to test this hypothesis in a repeated cross-over design study

in which 18 participants completed two experimental sessions involving a time-to-exhaustion cycling test

at 80% of peak power output. Each cycling task was preceded by 1h of a prolonged Stroop task (Stroop

session) or a neutral control task (Control session). Perception of effort and surface electromyography

from ten lower-limb muscles of the right leg were recorded at regular intervals during cycling. Mental

fatigue was higher in the Stroop compared to the Control session ($p = .002$). Endurance cycling time was

111 ± 160 s shorter in the Stroop than in the Control session ($p = .009$). No significant differences in

electromyography parameters were observed between Stroop and Control sessions, for any muscle ($p >$

.05). Perception of effort was higher in the Stroop session from the onset of the cycling task ($p = .006$),

and the rate of increase in perception of effort was significantly higher in the Stroop than Control session

($p = .031$). Our findings do not support the hypothesis that mental fatigue alters motor control or

increases central motor command, as no changes in muscle activation were detected. Conversely, our

results reinforce the notion that prolonged cognitive engagement impairs endurance performance

primarily through an increased perception of effort. Future research should consider combining surface

electromyography with more sensitive neurophysiological techniques to investigate potential subtle

changes in motor drive during dynamic, whole-body tasks under mental fatigue.

Keywords.

Impact statement.

Our study confirms that mental fatigue induced by prolonged cognitive exertion impairs cycling

endurance performance. By combining measurements of perceptual responses and multi-muscle surface

EMG during the endurance task, we observed that the decreased endurance performance is related to

an increased perceived effort in the presence of mental fatigue, not related to alterations in motor

command.

Introduction.

Mental fatigue is a psychobiological state induced by prolonged engagement in demanding cognitive tasks (Boksem and Tops 2008; Marcora et al. 2009). Subjectively, mental fatigue is characterized by an increase in tiredness and lack of energy (Boksem and Tops 2008), and an aversion to continuing or initiating tasks (Müller and Apps 2019). Objectively, mental fatigue alters cognitive functioning, leading to decreased cognitive performance or the maintenance of performance at the cost of increased effort (Mangin and Pageaux 2025). Beyond the negative effect of mental fatigue on cognitive performance, numerous studies have also reported its detrimental effects on physical performance (Van Cutsem et al. 2017; Brown et al. 2020; Pageaux and Lepers 2018; Giboin and Wolff 2019). Mental fatigue has been shown to reduce endurance performance in isometric tasks performed to exhaustion (Bray et al. 2008; Pageaux et al. 2013; Alix-Fages et al. 2023). The impairment in endurance performance has also been observed during cycling and running endurance tests (Marcora et al. 2009; MacMahon et al. 2014; Smith et al. 2016; Martin et al. 2016). This reduction in endurance performance has been proposed to be associated with a higher-than-normal perception of effort (Marcora et al. 2009; Pageaux and Lepers 2018).

The perception of effort during a physical task, defined as the conscious awareness of how hard, heavy, and strenuous the task feels (Marcora 2010), is a key regulator of endurance performance (Pageaux 2014; Marcora et al. 2008; Marcora and Staiano 2010). At the behavioral level, building on the intensity of motivation theory (Brehm and Self 1989; Richter et al. 2016), the perception of effort can be linked to the regulation of endurance performance through the psychobiological model of endurance performance (Marcora 2019; Marcora et al. 2008; Pageaux 2014). According to this framework, task disengagement, also referred to as exhaustion or task failure, occurs when an individual exerts the maximal effort they are willing to invest in the task. This upper limit is determined by the individual's motivation to succeed (Marcora 2019; Marcora et al. 2008; Pageaux 2014). Previous studies have

demonstrated that, for the same mechanical output, the perception of effort increases following

prolonged engagement (≥ 30 min) in cognitive tasks (Marcora et al. 2009; Pageaux et al. 2013). This

heightened perception of effort leads individuals to reach the maximum effort they are willing to exert

earlier, resulting in task disengagement and impaired endurance performance.

Understanding the neurophysiological alterations that lead to an increased perception of effort in

the presence of fatigue could help unravel the origins of the detrimental effects of mental fatigue on

endurance performance. The perception of effort is generated by the brain's processing of sensory

signals. Although the nature of these signals remains debated, converging evidence suggests that effort

perception originates from signals related to the motor command (for reviews, see Marcora (2009);

Bergevin et al. (2023); Mangin and Pageaux (2026)). During voluntary muscle contractions, motor

commands are sent to the working muscles, and an efference copy of these motor commands, referred

to as the corollary discharge, is transmitted to cortical areas involved in sensory processing (Christensen

et al. 2007; McCloskey). The corollary discharge model proposes that perceived effort is generated

through the brain's processing of this signal (De Morree et al. 2012; Bergevin et al. 2023). Within this

framework, an alteration in perceived effort during physical tasks may result from changes in motor

commands and their corollary discharges, from altered brain processing of these signals, or from both.

In line with this model, the increase in perceived effort under mental fatigue may be linked to

specific modulations of frontal cortex activity, potentially driven by metabolic alterations (Barakat et al.

2025; Pessiglione et al. 2025). Among frontal brain areas, the anterior cingulate cortex is likely a key

structure in the negative effects of mental fatigue on the perception of effort, and consequently, on

endurance performance. The anterior cingulate cortex plays a crucial role in cognitive control and effort-

based decision-making (Shenhav et al. 2016), and its activity increases during demanding cognitive tasks

(Carter et al. 1998; Pardo et al. 1990). Specific cingulate regions project extensively to premotor and

motor cortices, as well as to the spinal cord, all key structures involved in motor command and control

(Medford and Critchley 2010; Paus 2001; Gillies et al. 2019). These connections suggest that cognitively

demanding tasks inducing mental fatigue could disrupt motor command by altering prefrontal circuitry

involved in the regulation of the motor command during task execution. Such interactions may influence

muscle activation and could explain reports of increased muscle activity under mental fatigue during

isometric exercise (Bray et al. 2008; Jacquet et al. 2021). However, a recent study observed that mental

fatigue induced by a prolonged Stroop task, while decreasing dorsiflexion isometric endurance

performance, did not affect motor command and muscle fibers recruitment assessed with high density-

electromyography (EMG) (Alix-Fages et al. 2023). The discrepancies between these studies highlight the

need to further investigate how mental fatigue influences muscle activation, particularly during dynamic

exercise modalities, such as cycling, which better reflect real-world exercise condition. Indeed, isometric

contractions may not fully capture the complexity of motor control during ecological movement. In this

context, increased vastus lateralis activity has been observed during a submaximal cycling task under

mental fatigue (Pageaux et al. 2015). However, because cycling requires the coordinated activation of

multiple muscles (So et al. 2005), the results of Pageaux et al. (2015), which focused on a single muscle,

do not provide a comprehensive understanding of the effects of mental fatigue on muscle activation and

should therefore be replicated using a more comprehensive assessment of lower-limb muscle activation.

