

1 **Dynamics of the power-duration relationship during prolonged endurance**  
2 **exercise and influence of carbohydrate ingestion**

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21

22 **Abstract**

23 We tested the hypotheses that the parameters of the power-duration relationship, estimated as  
24 the end-test power (EP) and work done above EP (WEP) during a 3-min all out exercise test  
25 (3MT), would be reduced progressively following 40 min, 80 min and 2 h of heavy-intensity  
26 cycling, and that carbohydrate (CHO) ingestion would attenuate the reduction in EP and  
27 WEP. Sixteen participants completed a 3MT without prior exercise (control), immediately  
28 after 40 min, 80 min and 2-h of heavy-intensity exercise while consuming a placebo beverage,  
29 and also after 2-h of heavy-intensity exercise while consuming a CHO supplement (60 g/h  
30 CHO). There was no difference in EP measured without prior exercise ( $260 \pm 37$  W)  
31 compared to EP following 40 min ( $268 \pm 39$  W) or 80 min ( $260 \pm 40$  W) of heavy-intensity  
32 exercise; however, after 2-h, EP was 9% lower compared to control ( $236 \pm 47$  W;  $P < 0.05$ ).  
33 There was no difference in WEP measured without prior exercise ( $17.9 \pm 3.3$  kJ) compared to  
34 after 40 min of heavy-intensity exercise ( $16.1 \pm 3.3$  kJ), but WEP was lower ( $P < 0.05$ ) than  
35 control after 80 min ( $14.7 \pm 2.9$  kJ) and 2-h ( $13.8 \pm 2.7$  kJ). Compared to placebo, CHO  
36 ingestion negated the reduction of EP following 2-h of heavy-intensity exercise ( $254 \pm 49$  W)  
37 but had no effect on WEP ( $13.5 \pm 3.4$  kJ). These results reveal a different time course for the  
38 deterioration of EP and WEP during prolonged endurance exercise and indicate that EP is  
39 sensitive to CHO availability.

40

41 **New and Noteworthy**

42

43 The parameters of the power-duration relationship (critical power, CP, and the curvature  
44 constant,  $W'$ ) have typically been considered to be static. Herein, we report the time course for  
45 reductions in CP and  $W'$ , as estimated using the 3-min all-out cycle test, during 2 h of heavy-  
46 intensity exercise. We also show that carbohydrate ingestion during exercise preserves CP,  
47 but not  $W'$ , without altering muscle glycogen depletion. These results provide new  
48 mechanistic and practical insight into the power-duration curve and its relationship to  
49 exercise-related fatigue development.

## 50 **Introduction**

51 The parameters of the hyperbolic power-duration relationship, the critical power (CP) and the  
52 curvature constant ( $W'$ , which represents a fixed work capacity above CP), are important  
53 determinants of endurance exercise performance (25, 32, 50). CP is considered to be a  
54 metabolic or fatigue threshold which separates the 'heavy' from the 'severe' exercise intensity  
55 domains (8, 40, 41). In the heavy-intensity domain ( $<CP$ ), intramuscular metabolic  
56 homeostasis is maintained and pulmonary  $\dot{V}O_2$  attains a delayed steady-state (4, 26, 41). In  
57 contrast, in the severe-intensity domain ( $>CP$ ), intramuscular metabolic homeostasis is not  
58 achieved, a  $\dot{V}O_2$  'slow component' develops that drives  $\dot{V}O_2$  inexorably to its maximum, and  
59 exercise tolerance is predictably limited as a function of the power output above CP and the  
60 size of the  $W'$  (4, 26, 40, 41).

61 The CP and  $W'$  are conventionally estimated using 3-5 severe-intensity prediction trials in  
62 which constant power outputs are maintained until the limit of tolerance, with the asymptote  
63 (representing CP) and the curvature constant (representing  $W'$ ) of the power-time relationship  
64 subsequently being determined mathematically (30, 41, 48). More recently, a 3-min all-out  
65 cycle test against fixed resistance (3MT) has been developed, during which external power  
66 output declines hyperbolically with time, which permits a more expeditious assessment of CP  
67 and  $W'$  (7, 48). The 3MT has been shown to provide valid and reliable estimates of CP and  
68  $W'$ , where the mean power output during the last 30 s of the test (end-test power, EP)  
69 represents CP, and the work completed above EP (WEP) represents  $W'$  (7, 38, 48). We have  
70 recently reported that the 3MT continues to provide valid (13) and reasonably reliable (12)  
71 estimates of CP and  $W'$  following 2 h of heavy-intensity cycle exercise. In these studies we  
72 found that prolonged endurance exercise consistently and profoundly altered the power-time  
73 relationship, with CP and EP falling by  $\sim 10\%$  and  $W'$  and WEP falling by  $\sim 20\%$  (12, 13).  
74 These results have important implications for our understanding of fatigue development, and

75 for performance prognosis, during endurance exercise. At present, however, the time course  
76 over which EP and WEP deteriorate during prolonged endurance exercise is not known.  
77 Elucidating the dynamic changes in EP and WEP *during* prolonged exercise may provide  
78 insight into the determinants of fatigue and underpin the development of interventions to  
79 attenuate the decline in performance during such exercise.

80 The mechanistic bases for the reductions in EP and WEP after 2 h of heavy-intensity exercise  
81 are likely multifactorial, and may include muscle glycogen depletion (12, 13, 30). It is well  
82 known that glycogen depletion increases with the duration of heavy-intensity exercise (17,  
83 18). If glycogen depletion impacts the power-duration relationship, then reductions in EP and  
84 WEP would be expected to become much more substantial following longer, compared to  
85 shorter, bouts of heavy-intensity exercise. Carbohydrate (CHO) ingestion is known to benefit  
86 prolonged endurance exercise performance by sparing muscle [glycogen], better maintaining  
87 blood [glucose] and/or providing stimulation to the central nervous system via the ‘pleasure  
88 and reward’ centers of the brain (21, 23). During long-duration events, which deplete muscle  
89 glycogen stores, exogenous CHO intake is particularly important to maintain high rates of  
90 CHO oxidation (20), with the greatest performance enhancement observed at ingestion rates  
91 of 60-80 g/h (44). While the reductions in EP and WEP were not significantly correlated with  
92 changes in muscle [glycogen] following 2 h of heavy-exercise in our previous study (13), the  
93 relationship between muscle CHO availability (in the muscle and circulation) and the power-  
94 time relationship is likely to be complex, and it is possible that CHO ingestion may offset the  
95 reductions in EP and WEP reported following 2 h of heavy-intensity cycling (12, 13)

96 The purpose of this study was to: 1) investigate the dynamic changes in EP and WEP during  
97 and following 2 h of heavy-intensity exercise; and 2) determine the effect of 60 g/h of CHO  
98 ingestion, compared to a placebo, on EP and WEP during and following 2 h of heavy-  
99 intensity exercise. We hypothesized that EP and WEP would be reduced progressively

100 following 40 min, 80 min and 2 h of heavy-intensity exercise, and that CHO ingestion would  
101 attenuate the declines in EP and WEP after 2 h of heavy-intensity exercise.

