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The Impact of Age and Physical Activity Level on Manual Aiming Performance

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Abstract

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3 Older adults traditionally adapt their discrete aiming movements, thereby travelling a 4 larger proportion of the movement under closed-loop control. As the beneficial impact of 5 a physically active lifestyle in old age has been described for several aspects of motor 6 control, we compared the aiming performance of young controls to active and sedentary 7 older adults. To additionally determine the contribution of visual feedback, aiming 8 movements were executed with and without saccades. Results showed only sedentary 9 older adults adopted the typical movement changes, highlighting the impact of a 10 physically active lifestyle on manual aiming in old age. In an attempt to reveal the 11 mechanism underlying the movement changes, evidence for an age-related decline in 12 force control was found, which in turn resulted in an adapted aiming strategy. Finally, 13 prohibiting saccades did not affect older adults' performance to a greater extent, 14 suggesting they do not rely more on visual feedback than young controls. 15 16 *Keywords:* aging, physical activity, manual aiming, eye movements 17

1 The Impact of Age and Physical Activity Level on Manual Aiming Performance 2 Ever since Woodworth's classic work on manual aiming (1899) motor control 3 researchers have shown that goal-directed upper limb movements traditionally consist of 4 two phases: a primary submovement and a homing-in phase. The former can be defined 5 as the initial impulse towards the vicinity of the target (mainly open-loop control), 6 whereas the latter phase is associated with feedback-based corrections as the limb 7 approaches the target (primarily closed-loop control; e.g., Elliott, Helsen, & Chua, 2001). 8 The relative contribution of open- versus closed-loop processes to the control of goal-9 directed movements changes across the lifespan: Young adults generally end their 10 primary submovement just before the target to only make a small adjustment in the same 11 direction as the initial pulse, whereas older adults undershoot the target to a greater 12 extent. By making shorter-ranged and slower primary submovements, older adults need a 13 greater number of time-consuming adjustments during the homing-in phase, resulting in 14 longer overall movement times (Ketcham, Seidler, Van Gemmert, & Stelmach, 2002;

15 Poston, Van Gemmert, Barduson, & Stelmach, 2009; Pratt, Chasteen, & Abrams,

16 1994; Walker, Philbin, & Fisk, 1997).

17 Though these age-related changes in aiming behavior have been described 18 consistently, a study by Lyons and colleagues (1996) reported no differences between 19 young and older adults' movement times, accuracy levels, and primary submovement 20 trajectories. To explain these unexpected results, Lyons and colleagues (1996) argued 21 that older adults may make a better use of kinesthetic feedback for the control of goal-22 directed movement. As an alternative explanation, the possible influence of a physically 23 active lifestyle in old age was raised. Indeed, recent evidence suggests that maintaining a 24 physically active lifestyle during aging allows older adults to slow declines in their 25 sensorimotor functions. For instance, better maintenance of interlimb coordination skills

(Capranica, Tessitore, Olivieri, Minganti, & Pesce, 2004; Cortis et al., 2009) and more
 accurate proprioceptive perception (Adamo, Alexander, & Brown, 2009; Proske &
 Gandevia, 2012) were observed in active older adults compared to sedentary controls.
 Therefore, the first aim of the current study was to explore whether a physically active
 lifestyle also attenuates the typical age-related changes in manual aiming. To address this
 question, aiming performances in active and sedentary older adults were compared with
 those observed in young controls.

8 To understand how physical activity may help to reduce these traditional age-9 related changes, one should nonetheless know what mechanism underlies the movement 10 adaptations in old age. We shortly present two possibilities: A first hypothesis is that 11 older adults generally engage in more closed-loop control to cope with a deteriorated 12 ability to reliably tune muscular forces (Christou & Carlton, 2001; Galganski, Fuglevand, 13 & Enoka, 1993). This theory assumes that when an older adult produces a force, the noise 14 associated with the resulting movement is greater than when a younger adult produces 15 that same force (Walker et al., 1997). An increased noise-to-force ratio might compel 16 older adults to make less forceful and thus shorter primary submovements in order to 17 reduce their endpoint variability. As a result, the homing-in phase of the movement 18 becomes longer but also more predictable. However, the theory has recently been 19 challenged by Welsh and colleagues (2007) showing older adults' primary 20 submovements are not more variable in time and space than those of young adults. They 21 proposed the alternative that older adults adopt a *play-it-safe strategy* to avoid the higher 22 energy costs associated with target overshoots: When correcting for an overshoot, one 23 does not only have to overcome the inertia of a zero-velocity situation, but also reverse 24 the roles of the agonist and antagonist muscle groups (Elliott et al., 2001; Engelbrecht, 25 Berthier, & O'Sullivan, 2003). Undershooting the target to a greater extent and making

