

**Title:** Nitrate supplement benefits contractile forces in fatigued but not unfatigued muscle

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**Short Title:** Nitrate benefits muscle force when fatigued

## 1 **Abstract**

2 **Purpose:** Evidence suggests dietary nitrate supplementation enhances low-frequency ( $\leq 20$  Hz)  
3 involuntary, but not voluntary, forces in unfatigued human muscle. We investigated the  
4 hypotheses that nitrate supplementation would also attenuate low-frequency fatigue and the  
5 loss of explosive-voluntary forces in fatigued conditions. **Methods:** In a counterbalanced  
6 double-blinded order, 17 male participants completed two experimental trials following 7 days  
7 of dietary supplementation with either nitrate-rich (NIT) or nitrate-depleted (PLA) beetroot  
8 juice. Each trial consisted of measuring isometric knee-extension forces during a series of  
9 explosive-maximal voluntary contractions (MVCs) and involuntary-tetanic contractions (at 10,  
10 20 50, and 100 Hz) in unfatigued conditions, followed by a fatigue protocol of 60 MVCs and  
11 a repeat of the tetanic contractions immediately post the 60 MVCs. **Results:** In unfatigued  
12 conditions, there was no effect of NIT on any of the measured dependent variables; including  
13 maximal voluntary force, explosive-impulse, and tetanic peak forces or peak rate of force  
14 developments (RFDs) at any frequency. In contrast, the percentage decline in explosive-  
15 voluntary impulse from the first to the last 6 MVCs in the fatigue protocol was lower in NIT  
16 ( $51.1 \pm 13.9\%$ ) than PLA ( $57.3 \pm 12.4\%$ ;  $P=0.039$ ;  $d=0.51$ ). Furthermore, low-frequency  
17 fatigue determined via the percentage decline in the 20:50 Hz ratio was attenuated in NIT, for  
18 tetanic peak force (NIT,  $12.3 \pm 12.0\%$  vs. PLA,  $17.0 \pm 10.1\%$ ;  $P=0.110$ ;  $d=0.46$ ), and tetanic  
19 peak RFD (NIT,  $12.3 \pm 10.4\%$  vs. PLA,  $20.3 \pm 9.5\%$ ;  $P=0.011$ ;  $d=0.83$ ). **Conclusion:** Nitrate  
20 supplementation reduced the decline in explosive-voluntary forces during a fatiguing protocol,  
21 and attenuated low-frequency fatigue, likely due to reduced disruption of excitation-  
22 contraction coupling. However, contrary to previous findings, nitrate supplementation had no  
23 effect on contractile performance in unfatigued conditions.

24 **Key words:** low-frequency fatigue, rate of force development, force-frequency relationship,  
25 beetroot juice, excitation-contraction coupling, explosive strength

## 26 **Introduction**

27 Nitric Oxide (NO) is an important signalling molecule within the body, generated  
28 endogenously by the oxidation of L-arginine (1). NO can also be generated through the  
29 reduction of dietary inorganic nitrate to nitrite, by facultative bacteria in the oral cavity, with  
30 nitrite further reduced to NO within various tissues around the body (2). It is through this  
31 nitrate-nitrite pathway that supplementing the diet with inorganic nitrate appears to increase  
32 the bioavailability of NO and have measurable physiological effects, including reduced blood  
33 pressure (3, 4), increased exercise economy (4-6), and improved endurance performance (5, 7).  
34 These effects have been widely investigated over the last decade (8), but only recently has  
35 evidence suggested nitrate supplementation may also enhance the excitation-contraction  
36 coupling of skeletal muscle, resulting in greater force production for a given excitation (9-11).

37 Hernandez et al. (10) supplemented the diet of rats with nitrate for 7 days and reported improved  
38 tetanic peak force at low ( $\leq 50$  Hz) stimulation frequencies in fast- but not slow-twitch muscle  
39 fibres, which was associated with increased release of  $\text{Ca}^{2+}$  from the sarcoplasmic reticulum  
40 (SR). Three *in vivo* human studies have since investigated involuntary contractile responses of  
41 the mixed-fibre quadriceps muscles following dietary supplementation with nitrate-rich  
42 beetroot juice, and whilst two reported 5-20% improvements in low-frequency ( $\leq 20$  Hz) tetanic  
43 peak force (9, 11), the third reported no effects (12). These studies used different control  
44 conditions – nitrate-depleted beetroot juice (12), lime cordial (9), and no placebo (11) – to  
45 compare with the nitrate supplement condition, which may have contributed to the inconsistent  
46 results. Furthermore, the benefits of nitrate supplementation to contractile performance seem

