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► To cite this version:

Alison Lorcery, Nathalie André, Abdelrhani Benraïss, Maxime Pingault, Francesco Mirabelli, et al.. Engagement of mental effort in response to mental fatigue: A psychophysiological analysis. Psychology of Sport and Exercise, 2024, 74, pp.102660. 10.1016/j.psychsport.2024.102660. hal-04581523

HAL Id: hal-04581523 https://hal.science/hal-04581523

Submitted on 24 May 2024

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1	Engagement of mental effort in response to mental fatigue: A psychophysiological analysis
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15 1. Introduction

Mental fatigue is a universal human experience. Studying for exams, tackling complex 16 work tasks, or simply keeping up with a mentally taxing flow of information are common 17 18 activities that often induce mental fatigue. Fatigue or the perception of fatigue that results 19 from the deployment of effort during effortful activities does not necessarily lead to the 20 sudden cessation of the activity. Rather, fatigue may be viewed as a regulatory signal 21 generated by the organism that indicates a high consumption of energy during or following 22 an effortful activity that can be generally interpreted as a decrease in available resources. Individuals may then adopt two main behavioral patterns. The first consists of the 23 24 deployment of compensatory mental effort intended to maintain the level of performance 25 despite fatigue (Hockey, 1997; 2011), while the second entails a disengagement of effort 26 that leads to a performance decrement (Mangin et al., 2023). These two behavioral patterns 27 can coexist within the same task but can operate at different moments in the task (e.g., 28 compensatory effort in the middle of the task and disengagement of effort at the end of the task). Within the framework of cost-benefit theories, people adapt their effort continuously 29 30 and the choice of their behavior depends on the comparison between the costs of effort and 31 the benefits of expending effort (André et al., 2019; Shenhav et al., 2013). However, 32 characterizing these patterns offers the advantage to understand participant's behavior in 33 effortful tasks. The objective of this study is to explore the underlying psychophysiological mechanisms of effort engagement in response to mental fatigue. 34

Mental effort should be seen as a mechanism that estimates the amount of energy the organism must expend to achieve a relevant goal and allocates that effort to the task (André et al., 2019). This effort-based decision making process is commonly assumed to be based on the state of the organism and the constraints of the task (André et al., 2019; Shenhav et al., 39 2013). In investigating behavioral patterns of effort allocation employed during tasks inducing mental fatigue, reliable physiological measures such as heart rate variability (HRV) 40 and preejection period (PEP) could provide objective and relevant indicators of how people 41 adapt to mental fatigue (Mulder et al., 2004; Wright, 1996). Effort is associated with the 42 43 cardiovascular system (Obrist, 1976), which is influenced by the two antagonist branches of 44 the autonomic nervous system (the sympathetic and parasympathetic branches). HRV is the 45 fluctuation in the time intervals between heartbeats. Its is under the influence of the sympathetic and parasympathetic systems but mainly reflects parasympathetic activity 46 47 (Shaffer & Ginsberg, 2017); it can be studied through time domain measures (e.g., standard 48 deviation of all NN intervals, SDNN; root mean square of the successive differences, RMSSD), frequency domain measures (e.g., high frequency, HF; low frequency, LF) or nonlinear 49 50 measures (e.g., entropy). Studies have found an inverse relationship between effort and HRV 51 as mental effort increases, HRV decreases (Aasman et al., 1987; De Rivecourt et al., 2008, 2008; Delliaux et al., 2019; Fairclough & Mulder, 2012; Mizuno et al., 2011). However, HRV 52 cannot be considered as a marker of mental effort. 53

54 In contrast to HRV, PEP is a direct measure of sympathetic activity (Benschop et al., 1994). The PEP is determined based on changes in the force of contraction of the heart, 55 56 which is under the influence of the sympathetic beta-adrenergic activity (Benschop et al., 57 1994) and corresponds to the time interval between the onset of the ventricular excitation and the opening of the left ventricular valve (Berntson et al., 2004). Changes in the PEP have 58 been shown to be related to changes in mental effort during cognitive tasks, with the 59 allocation of more mental effort corresponding to shorter PEP (Mallat et al., 2020; Richter et 60 al., 2008). These measures are reliable and precise indicators of effort mobilization. 61

62 Mental fatigue is characterized by a temporary feeling of tiredness and/or a lack of energy that arises from intense and/or prolonged periods of demanding cognitive activities 63 (Pageaux & Lepers, 2018). Mental fatigue is mainly studied by using a time-on-task protocol 64 65 involving long and effortful cognitive tasks (Boksem et al., 2005; Mackworth, 1968; Matuz et 66 al., 2019). It has also been studied with the sequential-task protocol (Baumeister et al., 67 1998), which involves observing mental fatigue during a second task (the dependent task) 68 that follows an initial effortful task (the depleting task). Simultaneous use of both protocols in the same experiment can help examine how effort is deployed over time during long and 69 effortful tasks, and the effect of that effort deployment on tasks performed subsequently 70 71 (Mangin et al., 2022).