The present study aimed to investigate whether the presence of mental fatigue is associated with

alterations in muscle activation during dynamic exercise. In secondary analysis, we aimed to replicate the

negative effect of mental fatigue on endurance performance. We selected cycling as the endurance

exercise because it allows for a more precise and comprehensive analysis of lower-limb muscle EMG

activity compared to running, as previously performed in our laboratory (Hug et al. 2019). We

hypothesized that mental fatigue would increase perception of effort and alter lower limb muscle

activation, thereby reducing endurance performance.

Methods.

Participants

Twenty participants (8 female; age: 22 ± 5 years; height: 175 ± 12 cm; weight: 68 ± 14 kg) participated in this repeated cross-over design study. Participants reported engaging in 2-6 h of moderate physical activity per week, but did not report extensive cycling training history and were not currently active cyclists. Participants were instructed to refrain from engaging in any strenuous lower-limb physical activity during the 24 h preceding each laboratory visit. Participants were provided with written instructions detailing all study procedures but were unaware of its objectives and hypotheses. They were not informed that the cognitive task was used to induce mental fatigue and modify the subsequent endurance performance. Written informed consent was obtained from each participant. This study adhered to the standards outlined in the latest revision of the Declaration of Helsinki (with the exception of registration in a database) and was approved by the Nantes University ethics committee (n° IRB: IORG0011023).

Two participants were excluded after reporting engagement in strenuous physical activity a few hours prior to the experimental testing. As a result, 18 participants were included in the statistical analysis. This sample size was constrained by the time resources available for the MSc students recruited as experimenters on this study, and we recruited as much participants as possible in this given time (Lakens 2022). A sensitivity analysis revealed that with our sample size (n = 18), the minimal detectable effect size (Cohen's d) for a paired t-test is 0.70 with 80% power and $\alpha = 0.05$. Regarding our Statistical Parametric Mapping (SPM) analysis, as it includes a correction for temporal smoothness and multiple comparisons across the time series, the actual minimal detectable effect size is likely higher. Thus, only medium-to-large effects could be reliably detected in our study.

Study design and overview of the laboratory visits

This study was a within-subject design, with participants visiting the laboratory on three separate

occasions. The first visit was a familiarization session, and the second and third visits were the control

and experimental sessions (randomized, counterbalanced order). All visits were spaced at least 72 h

apart. The control and experimental sessions were identical, except for the cognitive task performed:

watching a documentary (Control session) or performing a Stroop task (Stroop session). Each session

began with questionnaires about mental fatigue and motivation. EMG electrodes were then placed on

ten muscles of the right leg and signal quality was verified (see the *"Electromyography"* section).

Participants then engaged either in 1 h of the Stroop task or 1 h of viewing an emotionally neutral

documentary. Mental fatigue, motivation and boredom were measured during and post Stroop and

documentary. Then, participants promptly transferred to the cycle ergometer and performed a cycling

time to exhaustion test at 80% of their peak power output (PPO) until exhaustion.

Visit 1: Familiarization and incremental test

Participants began by determining their preferred pedaling cadence on a cycle ergometer set up in

hyperbolic mode (Excalibur Sport, Lode, Groningen, Netherlands). Participants cycled for 1 min at 100 W,

followed by 1 min at 175 W, and 1 min at 250 W. Participants were instructed to cycle at a freely chosen

cadence between 60–90 rpm, and this preferred cadence was recorded for each stage. If a participant

did not report at least a moderate effort when cycling at 250W, additional 1-min bouts with increments

of 50 W were performed until the participant had to produce a moderate effort. The preferred cadence

recorded at the power output closest to 80% of the participant's PPO was used during the time to

exhaustion test performed in the Control and Stroop sessions (72 ± 6 rpm).

After a 5-min rest, participants performed an incremental test at their predetermined preferred

cadence, starting at 100 W with increments of 25 W every minute until exhaustion. Exhaustion was

defined as either voluntary disengagement from the test or the inability to maintain the target cadence

within ± 3 rpm for more than 3 s. The last fully completed stage was used to determine the participant's

PPO. This PPO (mean of 250 ± 65 W), was used to determine the workload for the time to exhaustion

tests performed in the Control and Stroop sessions. Participants were then familiarized with the Stroop

task. If the participants did not clearly demonstrate an understanding of the instructions, they had to

complete additional blocks until they fully grasped the task. Then, participants were provided with

detailed instructions on how to dissociate effort and muscle pain perceptions, and how to report the

intensity of each perception with the CR100 scale (Borg and Kaijser 2006; Pageaux et al. 2020). Finally,

participants performed the cycling time to exhaustion test at 80% PPO for familiarization.

Visit 2 and 3: Stroop and Control sessions.

Participants began each session by engaging, in a randomized and counterbalanced order, for 60-

min in an experimental (Stroop task) or control (watched a documentary) session. In the control and

Stroop sessions, mental fatigue and motivation to perform the cycling task were assessed before, at 30-

min (mid), and immediately post cognitive tasks. Boredom was also measured mid and post cognitive

tasks. Upon completing the questionnaires, participants transferred to the cycle ergometer to begin the

cycling time to exhaustion test. Mental fatigue and motivation to perform the cycling time to exhaustion

test was also measured before and after the test. An overview of the Control and Stroop sessions is

presented in Figure 1.

Figure 1. Overview of the experimental and control sessions. Participants visited the laboratory
on three distinct occasions. The first visit was dedicated to peak power output (PPO) measurement and
familiarization procedures. The second and third visits were the experimental sessions. After completing
either a one-hour Stroop task (Stroop session; two 30-min blocks) or watching a documentary (control
session), participants performed a 3-min warm-up at 40% PPO, followed by a time-to-exhaustion test at
80% PPO. Participants reported their perceived effort and muscle pain at regular intervals during the
cycling test. Electromyographic (EMG) activity was continuously recorded and analyzed over the 20
pedaling cycles preceding each effort and pain perception measurement. We used visual analogue scales
to measure mental changes in mental fatigue, motivation and boredom during the sessions. Participants
completed the NASA-TLX at the very end of the procedure.