1	more use of sensory feedback to safely guide the hand to the target may be considered a
2	secure strategy to prevent overshoots and save energy. Here, we attempted to investigate
3	which of these two proposals is consistent with the traditional movement adaptations in
4	old age. Similar to the study of Welsh and colleagues, we examined movement variability
5	to compare the noise-to-force ratios between groups. On the other hand, the hypothesis
6	that the typical movement adaptations represent a play-it-safe strategy to prevent target
7	overshoots was tested by adding an aiming condition in which there was no time for the
8	movement adaptations (cyclical aiming). If this cyclical aiming condition results in an
9	increased amount of target overshoots, particularly for sedentary older adults, it would
10	provide support for the play-it-safe hypothesis.
11	Irrespective of which abovementioned hypothesis is correct, the greater
12	proportion of the movement occurring under closed-loop control suggests that sensory
13	feedback processing becomes increasingly important in old age. As online feedback
14	consists of proprioceptive and visual information, it is appropriate to look at the impact of
15	aging on both sources of feedback. On the one hand, a clear age-related decline in
16	proprioception has been described consistently in upper limb-matching tasks (e.g.,
17	Adamo et al., 2009; Adamo, Martin, & Brown, 2007; Wright, Adamo, & Brown, 2011).
18	On the other hand, the motor system of the eye seems to be only mildly affected or
19	perhaps even spared by the aging process (Kadota & Gomi, 2010; Pratt, Dodd, & Welsh,
20	2006). Many have therefore suggested that older adults increase their reliance on visual
21	feedback during the execution of manual aiming movements (Rand & Stelmach, 2011a,
22	2011b; Seidler-Dobrin & Stelmach, 1998), possibly as a means to compensate for
23	declines in proprioceptive acuity. In this theoretical context, the experimental data are
24	rather controversial (Chaput and Proteau 1996; Coats and Wann, 2011; Lyons, Elliott,
25	Swanson, & Chua, 1996; Pratt et al., 1994), and there is no general agreement about this

1 sensory reweighting in older adults. To determine whether visual feedback is indeed of 2 increased importance, particularly in sedentary older adults, the aiming task in the current 3 experiment was executed with and without saccades. Eye movements were recorded 4 throughout the experiment to control for the extent by which the aiming movements were 5 executed with visual guidance when saccades were allowed. This additional measurement 6 finally allowed us to look into the differential use of eye movements among groups. 7 In summary, the present study was designed to identify differences between 8 young controls and active and sedentary older adults during visually-guided aiming tasks. 9 These three participant groups were asked to aim as fast and accurate as possible towards 10 fixed targets. To determine the exact contribution of visual information, the aiming 11 movements were performed with or without saccades. The task was executed in a discrete 12 or cyclical way, putting less or more time constraint upon the movements. This 13 experiment enabled us to test the following three hypotheses: First, older adults were 14 expected to adopt the traditional movement adaptations when they were allowed 15 sufficient time in the discrete aiming task. However, if an active lifestyle could indeed 16 counteract the age-related changes in manual aiming behavior, these movement 17 characteristics should only emerge in the sedentary older adults. Specifically, we 18 expected the discrete aiming movements of sedentary older adults to be characterized by 19 slower and shorter-ranged primary submovements, and relatively more time spent in the 20 homing-in phase compared to the young and active older adults. Together this would 21 result in longer overall movement times. Second, by looking into the temporal and spatial 22 variability of the movements, we aimed to verify whether an increased noise-to-force 23 ratio may be responsible for these movement adaptations in sedentary older adults. 24 Conversely, the play-it-safe hypothesis would be supported by sedentary older adults 25 showing an increased amount of target overshoots during cyclical aiming. Third, it was

hypothesized that sedentary older adults depend more on visual feedback during manual
 aiming. This would be reflected in a larger drop in accuracy levels when eye movements
 were prohibited.

4

Method

5 **Participants**

6 Fifteen young and 28 older adults participated in the study on a voluntary basis. Young 7 participants were recruited via flyers distributed over the university campus, whereas 8 active and sedentary older adults were recruited at local running and senior clubs, 9 respectively. All participants were right-handed according to the Edinburgh Handedness 10 Inventory (Oldfield, 1971). They self-claimed to be in good health and to have normal or 11 corrected-to-normal vision. The latter was controlled by asking them to read the task 12 instructions on the screen prior to the experiment. Here, visual acuity demands were 13 considerably higher compared to those required in the experimental task. Since all 14 participants were able to read the instructions aloud, we assumed visual acuity was 15 sufficient for the experimental task. Participants performed a Nine Hole Pegboard Test 16 (NHPT; Mathiowetz, Volland, Kashman, & Weber, 1985) to check for intact fine motor 17 skills and were excluded if their score did not meet the age- and gender-dependent 18 inclusion criteria described by Oxford Grice and colleagues (2003). Two older 19 participants were excluded from the study for this reason. To exclude participants with 20 dementia or other severe anomalies in cognitive functioning, a Mini-Mental State 21 Examination (MMSE; Folstein, Folstein, & McHugh, 1975) was administered to the 22 older participants. The minimum score for inclusion was set at 27 out of 30, which all 23 achieved. Physical activity levels as measured by the Baecke questionnaire (Baecke, 24 Burema, & Frijters, 1982; Voorrips, Ravelli, Dongelmans, Deurenberg, & Van Staveren, 25 1991) were used to divide the older participants in two groups: participants with Baecke