72 Disengagement of effort is one possible response to mental fatigue; it involves a 73 reduction or withdrawal of mental effort during complex or difficult tasks leading to a 74 performance decline (Hockey, 2013; Hopstaken et al., 2015). This response occurs when the 75 objectives of a task can no longer be effectively achieved due to the effects of mental fatigue. This does not mean that the task is abandoned but rather that performance cannot 76 77 be maintained with minimal effort. Conversely, cognitive compensatory mental effort 78 involves increased mental effort to counteract or at least limit the negative impact of mental fatigue on performance. 79

Disengagement of effort can be observed by a decrease in performance (e.g., a lengthening of the reaction time, an increase in error rate), risky decision making or a preference for low-effort tasks (Hockey, 1997). Disengagement of effort not only leads to a decrease in performance but also correlates with a decrease in neurophysiological activity (i.e., sympathetic or neuronal activity). 85 Shingledecker & Holding (1974), for example, examined how mental effort allocation was affected by mental fatigue using a decision-making task. This task required participants to 86 assess multiple electrical circuits to identify faults by employing one of three distinct 87 strategies: an intensive strategy associated with a higher probability of success (checking 88 three resistors), a moderate strategy with a balanced likelihood of success (two resistors), 89 90 and a less demanding strategy (one resistor) associated with a higher risk of reduced 91 performance. This study included nineteen students from the Naval and Air Force School 92 who were divided into two groups: a control group and a fatigue group. In the fatigue group, participants underwent a period of 24 to 32 hours of continuous work involving a battery of 93 multiple tasks before performing the decision-making task; these tasks included three 94 monitoring tasks performed alongside other tasks, such as arithmetic, target identification, 95 96 and code locking. Compared to the control group, participants in the fatigue group demonstrated a stronger preference toward less-demanding behaviors, even at the cost of 97 increased potential errors, compared to the control group. 98

Hopstaken et al. (2015) also investigated the link between mental fatigue and task 99 100 disengagement by using a time-on-task protocol. Twenty participants completed an n-back 101 task with increasing levels of difficulty (1, 2 and 3 back tasks) for 2 hours. During the task, the 102 pupil diameter (i.e., an index of sympathetic activity), the amplitude of the event-related 103 potential P3 (i.e., a positive deflection in activity approximately 300 ms following the 104 presentation of a stimulus) and self-reported mental fatigue were measured. Both pupil 105 diameter and P3 amplitude are indices of mental effort allocation. After participant 106 completed six 18-min blocks of the n-back task, the reward was manipulated by telling the 107 participants that if they improved their performance, the task would be shorter. This reward 108 was intended to check for a reengagement of effort. The authors have shown that the

decrease in performance was associated with a decrease in pupil diameter and P3 amplitude, which are interpreted as disengagement from the task and an increase in perceived fatigue. Nevertheless, despite the high subjective level of mental fatigue reported by the participants, the reward helped the participants to reengage effort in the cognitive task, which was marked by an increase in pupil diameter and P3 amplitude.

114 Similarly, Matuz et al. (2021) investigated the effect of mental fatigue on HRV as a 115 function of time-on-task and on recovery. Forty-four participants were split into 2 groups 116 and either performed a Gatekeeper task (dual 2-back task combining visual and auditory stimuli) or watched a documentary for approximately 90 min. After the task, both groups 117 had a break for 12 min and then the fatigue group completed 1 more block of the 118 119 gatekeeper task while the other group watched another documentary. The results showed 120 no change in performance during the 90-min gatekeeper task, an increase in different HRV 121 parameters (RMSSD, pNN50, HF) with time-on-task and an increase in perceived fatigue. This 122 pattern of results was interpreted as a progressive disengagement of effort throughout the depleting task. After the 12-min break, participants were able to increase their performance 123 124 for the last block and showed a reengagement of effort as observed by the decrease in the 125 RMSSD component of HRV.

These studies illustrate the impact of mental fatigue on effort engagement. They reveal a gradual disengagement of effort over time, and a shift toward low-effort behaviors. However, rewards and rest can facilitate re-engagement of effort in the task despite mental fatigue. Compensatory effort, another behavioral pattern, has also been observed when people are engaged in effortful tasks.

Hockey et al. (1998) conducted a study to investigate the impact of sleep deprivation on
the use of compensatory control. In this study, 16 operators were placed in a simulated air

133 management system, with conditions similar to those in spacecraft's crew cabin or a hyperbaric chamber; participants were either sleep-deprived or had a normal night of sleep. 134 They found that sleep-deprivation did not significantly affect the operators' performance in 135 the primary task, which involved maintaining air pressure within specified limits. However, 136 they observed changes in their performance during secondary tasks, such as increased 137 138 reaction time to respond to alarms and changes in task management strategies, including 139 more frequent system value checks. These findings underscore the capacity to maintain 140 performance through compensatory effort on primary performance in situations where errors could have serious safety implications, even with sleep deprivation. 141

At the neurophysiological level, Wang et al. (2016) studied compensatory neural 142 mechanisms in the face of mental fatigue. Fourteen healthy younger adults performed a 143 144 Stroop task for 160 min while event-related potentials (ERP), indicators of neural responses to specific stimuli, were recorded. They observed a compensation phase during the first 80 145 min, characterized by increased amplitudes of late ERP components in the antero-frontal 146 region and significant associations with task performance. This compensatory effort was 147 148 followed by a decompensation phase, marked by accelerated performance decline and 149 decreased ERP amplitude (i.e., a disengagement of effort).