47 specific to fast twitch fibres (10), and so will likely be diluted and thus variable in human whole  
48 mixed-fibre muscles. Nevertheless, assuming it is possible to improve excitation-contraction  
49 coupling and enhance low frequency force in human muscle, this would theoretically benefit  
50 humans during voluntary contractions, where free cytosolic  $\text{Ca}^{2+}$  is low or rising, such as during  
51 repeated submaximal voluntary contractions or during the rising slope of the force-time curve  
52 of explosive voluntary contractions. The latter was investigated by Haider and Folland (9), and  
53 whilst nitrate supplementation improved explosive force during involuntary twitch and 300-Hz  
54 tetanic contractions, explosive force during voluntary contractions was unaffected. This poor  
55 translation of effects from involuntary to voluntary contractions may have been due to the large  
56 variability in neural drive during voluntary explosive contractions (13), which is a more  
57 important determinant of explosive voluntary force than involuntary explosive force (13, 14).  
58 It is conceivable however, that the influence of nitrate supplementation on explosive voluntary  
59 force may become more apparent in fatigued conditions where excitation-contraction coupling  
60 is disrupted.

61 A common feature of neuromuscular fatigue is the greater reduction of force at low ( $<50$  Hz)  
62 vs. high ( $\geq 50$  Hz) stimulation frequencies (low-frequency fatigue; (15)), thought to be largely  
63 caused by reduced SR  $\text{Ca}^{2+}$  release (16-18), and reflective of disruption to excitation-  
64 contraction coupling. Low-frequency fatigue appears to have two components; one dependent  
65 on metabolite accumulation, observed immediately after fatiguing exercise of sufficiently high  
66 force-time integral (19, 20) but which recovers within minutes (16, 19); and one observed after  
67 several minutes of recovery which can last for hours (15, 19) and is thus independent of  
68 metabolite accumulation. Recent evidence of nitrate supplementation increasing SR  $\text{Ca}^{2+}$   
69 release in unfatigued rat muscle (10), and reducing metabolic perturbation during fatiguing  
70 contractions in humans (21), raises the possibility that nitrate supplementation may attenuate  
71 the first component of low-frequency fatigue, by countering the mechanisms causing it. Hoon

72 et al. (12) reported a reduction in the fatigue of low frequency (20 Hz) peak force during  
73 repeated contractions with hypovolemia, despite observing no effects in unfatigued conditions,  
74 suggesting the influence of nitrate supplementation becomes more evident during fatiguing  
75 conditions known to disrupt excitation-contraction coupling. However, Hoon et al. (12) did not  
76 quantify low-frequency fatigue (low vs. high frequency forces), so the extent of disruption to  
77 excitation-contraction coupling in their protocol, and benefit of nitrate supplementation to any  
78 disruption remain unclear. Moreover, it is unknown whether the effects of nitrate  
79 supplementation on explosive voluntary force also become more evident with fatiguing  
80 exercise that disrupts excitation-contraction coupling.

81 The purpose of this study was to investigate the effects of dietary nitrate supplementation on  
82 involuntary and voluntary contractile responses in human muscle, during both unfatigued and  
83 fatigued conditions. We hypothesised that in unfatigued conditions nitrate supplementation  
84 would enhance low-frequency force but not affect explosive voluntary force; whilst in fatigued  
85 conditions nitrate supplementation would attenuate both low-frequency fatigue and the loss of  
86 explosive voluntary force. The fatiguing protocol employed in this study was a 5-min all-out  
87 bout of 60 MVCs in which mean MVC force declines to a plateau representing a critical force  
88 threshold (22), due to the depletion of high energy phosphates and considerable metabolite  
89 accumulation (23). This protocol was chosen to enable between-condition differences in force-  
90 time characteristics of MVCs during the protocol, whilst simultaneously ensuring a plateau in  
91 fatigue and metabolic perturbation prior to testing the involuntary contractile responses  
92 immediately after the protocol. We also predicted the protocol would provide sufficient  
93 metabolic stress and force-time integral to observe the first component of low-frequency  
94 fatigue.