102

### 103 **Methods**

104 This paper reports the results of two experiments. The first experiment was conducted to  
105 investigate possible changes in EP and WEP after 40 min, 80 min and 2 h of heavy-intensity  
106 exercise and the second experiment was conducted to investigate the effect of CHO ingestion  
107 on changes in EP and WEP after 2 h of heavy-intensity exercise.

#### 108 *Participants*

109 Experiments I and II were conducted on the same group of participants. Sixteen males (mean  
110  $\pm$  SD: age =  $34 \pm 6$  years, height =  $1.78 \pm 0.07$  m, body mass =  $79.1 \pm 7.6$  kg, peak O<sub>2</sub> uptake  
111 ( $\dot{V}O_{2peak}$ ) =  $52.5 \pm 7.3$  mL·kg<sup>-1</sup>·min<sup>-1</sup>) took part in the experiments. They were all competitive  
112 athletes (comprising two runners, six cyclists, four triathletes, three Crossfit athletes, and one  
113 squash player) but were not professional/elite. The participants were instructed to arrive at the  
114 laboratory in a rested and hydrated state, to avoid alcoholic drinks and strenuous exercise for  
115 24 h prior to testing, and to maintain their habitual diet throughout the study. The participants  
116 recorded their diet for 24 h prior to the first experimental session and replicated this prior to  
117 each subsequent visit. The experimental procedures were approved by the Institutional  
118 Research Ethics Committee at the University of Exeter and informed consent was obtained  
119 from each participant prior to testing. One participant did not consent to having muscle  
120 biopsies taken in Experiment II. All exercise tests were separated by a minimum of 24 h but  
121 the tests in which the 3MT was completed following a bout of heavy-intensity exercise (see  
122 below for more details) were separated by at least 72 h (i.e.,  $7 \pm 4$  days).

#### 123 *Experimental design*

124 Participants reported to the laboratory on 7 occasions over a 7-week period ( $\pm 2$  weeks). The  
125 tests included a ramp incremental exercise test for the determination of  $\dot{V}O_{2peak}$  and gas  
126 exchange threshold (GET), a 3MT familiarisation trial, a 3MT performed in a rested state  
127 which served as a control (C-3MT), and on subsequent visits: a 3MT preceded by 40 min (40-  
128 3MT), 80 min (80-3MT) or, on two occasions, 2 h of heavy-intensity exercise. A placebo  
129 drink was consumed during the 40-3MT, 80-3MT and during one of the 2 h visits (120-  
130 3MT<sub>PLA</sub>), while CHO was consumed during one 2 h visit (120-3MT<sub>CHO</sub>). The 120-3MT<sub>PLA</sub>  
131 visit was used for both experiments. The other trials were administered in a randomized and  
132 counterbalanced order.

133 All exercise tests were conducted using the same electrically-braked cycle ergometer (Lode  
134 Excalibur Sport, Groningen, Netherlands). During all tests, except the 3MTs, the participants  
135 cycled at a self-selected pedal rate (70-90 rpm). For each participant, the self-selected pedal  
136 rate used in the ramp incremental test was recorded and replicated in each subsequent visit.  
137 The ergometer seat and handlebar configuration were adjusted for comfort during the first  
138 visit and were recorded and then replicated in subsequent visits. Exercise tests took place in  
139 an air-conditioned laboratory with ambient temperature of 20°C and relative humidity of 60%.

#### 140 *Determination of $\dot{V}O_{2peak}$ and gas exchange threshold*

141 During visit 1 the participants completed a ramp incremental exercise test. The ramp protocol  
142 consisted of a 3-min baseline of pedalling at 20 W after which the power output was increased  
143 by 30 W/min until the participant was unable to continue. The limit of tolerance was  
144 determined when cadence fell  $>10$  rpm below the target cadence for more than 5 s despite  
145 strong verbal encouragement.  $\dot{V}O_{2peak}$  was determined as the highest 30-s mean value  
146 recorded during the test. The GET was defined according to the procedures of Beaver et al.  
147 (2). The GET and  $\dot{V}O_{2peak}$  were used to normalize the fixed resistance for the 3MTs.

148 *Three-min all-out tests (3MTs)*

149 The resistance for the 3MT was applied using the linear factor function of the ergometer and  
150 was calculated as: linear factor = power output/preferred cadence<sup>2</sup> where the power was  
151 50%Δ (i.e., GET plus 50% of the interval between the GET and ramp test peak power output).  
152 Visit 2 (familiarization test) and visit 3 consisted of a C-3MT performed with no prior  
153 exercise. The 3MT protocol began with a 3-min baseline of pedalling at 20 W. During visits  
154 4-7, a 60 s pause was administered after the constant power output bout, during which the  
155 participants had 30 s of passive recovery and then were instructed to cycle for the last 30 s  
156 against a resistance of 20 W. This was done to replicate the 1-min pause that was required to  
157 obtain a muscle biopsy in Experiment II. A 5 s countdown was given prior to the 3MT and the  
158 participant was instructed to increase cadence to ~110-120 rpm. Strong verbal encouragement  
159 was then given for an all-out effort from the onset of the 3MT. Participants were not informed  
160 of the elapsed time. Instructions were given to reach peak power output as quickly as possible  
161 and to maintain the all-out effort throughout the test. The EP was subsequently calculated as  
162 the mean power output over the last 30 s of the test, and the WEP was calculated as the work  
163 done above EP during the 3MT, i.e. the mean power output above EP for each second of the  
164 test was multiplied by the number of seconds of exercise performed above EP to compute the  
165 total work done above EP (48). The results of the 3MT were deemed valid only when the  
166  $\dot{V}O_{2peak}$  attained exceeded 95% of the  $\dot{V}O_{2peak}$  determined in the initial ramp incremental test.  
167 Results determined from the C-3MT, 40-3MT, 80-3MT, 120-3MT<sub>PLA</sub> and 120-3MT<sub>CHO</sub> were  
168 consequently termed C-EP and C-WEP, 40-EP and 40-WEP, 80-EP and 80-WEP, 120<sub>PLA</sub>-EP  
169 and 120<sub>PLA</sub>-WEP, 120<sub>CHO</sub>-EP and 120<sub>CHO</sub>-WEP, respectively.