Extending the evidence linking increased brain activity to increased mental effort Abi-Jaoude et al. (2018) investigated the neural correlates of inhibitory control. In their study, functional magnetic resonance imaging was used while 19 participants inhibited their eye blinking across 6 blocks, each lasting 1-min, separated by 1-min intervals of rest. Performance gradually declined, accompanied by a corresponding increase in the frequency of eye blinks. This inhibition coincided with a notable increase in effortful control marked by an increased activity in prefrontal-control regions including the inferior frontal gyrus, dorsolateral prefrontal cortex, dorsal anterior cingulate cortex, supplementary motor area and caudate. In this experiment, participants employed a compensatory mental effort characterized by an increase in frontal activity. However, this effort proved inadequate for sustaining performance levels.

These different results demonstrate the dynamic nature of effort engagement, which is mainly supported by prefrontal areas. It has been shown that effort is compromised in the presence of mental fatigue, resulting in a disengagement of effort. Nevertheless, these results also highlight the potential influence of the task environment and motivation on initiating or restoring task engagement, whether this effect is driven by rewards or rest.

The main objective of this study is to investigate participants' effort engagement under 166 mental fatigue by examining both physiological and behavioral measures. Additionally, the 167 168 study aims to assess subsequent task performance, providing valuable insights into the effects of mental fatigue on subsequent effort engagement in physical tasks. First, we 169 hypothesize that performance on the dependent task (endurance handgrip task) will be 170 relatively impaired after the fatiguing task (30-min Stroop task) compared to the control task 171 172 (watching a documentary). Second, we hypothesize that during the fatiguing task, 173 performance decrements will be accompanied by a disengagement of mental effort resulting in a decrease in sympathetic activation (i.e., an increase in PEP reactivity) and an increase in 174 175 parasympathetic activation (i.e., a decrease in HF power and RMSSD) as a function of timeon-task. In contrast, during the control task (watching a documentary), we expect no 176 177 changes in sympathetic and parasympathetic activity.

178 2. Method

179 2.1. Participants and design

180 The sample size was determined using G*Power software, with a moderate effect size on the sequential task effect (f = 0.25; based on Experiment 3 from Mangin et al., 2021, 181 with alpha = .05, and power = .80); this analysis indicated that 51 participants were sufficient 182 to detect an effect. We choose to recruit 58 participants from the sport sciences faculty at 183 184 the University of Poitiers and through local press announcements to reach this target sample 185 size given the expected dropouts. Eight participants withdrew from the experiment due to 186 its extended duration (three 60-90-min sessions in total). The final sample size was 50 187 participants (25 females) with a mean age of 27.63 years (SD = 11.80). All participants provided informed consent after receiving verbal explanations about the procedure. The 188 local ethics committee approved the experiment (Tours-Poitiers Ethical Committee, CER-TP 189 190 2020-11-05).

191 2.1.1. Procedure

The experiment required 3 separate sessions to be completed, and each session was 192 separated by a maximum of 3 weeks. At the beginning of the first session, participants 193 completed a demographic questionnaire and a health questionnaire. A few hours before 194 195 each session they were asked to refrain from psychostimulant substances (cigarettes, 196 caffeine, drugs, sleeping pills) and exhausting physical activity. Then, they were familiarized with a modified Stroop and the time-to-exhaustion (TTE) handgrip task. In the second and 197 198 third sessions, participants wore electrodes for electrocardiography (ECG) and thoracic impedance cardiography (ICG) measurements. At the beginning of each session, they rested 199 200 while watching a sunset video for 10 minutes (i.e., baseline measurements). Following the 201 rest period, participants performed maximal voluntary contractions (MVCs) and then the 202 cognitive task for 30 min. Throughout the experiment, participants provided ratings of 203 perceived fatigue. In addition, boredom and motivation before the TTE handgrip task were

204 measured just after the cognitive task. These subjective measures were collected using 205 visual analog scales (VAS) displayed on a computer screen, ranging from 0% to 100% (a more 206 detailed description is available in the supplementary material S1). The control task 207 (documentary viewing) and the fatiguing task (Stroop task) took place in separate sessions 208 and the order of these two sessions was counterbalanced between participants (Mangin et 209 al., 2021).

210 2.2 Materials and measures

211 2.2.1 Effortful cognitive task (modified Stroop task)

212 Participants completed a computerized version of the incongruent Stroop task with E-213 prime software and S-R response box (version 2.0, Psychology Software Tools, Pittsburgh, PA, USA). They responded vocally to color words presented on a computer screen, while 214 215 their responses and response time were recorded with a microphone. The task consisted of 216 888 trials and lasted 29.6 min. Each trial lasted 2 seconds; the specific time course each trial 217 is presented in supplementary material S1. The entire task comprised an equal number of 'reading' and 'naming' trials (i.e., the participants were instructed to name the color of the 218 219 ink with which the word is shown on the screen) and the order of presentation of the color 220 words was completely random. The data were divided into 4 parts to analyze the time-ontask effect, each part corresponding to 222 trials and lasting 7 min and 30 s. We calculated 221 222 different parameters, such as the error rate, the omission rate and the reaction time (RT), for the correct trials. 223

224 2.2.2 Control task

Participants watched a 30-min documentary, "Earth" by Alastair Fothergill and Mark
Linfield (2007), which was used in similar experiments (Mangin et al., 2021, 2022). At the

end of the session, participants completed a multiple-choice questionnaire to verify thatthey watched the documentary attentively.