## 95 **Methods**

### 96 **Participants**

97 Seventeen healthy, non-smoking, recreationally active males (mean  $\pm$  SD; age,  $23 \pm 4$  years;  
98 body mass,  $74.04 \pm 9.62$  kg; height,  $1.75 \pm 0.06$  m) volunteered to participate in this study  
99 which was approved by the University of Roehampton Ethical Advisory Committee.  
100 Participants provided written informed consent prior to their involvement.

### 101 **Experimental Overview**

102 Similar to the design of Haider and Folland (9), each participant visited the laboratory at a  
103 consistent time of day on four separate occasions to complete two familiarisation, and two  
104 experimental trials. Seven days separated each of the first three trials, whilst the two  
105 experimental trials were separated by 9 days and completed in a randomised, double-blinded  
106 order. In the seven days immediately prior to each experimental trial participants supplemented  
107 their diet with either nitrate rich (NIT) or nitrate depleted (PLA) beetroot juice. During the  
108 course of the study participants were requested to maintain habitual physical activity and diet,  
109 not use antibacterial mouthwash, and abstain from caffeine (for 6 hours), alcohol (for 24 hours)  
110 and vigorous exercise (for 36 hours) before experimental trials.

111 Each trial involved the same protocol of isometric voluntary and involuntary contractions of  
112 the knee extensors of the dominant leg, determined as the preferred leg to kick a ball with. In  
113 the protocol, participants first completed explosive-maximal voluntary contractions (MVCs)  
114 and electrically evoked 1-s tetanic contractions at 10, 20, 50, and 100 Hz, to determine  
115 neuromuscular function in unfatigued conditions. Participants then completed a fatiguing  
116 protocol of 60 MVCs, followed immediately by the same series of tetanic contractions as above  
117 to determine neuromuscular function in fatigued conditions. External knee-extensor force and

118 surface electromyography (EMG) were recorded throughout the measurement trials. Finger-  
119 prick blood samples were collected at the start of each experimental trial, to determine plasma  
120 nitrate and nitrate concentrations. Data analysis was completed before un-blinding the  
121 investigators to the condition order for each participant.

## 122 **Supplementation**

123 Participants supplemented their diet with 70-ml shots of concentrated nitrate-rich (NIT; 400-  
124 500 mg per 70ml) or nitrate-depleted (PLA; 0.35-1.26 mg per 70ml) beetroot juice (non-  
125 organic SPORT shot, Beet It, James White Drinks Ltd, Ipswich, UK). Two shots were taken  
126 per day for the 7-day supplementation period; one each morning and one each evening except  
127 for the day of the experimental trial when both shots were taken together 2.5 hours before the  
128 trial. Daily nitrate supplementation was ~12.9 mmol and ~0.01-0.04 mmol, in the NIT and PLA  
129 conditions, respectively.

## 130 **Force and EMG recordings**

131 Participants sat in a custom-built, low compliance, isometric knee-extensor strength testing  
132 chair (9), with hip and knee angles of 100° and 120°, respectively (180° = anatomical position).  
133 Shoulder and pelvis strapping secured participants tightly to the chair, minimising upper body  
134 movements. An ankle strap (35-mm width reinforced canvas webbing) was placed around the  
135 leg being tested, at a constant 4 cm above the lateral malleolus. The strapping was in series  
136 with a linear-response S-beam strain gauge load cell (1.5 kN maximum amplitude and  
137 amplitude resolution of 1/2000; Force Logic, Swallowfield, UK), positioned perpendicular and  
138 posterior to the shank. The force signal was amplified (x370), sampled at 2000 Hz via an AD  
139 convertor (Micro 1401; CED, Cambridge, UK) and recorded on a PC utilising Spike2 software  
140 (CED, Cambridge, UK). Offline, the force signal was low pass filtered at 500 Hz with a 4<sup>th</sup>

141 order zero lag Butterworth filter, and corrected for the weight of the shank by subtracting  
142 resting baseline force.