170 *Experiment I: Effect of 40 min, 80 min and 2 h of heavy-intensity exercise on the parameters*  
171 *of the power-duration relationship*



172 The constant power output applied during the 40 min, 80 min and 2 h heavy-intensity exercise  
173 bouts was calculated as the power output at the GET plus 25% of the difference between the  
174 GET and C-EP ( $25\% \Delta I$ ; 12). Experiment I consisted of three heavy-intensity exercise bouts  
175 of 40 min, 80 min and 2 h followed by a 3MT. The visits began with a 3-min baseline of  
176 pedaling at 20 W for attainment of baseline measurements, after which the power output  
177 abruptly increased to the target power output for 40 min, 80 min or 2 h. Participants were  
178 instructed to hold their desired cadence throughout the constant power output bout.  
179 Participants were provided with a 100-ml opaque plastic bottle containing 1 mL of apple-  
180 flavored sweetener (Myprotein.Co, UK), with no caloric value, added to 94 mL of water to  
181 ensure that supplements were indistinguishable from, and of equal volume to, the CHO  
182 solution used in Experiment II (see below). The first bottle was given at -3 min, as  
183 participants wore a mask between -3 – 15 min for measurements of pulmonary gas exchange,  
184 and thereafter a bottle was given every 15 min. During the 40-3MT the last beverage was  
185 consumed at 30 min; during the 80-3MT visit the last beverage was consumed at 75 min; and  
186 during the 120-3MT<sub>PLA</sub> the last beverage was consumed at 105 min. A clock with time  
187 remaining was visible during the constant power output bout and participants were allowed to  
188 listen to music; however, both were withdrawn 2 min prior to the 3MT. Participants were  
189 instructed to stop pedalling for 30 s after the constant power output bout, and at 30 s, they  
190 were instructed to start cycling again at 20 W. This was administered to ensure the same rest  
191 period was provided between the four constant power output tests (both experiments) and the  
192 3MTs and so that muscle biopsies could be taken in the 30 s window during the 2 h visits for  
193 experiment II. Pulmonary gas exchange data were attained at the following time points during  
194 the 40-3MT visit: -3-15, 25-30 and 35-40 min; the 80-3MT visit: -3-15, 25-30, 55-60 and 75-  
195 80 min; and the 120-3MT<sub>PLA</sub> visit: -3-15, 25-30, 55-60, 85-90 and 115-120 min; and  
196 continuously throughout the 3MT. A blood sample from a fingertip was collected every 20

197 min during the constant power output bouts for the analysis of [lactate] and [glucose]. Heart  
198 rate (HR) was recorded (Garmin FR70, Garmin Ltd, Schaffhausen, Switzerland) every 5 s  
199 during all visits. Before and after the test, participants were weighed in minimal clothing to  
200 assess changes in body mass.

#### 201 *Experiment II: Effect of CHO ingestion on the parameters of the power-duration relationship*

202 The 120-3MT<sub>PLA</sub> and 120-3MT<sub>CHO</sub> visits included 2 h of heavy-intensity exercise  
203 immediately followed by a 3MT. The 120-3MT<sub>PLA</sub> exercise trial was the same as that in  
204 Experiment I. The procedures for the 120-3MT<sub>CHO</sub> visit were identical to the 2 h visit  
205 described in Experiment I, except for the ingestion of CHO. During the 120-3MT<sub>CHO</sub> visit  
206 participants consumed 60g/h of CHO (Maurten drink mix 320, Biotech center, Gothenburg,  
207 Sweden). Participants were given the same bottle as described in Experiment I, containing 94  
208 ml of Maurten drink mix (15g of CHO), every 15 min during the constant power output bout.  
209 A muscle biopsy was taken prior to exercise and again at 120 min during the 30 s rest period  
210 between the constant-power-output bout and the 3MT.

#### 211 *Measurements*

212 **Pulmonary gas exchange.** Pulmonary gas exchange was measured breath-by-breath and  
213 averaged over 10 s periods during all visits. Participants wore a face mask (Hans Rudolf 7450  
214 Series V2<sup>TM</sup> Mask, CareFusion, Germany) and inspired and expired gas volume and gas  
215 concentration signals were sampled continuously at 100 Hz (Vyntus, CareFusion, Germany)  
216 via a capillary line connected to the mask. These analysers were calibrated before each test  
217 with gases of known concentration and the turbine volume transducer was calibrated using a  
218 3-L syringe (Hans Rudolph, MO). The volume and concentration signals were time-aligned  
219 by accounting for the delay in capillary gas transit and analyzer rise time relative to the  
220 volume signal. The baseline  $\dot{V}O_2$  period during all visits were defined as the mean value

221 recorded over the final minute during the 3-min warm up period at 20 W. Fat and CHO  
222 oxidation rates were calculated from  $\dot{V}O_2$  and  $\dot{V}CO_2$  using the following stoichiometric  
223 equations with the assumption that protein oxidation during exercise did not change (24):

224 CHO oxidation ( $g \cdot min^{-1}$ ) =  $[4.21 (\dot{V}CO_2) - 2.692 (\dot{V}O_2)]$

225 Fat oxidation ( $g \cdot min^{-1}$ ) =  $[1.695 (\dot{V}O_2) - 1.701 (\dot{V}CO_2)]$

226 **Muscle biopsies.** Muscle samples were obtained from one incision from the medial region of  
227 the *m. vastus lateralis* under local anesthesia (1% lidocaine) using the percutaneous  
228 Bergström needle biopsy technique under suction (3). Muscle samples were taken at rest and  
229 immediately post 2 h of heavy-intensity exercise during the 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub>  
230 visits. The post-exercise biopsies were taken while participants remained on the cycle  
231 ergometer and were typically collected within 10 s of the completion of the exercise  
232 bout. Biopsy samples were immediately frozen in liquid nitrogen and stored at  $-80^\circ C$  for  
233 subsequent analysis.

234 **Muscle glycogen concentration.** Muscle samples were freeze-dried prior to dissection from  
235 connective tissue, fat and blood. Muscle glycogen was extracted from  $\sim 1$  mg d.w. muscle and  
236 hydrolysed to glucose units in 1M HCl at  $95^\circ C$  for 3 h. The addition of hexokinase catalyzed  
237 the reaction of glucose with adenosine triphosphate to glucose-6-phosphate, and then to 6-P-  
238 gluconolactone with NADH<sup>+</sup> in the presence of G-6-PDH enzyme, producing the fluorescent  
239 detectable NADPH (28). Reactions were measured on a Fluoroskan (Fluoroskan™ Microplate  
240 Fluorometer, ThermoFisher Scientific, Mass. USA), with Excitation 355 nm and Emission  
241 460 nm filters. Glycogen was reported in units of mmol of glucose per kg dry muscle.

242 **Blood analyses.** All fingertip blood samples ( $\sim 25 \mu l$ ) (visit 4-7) were collected into capillary  
243 tubes and analysed within 60 s for blood [lactate] and [glucose] using an automated lactate  
244 analyser (Stat2300, Yellow Spring Instrument, Yellow Springs, OH).