229 2.2.3 TTE handgrip task

During the TTE handgrip task, participants maintained a force level at 13% (± 1%) of their 230 MVC as long as possible. Visual feedback showing their force production was provided on a 231 232 computer screen. Each variation in force production corresponded to the movement of a 233 needle on a circular gauge. The target force was represented by a green arc ranging from 234 12% to 14% of the MVC. TTE was defined as the time at which the produced force had fallen below the limit of 12% for 2 s. Participants were unaware of the elapsed time or specific 235 force values during the task. TTE was calculated offline from the beginning of the force signal 236 237 to the exhaustion time. For more details on the calibration of the gauge, see supplementary 238 material S2. During the TTE handgrip task, perceptions of effort and muscle pain were assessed every 30 s (see supplementary materials for more details). 239

240 2.2.4 Cardiovascular measures

ICG and ECG were recorded during the rest period (10 min) and during the cognitive 241 242 tasks (30 min). As the PEP can be influenced by factors such as ventricular filling (i.e., 243 preload) and arterial pressure (i.e., afterload), heart rate and arterial pressure were monitored to accurately attribute any changes in PEP to beta-adrenergic sympathetic 244 245 activity. Systolic blood pressure (SBP) and diastolic blood pressure (DBP) were measured 246 (mmHg) at the end of the 10-min baseline period and after the 30-min cognitive task. BP was 247 measured with a digital automatic blood pressure monitor (OMRON-MIT Elite). The blood 248 pressure cuff was placed over the brachial artery above the elbow of the participant's 249 nondominant arm. ICG and ECG were recorded continuously using a BIOPAC MP160 system 250 at 2000 Hz. For the ECG, three electrodes were placed on the right and left shoulders (right

arm and left arm) and on the left side under the pectoral muscles, on the lower edge of left
rib cage (left leg). For ICG, electrodes were placed on the right and left trapezius and on the
right and left middle axillary line at the height of the xiphoid process.

254 2.2.5 Physiological measures analysis

A more detailed description of the PEP calculation is available in supplementary 255 256 material S3. The first minute of the 10-min baseline recording was removed, leaving 9 257 periods of 1 min each. Then, the average of the 9 PEPs was calculated, resulting in a single 258 PEP baseline score for each session. The intraclass correlation coefficients for the PEP baseline were 0.993 for the control and 0.996 for the Stroop session. In the same way, the 259 260 30 min of the mental task (control and Stroop task) was composed of 30 mean values representing 1 min each. PEP is interpreted by examining reactivity scores, which represent 261 262 changes in PEP compared to the baseline. To calculate the reactivity score, the baseline PEP 263 scores for each participant were subtracted from the corresponding PEP scores during the 264 mental task, following the method described by Llabre et al. (1991). A total of 30 reactivity scores were obtained, reflecting the PEP changes during the entire duration of the mental 265 266 tasks. These 30 min recordings were averaged among 4 periods of 7.5 min each.

Heart rate variability indices were calculated by using Kubios HRV Premium software, version 3.5.0. The ECG signal was used as the input for the analysis. Prior to the analysis, a medium automatic artifact correction algorithm was applied. For the assessment of HRV, the RMSSD was selected as the time-domain parameter. Additionally, the HF parameter was chosen as the frequency-domain parameter of HRV. HRV indices were calculated for the four 7.5-min parts of the mental task.

273 2.2.6 Individual behavioral patterns of effort investment

To analyze individual behavioral patterns of effort investment, we computed for each participant their inverse efficiency score, a score that combines reaction time and errors, the two most important indicators of performance (Bruyer & Brysbaert, 2011; Liesefeld & Janczyk, 2019). This score was calculated as follows: mean correct reaction time for naming trials / (1-proportion of decision errors for naming trials). Then, we computed changes in their inverse efficiency score and preejection period by subtracting the index obtained in the fourth part from the index obtained in the first part.

281 2.5.6. Statistical analyses

Statistical analyses were performed using JASP software, including two-way repeated-measures ANOVA and paired sample t tests when appropriate. Effect sizes were reported using partial eta-squared (η_p^2) . Greenhouse–Geisser correction was applied if the sphericity assumption was violated. Post hoc comparisons were corrected using the Bonferroni procedure.

287 3 Results

288 Behavioral and subjective analyses were conducted on all 50 participants' data, while 289 physiological analyses were performed with the data from only 49 subjects due to faulty 290 signal recording for one subject.

291 3.1 Manipulation checks

292 3.1.1 Perceived difficulty

A t test was conducted on the self-reported difficulty of the control and the Stroop task. As expected, the Stroop task (M = 72.100, SD = 15.027) was perceived as more difficult than the control task (M = 17.640, SD = 19.340): t (49) = 16.674, p < .001, d = 2.358.