1	scores over the median score of 7.3 were attributed to the physically active subgroup,
2	whereas participants scoring under the median were attributed to the sedentary subgroup.
3	This resulted in three groups: young controls (n=15), physically active older participants
4	(n=13) and sedentary older participants (n=13). The general characteristics of these
5	groups are summarized in Table 1. The study was approved by the Medical Ethics
6	Committee of the KU Leuven and was conducted in accordance with the 1964
7	Declaration of Helsinki. Prior to the experiment, written informed consent was obtained
8	from all participants.
9	Task and Apparatus
10	The task and apparatus were similar to those used in several previous studies (e.g.,
11	Lavrysen, Elliott, Buekers, Feys, & Helsen, 2007; Lavrysen et al., 2008; Lavrysen et al.,
12	2012). Participants sat in a comfortable chair and wore an orthosis on the preferred, right
13	forearm. The axis of this orthosis was aligned with the anatomical axis of the wrist joint
14	and positioned in a way that the hand could only move in the horizontal plane. A high-
15	precision shaft encoder with an accuracy of 0.0055° and sampling frequency of 250 Hz
16	was attached onto the orthosis. Wrist angular position was presented as a 1.5 cm diameter
17	circular cursor on a 60 cm computer monitor, located at a standardized distance of 100
18	cm in front of the participant at eye level. Apart from this cursor, two fixed targets also
19	appeared on the monitor. The size of these targets, each marked by two vertical lines,
20	depended upon aiming conditions that are further explained in the Protocol section. The
21	task consisted of moving the cursor from target to target by making flexion/extension
22	wrist movements after an auditory cue. Participants were asked to make the movements
23	as fast and accurate as possible, and to wait for the next auditory cue with the cursor
24	between the target boundaries. Point of gaze (PG) was recorded using an Applied Science

25 Laboratories (ASL) 6000 pan-tilt eye-tracker system (Bedford, MA) with a sampling

1 frequency of 240 Hz and an accuracy of 0.5°. A comfortable neck rest was installed onto 2 the participant's chair to prevent head movements and the loss of PG signal. Prior to the 3 experiment, a nine-point calibration was performed for every participant. 4 **Protocol** 5 As illustrated in Figure 1, participants started the experiment with two 6 familiarization blocks in which the different conditions were practiced. These blocks 7 consisted of four 25-second trials in which aiming movements were performed at a self-8 selected pace. In the first trial, participants made horizontal aiming movements over a 9 distance of 27.5 cm on the screen (corresponding to a wrist angle of 52°) towards targets 10 of 5.2 cm (wrist angle of 10°), resulting in an index of difficulty (ID) of 3.4 bits (Fitts, 11 1954). In the second trial, the ID was increased to 4.4 bits by decreasing the target sizes 12 to 2.6 cm (wrist angle of 5°). As these trials were conducted with eye movements, this 13 visual condition was called *free vision*. Afterwards, the two trials were repeated in a 14 *fixation* condition. Here, participants were asked to fixate the eyes on an additional 15 vertical line in the middle of the screen, thus prohibiting eye movements. Even though 16 peripheral vision was still available, this manipulation made accurate aiming more 17 difficult by depriving the effective use of central vision (Binsted & Elliott, 1999). 18 After the familiarization, participants proceeded with the main experiment. 19 Blocks again consisted of four consecutive trials in which the conditions and sequence 20 remained identical to the familiarization blocks. The only difference was that instead of 21 moving at a self-selected pace, participants were instructed to start their aiming 22 movement at the onset of a 50-ms auditory cue and to move as fast and accurate as 23 possible towards the target. Every trial consisted of 25 auditory cues, and thus 25 aiming 24 movements. First, participants did two blocks of the discrete aiming task in which the 25 auditory cue was presented every 1500 ms. After a 20-minute break, the experiment

1	continued with two blocks in which the interval between auditory cues was shortened to
2	500 ms, resulting in cyclical aiming movements. In total 400 aiming movements were
3	recorded for each participant.
4	Dependent Variables
5	Prior to the calculation of all dependent variables, a first order low-pass Butterworth filter
6	with a cut-off frequency of 20 Hz was applied on both the hand and eye movement data.
7	The filtered hand position data were differentiated to obtain instantaneous velocity, and
8	then differentiated again to obtain instantaneous acceleration. The first and final two
9	movements of a trial were not considered in the analysis.
10	Hand movement time. The hand movement time was defined as the time
11	between hand movement initiation (first sample when the standard deviation (SD) of the
12	velocity profile was inferior to 0.75 mm/s for 80 ms from peak velocity backwards) and
13	termination (first sample when the SD of the velocity profile was inferior to 3 mm/s for
14	120 ms from peak velocity onwards). Both criteria were validated based on a visual
15	inspection in Matlab.
16	Endpoint accuracy. If the entire cursor fell within the target boundaries at hand
17	movement termination, this was considered a target hit. If the cursor fell short or long of
18	the target, this was considered a target under- or overshoot, respectively. The percentage
19	of target hits was calculated for every trial and regarded as endpoint accuracy. The

20 percentages of target under- and overshoots were assessed accordingly.