## 245 **Statistical analysis**

246 For experiment I, one-way ANOVAs with repeated measures were used to assess differences  
247 over time during the 40-3MT, 80-3MT and 120-3MT<sub>PLA</sub> tests in respiratory gas exchange  
248 variables, HR, blood [lactate] and blood [glucose]. To assess the difference in these  
249 physiological variables at common time points within the 40-3MT, 80-3MT and 120-3MT<sub>PLA</sub>  
250 a repeated measures ANOVA (condition x time) was used. One-way ANOVA with repeated  
251 measures was used to assess differences in EP, WEP, total work done (TWD), peak power  
252 output,  $\dot{V}O_{2peak}$ , and body mass between C-3MT, 40-3MT, 80-3MT and 120-3MT<sub>PLA</sub>.

253 For experiment II, one-way ANOVAs with repeated measures were used to assess differences  
254 in the EP, WEP, TWD, peak power output, muscle glycogen concentration and  $\dot{V}O_{2peak}$ , as  
255 well as differences in respiratory gas exchange variables, blood [glucose] and blood [lactate]  
256 between C-3MT, 120-3MT<sub>PLA</sub> and 120-3MT<sub>CHO</sub>. Differences in the change in muscle  
257 [glycogen] (from rest to post-exercise) between the 120-3MT<sub>PLA</sub> and 120-3MT<sub>CHO</sub> visits were  
258 analysed using a paired sample t-test. The relationships between the change in muscle  
259 [glycogen] and the changes in in EP and WEP were determined using Pearson product-  
260 moment correlation coefficients.

261 Statistical significance was accepted at  $P < 0.05$ . Significant interactions and main effects were  
262 followed up with Bonferroni post hoc tests. Data are reported as mean  $\pm$  SD.

263

## 264 **Results**

265

266 The  $\dot{V}O_{2peak}$  in the ramp incremental test was  $4.12 \pm 0.45 \text{ L} \cdot \text{min}^{-1}$ , the peak power output was  
267  $360 \pm 41 \text{ W}$  and the GET was  $132 \pm 7 \text{ W}$ . The 25% $\Delta 1$  for the 2 h constant power output bouts  
268 was  $164 \pm 28 \text{ W}$ .

269

270 *Experiment I: Dynamic changes in the parameters of the power-duration relationship*  
271 *following 40 min, 80 min and 2 h of heavy-intensity exercise*

272 During the 40-3MT visit, the relative intensity did not change between 10-15 min ( $63\% \pm 7\%$   
273  $\dot{V}O_{2peak}$ ) and 35-40 min ( $63\% \pm 5\% \dot{V}O_{2peak}$ ;  $P>0.05$ ). The relative intensity increased during  
274 both the 80-3MT visit (from 10-15 min:  $63\% \pm 7\% \dot{V}O_{2peak}$  to 75-80 min:  $65\% \pm 5\% \dot{V}O_{2peak}$ ;  
275  $P<0.05$ ) and the 120-3MT<sub>PLA</sub> visit (from 10-15 min:  $64\% \pm 8\% \dot{V}O_{2peak}$  to 115-120 min:  $68\%$   
276  $\pm 7\% \dot{V}O_{2peak}$ ;  $P<0.001$ ). HR increased over time during all the constant power output bouts  
277 (Table 1). During the 40-3MT visit, RER did not change significantly from 10-15 min to 35-  
278 40 min; however, RER decreased during both the 80-3MT and the 120-3MT<sub>PLA</sub> visits (Table  
279 1).

280 Body mass decreased during the 40-3MT, 80-3MT and 120-3MT<sub>PLA</sub> trials (Table 1). Body  
281 mass was lower post-exercise in the 120-3MT<sub>PLA</sub> visit compared to the 80-3MT and 40-3MT  
282 visits with no differences between the 80-3MT and the 40-3MT visit (Table 1).

283 The power output profiles during the C-3MT, 40-3MT, 80-3MT and 120-3MT<sub>PLA</sub> are shown  
284 in Fig. 1. There were no differences in  $\dot{V}O_{2peak}$  between C-3MT ( $4.03 \pm 0.40 \text{ L}\cdot\text{min}^{-1}$ ), 40-  
285 3MT ( $4.19 \pm 0.40 \text{ L}\cdot\text{min}^{-1}$ ), 80-3MT ( $4.15 \pm 0.41 \text{ L}\cdot\text{min}^{-1}$ ), 120-3MT<sub>PLA</sub> ( $4.08 \pm 0.51 \text{ L}\cdot\text{min}^{-1}$ )  
286 and the ramp incremental test ( $P>0.05$ ). There was no differences in EP between C-EP ( $260 \pm$   
287  $37 \text{ W}$ ), 40-EP ( $268 \pm 39 \text{ W}$ ) and 80-EP ( $260 \pm 40 \text{ W}$ ;  $P>0.05$ ). However, 120<sub>PLA</sub>-EP was  
288 lower than EP in all the other conditions ( $236 \pm 47 \text{ W}$ ;  $P<0.05$ ; Fig. 2A). There was no  
289 difference in WEP between C-WEP ( $17.9 \pm 3.3 \text{ kJ}$ ) and 40-WEP ( $16.1 \pm 3.3 \text{ kJ}$ ), but both 80-  
290 WEP ( $14.7 \pm 2.9 \text{ kJ}$ ;  $P<0.05$ ) and 120<sub>PLA</sub>-WEP ( $13.8 \pm 2.7 \text{ kJ}$ ;  $P<0.05$ ) were lower than C-  
291 WEP; 80-WEP was also lower than 40-WEP ( $P<0.05$ ; Fig. 2B). Results for peak power  
292 output and TWD during the 3MTs are shown in Fig. 2C and Fig. 2D, respectively. Blood

293 [lactate] immediately after the 3MT was higher in the 40-3MT ( $8.8 \pm 2.1$  mM) compared to  
294 the 120-3MT<sub>PLA</sub> visit ( $7.0 \pm 2.1$  mM;  $P < 0.05$ ) with no difference after any other 3MTs.

295 *Experiment II: Influence of CHO ingestion on changes in the power-duration relationship*  
296 *following 2 h of heavy-intensity exercise*

297 In both the 120-3MT<sub>PLA</sub> and 120-3MT<sub>CHO</sub> tests, the relative intensity increased from ~64%  
298  $\dot{V}O_{2\text{peak}}$  at 10-15 min to ~68%  $\dot{V}O_{2\text{peak}}$  at 115-120 min (Fig. 3A). HR increased during both  
299 120-3MT visits (Table 1). There was no difference in relative intensity or HR between the  
300 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub> visits at any time point (Table 1 and Fig. 3A). RER decreased  
301 during both the 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub> visits, but was higher at 115-120 min in the  
302 120-3MT<sub>CHO</sub> trial compared to the 120-3MT<sub>PLA</sub> (Fig. 3B). CHO oxidation was higher in the  
303 120-3MT<sub>CHO</sub> bout compared to the 120-3MT<sub>PLA</sub> bout at 85-90 and 115-120 min (Fig. 3C).  
304 Blood [glucose] was higher during the 120-3MT<sub>CHO</sub> bout compared to 120-3MT<sub>PLA</sub> at all time  
305 points at and beyond 40 min (Fig. 3D). There was no difference in blood [lactate] measured  
306 during the 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub> trials. However, blood [lactate] was higher post  
307 3MT during the 120-3MT<sub>CHO</sub> ( $8.4 \pm 0.5$  mM) compared to the 120-3MT<sub>PLA</sub> visit ( $7.2 \pm 0.5$   
308 mM;  $P < 0.05$ ).