296 3.1.2 Perceived fatigue

297 We conducted an ANOVA on self-reported fatigue with Time and Session (Stroop and control) as repeated-measures factors. The interaction between Time and Session was 298 significant: *F* (1.956, 95.839) = 11.566, p < .001, $\eta_p^2 = .191$. Before the mental task, the level 299 of fatigue was the same in both conditions (M = 33.050, SD = 21.809, p = 1.000). The level of 300 fatigue did not increase between the points before (M = 33.870, SD = 23.998) and after the 301 302 control task (M = 39.660, SD = 24.866, p = 1.000). In contrast and as expected, the level of 303 fatigue increased between the points before (M = 32.320, SD = 19.620) and after the Stroop 304 task (M = 57.140, SD = 24.482, p < .001). Finally, the level of fatigue after the handgrip task was the same across the two sessions (M = 54.100, SD = 23.637, p = .343). The level of 305 fatigue did not increase between the points after the mental (M = 39.660, SD = 24.866) and 306 307 after the physical task (M = 49.900, SD = 22.380) in the control session (p = .067). It also did not increase between the points after the Stroop task (M = 57.140, SD = 24.482) and the 308 physical task (*M* = 58.300, *SD* = 24.893, *p* =1.000). 309

310 3.2 Behavioral results

311 3.2.1 Performance during the modified Stroop task

We conducted an ANOVA with Time-on-task (periods 1, 2, 3 and 4) as a repeatedmeasures factor on omission rate, error rate, and mean RT.

The omission rate increased significantly with Time-on-task: *F* (1.888, 92.524) = 5.759, p = .005, $\eta_p^2 = .105$. The omission rate increased significantly from the first (*M* = .133, *SD* =

316 .148) to the fourth period (M = .205, SD = .199) of the Stroop task (p < .001).

We conducted an ANOVA with Time-on-task and Trial type (reading and naming) as repeated-measures factors on the mean RTs of correct responses. The interaction between Time-on-task and Trial type was significant: *F* (2.574, 126.140) = 14.051, *p* < .001, η_p^2 = .223. The mean RT for the reading trials did not change over the four periods (all *p* >.05; *M* = 321 629.779 ms; *SD* = 85.745). In contrast, RT increased for the naming trials from the first (M = 322 765.614 ms, *SD* = 78.845) to the fourth period (M = 787.803 ms, *SD* = 81.438, p = .020). In 323 addition, the mean RT was consistently shorter for the reading trials than for naming trials 324 during the 4 periods of the task (all p < .001).

Another ANOVA with the same design was conducted on error rate. The interaction 325 326 between Time-on-task and Trial type was not significant: F(2.027, 99.300) = 1.039, p = .358, η_{ρ}^{2} =.021. However, the main effect of Time-on-task was significant: F (2.308, 113.099) = 327 14.211, p < .001, $\eta_p^2 = .225$. The error rate decreased from the first (M = .068, SD = .067) to 328 the fourth (M = .055, SD = .069) period of the task for both types of trials (p < .001). The 329 main effect of Trial type was also significant: F (1, 49) = 50.717, p < .001, η_p^2 = .509. The error 330 rate was consistently lower for the reading trials (M = .011, SD = .021) than for naming trials 331 332 (M = .038, SD = .036) during the 4 periods of the task (all p < .001).

333 3.2.2 Performance on the subsequent handgrip task

We conducted a paired sample t test with Session as a repeated-measures factor (control and Stroop) on the TTE during the handgrip task. Participants squeezed the handgrip longer after the control task (M = 9.188 min, SD = 3.898) than after the Stroop task (M =8.313 min, SD = 2.985): t (49) = 2.233, p = .030, d = .316. The analysis of the participant's MVC is presented in supplementary material S5.

- 339 3.3 Physiological results
- 340 3.3.1 PEP reactivity

We conducted an ANOVA with Time-on-task (periods 1, 2, 3 and 4) and Task (Stroop and control) as repeated-measures factors on PEP reactivity. The interaction between Timeon-task and Session was significant: *F* (2.091, 100.391) = 8.718, *p* < .001, η_p^2 = .186. PEP reactivity increased more sharply during the Stroop task than during the control task (see

345	Figure 1). In addition, post hoc comparisons indicated that the PEP reactivity score was lower
346	during the Stroop task than during the control task (all $p < .05$), regardless the period. During
347	the control session, PEP reactivity significantly increased ($p < .001$) between the first ($M =$
348	3.197 ms, SD = 3.340) and the second period (M = 5.196 ms, SD = 3.587) but did not change
349	between the other periods (all $p > .05$). In addition, PEP reactivity increased significantly
350	between the first ($M = 3.197$ ms, $SD = 3.340$) and the fourth ($M = 6.089$ ms, $SD = 4.658$)
351	period of the control task (p <.001). During the Stroop task, PEP reactivity increased
352	significantly between the first ($M = -3.865$ ms, $SD = 6.577$) and the second period ($M =597$
353	ms, $SD = 6.442$, $p < .001$), and between the second and the third period ($M = 1.481$ ms, $SD =$
354	6.344, $p = .002$). In addition, PEP reactivity increased significantly between the first ($M = -$
355	3.865 ms, $SD = 6.577$) and the fourth period ($M = 2.382$ ms, $SD = 7.251$) of the Stroop task (p
356	<.001).