143 Following preparation of the skin (shaving, lightly abrading, and cleansing with 70% ethanol),  
144 single differential surface EMG electrodes (2-cm diameter Ag-Ag-Cl gel; 2-cm inter-electrode  
145 distance; Noraxon U.S.A., Inc., Scottsdale, Arizona) were placed over the belly of the muscle  
146 of the rectus femoris (RF), vastus lateralis (VL), and vastus medialis (VM). Electrodes were  
147 positioned parallel with the presumed orientation of the fibres; and at ~50% (RF), ~54% (VL),  
148 and ~88% (VM) of the distance between the greater trochanter and the lateral femoral condyle.  
149 EMG signals were filtered (10 Hz, high pass) and amplified (x200) at the source (TeleMyo  
150 DTS, Noraxon U.S.A., Inc., Scottsdale, Arizona), transmitted wirelessly to the DTS desktop  
151 receiver for further amplification (total system gain x500), and sampled at 2000 Hz via the  
152 same AD convertor and PC software as the force signal. Offline, EMG signals were corrected  
153 for the 156-ms delay inherent in the Noraxon wireless system, and band-pass filtered between  
154 10-500 Hz with a 4<sup>th</sup> order zero-lag Butterworth filter. All measurements of EMG amplitude  
155 (see Fatigue Protocol section) were averaged across the three quadriceps muscles to give a  
156 single mean value for the knee extensors.

### 157 **Unfatigued Voluntary Contractions**

158 Following a series of warm-up contractions (2, 3-s contractions each at 30, 50, 70, and 90% of  
159 perceived maximal effort), participants completed 10 MVCs (each separated by ~60 s), in  
160 which they were instructed to push as “fast and hard” as possible for ~3 s, from a relaxed (zero  
161 active tension) state and without prior countermovement. Participants were instructed to focus  
162 on pushing fast in the early phase (first second) of the MVC, followed by as hard as possible  
163 after that to maximize explosive and maximal forces, respectively (24). Biofeedback was  
164 provided on a computer monitor in front of participants, displaying; (i) the force signal with a



165 cursor on the greatest force achieved so far that session; (ii) the resting baseline force on a  
166 sensitive scale to provide feedback on whether a countermovement or pre-tension had occurred  
167 prior to the MVC; and (iii) the slope of the force-time curve (40-ms time constant) with a cursor  
168 on the highest peak slope achieved so far that session. Verbal encouragement was provided  
169 throughout.

170 All data were analysed using custom-developed computer programmes in Matlab (The  
171 MathWorks inc., Natick, MA, USA). Maximal voluntary force (MVF) was determined as the  
172 greatest peak force recorded in any MVC performed in that session. Explosive impulse (force-  
173 time integral) was measured over the first 50 (IMP<sub>0-50</sub>), 100 (IMP<sub>0-100</sub>), and 150 ms (IMP<sub>0-150</sub>)  
174 from force onset, and averaged across the 3 valid MVCs with the highest IMP<sub>0-100</sub>, in the  
175 unfatigued condition. Force onset was defined as the last data point before the slope of the  
176 force-time curve (2-ms time constant) crossed and remained above zero for the time it took  
177 force to reach 50% MVF. Valid MVCs for explosive impulse measures were considered those  
178 that had no pre-tension or countermovement prior to force onset, determined via the following  
179 criteria: (i) mean baseline force in the 200-ms immediately prior to force onset was between -  
180 1% and 1% MVF; and (ii) force at onset was within 1 N of this mean baseline force.

### 181 **Unfatigued Tetanic Contractions**

182 One-second, tetanic contractions were evoked with a train of square-wave electrical impulses  
183 (0.2-ms pulse width; DS7AH, Digitimer Ltd, UK), via two carbon rubber electrodes (14 x 10  
184 cm; Electro Medical Supplies, Wantage, UK) placed ~8 cm apart at proximal (anode) and distal  
185 (cathode) ends of the anterior surface of the thigh. Starting at a near imperceptible electrical  
186 current (~20 mA), 100-Hz tetanic contractions were evoked at 20-s intervals, and the current  
187 intensity was gradually increased (20-30 mA steps) with each contraction until the peak force  
188 response reached 50% of the MVF measured in the familiarization session (typically at 100-

189 150 mA). At this stimulation intensity, 2 sets of 4 tetanic contractions were evoked with one  
190 contraction each at 10, 20, 50, and 100 Hz per set. The order of the four different stimulation  
191 frequencies within a set was randomized between participants, but remained constant for both  
192 sets and conditions (i.e., NIT and PLA) for each participant. Two seconds separated  
193 consecutive tetanic contractions within and between sets.