309 The power output profiles during the C-3MT, 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub> are shown in  
310 Fig. 4. There were no differences in  $\dot{V}O_{2\text{peak}}$  between C-3MT, 120-3MT<sub>CHO</sub>, 120-3MT<sub>PLA</sub> and  
311 the ramp incremental test ( $P > 0.05$ ). 120<sub>PLA</sub>-EP was 9% lower ( $236 \pm 47$  W) than C-EP ( $260 \pm$   
312  $37$  W;  $P < 0.05$ ) and 7% lower than 120<sub>CHO</sub>-EP ( $254 \pm 49$  W;  $P < 0.05$ ; Fig. 5A). 120<sub>CHO</sub>-EP  
313 was not different from C-EP (Fig. 5A). C-WEP was 22% higher ( $17.9 \pm 3.3$  kJ) than 120<sub>PLA</sub>-  
314 WEP ( $13.8 \pm 2.7$  kJ;  $P < 0.001$ ) and 24% higher than 120<sub>CHO</sub>-WEP ( $13.5 \pm 3.4$  kJ;  $P < 0.001$ ;  
315 Fig. 5B). 120<sub>CHO</sub>-WEP was not different from 120<sub>PLA</sub>-WEP (Fig. 5B). Results for peak power  
316 output and TWD are shown in Fig. 5C and Fig. 5D, respectively.

317 There was insufficient muscle tissue in one biopsy sample for completion of muscle glycogen  
318 analyses, and therefore the muscle glycogen data are for n=14. Muscle [glycogen] decreased  
319 over the 2 h heavy-intensity exercise bouts in both the 120-3MT<sub>CHO</sub> and 120-3MT<sub>PLA</sub> trial  
320 (Fig. 6). Muscle [glycogen] was lower following the 2 h bout in the 120-3MT<sub>PLA</sub> trial  
321 compared to 120-3MT<sub>CHO</sub> trial; however, the change in muscle [glycogen] was not different  
322 between trials (Fig. 6). There was no correlation between the change in muscle [glycogen]  
323 over the 2 h exercise bout and the changes in EP or WEP in either the 120-3MT<sub>PLA</sub> or the 120-  
324 3MT<sub>CHO</sub> bout.

325 To increase sample size and therefore increase confidence in our analysis, we combined the  
326 data from the present study with those from Clark et al. (13) to create a data set containing 28  
327 participants who underwent muscle biopsies and completed a 3MT both at rest and following  
328 2 h of heavy-intensity exercise. The pooled data show that muscle [glycogen] at rest was  
329 correlated with control EP (Fig. 7A) and that muscle [glycogen] following 2 h of heavy-  
330 intensity exercise was correlated with both fatigued EP (Fig. 7B) and fatigued WEP ( $r = 0.43$ ;  
331  $P < 0.05$ ). The change in EP following 2 h of heavy-intensity exercise was not correlated with  
332 the change in muscle [glycogen] (Fig. 8C, 8D). However, the percentage change in muscle  
333 [glycogen] following 2 h of heavy-intensity exercise was correlated with both the absolute  
334 change in WEP (Fig. 7E) and the percentage change in WEP (Fig. 7F).

335

## 336 **Discussion**

337

338 This is the first study to investigate the influence of different durations of prolonged  
339 endurance exercise, and CHO ingestion during exercise, on the parameters of the power-  
340 duration relationship. We used the 3MT as a practical and expeditious method to appraise  
341 changes in the power-duration relationship because it has been shown that the EP and WEP

342 provide valid estimates of CP and W', respectively, both in the absence of prior exercise (7,  
343 48) and following 2 h of heavy-intensity cycle exercise (13). The principal novel findings  
344 were that: (1) EP was not altered by 40 min or 80 min but was significantly reduced after 2 h  
345 of heavy-intensity exercise; (2) WEP was not altered by 40 min but was significantly reduced  
346 after 80 min and 2 h of heavy-intensity exercise; (3) the reduction in EP following 2 h of  
347 heavy-intensity exercise was negated when CHO was consumed; and (4) the reduction in  
348 WEP following 2 h of heavy-intensity exercise was not rescued by CHO ingestion. These  
349 results reveal disparate time courses for the changes in EP and WEP during heavy-intensity  
350 exercise: WEP appears to fall in an approximately linear fashion and becomes significantly  
351 reduced when exercise duration  $\geq 80$  min; while EP is preserved for at least 80 min and is only  
352 significantly reduced when exercise duration approaches 2 h. Importantly, our results show  
353 that EP (but not WEP) is preserved following 2 h of heavy-intensity exercise when 60 g/h  
354 CHO is consumed, suggesting that CP (but not W') is influenced, at least in part, by CHO  
355 feeding. These findings may have significant implications for performance prediction and the  
356 formulation of optimal race (pacing and nutritional) strategies.

357 *I: Dynamic changes in the parameters of the power-duration relationship following 40 min,*  
358 *80 min and 2 h of heavy-intensity exercise*

359 Consistent with our previous research, we found that 2 h of heavy-intensity exercise led to a  
360 decline of both EP and WEP (12, 13). Specifically, there was a ~9% fall in EP and a ~22%  
361 fall in WEP compared to C-3MT, results which are in close agreement with our previous  
362 findings of an 8-11% reduction in EP and a 20-22% reduction in WEP following 2 h of  
363 heavy-intensity exercise (12, 13). The key novel findings of the present study were that there  
364 were no significant changes in either EP or WEP compared to the control condition following  
365 40 min of heavy-intensity exercise whereas, following 80 min of exercise, EP was unchanged  
366 but WEP was significantly reduced (by 17%). Our study therefore reveals differences in the



367 time course of changes in EP and WEP during endurance exercise, with WEP deteriorating  
368 more rapidly than EP. These results may provide insight into the physiological mechanisms  
369 underpinning the power-duration relationship and their relationship with the fatigue process  
370 during endurance exercise.