Peak velocity. The highest velocity found in the primary submovement was
considered peak velocity.

23 Relative distance and duration of the primary submovement. The end of the
24 primary submovement was defined as the sample of the second zero-line crossing in the
25 acceleration profile. For every aiming movement, we calculated the distance travelled up

to this point relative to the distance between the middle of both targets. In addition, the
time spent during this primary submovement was also determined relative to the hand
movement time.

4 Temporal and spatial variability. Identical to the calculations for the end of the 5 primary submovement, the relative duration and distance travelled up to the moment of 6 peak acceleration (highest acceleration during the primary submovement) and peak 7 velocity were computed. By then calculating the mean SD of the relative durations and 8 distances of all three kinematic markers, we were able to get a better view on the 9 temporal and spatial variability of the movements across multiple aiming attempts.

10 Primary saccade amplitude. Primary saccade initiation and termination were 11 determined similarly as in previous studies of our lab (e.g., Helsen, Elliott, Starkes, & 12 Ricker, 1998): Saccade onset was the last point when at least 24 sequential gaze 13 coordinate samples (i.e., 100 ms) had an SD equal to or higher than 1°. The end of a 14 saccade (or fixation onset) was defined as the first of 24 gaze samples with a SD lower 15 than 1°. The primary saccade was considered only if it travelled at least 50% of the total 16 distance between the two targets. Its amplitude was calculated and is expressed relative to 17 the distance between the middle of both targets.

18 Aiming movements with corrective saccades. This variable was defined as the 19 percentage of aiming movements in which the primary saccade was followed by a 20 fixation and at least one consecutive corrective saccade. The calculation of corrective 21 saccades was done using the same SD criterion as for primary saccades.

22 Data Analysis

First, because the assumptions for parametric statistics were not met, the general characteristics of all three groups were compared using a Kruskall-Wallis analysis of variance (ANOVA; see Table 1). Then, a custom-written Matlab-script computed the

1	means and SDs for all abovementioned variables per trial. As the aim of this study was
2	not to compare the discrete with the cyclical aiming task, but rather participant groups'
3	performance within each task, the data were separated in two sets: one with all data for
4	discrete aiming and one for cyclical aiming. Hand movement variables were analyzed
5	using a 3 GROUP (young, active older, sedentary older) x 2 VISUAL CONDITION (free
6	vision, fixation) x 2 ID (3.4 bits, 4.4 bits) mixed-model ANOVA. Separate analyses were
7	performed on the discrete and cyclical aiming data. Due to the absence of saccades in the
8	fixation condition, variables concerning eye movements were calculated and analyzed
9	only for the free vision condition. Because the task consisted of a one-dimensional
10	horizontal aiming movement, only the horizontal eye movement data were taken into
11	account. Post-hoc tests (Tukey's honestly significant differences) were conducted when
12	appropriate. For all analyses, the significance level was set at $p < .05$. Due to the specific
13	focus of the study, only significant differences including a GROUP effect are presented.
14	Results
15	Discrete Aiming
15 16	Discrete Aiming Hand movement time. A main effect of GROUP [F(2, 298) = 48.92, <i>p</i> < .01]
15 16 17	Discrete Aiming Hand movement time. A main effect of GROUP [F(2, 298) = 48.92, <i>p</i> < .01] indicated sedentary older adults needed more time to perform the aiming movements
15 16 17 18	Discrete Aiming Hand movement time. A main effect of GROUP $[F(2, 298) = 48.92, p < .01]$ indicated sedentary older adults needed more time to perform the aiming movements $(732 \pm 98 \text{ ms})$ than young $(615 \pm 84 \text{ ms})$ and active older $(619 \pm 107 \text{ ms})$ participants
15 16 17 18 19	Discrete AimingHand movement time. A main effect of GROUP $[F(2, 298) = 48.92, p < .01]$ indicated sedentary older adults needed more time to perform the aiming movements(732 ± 98 ms) than young (615 ± 84 ms) and active older (619 ± 107 ms) participants(see Figure 2A).
15 16 17 18 19 20	Discrete AimingHand movement time. A main effect of GROUP [F(2, 298) = 48.92, p < .01]
15 16 17 18 19 20 21	Discrete Aiming Hand movement time. A main effect of GROUP [F(2, 298) = 48.92, <i>p</i> < .01] indicated sedentary older adults needed more time to perform the aiming movements (732 ± 98 ms) than young (615 ± 84 ms) and active older (619 ± 107 ms) participants (see Figure 2A). Endpoint accuracy. No main or interaction effects regarding the percentage of target hits, undershoots or overshoots were observed.
15 16 17 18 19 20 21 22	Discrete Aiming Hand movement time. A main effect of GROUP [F(2, 298) = 48.92, <i>p</i> < .01] indicated sedentary older adults needed more time to perform the aiming movements (732 ± 98 ms) than young (615 ± 84 ms) and active older (619 ± 107 ms) participants (see Figure 2A). Endpoint accuracy. No main or interaction effects regarding the percentage of target hits, undershoots or overshoots were observed. Peak velocity. A significant GROUP effect [F(2, 298) = 21.56, <i>p</i> < .01]
 15 16 17 18 19 20 21 22 23 	Discrete Aiming Hand movement time. A main effect of GROUP [F(2, 298) = 48.92, p < .01] indicated sedentary older adults needed more time to perform the aiming movements (732 ± 98 ms) than young (615 ± 84 ms) and active older (619 ± 107 ms) participants (see Figure 2A). Endpoint accuracy. No main or interaction effects regarding the percentage of target hits, undershoots or overshoots were observed. Peak velocity. A significant GROUP effect [F(2, 298) = 21.56, p < .01] revealed lower peak velocities in sedentary older adults (857 ± 142 mm/s) than in young