357

358

Insert Figure 1 here

359

360 3.3.2 Heart rate variability

361 An ANOVA with Session and Time-on-task (baseline, periods 1, 2 and 3 of the mental task) as repeated-measures factors was conducted on the high frequency (HF) measure of 362 HRV. The interaction between Session and Time-on-task reached significance: F (2.098, 363 100.705 = 12.227, p < .001, η_p^2 = .203. At baseline, HF values were not significantly different 364 between the control and Stroop sessions (p = 1.000). During the 4 periods, HF values were 365 366 lower in the Stroop task than during the control task (all p < .05). In the Stroop task, HF power increased between the first ($M = 5.392 \log - HF$, SD = 1.131) and the fourth periods (M367 = 5.720 log-HF, SD = 1.120): p = .003. In the control task, HF power did not change as a 368

function of Time-on-task (all p = 1.000). Other cardiovascular measures, such as heart rate, breathing rate, systolic and diastolic blood pressure are available in supplementary material S6.

372 Results concerning RMSSD are included in supplementary material and are quite 373 similar to those of the HF.

374 3.4 Individual behavioral patterns of effort investment

We conducted an analysis of individual behavioral patterns during the Stroop task by using a plot that integrates changes in the preejection period reactivity (horizontal axis) and performance on naming trials with the inverse efficiency score (vertical axis). On the horizontal axis, a positive score indicates an increase in sympathetic activity, while a negative score indicates a decrease. On the vertical axis, a positive score reflects a decrease in performance, whereas a negative score indicates an improvement.

This plot reveals that 6% of participants exhibited a decrease in performance coupled with increased sympathetic activity, suggesting non-efficient compensatory effort. Another 6% showed both improved performance and increased sympathetic activity, indicating a compensatory effort. A large proportion of 35% participants demonstrated improved performance alongside decreased sympathetic activity, suggesting a learning effect. The largest proportion of participants (49%) showed a decrease in both performance and sympathetic activity, indicating a disengagement of effort.

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389

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Insert Figure 2 here

391 4 Discussion

392 The aim of this study was to investigate participants' response to mental fatigue in terms of effort engagement. The two important aspects of this study were (1) to examine the 393 evolution of effort engagement during the depleting and control tasks and (2) to 394 simultaneously use time-on-task and sequential-task protocols to examine the effects of 395 mental fatigue on the behavioral and subjective responses of the participants. We found 396 397 that with increasing fatigue during the mental task, cardiac measures indicated a decrease in sympathetic activity (assessed with PEP) and an increase in parasympathetic activity 398 399 (assessed with HRV), suggesting a disengagement of effort and supporting our hypotheses. This disengagement was further evidenced at the behavioral level by a decline in 400 performance during the TTE handgrip task that followed the fatiguing task; there was a 401 significant reduction of 9.523% in comparison to the control cognitive task. During the 402 403 Stroop task, participants changed their behavior over time prioritizing accuracy over speed, as indicated by the lengthening of reaction times involving inhibitory control (i.e., naming 404 trials) and an increase in the omission rate, coupled with a simultaneous reduction in error 405 406 rate across both trial types. The analyses of individual responses revealed that the largest 407 proportion of participants (49%) demonstrated a disengagement of effort leading to a 408 decreased in performance. In contrast, 35% were able to increase their performance with a decrease in sympathetic activity. Compensatory effort was observed only among 12% of 409 410 participants, highlighted by an increase in sympathetic activity.

411 4.1. Effort expenditure during the mental tasks

Participants' PEP reactivity, reflecting changes from a resting state, was found to be higher during the Stroop task than during the documentary viewing task, indicating higher sympathetic activity and suggesting higher effort investment. In addition, the significant interaction between measures over the four periods and the two conditions suggests a 416 habituation effect in both tasks. Indeed, a decrease in PEP reactivity was observed for both conditions. Nevertheless, the most important decrease in sympathetic activity in the Stroop 417 task showed that there is another factor involved in addition to the habituation effect (i.e., a 418 419 decrease in arousal). This sharper decrease in sympathetic activity can be explained either by 420 a voluntary disengagement of effort (as a result of boredom or fatigue or effort minimization 421 strategy) or the automation of certain processes (i.e., stimulus identification). The 422 automation of a series of operations is generally accompanied by maintaining or improving 423 the performance of the system. In contrast, effort disengagement should be accompanied by 424 a decrease in performance. It appeared that performance during the Stroop task declined 425 with an increase in the omission rate and the mean reaction time for the trials requiring inhibitory control (i.e., naming trials) from the first to the fourth period. Our results rather 426 427 are more consistent with a disengagement of effort rather than with an automation process. 428 Moreover, measures such as heart rate, systolic blood pressure, and diastolic blood pressure were not affected during the Stroop task, suggesting that the changes in PEP were 429 specifically related to mental effort allocation rather than factors associated with preload or 430 431 afterload (Sherwood et al., 1990). These findings are consistent with prior research that has 432 employed PEP as a measure of effort mobilization during mentally demanding tasks (Mallat et al., 2020; Richter et al., 2008). These results were also consistent with the HF component 433 434 of HRV, which reflects parasympathetic activity. These findings collectively support the notion of effort disengagement during the Stroop task in response to mental fatigue, 435 providing empirical support for our hypotheses. 436