Stroop task. Participants performed a modified version of the incongruent Stroop task (Mangin et

al. 2021). The task was performed while seated in an isolated room, using the SuperLab® software

(Cedrus, USA), displayed on a 16-inch monitor placed on a desk directly in front of the participant. In visit

1, participants familiarized with the Strop task by completing two blocks of 24 words. In the

experimental session, participants completed the incongruent Stroop task for 1 h, with two bouts of 30-

min separated by a 1-min period for mental fatigue, motivation and boredom measurement. Each trial

began with the presentation of a fixation cross point enclosed in either a square or a circle for 50 ms at

the center of the screen that was positioned in front of the participant. The fixation cross alone

remained in the middle of the screen for 400 ms. Immediately after this preparatory signal, a word, the

response signal, appeared at the center of the screen and remained visible until the participant

responded orally. In cases of omission, the response signal was displayed for 1250 ms before being

replaced by a fixation cross for 300 ms. If a participant responded before the end of the 1250 ms, a

fixation cross appeared at the center of the screen and remained visible for the remainder of the 1250

ms, plus an additional 300 ms. As a result, each trial lasted exactly 2 seconds. The response signals

consisted of color names (i.e., red, blue, yellow, or green) written in an incongruent ink color (e.g., red

written in blue). In this task, the meaning of the word was always incongruent with the ink color used to

display it. When the fixation cross was enclosed in a square, participants were instructed to read the

word, whereas when it was enclosed in a circle, they were required to name the color of the ink. In 50%

of the trials, participants were required to read the word, while in the remaining 50%, they had to name

the ink color. This 50/50 distribution was chosen to minimize learning effects during the incongruent

Stroop task (Dulaney and Rogers 1994), and to increase task difficulty by engaging cognitive flexibility in

addition to inhibitory control. The order of trial presentation was randomized.

Documentary watching. Each participant watched the French version of the documentary *Home* by

Y.A. Bertrand. This documentary has been used as an appropriate control condition in the context of

mental fatigue studies (Jacquet et al. 2021). The duration of this control task was matched to that of the

Stroop task. Participants sat in an isolated room, where the documentary was projected onto a screen

positioned 1 m in front of them.

Cycling time to exhaustion test. After completion of the cognitive tasks and following a 3-min

warm-up at 40% PPO, participants completed a time to exhaustion test at 80% PPO at their preferred

cadence determined in visit 1. Participants had to remain seated on the saddle. To prevent changes in

hip angle caused by lowering the hands on the handlebars, participants were instructed to keep their

hands in the same position throughout the test (i.e., on top of the handlebars). Both instructions were

visually controlled by the experimenters. Participants reported the intensity of perceived effort and

muscle pain every 2 min during the task. No encouragement was provided at any point during the time-

to-exhaustion test.

Endurance performance was quantified as time to exhaustion, defined as the time at which

participants voluntarily disengaged from the task or were unable to maintain their preferred cadence (±

3 rpm) for more than 3 s despite receiving a standardized, neutral, verbal reminder to return to the

target cadence. No motivational encouragement was provided during the test. To compare EMG and

perceptual responses during the Stroop and Control sessions, we used individual isotime analysis (Nicolò

et al. 2019). For each participant, their shortest time to exhaustion across the Stroop and Control

sessions was defined as 100% isotime. Two other time points, corresponding to 0% and 50% of this 100%

isotime, were then calculated for each participant and session. The 0% isotime time point was always the

first measurement available during the time to exhaustion test.

EMG

EMG recording and electrode placement. Surface EMG was continuously recorded at 2000 Hz

during the cycling exercise using a wireless EMG system (Wave Plus wireless system, Cometa, Bareggio

MI, Italy) and dedicated software (WavePlus 1.4.0, Cometa, Bareggio MI, Italy). Data were collected for

ten muscles of the right lower limb: gluteus maximus (GMax), semitendinous (ST), biceps femoris (BF),

vastus medialis (VM), vastus lateralis (VL), rectus femoris (RF), gastrocnemius medialis (GM),

gastrocnemius lateralis (GL), soleus (SOL) and tibialis anterior (TA). A pair of self-adhesive Ag/AgCl

electrodes (Covidien, Mansfield, MA, USA) was placed on each muscle with a 20-mm center-to-center

inter-electrode distance. Electrode placements followed SENIAM recommendations, with the skin

shaved and cleaned with alcohol to minimize impedance. To prevent movement-induced artifacts, the

wireless EMG units were secured with adhesive tape. The electrode positions established during visit 2

was marked to ensure consistent placement in visit 3.

Data analysis. Custom-written Matlab (Mathworks, Natick, USA) routines were used to process

EMG data, using the open-source Biomechanical Toolkit library (Barre and Armand 2014). Raw EMG

signals were band-pass filtered between 10 Hz-450 Hz (Butterworth zero-lag 4th order), full-wave

rectified, and low-pass filtered at 10 Hz (Butterworth zero-lag 2nd order). All EMG data were time-

normalized to a cycling cycle over 360 points.

During the cycling time-to-exhaustion test, EMG data were extracted at four time points: 0%, 50%,

and 100% isotime, as well as at exhaustion. For each muscle, session, and time point, up to 20

consecutive pedaling cycles were initially extracted. Following visual inspection, cycles affected by

transient artifacts (e.g., movement-induced spikes or signal disturbances related to cable interference)

were excluded (see EMG data curation). To ensure a fully balanced within-subject design across

participants, sessions, muscles, and time points, the minimum common number of artifact-free cycles

available across all conditions was determined (16 cycles). Accordingly, exactly 16 complete pedaling

cycles were retained for each participant, muscle, session, and time point for subsequent analyses.

For EMG amplitude normalization, signals were normalized to the maximal value of the mean EMG

profile obtained at 0% isotime for each muscle and each session. Specifically, for each participant,

muscle, and session, the 16 retained pedaling cycles at 0% isotime were averaged to compute a

representative mean EMG waveform. The peak amplitude of this mean waveform was then used as the

normalization reference for all corresponding time points within the same session. This procedure

ensured within-session normalization while preserving valid between-session comparisons and avoiding

potential confounding influences associated with maximal voluntary contractions or separate

normalization tasks. After amplitude normalization, the full time-normalized EMG waveform of each

retained cycle was preserved without temporal averaging across cycles in order to maintain intra-

individual and inter-cycle variability. Mean and standard deviation waveforms were computed for

descriptive visualization purposes only. The normalized EMG profiles were subsequently analyzed using

Statistical Parametric Mapping to compare activation patterns between conditions across the pedaling

cycle (see *Statistical Analysis*).

To determine whether mental fatigue influenced the consistency of neuromuscular activation, we

performed a variability analysis of the EMG signal. For each muscle, time point (isotime levels and

exhaustion), and condition (Stroop vs. Control), the point-by-point standard deviation of the EMG signal

across the 16 retained cycles was calculated over the pedaling cycle. These standard deviation

waveforms were used as indices of inter-cycle variability. Differences in variability between sessions

were assessed using paired SPM1D t-tests, conducted separately for each muscle and time point. This

approach allowed us to examine whether mental fatigue altered the stability and temporal consistency

of muscle activation across repeated pedal strokes.