194 Tetanic peak force was determined as peak instantaneous force for 10 Hz contractions, or mean  
195 force calculated over a 300-ms period at peak instantaneous force (150-ms either side of peak,  
196 or 300 ms prior to peak if at the end of the plateau) for 20, 50, and 100 Hz contractions. Tetanic  
197 peak rate of force development (RFD) was determined as the peak instantaneous slope of the  
198 force-time curve over a 25-ms moving time window. For each frequency, peak forces and  
199 RFDs were averaged across the two sets, and calculated relative to peak force or RFD at 100  
200 Hz, respectively, controlling for any differences in stimulation intensity between conditions.  
201 The 20:50 Hz ratio was also measured for both peak force and RFD to assess any differential  
202 effects of condition on low (20 Hz) vs. high (50 Hz) frequencies.

### 203 **Fatigue Protocol**

204 Following a 10-min recovery out of the strength testing chair, participants repeated the warm-  
205 up outlined above before completing a fatigue-protocol involving 60, 3-s MVCs (each  
206 separated by 2-s). This fatigue protocol has previously been shown to elicit a decline in mean  
207 force with each MVC to an asymptotic plateau (critical force threshold) by the last 6 MVCs,  
208 reflecting the highest force that can be maintained with a metabolic steady state (22, 23). The  
209 instruction with each MVC was as above for the unfatigued MVCs (i.e., “push fast and hard”),  
210 but participants were also instructed to relax as quickly as possible at the end of each MVC in  
211 preparation for the next MVC in the series. The timing of each MVC was maintained using a  
212 digital metronome (Tempo Application for iPad; FrozenApe.com). Participants were instructed

213 not to pace themselves, but to produce a maximal effort with each MVC, and were blinded  
214 from the time and MVC number until immediately before the last MVC. Two horizontal  
215 cursors were placed at 90 and 85% of MVF recorded in the unfatigued MVCs, and participants  
216 were required to exceed these forces in the first and second MVCs of the protocol, respectively.  
217 Failure to do so was considered indicative of sub-maximal efforts from the start, in which case  
218 the protocol was interrupted, 5-min recovery given, and the protocol re-attempted, for a  
219 maximum of three attempts. The same two sets of tetanic contractions as performed in  
220 unfatigued conditions were completed, commencing at a similar  $3.0 \pm 1.1$  s (PLA) and  $2.6 \pm$   
221  $0.8$  s (NIT; paired comparison,  $P = 0.278$ ) after the last MVC in the fatigue protocol.

222 For each MVC in the fatigue protocol, the force-time integral (impulse), mean force, and root  
223 mean squared (RMS) EMG amplitude were calculated between the data points where force  
224 increased above and decreased below 2% MVF. This threshold for detecting MVC on- and  
225 offset was selected for computational reasons to avoid misidentifying MVCs during recovery  
226 periods. Total impulse was determined from the sum of impulses of all 60 MVCs. Mean MVC  
227 force and EMG amplitudes were averaged across MVCs within 10 consecutive bins of 6  
228 MVCs. End-test force reflecting the critical force threshold, was defined as the mean MVC  
229 force of the last 6 MVCs (bin 10). Fatigue indexes were calculated for mean MVC force and  
230 EMG amplitude, as the percentage decline from the first 6 (bin 1) to the last 6 MVCs (bin 10).  
231 Explosive impulse over the first 0-150 ms from force onset ( $IMP_{0-150}$ ) was determined for each  
232 valid MVC using the same methods as above for the unfatigued MVCs, and averaged across  
233 the 3 valid MVCs in each bin with the greatest  $IMP_{0-150}$ . Explosive impulses over earlier phases  
234 (0-50 and 0-100 ms) were not calculated for the fatigue protocol due to the inherent variability  
235 in early phase explosive force (13), which appeared augmented by our fatigue protocol likely  
236 due to the limited recovery time between MVCs. Explosive RMS EMG amplitude over the first  
237 0-150 ms from EMG onset ( $EMG_{0-150}$ ), was also measured and averaged across the same three

238 MVCs used to determine  $IMP_{0-150}$  in each bin. EMG onset was defined in the first muscle to be  
239 activated, as the last data point before the RMS EMG signal with a 2-ms moving time constant,  
240 increased and remained above the mean of the baseline RMS for 0.5 s. Fatigue indexes from  
241 bin 1 to 10 were calculated as above for  $IMP_{0-150}$  and  $EMG_{0-150}$ .