1	Relative distance of the primary submovement. A main effect of GROUP
2	[F(2, 298) = 26.87, p < .01] indicated that sedentary older participants travelled relatively
3	shorter distances during their primary submovement (80.7 \pm 8.2%) compared to young
4	$(87.2 \pm 7.5\%)$ and active older $(88.3 \pm 7.7\%)$ adults (see Figure 2C). The primary
5	submovement of sedentary older adults thus undershot the target to a greater extent.
6	Relative duration of the primary submovement. A significant GROUP
7	effect was also found for the relative duration of the primary submovement $[F(2, 298) =$
8	8.33, $p < .05$], signaling that sedentary older adults had relatively shorter primary
9	submovements (52.6 \pm 9.1%) compared to young (56.5 \pm 11.0%) and active older (58.3 \pm
10	10.0%) adults (see Figure 2D). In other words, sedentary older adults spent a greater
11	proportion of the hand movement time during the homing-in phase of the movement.
12	Temporal and spatial variability. Temporal variability at peak acceleration
13	appeared to be lower in the young compared to the older groups (both $p < .01$; see Figure
14	3A). Similar results were observed for peak velocity when comparing young controls to
15	active older ($p < .05$) and sedentary older adults ($p < .01$). At the end of the primary
16	submovement, however, the temporal variability was no longer significantly different
17	among groups. With respect to space, lower SDs were noticed for the relative distance
18	travelled up to peak acceleration in the young compared to the older groups (both $p < .01$;
19	see Figure 3B). These group differences became statistically nonsignificant at peak
20	velocity and at the end of the primary submovement.
21	Primary saccade amplitude. A main effect of GROUP [F(2, 148) = 9.44, <i>p</i> <
22	.01] revealed that young adults' primary saccade amplitude ($89.7 \pm 6.4\%$) was greater

23 than those of active (81.1 \pm 7.4%) and sedentary (82.3 \pm 7.8%) older adults (see Figure

24 4A).

1	Aiming movements with corrective saccades. A main effect of GROUP [F(2,
2	148) = 10.14, $p < .01$] indicated young adults performed fewer hand movements with
3	corrective saccades (32.5 \pm 15.6%) compared to active (52.5 \pm 19.3%) and sedentary
4	$(51.2 \pm 20.8\%)$ older adults (see Figure 4B).
5	Cyclical Aiming
6	Hand movement time. No main or interaction effects regarding hand movement
7	time were observed in the cyclical aiming task. Figure 5A clearly shows all groups were
8	able to make the aiming movements within 500 ms on average, thereby respecting the
9	high pace of the auditory cues.
10	Endpoint accuracy. This strict time constraint resulted in a main effect of
11	GROUP concerning the percentage of target hits $[F(2, 298) = 30.63, p < .01]$: Young
12	adults' percentage of target hits (54.5 \pm 12.8%) was higher compared to the active (42.7 \pm
13	14.0%) and sedentary (40.1 \pm 14.7%) older participants. In accordance with their high
14	endpoint accuracy, young adults had a lower percentage of movements resulting in a
15	target undershoot (22.5 \pm 9.5%) compared to sedentary older adults (31.2 \pm 10.4%), who
16	in turn made relatively fewer target undershoots than active older adults ($37.9 \pm 12.8\%$)
17	[F(2, 298) = 22.85, p < .01]. Sedentary older adults did make more target overshoots
18	(28.7 \pm 10.9%) compared to both the young (22.9 \pm 9.5%) and active older (19.4 \pm 8.6%)
19	adults [F(2, 298) = 8.29, $p < .01$].
20	Peak velocity. As in the discrete aiming task, a main effect of GROUP was found
21	[F(2, 298) = 4.37, $p < .05$] showing sedentary older adults aimed with lower peak
22	velocities (1267 \pm 174 mm/s) than young (1344 \pm 142 mm/s) and active older (1380 \pm
23	163 mm/s) adults (see Figure 5B).