371 Several factors likely contribute to the changes observed in the power-duration parameters  
372 following 80 min and/or 2 h of heavy-intensity exercise. An increase in the  $O_2$  cost of  
373 sustaining the constant power output was observed during the 2 h (from ~64% to ~68% of  
374 initial  $\dot{V}O_{2peak}$ ) and 80 min (from ~63% to ~65% of initial  $\dot{V}O_{2peak}$ ) but not the 40 min  
375 exercise bout (stable at ~63% of initial  $\dot{V}O_{2peak}$ ) and occurred concomitantly with a decrease  
376 in RER in the 2 h (from ~0.91 to ~0.84) and 80-min (from ~0.93 to ~0.91) exercise bouts but  
377 not in the 40 min bout (from ~0.93 to ~0.92). The progressive loss of efficiency is therefore  
378 related in part to a shift in substrate utilisation from CHO towards fat oxidation during the 80  
379 min and 2 h exercise bouts. Given that EP reflects a critical oxidative metabolic rate (1), a loss  
380 of efficiency (i.e., a higher  $\dot{V}O_2$  per watt of power output) would necessarily result in a  
381 reduced EP.

382 A substantially increased core temperature and consequent redistribution of blood flow away  
383 from skeletal muscle to facilitate heat exchange might also increase the overall  $O_2$  cost of  
384 exercise (36). Moreover, significant dehydration, due to the sweat rate exceeding the rate of  
385 fluid replacement, could compromise cardiac output and muscle  $O_2$  delivery (42). Given that  
386 EP is an index of oxidative metabolic function (29, 47), these changes could reduce efficiency  
387 and/or exacerbate muscle metabolic perturbation and fatigue development. In our study,  
388 however, participants exercised in an air-conditioned lab (20° C) and consumed 380 ml of  
389 fluid per hour, *pro rata*, such that body mass losses were minimal ( $\leq 1.0$  kg;  $\leq 1.2\%$ ). Such  
390 small changes in body mass suggest that issues related to thermoregulation probably did not

391 contribute appreciably to the decline in 3MT performance we observed and certainly indicate  
392 that, if hyperthermia did occur, it likely affected subjects similarly.

393 It appears that CP represents an important boundary for neuromuscular fatigue development  
394 (9, 40) such that central fatigue, which may be determined by a reduction in voluntary  
395 activation measured by motor nerve stimulation, makes a greater contribution to fatigue  
396 development in the heavy-intensity domain compared to the severe-intensity domain (4, 9,  
397 46). It is possible, therefore, that the development of central fatigue during the 80 min and 2 h  
398 heavy-intensity exercise bouts in the present study impaired performance in the subsequent  
399 3MT, reducing EP and/or WEP. Consistent with this interpretation, it has been reported that  
400 acetaminophen ingestion, which would be expected to blunt central fatigue development by  
401 attenuating the sensation of pain and preventing any reduction in central motor drive, led to  
402 greater muscle activation over the last 30 s of a 3MT and a higher EP compared to the placebo  
403 condition (31).

404 The reduction in WEP after just 80 min as well as after 2 h of heavy-intensity exercise is  
405 intriguing. Significant changes in muscle [ATP] and/or muscle metabolic status (i.e.  
406 substantial depletion of phosphocreatine or accumulation of hydrogen ions) would not be  
407 anticipated during heavy-intensity exercise (4) such that the development of peripheral fatigue  
408 through these mechanisms is unlikely to explain the reduced WEP. The lack of effect on peak  
409 power output during the 3MT following 80 min and 2 h of heavy-intensity exercise might  
410 suggest that the reduced WEP at these time points is related not to high-energy phosphate  
411 depletion but rather to impaired ATP production via anaerobic glycolysis which may, in turn,  
412 be related to muscle glycogen depletion. Consistent with this, a reduction in WEP has been  
413 reported when glycogen depletion has been invoked by dietary restriction (30) or the  
414 performance of 2 h of heavy-intensity exercise (13). We note here that the evaluation of WEP  
415 is less reliable than EP (12) such that possible error in the estimates of WEP is a possible

416 limitation of the present study; however, the reduction in WEP at 80 min and 2 h of exercise  
417 is substantial relative to the likely error.

418 When we combined the data from the present study with those from Clark et al. (13), we  
419 found a significant correlation between the change in WEP, but not EP, and the change in  
420 muscle [glycogen] following 2 h of heavy-intensity exercise. The progressive decline in  
421 muscle [glycogen] that would be expected during prolonged heavy-intensity exercise (18, 19)  
422 could therefore contribute to the reduction in WEP during the 80 min and 2 h exercise bouts.  
423 It is interesting to note, however, that WEP was significantly reduced despite muscle  
424 glycogen depletion being far from complete (~36% of the resting value was remaining  
425 following 2 h of exercise) at the start of the 3MT. An important consideration in this regard is  
426 that muscle glycogen depletion can be localised to subcellular compartments such that muscle  
427 performance might become impaired even when ‘global’ muscle [glycogen] appears sufficient  
428 (34). The present data suggest that absolute muscle [glycogen] may influence the rate of  
429 energy generation through anaerobic glycolysis, and/or influence contractile function via  
430 effects on sarcoplasmic reticulum calcium release (37), thereby reducing WEP.

431 *II: Influence of CHO ingestion on changes in the power-duration relationship following 2 h of*  
432 *heavy-intensity exercise*

433 We tested the hypothesis that changes in the power-duration relationship following 2 h of  
434 heavy-intensity exercise would be mitigated when CHO, compared to placebo, was consumed  
435 during exercise. A striking observation was that the reduction in EP following 2 h of heavy-  
436 intensity exercise was eliminated by 60 g/h of CHO ingestion. Specifically, in the placebo  
437 condition, EP was reduced by 9% compared to C-EP, consistent with previous findings (12,  
438 13); however, when CHO was ingested during exercise, there was no significant reduction in  
439 EP compared to C-EP. In contrast, WEP was significantly reduced in both the placebo and

440 CHO conditions (22% and 24% reductions, respectively) compared to C-WEP, with there  
441 being no difference between the two conditions. An important novel finding of the present  
442 study is therefore that EP, but not WEP, may be preserved by CHO ingestion during  
443 endurance exercise of up to 2 h duration.

444 Significant muscle glycogen depletion was evident following 2 h of heavy-intensity exercise  
445 both when subjects ingested CHO (53% reduction in [glycogen]) and when they ingested a  
446 placebo beverage (64% reduction in [glycogen]). Muscle [glycogen] was higher following 2 h  
447 of heavy-intensity exercise with CHO compared to placebo ingestion but this may be  
448 explained by the tendency for muscle [glycogen] to be higher at baseline in the CHO  
449 condition. The reduction in muscle [glycogen] over the 2 h exercise bout was not different  
450 between conditions despite there being greater CHO availability and utilization (evidenced by  
451 higher RER, a greater rate of CHO oxidation and higher blood [glucose]) when CHO was  
452 ingested. Similarly, Smith et al. (45) reported that ingestion of 60 g/h of CHO during 2 h of  
453 exercise at 77% of  $\dot{V}O_{2\text{peak}}$  did not spare muscle glycogen, compared to placebo, but did  
454 enhance subsequent 20-km time trial performance, an effect that the authors suggested was  
455 due to the increased rate of CHO oxidation. In light of the results of the present study, it is  
456 possible that the participants in Smith et al. (45) had a higher CP and could therefore sustain a  
457 higher power output during the 20-km time trial following CHO compared to placebo  
458 ingestion.