242 Tetanic peak forces and RFDs at 10, 20, 50, and 100 Hz, and the 20:50 Hz ratio, were  
243 determined for the tetanic contractions post-fatigue protocol via the same methods explained  
244 above for the unfatigued conditions. The fatigue index (percentage decline) from pre- to post-  
245 fatigue protocol was determined for each frequency and the 20:50 Hz ratio, for both tetanic  
246 peak force and RFD. A positive fatigue index for the 20:50 ratio (i.e., a decline in this ratio  
247 following the fatigue protocol), was considered evidence of low-frequency fatigue.

#### 248 **Plasma Nitrate and Nitrite**

249 Capillary, finger-prick blood samples were taken at upon arrival to the laboratory for each  
250 experimental trial. Whole-blood was collected into 3 x 300  $\mu L$  EDTA-treated microvettes and  
251 immediately centrifuged in a micro-centrifuge for 15 min at 1000 x g. Following centrifugation  
252 the supernatant (300-400  $\mu L$ ) was removed and frozen at  $-80^{\circ}C$  until analysis. Plasma nitrate  
253 and nitrite concentrations were determined by ozone-based chemiluminescence (model 88AM;  
254 Eco Physics) using previously reported methods (25). First, total  $NO_x$  (all nitroso species) was  
255 measured by injecting an aliquot (50  $\mu L$ ) of each sample into a solution of vanadium (III)  
256 chloride (50mM) dissolved in 1M-HCl, within an airtight microreaction vessel connected to the  
257 chemiluminescence analyser. Plasma nitrite was then determined in a two-step process by: (i)  
258 injecting an aliquot (100  $\mu L$ ) of plasma into a solution of glacial acetic containing 45 mM-  
259 potassium iodide and 10 mM-iodide, at  $60^{\circ}C$ , and actively purged by inert He, which measured  
260 plasma nitrite + other nitroso species (but not nitrate); and (ii) treating the plasma with acidic  
261 sulphanilamide (1M-HCl) to scavenge nitrite, before injection (100  $\mu L$ ), allowing for

262 quantification of nitroso species not including nitrate or nitrite. Nitrite was then determined as  
263 the difference between the measures in step (i) and (ii), whilst plasma nitrate was determined  
264 as the difference between total NO<sub>x</sub> and the measure in step (i). Resources were only available  
265 to analyse plasma samples from the first 11 participants to complete the study.

## 266 **Statistical Analysis**

267 Two way repeated measures ANOVAs were used to determine the effects of supplementation  
268 on: unfatigued explosive impulse (2 supplements (PLA and NIT) vs. 3 time-epochs (IMP<sub>0-50</sub>,  
269 IMP<sub>0-100</sub>, and IMP<sub>0-150</sub>)); unfatigued normalised tetanic peak force and RFD (2 supplements  
270 (PLA and NIT) vs. 3 frequencies (10, 20, and 50 Hz)); and fatigue index of both tetanic peak  
271 force and RFD (2 supplements (PLA and NIT) vs. 4 frequencies (10, 20, 50, and 100 Hz)). In  
272 the instance of a main or interaction effect, paired t-tests were used for post-hoc paired  
273 comparisons. The effects of supplementation on all other dependent variables were determined  
274 via paired t-tests. Cohen's *d* effect sizes were determined for each paired comparison (26). To  
275 determine if mean MVC force had reached a plateau representing a critical torque threshold in  
276 the fatigue protocol, a linear function ( $y = mx + c$ ) was fitted to the data plotting the relationship  
277 between mean MVC force (*y*) and MVC number (*x*) for the last 6 MVCs (bin 10). The slope  
278 (*m*) of this linear function was compared to zero using a paired t-test, for PLA and NIT  
279 separately, with no significant differences reflecting a plateau in mean MVC force. Statistical  
280 significance was considered where  $P < 0.05$ , and statistical analysis was completed using IBM  
281 SPSS Statistics version 21. Data are reported as means  $\pm$  standard deviation (SD).