437 4.2. Decrease in arousal

The decrease in sympathetic activity observed during the two mental tasks may be due to a decrease in arousal. A low state of arousal can be attributed to various factors, 440 including a lack of interest, tasks that are too easy, or repeated presentations of the same 441 stimuli. Self-reported boredom during the mental tasks was relatively low (M = 31.47); participants did not report feeling more bored during the Stroop task compared to the 442 control task. This finding has been observed in studies with similar designs (Mangin et al., 443 444 2021, 2022). Another plausible explanation is habituation of the participants to the task 445 demands. Initially, the task may have been highly demanding and stressful, but as 446 participants became more familiar with the task, it likely became less stressful. To minimize 447 the confounding effects of arousal and automating processing in future studies, it would be 448 beneficial to use tasks that are less repetitive and able to be automatically processed, and that require a high level of concentration throughout the task. From that perspective, a 449 450 depleting task involving updating of working memory throughout the task, thus being more 451 difficult to perform automatically, could be a better choice. Another choice, would be to measure the arousal level during depleting and control tasks with EEG indices. 452

453 4.3. Motivational aspect of task disengagement

Some authors have postulated that disengagement of effort might be due to a shift of 454 455 motivation and/or attention (Inzlicht et al., 2014; Kurzban et al., 2013) or an imbalance 456 between costs and benefits (Boksem & Tops, 2008; Shenhav et al., 2013). The present experiment examined the motivation to perform the TTE handgrip task (after the control or 457 458 Stroop task) with a subjective scale (see supplementary material S7). There was as significant 459 difference in motivation to perform the TTE handgrip task according to the preceding mental task. This result implies that the motivation to perform the physical task was impacted by 460 461 the cognitive load of the mental task. However, this decrease of motivation did not correlate 462 significantly with the decrease of performance during the TTE handgrip task (see 463 supplementary material S9). This result is not line with the motivational hypothesis (Inzlicht 464 et al., 2014), suggesting that motivation to perform the handgrip endurance task plays a role465 in the decrease of performance observed in this experiment.

466 4.4. Effort minimization behavior

Effort minimization refers to the reduction of effort in anticipation of a longer or 467 upcoming effortful task (Radel et al., 2017). In the present experiment, participants were not 468 469 informed of the duration of the Stroop task. It is possible that participants may have 470 conserved their effort, anticipating a long duration for the Stroop task and knowing they 471 needed to reserve effort for the subsequent TTE handgrip task. To test the effort minimization hypothesis in a future experiment, participants could be given a choice 472 between a low-effort and a high-effort task following a long and difficult task. Another 473 possibility would be to manipulate the probability to perform an effortful task after the 474 475 depleting or control task. The participant's expectations regarding task duration could also 476 be manipulated and scenarios in which they anticipated a short or an extended task duration 477 could be compared; then, whether different behavioral patterns of effort investment are employed under these distinct expectations could be observed. 478

479 4.5. Compensatory effort as a possible behavioral pattern

The engagement of compensatory processes to maintain performance can be observed under specific conditions, particularly in individuals with limited resources and heightened susceptibility to fatigue, such as patients with chronic fatigue (André et al., 2021) or traumatic brain injury (Kohl et al., 2009). Factors such as rewards (Boksem et al., 2006) and perceived difficulty (Hsu et al., 2017; J. Wang et al., 2022) may play a role in motivating individuals to allocate their effort and employ compensatory behaviors to mitigate the impact of fatigue and sustain performance. 487 Interestingly, our correlational analyses revealed a significant negative association between the increase in omissions and change in PEP reactivity over time during the Stroop 488 task (see supplementary material S9). Specifically, participants who exhibited a higher 489 increase in omissions throughout the Stroop task also showed a greater stability in PEP 490 491 reactivity, indicating less changes in their effort allocation (r = -336, p < .05). This finding 492 suggests that participants who relied more on compensatory behaviors, as evidenced by 493 stable PEP reactivity, experienced difficulty in maintaining task performance, as reflected by 494 increased omissions. It appears that these compensatory mechanisms may be employed by participants who are particularly challenged by the cognitive demands of the Stroop task. 495 The perception of task difficulty may play a role in the utilization of such compensatory 496 behaviors. In line with this proposition, we observed a significant negative correlation (r = -497 498 .444, p = .001) between the participant's perception of task difficulty during the Stroop task and the influence of mental fatigue on the subsequent TTE handgrip task (see 499 supplementary material S9). This correlation suggests that greater perceived difficulty of the 500 501 Stroop task during the task is linked to a smaller decrease in performance on the subsequent 502 handgrip task, providing further arguments that the higher perception of difficulty during the 503 depleting task implies the use of compensatory behavioral patterns in the subsequent task.

504 4.6. Limitations

505 Some limitations of the current study can be highlighted. First, due to limitations in 506 measuring PEP with impedance cardiography (ICG) during physical tasks, i.e., the tendency 507 for artifacts from movements and contraction of the neck muscles to be present in the 508 recording, it was not possible to observe effort engagement at a physiological level during 509 the second task (i.e., handgrip task). It will be important to develop and share more efficient 510 algorithms or explore alternative measures to compensate for these artifacts in future 511 research.