EMG data curation. EMG data were curated prior to statistical analysis to ensure signal quality and

balanced statistical comparisons. Electrodes presenting persistent signal loss or severe artifacts in one of

the two sessions (e.g., low signal-to-noise ratio, movement-induced interference, or signal dropout

during prolonged acquisition) were excluded from analysis in both sessions to maintain within-subject

comparability. Across the 340 total muscle recordings (10 muscles × 18 participants × 2 sessions), 21

recordings (6%) were excluded due to poor signal quality. After electrode exclusion, the number of

participants retained per muscle for complete 2 sessions was: SOL (n = 17), RF (n = 14), VL (n = 15), BF (n

= 13), GL (n = 17), TA (n = 17), VM (n = 17), ST (n = 16), GMax (n = 14), and GM (n = 14). A total of 2720

pedaling cycles were collected across all participants and sessions. Following visual inspection, 83 cycles

(3%) were removed due to transient artifacts. After this selection, the minimum common number of

valid cycles across all participants, sessions, muscles, and time points was 16 cycles, which were retained

for statistical analysis to ensure a fully balanced repeated-measures design.

Psychological variables

Visual analog scales (VAS) were used to assess participants' mental fatigue, motivation, and

boredom. The VAS was printed as 100-mm horizontal lines, and participants responded to each scale-

specific question by placing a vertical mark on the line. For each VAS, the left and right anchors and

specific question, as well as the timing of each measurement, are described below.

Mental fatigue. In the control and Stroop sessions, participants reported their level of mental

fatigue before the cognitive tasks, after completing half of the cognitive task (30 min), immediately after

the cognitive task, and after the cycling time-to-exhaustion test. The VAS was anchored with "not

fatigued at all" and "extremely fatigued" on the left and right ends of the scale. The following question

was positioned above the VAS: *"What is your current level of mental fatigue, which is your feeling of*

exhaustion and lack of energy?" (Jacquet et al. 2021).

Motivation. Because fatigue could influence motivation (Müller and Apps 2019) and that the effort

allocated in a task is related to the motivation to perform the task (Richter et al. 2016), we measured

changes in motivation. Participants reported their level of motivation related (i) to the cognitive tasks

before the tasks, midway through the cognitive tasks (30 min) and immediately after the cognitive tasks;

and (ii) the cycling task before and immediately after the task. The VAS was anchored with "not

motivated at all" and "extremely motivated" on the left and right ends of the scale. The following

question was positioned above the VAS before the cognitive and cycling tasks, halfway through the

cognitive tasks, and after the cognitive and cycling tasks, respectively: *"What is your motivation to*

perform the task at hand?", "What is your motivation to continue the task you have just completed?",

"What is your motivation to repeat the task you have just completed?"

Boredom. Because boredom has been identified as a confounding factor in the development of

mental fatigue (Mangin and Pageaux 2025), we measured changes in boredom during the cognitive

tasks. Participants reported their level of boredom midway through the cognitive tasks and immediately

after the cognitive tasks. The VAS was anchored with "not bored at all" and "extremely bored" on the

left and right ends of the scale. The following question was positioned above the VAS: *"Were you bored*

during the task you just completed?"

During the cycling warm-up and time to exhaustion tests, participants reported the intensity of

their perceived effort and muscle pain using the CR100 scale (Borg and Kaijser 2006) at specific and

consistent time points: 110 s after the start of the warm-up at 40% PPO, 30 s after starting the time to

exhaustion test at 80% PPO, and every 2 min afterwards and at exhaustion. Details for each perception

are presented below.

Perceptions of effort. Participants rated the intensity of their perceived effort to cycle. They were

asked to refer to their sensations of how hard and intense it felt to move their legs and breathe.

Participants were explicitly instructed to consider only their perception of effort and not any other

exercise-related perceptions such as muscle pain or fatigue (Bergevin et al. 2023; Pageaux 2016). The

CR100 scale ranges from 0 (no effort at all) to 100 (maximal effort), with maximal effort anchored to the

most intense exertion the participant had ever experienced during a physical task. Modifications were

made to the scale's 0 and 100 anchors to explicitly incorporate the term "effort" (Jacquet et al. 2021).

The scale includes verbal anchors corresponding to different intensity levels, such as weak/light (score of

13), moderate (23), strong/heavy (50), and very strong (70). Participants could report values above 100 if

they perceived an effort exceeded their maximal effort previously experienced (i.e., rating 100). To

enhance understanding, each participant was provided with verbal examples of "no effort at all" (e.g.,

sitting and relaxing without cognitive engagement) and "maximal effort" (e.g., the most intense effort

they had ever experienced during a high intensity whole-body physical task).

Perceptions of muscle pain. Muscle pain was assessed during the cycling task, as it is known to

influence endurance performance and to develop during endurance exercise (O'Connor and Cook 1999).

Participants used a separate modified CR100 scale to assess muscle pain, with the word "pain" explicitly

incorporated into the anchor descriptions: 0 (no pain at all) and 100 (maximal pain). Similar to the

perceived effort scale, memory anchoring was used to define the 100-point reference. Participants were

instructed to rate "the intensity of pain they felt during the exercise", focusing specifically on localized

sensations in the leg muscles. These sensations were described as potentially including feelings of

burning, intense, or sharp pain (O'Connor and Cook 1999). It was emphasized that participants should

not confuse or equate their ratings of effort with their perception of pain (Bergevin et al. 2023; Pageaux

2016). To ensure proper use of the scale, each participant was provided with verbal examples illustrating

"no muscle pain" and "maximal muscle pain" as reference points.

Subjective workload. Participants reported their perceived workload at the end of each

experimental session using the NASA-TLX scale (Hart and Staveland 1988), that consists of six items, i.e.,

(i) mental demand, (ii) physical demand, (iii) temporal demand, (iv) performance, (v) effort, and (vi)

frustration. Participants rated each item on a scale divided into twenty equal intervals anchored by a

bipolar descriptor (i.e., high/low). This score was multiplied by five, resulting in a final score between 0

and 100 for each item.

Statistics.

Except for EMG data analyzed with Matlab, statistical analysis was conducted with Jamovi 1.2.27.

Time to exhaustion. Paired *t*-tests were conducted to assess differences in endurance performance

between sessions (Stroop vs. Control).

EMG. To assess differences in muscle activation patterns between Stroop and Control sessions, we

performed time-series analyses using Statistical Parametric Mapping (SPM1D v0.4 Matlab library)

(Pataky et al. 2013). EMG signals were analyzed across the normalized pedaling cycle (0–100%), with

separate analyses conducted for each muscle. For the isotime series (0%, 50%, and 100%) during the

time to exhaustion test, a two-way repeated-measures ANOVA was used, with session (Stroop vs.

Control) and isotime point (three isotime levels) as within-subject factors. This analysis allowed us to

evaluate the evolution of muscle activation across the task duration and whether this evolution differed

between Stroop and Control sessions under increasing fatigue. In addition, paired t-tests were

conducted using SPM1D to specifically compare both sessions at task failure. Isolating these comparisons

enabled targeted hypothesis testing without unnecessarily complicating the factorial design. Each

analysis was based on 16 complete pedaling cycles per subject, per session, and per time point, with no

temporal averaging, to preserve within-subject variability and cycle-to-cycle dynamics. Muscles were

analyzed individually, rather than as a factor in the statistical models, based on physiological and

methodological rationale. Each muscle has a distinct activation profile and biomechanical function during

cycling, and comparing signals with fundamentally different temporal shapes would violate the

assumptions of time-series based SPM analysis. Treating each muscle independently ensured both

physiologically meaningful and statistically appropriate comparisons. Statistical significance was set at α

= 0.05 for all SPM analyses.