6

24

adults (see Figure 7A).

1 Relative distance of the primary submovement. Interestingly, a significant 2 GROUP effect was found [F(2, 298) = 10.57, p < .01], indicating active older adults 3 travelled a relatively greater distance during their primary submovement (99.0 \pm 4.7%) 4 compared to young (96.6 \pm 4.7%) and sedentary older (96.5 \pm 5.4%) adults (see Figure 5 5C).

Relative duration of the primary submovement. A main effect of GROUP 7 [F(2, 298) = 3.93, p < .05] showed that young adults used relatively less time to perform 8 their primary submovement $(71.9 \pm 11.2\%)$ than sedentary older adults $(75.9 \pm 10.9\%)$. 9 Post-hoc analysis revealed that active older adults $(72.9 \pm 9.1\%)$ did not significantly 10 differ from young or sedentary older adults (See Figure 5D).

11 **Temporal and spatial variability.** Young adults had a lower temporal variability 12 at peak acceleration compared to active older adults (p < .01), who in turn had lower SDs 13 than sedentary older adults (also p < .01; see Figure 6A). Comparable results were found 14 at peak velocity: Young controls were more consistent than active older adults (p < .01), 15 who in turn had lower SDs than their sedentary counterparts (p < .05). As in the discrete 16 aiming task, all temporal differences became statistically nonsignificant at the end of the 17 primary submovement. Analysis of the spatial variability revealed that the young had 18 lower SDs compared to active and sedentary older adults at peak acceleration (both p < p19 .01) and at peak velocity (p < .05 and p < .01, respectively; see Figure 6B). Again, these 20 differences became statistically nonsignificant at the end of the primary submovement. 21 **Primary saccade amplitude.** A main effect of GROUP [F(2, 148) = 7.68, p < 1.05]22 .01] indicated the young adults' primary saccade travelled on average further (91.6 \pm 23 (6.2%) compared to those of active $(85.5 \pm 4.1\%)$ and sedentary $(84.7 \pm 6.9\%)$ older

1	Aiming movements with corrective saccades. Contrary to the discrete aiming
2	task, no main effect of GROUP was observed concerning the use of corrective saccades.
3	Discussion
4	In this study, we examined differences in manual aiming behavior between young
5	controls and active and sedentary older adults. In an attempt to reveal the mechanism
6	responsible for these changes, two aiming conditions (discrete aiming vs. cyclical
7	aiming) were used. Furthermore, two visual conditions (free vision vs. fixation) were
8	included to determine the contribution of visual feedback during the task. In short, this
9	experiment enabled us to investigate the following three hypotheses: First, only sedentary
10	older adults were expected to adopt the traditional age-related movement adaptations in
11	the discrete aiming task. Second, by looking into the movement variability, we examined
12	whether an increased noise-to-force ratio could underlie these movement adaptations. On
13	the other hand, the recent hypothesis of the <i>play-it-safe strategy</i> would be supported by
14	sedentary older adults adapting their aiming movements to a greater extent when
15	confronted with higher accuracy constraints, and an increased amount of target
16	overshoots in the cyclical aiming task. Third, sedentary older adults were expected to rely
17	more on visual feedback during the aiming movements. This hypothesis would be
18	supported by a greater drop in the accuracy levels of sedentary older adults when eye
19	movements were prohibited.
20	Only sedentary older adults adapt their discrete aiming movements.
21	Compared to both other groups, sedentary older adults needed more time (see
22	Figure 2A) to perform accurate goal-directed movements in the discrete aiming task.
23	Their movements were characterized by slower (2B) and shorter-ranged (2C) primary

submovements, resulting in a relatively larger proportion of time spent in the homing-in

25 phase (2D). As hypothesized, these typical age-related movement adaptations (Ketcham

1 et al., 2002; Poston et al., 2009; Pratt et al., 1994; Walker et al., 1997) were thus only 2 found in the sedentary older adults, but not in the physically active older adults. 3 Moreover, for the majority of variables the differences between active and sedentary 4 older adults were more pronounced than between active older adults and young controls. 5 In one case active older adults even performed better than young controls (i.e., relative 6 distance of the primary submovement in the cyclical aiming condition; see Figure 5C), 7 underlining the impact of a physically active lifestyle on older adults' aiming 8 performance. This observation should not come as a surprise, as the beneficial influence 9 of a physically active lifestyle in old age has already been described comprehensively in 10 motor control literature. For instance, the age-related degradation in interlimb 11 coordination has shown to be attenuated in older adults with a history in gymnastics 12 (Capranica et al., 2004) and soccer (Cortis et al., 2009). Also, upper-limb proprioception 13 has been demonstrated to be only mildly affected in physically active older adults 14 compared to sedentary controls (Adamo et al., 2009). Besides a general effect of physical 15 activity level, Adamo and colleagues (2009) reported an even greater impact in older 16 adults specifically involved in upper-limb activities (e.g., needlework, drawing, playing 17 tennis, etc.). Taking into account the substantial role of proprioception in accurate 18 aiming, the latter study has two major consequences for the interpretation of our data. 19 First, the general effect of physical activity implies that a better conservation of 20 proprioception among active older adults could mediate the observed differences in 21 manual aiming performance between active and sedentary older adults. Second, the 22 specific impact of upper-limb training on proprioception suggests even greater 23 differences in aiming behavior could have emerged if our active subsample was limited 24 to older adults specifically involved in upper-limb activities. Future research may 25 therefore investigate whether this distinct impact of upper-limb training also applies to