459 The increased rate of CHO oxidation observed in the present study, consequent to CHO  
460 ingestion, likely contributed to the preserved EP we observed. However, given the greater  
461 proportional development of central fatigue during heavy-intensity endurance exercise (4, 9,  
462 46), it is possible that other factors also contributed. In the placebo condition, blood [glucose]  
463 was significantly lower than the baseline value at 100 and 120 min of exercise (~3.8 mM)  
464 whereas it remained stable throughout exercise in the CHO condition (~4.8 mM). It is

465 possible that this difference in blood [glucose] attenuated central fatigue development (14, 35)  
466 and enabled a higher muscle activation during the subsequent 3MT. Similarly, the detection of  
467 CHO by sensors in the mouth, even when the CHO is not swallowed, may attenuate  
468 decrements in exercise performance associated with fatigue (10, 16, 22). Specifically, it  
469 appears that CHO receptors in the oral cavity may signal an impending increase in CHO  
470 availability to higher brain regions (11, 16, 23). It is possible therefore that, in addition to  
471 direct effects on skeletal muscle metabolism, the ingestion of CHO during exercise reduced  
472 central fatigue and enabled enhanced motor output and contractile function (35) during the  
473 subsequent 3MT.

474 In the present study, no significant correlations were found between the changes in muscle  
475 [glycogen] and EP or WEP in either condition, possibly due to the relatively small sample  
476 size. However, when the data from the present study were pooled with those of Clark et al.  
477 (13), we found a positive relationship between EP and muscle [glycogen] both at rest and  
478 following 2 h of heavy-intensity exercise. These results suggest a link between aerobic fitness  
479 and muscle glycogen storage, which might be mediated by training status (15). Moreover,  
480 when the data from the two studies were combined, we found that, following 2 h of heavy-  
481 intensity exercise, muscle [glycogen] was correlated with WEP and also that the change in  
482 muscle [glycogen] over the 2 h exercise bout was correlated with the change in WEP.

483 The physiological mechanisms underpinning  $W'$  have not been entirely resolved (5, 33, 43).  
484 However, because CP is closely related to the proportion of type I muscle fibers (29, 47), it  
485 has been suggested that  $W'$  may reflect the metabolic, contractile and/or fatigue-related  
486 characteristics of type II muscle fibers (47, 51). The fall in WEP we observed might therefore  
487 reflect the specific effects of 2 h of heavy-intensity exercise on the type II fiber population,  
488 including glycogen depletion (52). There is evidence to suggest that  $W'$  is related to the  
489 capacity for substrate-level phosphorylation, with PCr availability being important for the

490 achievement of peak power output in the 3MT (39, 47, 49). It has been reported that  $W'$  is  
491 reduced following glycogen depletion induced by dietary CHO restriction, with there being no  
492 effect on CP (30). The results of the current investigation are consistent with these findings in  
493 showing that WEP is reduced when glycogen depletion is evident following 2 h of heavy-  
494 intensity cycling, irrespective of effects on EP.

495 The different effect of CHO feeding during endurance exercise on EP and WEP provide novel  
496 insight into the mechanisms underpinning these parameters (and, by extension, CP and  $W'$ ).  
497 While muscle glycogen depletion was not altered compared to the placebo condition, the  
498 maintenance of euglycaemia by CHO ingestion during prolonged exercise resulted in a  
499 preservation of EP in the face of a decline in WEP. This suggests that, following 2 h of heavy-  
500 intensity exercise, EP may be modulated by central fatigue whereas WEP may be more  
501 directly related to muscle glycogen availability. Further studies are required, with more direct  
502 measurements of central and peripheral fatigue, to explore this possibility.

### 503 *Implications for Performance*

504 The results of the present study have several potentially important implications for athlete  
505 performance diagnostics and race practice. The disparate time courses for the degradation of  
506 EP and WEP we observed during prolonged endurance exercise is of particular interest. The  
507 maintenance of EP for ~80 min of such exercise indicates that performance for events which  
508 are sustained below EP can be faithfully predicted from measurements made in the rested  
509 state whereas, for longer events, the fall in EP render such predictions more complicated.  
510 Indeed, inter-individual variation in the reductions in EP and WEP *during* endurance exercise,  
511 reflecting fatigue resistance, is likely an important but previously overlooked component of  
512 success in endurance sports (12). The fall in WEP during heavy-intensity exercise occurred  
513 much earlier than the fall in EP, with the group mean reduction being 10% after 40 min (not

514 significant), 18% after 80 min and 23% after 2 h. This relatively early reduction in WEP may  
515 impact on an athlete's ability to draw upon  $W'$ , limiting their ability to respond to, or initiate,  
516 surges in pace above CP, a factor that should be carefully considered when developing race  
517 tactics.

518 Our findings also emphasise the importance of CHO consumption during prolonged  
519 endurance exercise by showing that ingestion of 60 g/h CHO enabled EP to be maintained  
520 compared to a 9% reduction in EP when placebo was consumed. The performance  
521 implications of this difference, whether measured in terms of the mean speed that may be  
522 sustained throughout a race or in the ability to finish strongly, are likely to be profound.  
523 Depending on the power being sustained and the extent of the fall in CP during prolonged  
524 endurance exercise, it is possible that an athlete may eventually transition from the heavy- to  
525 the severe-intensity exercise domain, with the inevitable outcome that power must fall and/or  
526 exercise will become intolerable. This highlights the important interaction between  
527 physiology and nutrition during endurance exercise. Maintaining a high rate of CHO ingestion  
528 while exercising at a high intensity is an important consideration, and a potential limiting  
529 factor, for extreme human endurance challenges such as the attempt to run a <2 h marathon  
530 (6, 27).

531 It is important to acknowledge that our results are specific to the conditions of our study.  
532 Naturally, dynamic changes in EP and WEP would likely be different if other combinations of  
533 exercise intensity and duration were assessed. Moreover, the effect of CHO ingestion on the  
534 change in EP is also likely influenced by exercise intensity, exercise duration and the rate  
535 (and type) of CHO consumption (22). Finally, the extent to which our results in cycling may  
536 be extrapolated to other exercise modalities is presently unclear. These questions and the  
537 nature of the interaction between these key variables might be the subject of future  
538 investigations.