Perceptual responses. To assess the effect of session on perceptions of effort and muscle pain,

paired *t*-tests were conducted on perceptual responses recorded during the warm-up and at exhaustion.

A two-way repeated measures ANOVA [session (Stroop vs. Control) × time (0%, 50% and 100% isotime)

was conducted for perceptual responses during the time to exhaustion test.

Mental fatigue, motivation and boredom. Repeated measured ANOVA were used to assess

changes over time in these variables in each session (Stroop vs. Control). For mental fatigue, the factor

time included four levels: pre cognitive task, midway through the cognitive task, post cognitive task and

post cycling. For motivation to perform the cognitive tasks, the factor time included three levels: pre

cognitive task, midway through the cognitive task, post cognitive task. For motivation to perform the

cycling tests, the factor time included two levels: pre cycling and post cycling. For boredom, the factor

time included two levels: midway through the cognitive task and post cognitive task.

The normality of the data was verified using the Shapiro-Wilk test and visual inspection of the QQ

plots. For pairwise comparisons, when the data deviated from a normal distribution, we employed the

Wilcoxon signed-rank test. In these instances, we present the results of both the Student *t*-test and the

Wilcoxon rank test. Post-hoc comparisons of the repeated measures ANOVA were corrected for multiple

comparisons with the Holm-Bonferroni method. The alpha level for statistical significance was set at $\alpha \leq$

0.05. Effects size are reported as partial eta squared (η_p^2), and thresholds for small, moderate, and large

effects were set at 0.01, 0.07, and 0.14, respectively (Cohen 1988). Cohen's *d* were calculated when *t*-

tests were performed and thresholds for small, moderate and large effects were set at 0.2, 0.5, and 0.8

respectively (Cohen 1988). When a Wilcoxon rank test was performed, the rank biseral correlation (r_{rb}) is

reported. Greenhouse-Geisser correction to the degrees of freedom was applied when violations of

sphericity were present. All data are presented as means ± standard deviation, unless stated.

Results.

Manipulation checks for mental fatigue induction

Mental fatigue. Mental fatigue increased overtime ($F(2, 34) = 29.19$, $p < .001$, $n_p^2 = .632$) and was

higher in the Stroop than in the Control session (main effect of session: $F(1, 17) = 8.36$, $p = .010$, $n_p^2 = $

.330). The session × time interaction reached significance ($F(3, 51) = 4.02$, $p = .012$, $n_p^2 = .191$), and the

details of the posthoc comparisons are presented in Figure 2A. Participants reported similar levels of

mental fatigue pre cognitive task in the Stroop and Control sessions ($t(17) = -0.879$, $p = .783$, $d = .207$,

95%CI [-.671, .263]), but higher levels of mental fatigue post cognitive task in the Stroop compared to the

Control session ($t(17) = -3.55$, $p = .015$, $d = -.837$, *95%CI* [-1.367, -.288]).

Motivation. Motivation to perform the cognitive tasks decreased overtime ($F(2, 34) = 94.36$, $p < $

.001, $n_p^2 = .847$) and was lower in the Stroop than in the Control session (main effect of session: $F(1, 17)$

$= 5.88$, $p = .027$, $n_p^2 = .257$). The session × time interaction reached significance ($F(2, 34) = 5.99$, $p = .006$,

$n_p^2 = .261$), and details of the posthoc results are presented in Figure 2B. Pre cognitive task, participants

reported similar levels of motivation in the Stroop and Control sessions ($t(17) = -.175$, $p = .863$, $d = -.041$,

95%CI [-.503, .422]). Midway through cognitive tasks, participants were more motivated to continue in

the Control than in the Stroop session ($t(17) = 3.382$, $p = .011$, $d = .797$, *95%CI* [.256, 1.321]). Post

cognitive tasks, participants reported similar levels of motivation to repeat the cognitive task they had

just completed ($t(17) = 2.027$, $p = .117$, $d = .478$, *95%CI* [-.017, .960]). Motivation (Figure 2C) to perform

the cycling tests decreased from pre to post test ($F(1, 17) = 12.49$, $p = .003$, $n_p^2 = .424$), with no difference

between sessions ($F(1, 17) = .108$, $p = .476$, $n_p^2 = .006$) and no session × time interaction ($F(1, 17) = .003$,

$p = .956$, $n_p^2 < .001$).

Boredom. VAS scores for boredom were 4.0 ± 2.8 and 4.3 ± 3.0 at midway and post task for the

Control session, and 5.3 ± 2.5 and 6.5 ± 2.7 for the Stroop session. Participants were more bored when

performing the Stroop task than when watching the documentary (main effect of session: $F(1, 17) = 6.61$, $p = .020$, $n_p^2 = .280$). Boredom increased from midway to post task ($F(1, 17) = 7.80$, $p = .012$, $n_p^2 = .314$), with no session × time interaction ($F(1, 17) = 2.39$, $p = .140$, $n_p^2 = .123$).

Figure 2. Changes in mental fatigue and motivation during the control (documentary) and Stroop sessions. Panel A shows mean and individual values for mental fatigue level before the cognitive tasks (pre CT), midway through the cognitive tasks (mid CT), immediately after the cognitive tasks (post CT) and after the cycling time to exhaustion test (post CYC). Panel B shows mean and individual values for motivation to perform the cognitive task measured pre CT, mid CT and post CT. Panel C shows mean and individual values for motivation to perform the cycling time to exhaustion test measured pre CYC and post CYC. The symbol ● indicates a difference between sessions at the same time point; * indicates a difference with the previous time point within the same session; † indicates a difference with pre CT within the same session. One symbol denotes $p < .05$, two symbols denote $p < .01$, three symbols denote $p < .001$. Data are presented as mean ± standard deviation.

Cycling time to exhaustion

There was no order effect (t(17) = 0.36, p = .726, d = -.121, *95%CI* [-.773, .539]). The time to

exhaustion in the first session (793 ± 114) did not differ from the time to exhaustion in the second

session (812 ± 199).

The time to exhaustion decreased by 9.3 ± 11 % (-111 ± 160 s) in the Stroop compared with the

Control session (t(17) = 2.95, p = .009, d = .694, *95%CI* [.169, 1.200]). Due to deviation from a normal

distribution, we also employed a Wilcoxon rank test, which confirmed the difference between sessions

(W = 159, p = .001, r_{rb} = .860). In 83% of participants (15 out of 18), endurance performance was shorter

in the Stroop compared with the documentary session (Figure 3).