512 Moreover, the present study examined the disengagement of effort during the fatiguing task through variations in sympathetic activity as indicated by PEP reactivity. However, it 513 514 would be beneficial to combine PEP with measures such as electroencephalography (EEG) or 515 event-related potentials (ERPs), which are known to be influenced by mental fatigue 516 (Hopstaken et al., 2015; Tran et al., 2020). To our knowledge, the link between these two 517 measures has not been investigated during effortful tasks. Such an integration of measures could provide a more comprehensive understanding of the cognitive and physiological 518 processes underlying effort disengagement. 519

520 Notably, the PEP during the third and fourth periods of the Stroop task was longer than 521 that at the baseline, indicating that the sympathetic activity during baseline was higher than 522 at the end of the Stroop task. This finding may be attributed to the difficulty in capturing a 523 true baseline state during the resting condition.

524 4.7. Concluding remarks

525 In conclusion, this study makes a significant contribution to our understanding of effort 526 mobilization in the presence of mental fatigue. Decreased sympathetic activity, as reflected 527 by changes in PEP and HRV, further supports effort disengagement during the fatiguing task, 528 and on a subsequent task, as corroborated by the decline in performance.

Within the domain of sports and exercise psychology, these findings have important implications for understanding the effects of acute mental fatigue on effort engagement. They indicate that acute mental fatigue following cognitively demanding tasks is detrimental to endurance performance, leading to diminished effort allocation at the behavioral and autonomic levels. Further research should explore effort investment in the face of mental fatigue across various profiles (e.g. endurance athletes, mindfulness experts or video game players). Additionally, exploring effective training techniques, as suggested by recent studies on brain endurance training (Dallaway et al., 2021; Staiano et al., 2023), can enhance resistance to mental fatigue and open novel directions for optimizing performance.

538 However, the underlying mechanisms contributing to this disengagement, including 539 effort minimization behavior, decreased arousal, and the influence of mental fatigue, 540 warrant further investigation. To extend our understanding of effort investment in the 541 context of mental fatigue, future studies should adopt a multidimensional approach, incorporating markers such as those derived from fMRI to explore neural connectivity within 542 and between large-scale neuronal networks involved in the engagement of effortful control. 543 Additionally, it is important to study compensatory effort investment in populations with 544 545 chronic fatigue, as they may exhibit increased susceptibility to acute mental fatigue by revealing the interplay between chronic and acute mental fatigue (André et al., 2021; 546 Mangin et al., 2023). Including these diverse populations will improve our understanding of 547 how different contexts and individual characteristics influence effort engagement. 548 549 Ultimately, this understanding can inform the development of behavioral patterns of effort 550 investment and interventions to mitigate the negative impact of mental fatigue (Jacquet et al., 2023) and improve sustained effort engagement in various life domains (for a review, see 551 552 Audiffren et al., 2022).

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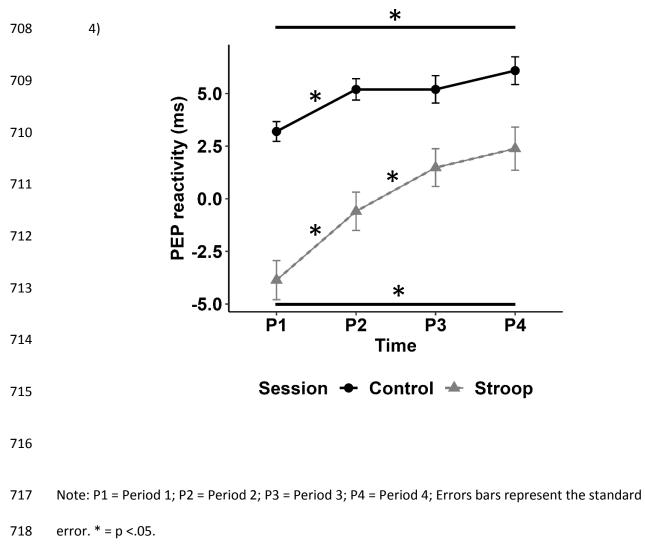
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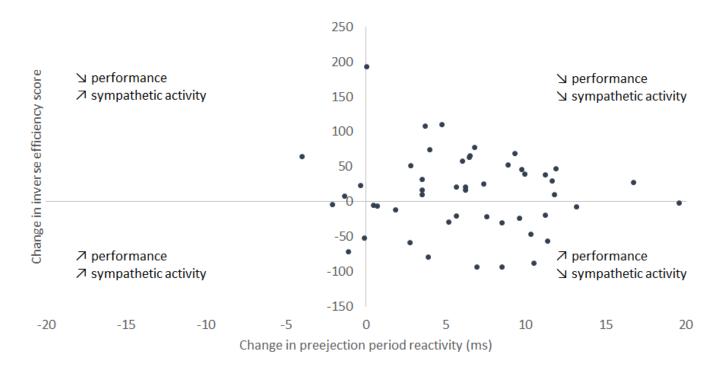
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707 Figure 1: Preejection-period reactivity as a function of session and time-on-task (Periods 1, 2, 3, and

- 720 Figure 2: Change in individual inverse efficiency score for naming trials as a function of change in pre-
- 721 ejection period reactivity during the Stroop task



Note: each point represents a participant. Inverse efficiency score for naming trials = mean reaction
time for correct responses / (1-proportion of decision errors). Change in preejection period reactivity
and change in inverse efficiency score was calculated as the index obtained in part 4 minus the index
obtained in part 1.

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