539 *Conclusion*

540 In conclusion, the EP and WEP, surrogates of the parameters of the power-duration  
541 relationship, CP and  $W'$ , respectively, were reduced following 2 h of heavy-intensity cycling.  
542 WEP, but not EP, was also reduced following 80 min of heavy-intensity cycling. CHO  
543 ingestion during 2 h of heavy-intensity cycling abolished the reduction in EP, but not WEP.  
544 These results suggest that, following prolonged endurance exercise,  $W'$  may be sensitive to  
545 local muscle glycogen availability, presumably via a limitation to energy production by  
546 anaerobic glycolysis, whereas CP may be sensitive to global CHO availability, perhaps via its  
547 relationship with central fatigue development. Practitioners should be aware that dynamic  
548 changes in the parameters of the power-duration relationship *during* heavy-intensity exercise  
549 present a challenge to the use of these parameters to predict performance during endurance  
550 sports events. It is clear, however, that CHO supplementation represents a practical and  
551 effective intervention to constrain the deterioration of CP during endurance exercise.

552



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740 **Figure Legends**

741 **Figure 1.** The group mean power profiles during the 3-min all-out test (3MT) measured with  
742 no prior exercise (C-3MT), and when preceded by 40 min (40-3MT), 80 min (80-3MT) and 2  
743 h (120-3MT<sub>PLA</sub>) of heavy-intensity exercise. Error bars are not shown for clarity. The end test  
744 power was significantly reduced at 2 h compared to control and the work done above the end  
745 test power was significantly reduced at 80 min and at 2 h. See text for further details.

746

747 **Figure 2.** Group mean end test power (A), work done above end test power (B), peak power  
748 outputs (C) and total work done (D) during the 3-min all-out test (3MT) measured with no  
749 prior exercise (C-3MT), and following 40 min (40-3MT), 80 min (80-3MT) and 2 h (120-  
750 3MT<sub>PLA</sub>) of heavy-intensity exercise. a = different from C-3MT ( $P<0.05$ ), b = different from  
751 40-3MT ( $P<0.005$ ), c = different from 80-3MT ( $P<0.05$ ).

752

753 **Figure 3.** Group mean relative intensity ( $\% \dot{V}O_{2peak}$ ) (panel A), respiratory exchange ratio  
754 (panel B), carbohydrate oxidation (panel C) and blood [glucose] and [lactate] (panel D)  
755 during 2 h of heavy-intensity cycling while ingesting carbohydrate (white symbols) or  
756 placebo (black symbols). \* = different from placebo ( $P<0.05$ ), a = different from 10-15 min  
757 ( $P<0.05$ ), b = different from 25-30 min ( $P<0.05$ ), c = different from 55-60 min ( $P<0.05$ ), d =  
758 different from 85-90 min ( $P<0.05$ ), \$= different from baseline ( $P<0.05$ ), £ = different from 20  
759 min ( $P<0.05$ ).

760

761 **Figure 4.** The group mean power profiles during the 3-min all-out test (3MT) measured with  
762 no prior exercise (C-3MT) and when preceded by a 2 h-heavy intensity exercise bout with  
763 ingestion of carbohydrate (120-3MT<sub>CHO</sub>) or placebo (120-3MT<sub>PLA</sub>). Error bars are not shown  
764 for clarity. The end test power was significantly reduced at 2 h compared to control when

765 placebo was ingested but was not different to control when carbohydrate was ingested. The  
766 work done above the end test power was significantly reduced compared to control  
767 irrespective of placebo or carbohydrate ingestion. See text for further details.

768

769 **Figure 5.** Group mean  $\pm$  SD end test power (A), work done above end test power (B), peak  
770 power outputs (C), and total work done (D) during the 3-min all-out test measured with no  
771 prior exercise (C-3MT) and after 2 h of exercise while ingesting carbohydrates (120-3MT<sub>CHO</sub>)  
772 or placebo (120-3MT<sub>PLA</sub>). \* = significant difference ( $P < 0.05$ ).

773

774 **Figure 6.** Group mean  $\pm$  SD muscle [glycogen] before and after 2 h of heavy-intensity  
775 exercise while consuming carbohydrate (CHO) or placebo (PLA). a = different from pre-  
776 exercise values ( $P < 0.001$ ), b = different from CHO condition ( $P < 0.05$ ).

777

778 **Figure 7.** Combined results from present study (black circles) and Clark et al. (13) (white  
779 circles) ( $n=28$ ). Correlation between muscle [glycogen] at rest and end test power (EP)  
780 without preceding exercise (panel A) and correlation between muscle [glycogen] and EP after  
781 2 h of heavy-intensity exercise (B). Correlations between the percentage change in muscle  
782 [glycogen] and the absolute (panel C) and percentage (panel D) change in EP over 2 h of  
783 heavy-intensity exercise. Correlations between the percentage change in muscle [glycogen]  
784 and the absolute (panel E) and percentage (panel F) change in WEP over 2 h of heavy-  
785 intensity exercise. \*\* =  $P < 0.005$ ; \* =  $P < 0.05$ .

**Table 1.** Mean  $\pm$  S.D. body mass, heart rate and RER during heavy-intensity exercise performed for various durations of heavy-intensity exercise

	Body mass (kg)		Heart Rate ( $b \cdot \text{min}^{-1}$ )		RER	
	Pre exercise	Post exercise	10 - 15 min	Last 5 min of exercise	10 - 15min	Last 5 min of exercise
40-3MT	79.2 $\pm$ 7.6	78.9 $\pm$ 7.6 <sup>ab</sup>	134 $\pm$ 16	138 $\pm$ 16 <sup>ab</sup>	0.93 $\pm$ 0.03	0.92 $\pm$ 0.04 <sup>b</sup>
80-3MT	79.3 $\pm$ 7.6	78.7 $\pm$ 7.5 <sup>ab</sup>	133 $\pm$ 15	141 $\pm$ 17 <sup>ab</sup>	0.93 $\pm$ 0.04	0.91 $\pm$ 0.05 <sup>ab</sup>
120-3MT <sub>PLA</sub>	79.2 $\pm$ 7.5	78.2 $\pm$ 7.3 <sup>a</sup>	134 $\pm$ 18	150 $\pm$ 16 <sup>a</sup>	0.91 $\pm$ 0.04	0.84 $\pm$ 0.05 <sup>a</sup>
120-3MT <sub>CHO</sub>	79.4 $\pm$ 7.6	78.5 $\pm$ 7.4 <sup>a</sup>	130 $\pm$ 16	149 $\pm$ 17 <sup>a</sup>	0.90 $\pm$ 0.05	0.87 $\pm$ 0.04 <sup>ab</sup>

40-3MT, 40 min of heavy-intensity exercise; 80-3MT, 80 min of heavy-intensity exercise; 120-3MT<sub>PLA</sub>, 120 min of heavy-intensity exercise consuming water; 120-3MT<sub>CHO</sub>, 120 min of heavy-intensity exercise consuming carbohydrates. <sup>a</sup> = different from start of exercise measurements,  $P < 0.05$ ; <sup>b</sup> = different from 120-3MT<sub>PLA</sub>,  $P < 0.05$ .