Figure 3. Cycling endurance performance. The cycling time to exhaustion at 80% peak power
output is displayed for the Control (documentary) and Stroop sessions. Large circles and diamonds
represent mean data ± standard deviation, while small circles and diamonds indicate individual data
points connected by solid lines. ●● denotes a significant difference between sessions (p < 0.01).
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Electromyography

SPM analyses revealed no significant main effect of session (Stroop vs. Control) on EMG activation

profiles for any muscle at any of the examined time points (Figure 4 and Supplementary Material S1).

This absence of difference was also observed for both the time-specific comparison at exhaustion, with

no significant session-related detected for any muscle (SPM statistic = t; df = 16; p > .05; clusters = none)

(Figure 5). Similarly, in the two-way repeated-measures ANOVA conducted across the isotime points (0%,

50%, and 100%), the main effect of session remained non-significant, and no significant session × isotime

point interaction was observed (Table 1). In contrast, a significant main effect of isotime point was

observed in specific phases of the pedaling cycle in a subset of muscles: GMax, VL, ST, and GM (Figure 4,

Table 1). For clarity reason, data for the RF, BF, VM, SOL and GL are presented as supplementary material

S1. Individual data for EMG analysis are provided as supplementary material S2.

The variability analysis revealed no differences in inter-cycle EMG variability between the Stroop

and Control sessions, for any muscle and at any of the tested time points (exhaustion, and the three

isotime points). Paired SPM1D t-tests conducted on the standard deviation profiles of the EMG signal did

not identify any significant clusters in favor of either session. These results suggest that mental fatigue

did not affect the consistency or temporal stability of muscle activation patterns during the cycling test.

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Figure 4. Electromyographic (EMG) activity of the lower limb muscles during the cycling time to
exhaustion test for the control (documentary) and Stroop sessions. Electromyographic (EMG) activity of

the gluteus maximus (GMax), vastus lateralis (VL), semi tendinous (ST), gastrocnemius medialis (GM) and
tibialis anterior (TA) muscles throughout the pedaling cycle. EMG activity was measured at three isotime
points (0%, 50%, and 100% – from top to bottom). Data are presented for two sessions: control (solid red
line) and Stroop (solid blue line). The x-axis represents the normalized pedaling cycle (points), while
the y-axis indicates normalized EMG activity. Solid lines represent the average muscle activity, with
shaded areas denoting the standard deviation. Significant differences ($p < 0.05$) over time, assessed using
a two-way repeated-measures ANOVA with factors task session (Stroop vs. Control) and isotime (0%,
50%, and 100%), combined with Statistical Parametric Mapping analysis, are indicated by vertical black
bars beneath each graph.

**Figure 5. Electromyographic (EMG) activity of the lower limb muscles at exhaustion for the control
(documentary) and Stroop sessions**. EMG activity of the gluteus maximus (GMax), vastus lateralis (VL),
rectus femoris (RF), vastus medialis (VM), semi tendinous (ST), biceps femoris (BF), gastrocnemius
medialis (GM), gastrocnemius lateralis (GL), soleus (SOL) and tibialis anterior (TA) muscles throughout
the pedaling cycle. Data are presented for two sessions: control (solid red line) and Stroop (solid blue
line). The x-axis represents the normalized pedaling cycle (points), while the y-axis indicates normalized
EMG activity. Solid lines represent the average muscle activity, with shaded areas denoting the standard
deviation. Statistical differences were calculated using a paired t-test with task session (Stroop vs.
control) combined with Statistical Parametric Mapping analysis.

584   **Table 1.** SPM1D results for EMG activity during the cycling time-to-exhaustion test (isotime analysis)

Muscle	Tested effect	SPM statistic	df	p (corrected)	Significant cluster and cycle phase (%)
RF	Session	F	1,16	> 0.05 (z_max = 11.84, $z\_threshold$ = 18.64)	−
	Isotime	F	2,26	> 0.05 (z_max = 7.42, $z\_threshold$ = 9.30)	−
	Session × Isotime	F	2,26	> 0.05 (z_max = 4.43, $z\_threshold$ = 9.30)	−
GMax	Session	F	1,13	> 0.05 (z_max = 2.76, $z\_threshold$ = 18.72)	−
	Isotime	F	2,26	0.00046; < 0.0001	[174 − 190]; [293 − 359]
	Session × Isotime	F	2,26	> 0.05 (z_max = 4.08, $z\_threshold$ = 9.33)	−
VL	Session	F	1,14	> 0.05 (z_max = 4.15, $z\_threshold$ = 17.65)	−
	Isotime	F	2,28	< 0.0001; < 0.0001	[139 − 172]; [280 − 340]
	Session × Isotime	F	2,28	> 0.05 (z_max = 4.96, $z\_threshold$ = 9.03)	−
BF	Session	F	1,12	> 0.05 (z_max = 5.69, $z\_threshold$ = 19.37)	−
	Isotime	F	2,24	< 0.0001; 0.0443	[307 − 331]; [338 − 340]
	Session × Isotime	F	2,24	> 0.05 (z_max = 5.41, $z\_threshold$ = 9.45)	−
ST	Session	F	1,15	> 0.05 (z_max = 8.36, $z\_threshold$ = 16.83)	−
	Isotime	F	2,30	< 0.0001	[294 − 338]
	Session × Isotime	F	2,30	> 0.05 (z_max = 4.13, $z\_threshold$ = 8.79)	−
TA	Session	F	1,16	> 0.05 (z_max = 1.85, $z\_threshold$ = 16.17)	−
	Isotime	F	2,32	> 0.05 (z_max = 7.15, $z\_threshold$ = 8.60)	−
	Session × Isotime	F	2,32	> 0.05 (z_max = 1.85, $z\_threshold$ = 8.60)	−
VM	Session	F	1,16	> 0.05 (z_max = 8.39, $z\_threshold$ = 16.56)	−
	Isotime	F	2,32	< 0.0001; < 0.0001; 0.0167	[92 − 120]; [127 − 177]; [281 − 312]
	Session × Isotime	F	2,32	> 0.05 (z_max = 3.52, $z\_threshold$ = 8.75)	−

	Session	F	1,13	> 0.05 (z_max = 3.62, z_threshold = 18.59)	–
GM	Isotime	F	2,26	< 0.0001; 0.0027	[0 – 27]; [31 – 43]
	Session × Isotime	F	2,26	> 0.05 (z_max = 2.69, z_threshold = 9.28)	–
	Session	F	1,16	> 0.05 (z_max = 3.98, z_threshold = 16.70)	–
SOL	Isotime	F	2,32	0.0107	[73 – 82]
	Session × Isotime	F	2,32	> 0.05 (z_max = 2.81, z_threshold = 8.80)	–
	Session	F	1,16	> 0.05 (z_max = 9.60, z_threshold = 16.62)	–
GL	Isotime	F	2,32	> 0.05 (z_max = 3.69, z_threshold = 8.77)	–
	Session × Isotime	F	2,32	> 0.05 (z_max = 4.48, z_threshold = 8.77)	–

Statistical Parametric Mapping (SPM1D) two-way repeated-measures ANOVAs were performed on
normalized surface electromyography (EMG) signals over the full pedaling cycle (0–360%). Session
(Stroop vs. Control) and Isotime (0%, 50%, and 100% of individual isotime) were entered as within-
subject factors. For each muscle, F-statistics, degrees of freedom (df), and Random Field Theory–
corrected *p*-values are reported. When present, significant supra-threshold clusters (*p* < .05, corrected)
are indicated together with the corresponding phase(s) of the pedaling cycle (%). For non-significant
effects, the maximum test statistic (z_max) and the critical threshold (z_threshold) from SPM1D are
reported, as exact *p*-values are not provided when no supra-threshold cluster is detected.
RF, rectus femoris; GMax, gluteus maximus; VL, vastus lateralis; BF, biceps femoris; ST, semitendinosus;
TA, tibialis anterior; VM, vastus medialis; GM, gastrocnemius medialis; SOL, soleus; GL, gastrocnemius
lateralis.
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Perceptual responses.