1 manual aiming. To clarify how physical activity in general and upper-limb training in 2 particular may impact the age-related changes in manual aiming, we first shed some light 3 on the mechanism underlying the movement adaptations typically observed in older 4 adults. 5 Evidence for both the *increased noise-to-force ratio* and the *play-it-safe strategy* 6 hypotheses. 7 Two possible mechanisms underlying the typical age-related changes in aiming 8 behavior were investigated. On the one hand, the theory of an *increased noise-to-force* 9 ratio (Walker et al., 1997) was explored by looking at the variability of the movements. 10 Although differences did not always reach the level of significance, sedentary older 11 adults generally exhibited the greatest temporal and spatial variability, whereas the lowest 12 variability was nearly always detected in young controls (see Figure 3 and 6). These data 13 not only demonstrate a general age-related increase in noise-to-force ratio, they also 14 suggest that maintaining a physically active lifestyle in old age may counteract this

15 increase. Interestingly, differences in movement variability between active and sedentary 16 older adults emerged particularly in the cyclical aiming task when sedentary older adults 17 could not apply the traditional movement adaptations to cope with their increased noise-18 to-force ratios. Despite our relatively small sample sizes, distinct group differences were 19 observed particularly in early kinematic markers, as one would expect in the case of a

20 deteriorated ability to plan and tune muscular forces in the sedentary older adults.

21 On the other hand, Welsh and colleagues (2007) have proposed an alternative 22 hypothesis in which the age-related changes in aiming behavior are explained by a *play-*23 *it-safe strategy* that is generally adopted by older adults to prevent costly target 24 overshoots. In line with this hypothesis, conditions in which the strategy cannot be 25 adopted due to a strict time constraint (e.g., cyclical aiming task) should result in an

1 increased number of target overshoots. If we look at the cyclical aiming data, we indeed 2 notice more target overshoots among sedentary older adults compared to the other 3 groups. This finding supports previous results in a proprioceptive aiming task at the lower 4 limbs (Boisgontier & Nougier, 2013) and suggests the observed movement adaptations 5 were indeed a successful way to prevent target overshoots. Interestingly, evidence for this 6 being a well-chosen strategy can also be derived from the cyclical aiming movement 7 data: The strict time constraint in this condition forced all participants to move the hand 8 very rapidly. Here, sedentary older adults proved to be physically able to move at the 9 speeds reached by young and active older adults in the discrete aiming condition. Based 10 on these results we can thus conclude that in the discrete aiming condition sedentary 11 older adults were physically able to move at similar speeds as young and active older 12 adults, but intentionally choose not to do so. In contrast, active older adults may not slow 13 down the initial pulse because their force control is not degraded to the same extent as 14 their sedentary counterparts. 15 Taken together, our data suggest that instead of one distinct mechanism, the 16 movement adaptations observed in sedentary older adults may be caused by a

17 combination of both increased noise-to-force ratios and the play-it-safe strategy. If

18 moving at the same speed as young controls, sedentary older adults' primary

19 submovements have a greater temporal and spatial variability due to increased noise-to-

20 force ratios (Christou & Carlton, 2001; Galganski et al., 1993). This high variability

results in a greater amount of target overshoots (Elliott et al., 2001; Engelbrecht et al.,

22 2003). When sufficient time is available, the movements are slowed down to prevent the

high energy cost associated with target overshoots. This finally results in slower and

24 shorter-ranged primary submovements with limited spatial variability. However, as can

25 be derived from the temporal and spatial variability of the movement (see Figures 3 and

6), maintaining high levels of physical activity may counteract the increase in noise-to force ratio among older adults, thereby decreasing the need to adopt a play-it-safe
 strategy.

4 Sedentary older adults do not rely more on visual feedback. 5 Finally, it was also hypothesized that sedentary older adults depend more on 6 visual information for the control of their aiming movements. This sensory reweighting 7 would be supported by a steeper decline in endpoint accuracy among sedentary older 8 adults when eye movements were prohibited. As can be derived from the lack of a 9 significant GROUP x VISUAL CONDITION interaction on endpoint accuracy, the 10 fixation condition did not affect sedentary older adults' aiming performance to a greater 11 extent than any other group. This seems to imply sedentary older adults do not rely more 12 on visual feedback during manual aiming compared to young or active older adults. 13 However, the lack in significant interaction could also be due to the visual conditions 14 used in the experiment: In the fixation condition, peripheral vision was still available 15 possibly guiding the hand onto the target. To exclude the use of peripheral vision, future 16 experiments may add visual conditions that take away visual information of the cursor 17 position instead of only prohibiting eye movements.