Perception of effort. Mean and individual data are presented in Figure 6A. Participants perceived

the warm-up more effortful in the Stroop compared to the Control session ($t(17)$ = -3.149, p = .006, d = -

.742, *95%CI* [-1.258, -.210]). Due to deviation from a normal distribution, we also employed a Wilcoxon

rank test which confirmed the difference between session (W = 4.50, p = .003, r_{rb} = -.915). During the

time to exhaustion test, analysis of the isotime values revealed a higher perception of effort in the

Stroop compared to the Control session (main effect of session: $F(1, 17)$ = 7.18, p = .016, n_p^2 = .297). The

perception of effort increased overtime ($F(2, 34)$ = 133.09, p < .0001, n_p^2 = .887), with no session × time

interaction ($F(2, 34)$ = 1.00, p = .377, n_p^2 = 0.056). At exhaustion, participants reported the same intensity

of perceived effort between sessions ($t(17)$ = -1.016, p = .324, d = -.239, *95%CI* [-.705, .233]) .

Perceptions of muscle pain. Mean and individual data are presented in Figure 6B. During the

warm-up, participants reported a similar level of muscle pain between the Stroop and Control sessions

(t(17) = -1.550, p = .140, d = -.365, *95%CI* [-.838, .118]). Due to deviation from a normal distribution, we

also employed a Wilcoxon rank test, which also suggested no difference between sessions (W = 35.50, p

= .299, r_{rb} = -.324). During the time to exhaustion test, analysis of the isotime values suggested a higher

muscle pain intensity in the Stroop compared to the Control session, without reaching significance (main

effect of session: F(1, 17) = 3.952, p = .063, n_p^2 = .189). Muscle pain increased overtime (F(2, 34) =

90.023, p < .001, n_p^2 = .841), with no session × time interaction (F(2, 34) = .693, p = .507, n_p^2 = .039). At

exhaustion, participants reported the same intensity of muscle between sessions (t(17) = .373, p = .713,

d = .088, *95%CI* [-0.376, 0.550]). Due to deviation from a normal distribution, we also employed a

Wilcoxon rank test, which also suggested no difference between sessions (W = 34.00, p = .964, r_{rb} = -

.030).

Figure 6. Perceptions of effort and muscle pain during the cycling exercise for the control
(documentary) and Stroop sessions. Panel A shows mean and individual values for the perception of
effort during the warm-up performed at 40% peak power output (PPO) and the time to exhaustion test
at 80% PPO. During the time to exhaustion test, data are presented at four time points: 0%, 50% and
100% individual isotime, and at exhaustion. Panel B shows mean and individual values for the perception
of muscle pain at the same time points. For clarity, the warm-up and exhaustion phases fall into a grey

area: the warm-up was performed at a different pedaling intensity (40% PPO), and the exhaustion data
were collected at a non-isotime time point. The symbol • indicates a difference between sessions at the
same time point; * indicates a main effect of session during the isotime. One symbol denotes $p < .05$,
two symbols denote $p < .01$. Data are presented as mean ± standard deviation.

NASA-TLX. The Control and Stroop sessions differed on the following NASA-TLX items: mental

demand (58 ± 32 vs. 81 ± 16, respectively; $p = .007$, $d = .73$, *95%CI* [.198, 1.240]), performance (29 ± 24

vs. 39 ± 27; $p = .049$, $d = .49$, *95%CI* [-.008, .983]), and frustration (34 ± 26 vs. 49 ± 32, respectively; $p =$

.008, $d = .70$, *95%CI* [.176, 1.210]). No difference was reported for the other items related to physical and

temporal demand, and effort (all $p > .05$, $d = .14$–.38).

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Discussion.

This study examined the effects of mental fatigue induced by a prolonged demanding cognitive task, compared with a control task, on cycling endurance performance, effort perception and surface EMG-derived muscle activation. Mental fatigue reduced endurance performance and increased the perception of effort, but did not alter EMG-related parameters during the cycling endurance task.

No EMG Evidence of Altered Motor Command Under Mental Fatigue

Our first objective was to investigate whether the increased perceived effort in the presence of mental fatigue was associated with alterations in muscle activation during cycling. Our hypothesis of altered muscle activation was grounded on prior evidence reporting changes in EMG activity following prolonged mental exertion during upper- and lower-limb isometric tasks (Bray et al. 2008; Graham et al. 2014; Jacquet et al. 2021; Budini et al. 2014), as well as during a submaximal cycling task (Pageaux et al. 2015). Collectively, these findings suggest that mental fatigue may affect central motor command during subsequent physical tasks, potentially contributing to the observed increased perceived effort.

Because cycling requires the coordinated activation of multiple muscles (So et al. 2005), the study by Pageaux et al. (2015), which focused on a single muscle, does not provide a comprehensive understanding of the effects of mental fatigue on muscle activation during a whole-body endurance task. Therefore, we aimed to extend these findings by examining muscle activation using surface EMG recordings from ten lower-limb muscles to better capture peripheral indices of motor command. Contrary to our hypothesis, mental fatigue did not alter muscle activation patterns. This result aligns with a recent work that reported no changes in high density-EMG-derived neurophysiological outcomes (i.e., motor unit activity, common synaptic inputs) following a 30-min Stroop task and a subsequent isometric contraction to failure (Alix-Fages et al. 2023). Given that our study was powered to detect

medium-to-large effect, our results, together with those of Alix-Pages et al. (2023), suggest that mental

fatigue either does not affect EMG-derived measures of muscle activation, or that its effects are small.

Several interpretations can be proposed to account for the absence of significant effects on EMG

parameters. First, neural control differs between single-joint and whole-body exercises (Sidhu et al.

2013). The dynamic nature of cycling likely leads to EMG patterns distinct from those observed during

isometric, single-joint tasks and may permit compensatory strategies that mask subtle neural

modulations detected under constrained isometric conditions (Bray et al. 2008; Graham et al. 2014;

Jacquet et al. 2021). Second, EMG-derived measures reflect peripheral manifestations of motor

command rather than the initial supraspinal processes involved in motor planning and motor command

generation. Because mental fatigue induces changes at a supraspinal level, it is possible that

compensatory adjustments occur during the early stages of motor command planning or generation,

before transmission through the corticospinal pathway. In such a case, muscle activation could remain

unchanged despite altered supraspinal activity. Accordingly, while our results suggest that the neural

information reaching the muscles is similar in the presence and absence of mental fatigue, alterations at

earlier stages of motor command generation cannot be excluded. For instance, it has been reported that

continuous repetition of motor imagery inducing mental fatigue decreased corticospinal excitability

measured with transcranial magnetic stimulation (Nakashima et al. 2021; Nakashima et al. 2022). Third,

the absence of changes in EMG-derived muscle activation suggests that the observed decline in

endurance performance is unlikely to primarily result from alterations in motor command. This

interpretation aligns with recent evidence suggesting that mental fatigue may instead reflect metabolic

alterations within brain regions involved in cognitive control (Pessiglione et al. 2025; Wiehler et al. 2022;

Barakat et al. 2025). Because effort is also perceived during cognitive tasks (Mangin and Pageaux 2026) ,

such metabolic disturbances may increase the perceived cost of effort, thereby contributing to the

higher perceived effort observed under mental fatigue. Notably, these metabolic changes have been

proposed to increase the cost of cognitive control, biasing decision-making toward low-effort actions

associated with immediate rewards (Barakat et al. 2025; Pessiglione et al. 2025). In the context of a

cycling time-to-exhaustion test, such low-effort actions would correspond to premature task

disengagement.

Mental Fatigue Impairs Endurance Performance.

Our second objective was to replicate the detrimental effect of mental fatigue on endurance

performance. Participants began the sessions with similar levels of mental fatigue in both sessions.

However, mental fatigue was significantly higher following 1 h of the Stroop task compared with 1 h of

watching a neutral documentary. Because boredom increased to a similar extent in both sessions, the

greater rise in perceived mental fatigue observed during the Stroop task cannot be attributed to

differences in boredom over time (Mangin and Pageaux 2025), confirming that the Stroop task

successfully induced a specific state of mental fatigue compared with the documentary condition.

Interestingly, although motivation to perform the cognitive task decreased to a greater extent in

the Stroop session, participants reported similar levels of motivation to perform the cycling endurance

task in both sessions. This observation not only supports the negative effect of mental fatigue on

motivation (Müller and Apps 2019), but also suggests that the reduction in motivation induced by mental

fatigue may be task-specific and primarily related to the cognitive task used to induce mental fatigue.

Furthermore, because participants reported similar levels of motivation to perform the cycling task in

each session, changes in endurance performance cannot be attributed to alterations in cycling-specific

motivation.

In line with our hypothesis, mental fatigue impaired cycling endurance performance. This finding

aligns with previous studies that used the Stroop task to induce mental fatigue and examine its impact

on physical performance (Bray et al. 2008; Smith et al. 2016; Boat et al. 2018; Pageaux et al. 2014).

Although the effect of mental fatigue on physical performance has recently been questioned (Holgado et

al. 2021b), particularly when endurance and maximal force outcomes are not clearly distinguished

(Holgado et al. 2023; Holgado et al. 2021a), the preponderance of evidence indicates that mental fatigue

selectively impairs endurance performance. In contrast, maximal force production appears largely

unaffected (Brown et al. 2020; Pageaux and Lepers 2018).

Importantly, endurance and maximal force performance rely on distinct physiological and

psychological regulatory mechanisms that should be considered in theoretical models of mental fatigue

(Briand et al. 2025). Maximal force performance predominantly depends on anaerobic energy systems

and involves brief all-out efforts with minimal regulation over time. In contrast, endurance performance

relies predominantly on aerobic metabolism and requires continuous regulation of effort, either through

persistence decisions in time-to-exhaustion tasks or pace management during time trials (Pageaux and

Lepers 2018; Englert et al. 2021). Accordingly, as mental fatigue is proposed to alter perceived effort, its

detrimental effects are more likely to manifest in endurance than in maximal force performance.

Our results align with this theoretical framework. During the Stroop session, participants reported

a higher perceived effort from the onset of the cycling warm-up, which remained elevated throughout

the cycling test and led them to reach their maximal perceived effort earlier. In line with the prediction

of the psychobiological model of endurance performance, this higher perception of effort led to

premature task disengagement and decreased endurance performance. For instance, Bray et al. (2008)

reported a ~20% reduction in handgrip endurance following a shorter Stroop cognitive task (220 s). A

meta-analysis reported that the duration of the cognitive task has a limited influence on the magnitude

of performance impairment (Giboin and Wolff 2019). Consistent with this, we observed a ~10% decrease

in endurance performance following a 60-min Stroop task, which is lower than the ~20% decrease

reported by Bray et al. (2008) and others who used shorter Stroop tasks ranging from 3 to 30 minutes

(Giboin and Wolff 2019). Further, the elevated perception of effort observed from the onset of the

cycling task, along with the significantly higher rate of increase in perception of effort during cycling in

the Stroop session (6.7 ± 2.5 vs. 6.0 ± 1.8 units/min, respectively; p = .031), reinforces previous findings

(Marcora et al. 2009; Pageaux et al. 2014; Smith et al. 2016) and provides further experimental evidence

that mental fatigue impairs endurance performance primarily through an increased perception of effort.

Limitations and perspectives for future research

Because our study was powered to detect medium-to-large effects, future studies with larger

sample sizes are needed to rule out small effects of mental fatigue on muscle activation assessed using

surface EMG. Further, surface EMG provides only a peripheral index of motor command. Given the

proposed link between perceived effort and motor command (Bergevin et al. 2023; De Morree et al.

2012), future research should investigate the effects of mental fatigue on motor command during

dynamic exercise using brain-level measures, especially transcranial magnetic stimulation. Further,

recent advances in electroencephalography and data analysis have enabled its application during cycling

(Pirlot et al. 2025), making it a promising tool for this purpose. In particular, combining

electroencephalography with EMG to measure corticomuscular coherence (Petersen et al. 2012) may

help identify supraspinal alterations occurring early in motor command generation in the presence of

mental fatigue, or alternatively, provide evidence against their involvement.

Conclusions

Prolonged cognitive engagement inducing mental fatigue impaired cycling endurance performance

by increasing perceived effort. This increased perceived effort occurred in the absence of detectable

changes in EMG-derived muscle activation during cycling. This dissociation between perceptual and

neuromuscular responses suggests that the detrimental effects of mental fatigue on endurance

performance are primarily driven by central mechanisms involved in effort regulation and task

disengagement. Future studies should determine whether combining surface EMG with more sensitive

neurophysiological approaches can reveal subtle alterations in motor command associated with mental

fatigue during dynamic, whole-body exercise.

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