18 To control the eyes effectively fixated the midline during the fixation condition, 19 eye movements were registered throughout the experiment. Though not specifically the 20 focus of our study, we noticed both active and sedentary older adults demonstrated 21 hypometric primary saccades in the free vision condition (see Figures 4 and 7), and a 22 higher occurrence of corrective saccades (see Figure 4). The latter was observed only in 23 the discrete aiming task, perhaps because the strict time constraint of the cyclical task 24 allowed less time for corrective saccades. These results are consistent with a recent study 25 of Rand and Stelmach (2011a) in which similar results of hypometric primary saccades

and greater amounts of corrective saccades were described among elderly participants
during two-segment manual aiming. One could therefore argue that the play-it-safe
approach may not be limited to the hand but also occurs in saccadic behavior, even in
active older adults. Future studies focusing on the coupling between eye and hand
movements may further clarify how this altered eye movement strategy contributes to
accurate manual aiming in old age.

7 Conclusions

8 The current study underlines the beneficial effect of a physically active lifestyle 9 on manual aiming performance in old age. In the discrete aiming task, active older adults 10 performed similar to young controls without modifying their aiming behavior, whereas 11 sedentary older adults adopted the traditional age-related movement adaptations. 12 Evidence for these movement adaptations being a well-chosen strategy was derived from 13 the cyclical aiming task data. However, slightly different from the traditional 14 interpretation, the idea was raised sedentary older adults adopted a *play-it-safe strategy* to 15 prevent costly target overshoots in the face of an *increased noise-to-force ratio*. Although 16 no causal inferences should be drawn here, it seems as if there is a strong link between 17 physical activity level and the preservation of an efficient manual control during discrete 18 aiming movements in older adults that deserves further attention.

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1	Table Captions:
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^	Young	Old	
Characteristic		Active	Sedentary
n	15	13	13
Male/female	6/9	8/5	6/7
Age (in years)	23.5 ± 0.8 ***	63.9 ± 2.5	65.1 ± 3.6
Baecke score	7.8 ± 1.0	8.3 ± 1.2	6.1 ± 0.9 ***
Oldfield score	82.1 ± 12.2	89.9 ± 12.7	90.9 ± 11.6
NHPT (in seconds)	16.9 ± 2.1 ***	19.0 ± 1.8	19.5 ± 2.4
MMSE score	/	29.5 ± 0.7	29.4 ± 0.8

Table 1: Participant Characteristics. Note: Results are presented as median

4 (interquartile range) when appropriate. A Kruskal-Wallis one-way analysis of variance

5 was used to compare the group scores. Significant group differences are highlighted by

6 * and *** (in case p < .05 and p < .01, respectively). *Abbreviations*: NHPT = Nine

7 Hole Peg Test; MMSE = Mini Mental State Examination. High Baecke scores indicate a

8 physically active lifestyle, low Baecke scores a rather sedentary lifestyle; Oldfield

9 scores indicate handedness (-100: extremely left-handed, +100: extremely right-

10 handed).

	Main Experiment						
			(
	No aud $ID = 3.4$	itory cue ID = 4.4	Auditory cue $ID = 3.4$	every 1500 ms $ID = 4.4$		Auditory cue $ID = 3.4$	e every 500 ms ID = 4.4
Free Vision	1	2	9	10	\bigcap	17	18
Fixation	3	4	11	12	ak	19	20
Free Vision	5	6	13	14	Bré	21	22
Fixation	7	8	15	16		23	24

1 Figure captions:



Figure 1: Schematic overview of the experimental design. The sequence of trials is

4 clarified by the increasing numbers and remained identical for all participants. Left:

5 familiarization, middle and right: main experiment, divided into discrete and cyclical

6 aiming (auditory cue every 1500 and 500 ms, respectively). Each trial of the main

7 experiment consisted of 25 aiming movements.





Figure 2: Hand movement results in the discrete aiming task. Comparison of mean group scores. Error bars represent standard deviations. (A) Hand movement time; (B) 4 Peak velocity of the hand; (C) Relative distance travelled during the primary 5 submovement; (D) Relative duration of the primary submovement. * p < .05. *** p < .01. 6











- 3 group scores. Error bars represent standard deviations. (A) Primary saccade amplitude;
- 4 (B) Proportion of aiming movements occurring with corrective saccades. * p < .05. *** p < .01.



Figure 5: Hand movement results in the cyclical aiming task. Comparison of mean group scores. Error bars represent standard deviations. (A) Hand movement time; (B) 4 Peak velocity of the hand; (C) Relative distance travelled during the primary 5 submovement; (D) Relative duration of the primary submovement. * p < .05. *** p < .01.











Figure 7: Eye movement results in the cyclical aiming task. Comparison of mean

group scores. Error bars represent standard deviations. (A) Primary saccade amplitude;

- (B) Proportion of aiming movements occurring with corrective saccades. * p < .05. *** p<.01.
- 5
- 6