## 282 **Results**

### 283 **Nitrate and Nitrite**

284 Plasma nitrate and nitrite were 10.3-fold greater ( $P < 0.001$ ;  $d = 12.6$ ) and 1.8-fold greater ( $P =$   
285  $0.002$ ;  $d = 4.66$ ), respectively, in NIT than PLA (Figure 1).

286 [INSERT FIGURE 1 HERE]

### 287 **Unfatigued Conditions**

288 *Voluntary contractions.* There was no effect of supplement on MVF ( $P = 0.887$ ;  $d = 0.01$ ; Table  
289 1). There was also no main effect of supplementation ( $P = 0.911$ ) or supplementation by time-  
290 epoch interaction effect ( $P = 0.903$ ) on explosive impulse recorded during the MVCs performed  
291 in unfatigued conditions (Table 1).

292 *Tetanic contractions.* Tetanic peak force at 100 Hz in unfatigued conditions was  $47 \pm 4\%$  of  
293 MVF and  $46 \pm 3\%$  of MVF in PLA and NIT, respectively, with no difference in the absolute  
294 value between the two conditions (PLA,  $348 \pm 60$  N; NIT,  $343 \pm 60$  N;  $P = 0.176$ ;  $d = 0.08$ ).  
295 There was also no difference in tetanic peak RFD at 100 Hz between PLA ( $4468 \pm 942$  N.s<sup>-1</sup>)  
296 and NIT ( $4542 \pm 982$  N.s<sup>-1</sup>;  $P = 0.608$ ;  $d = 0.08$ ). These results suggest stimulation intensity  
297 was constant across conditions. There were no main effects of supplementation ( $P \geq 0.718$ ) nor  
298 supplementation by frequency interaction effects ( $P \geq 0.382$ ) on either tetanic peak force or  
299 RFD recorded at 10, 20, and 50 Hz, in unfatigued conditions (Table 1). Consequently, the 20:50  
300 Hz ratio in unfatigued conditions was also similar between NIT and PLA for both tetanic peak  
301 force ( $P = 0.317$ ;  $d = 0.16$ ; Table 1) and RFD ( $P = 0.657$ ;  $d = 0.10$ ; Table 1).

302 [INSERT TABLE 1 HERE]

### 303 **Fatigued Conditions**

304 *Validity of fatigue protocol.* Three participants achieved <90% MVF in the first MVC and/or  
305 <85% MVF in the second MVC, of the fatigue protocol, in either PLA and/or NIT, and so were  
306 excluded from all fatigued-condition measurements on the assumption they were not  
307 performing maximal efforts from the start. In the remaining 14 participants, mean MVC force  
308 averaged across the 6 MVCs within each consecutive bin, declined in an exponential manner  
309 (Figure 2), so by the last 6 MVCs (bin 10) the slope of the linear relationship between mean  
310 MVC force (relative to MVF) and MVC number was statistically similar to zero in both PLA  
311 ( $-0.17 \pm 0.74$  %MVF/MVC;  $P = 0.394$ ) and NIT ( $0.52 \pm 1.23$  %MVF/MVC;  $P = 0.140$ ). This  
312 suggests the 14 remaining participants were consistently producing maximal efforts throughout  
313 the protocol, and mean MVC force declined to an asymptote likely representative of a critical  
314 force threshold (22). One participant of the 14 remaining was unable to record a valid MVC  
315 for explosive impulse analysis (i.e., there was countermovement or pre-tension before force  
316 onset) during the first 6-MVCs (bin 1) in PLA, and so was removed from analysis of explosive  
317 impulse and EMG during the fatigue protocol.

318 [INSERT FIGURE 2 HERE]

319 *Voluntary contractions.* There were no effects of supplementation on total impulse ( $P = 0.326$ ;  
320  $d = 0.05$ ), end-test force ( $P = 0.388$ ;  $d = 0.07$ ), mean MVC force fatigue index ( $P = 0.198$ ;  $d =$   
321  $0.19$ ), or mean MVC EMG amplitude fatigue index ( $P = 0.308$ ;  $d = 0.21$ ), recorded during the  
322 fatigue protocol (Table 2). However, the fatigue index for  $IMP_{0-150}$  was greater in the PLA  
323 compared with NIT for 8 of the 13 participants (Figure 3) resulting in a moderate and  
324 statistically significant effect of supplementation on explosive impulse fatigue ( $P = 0.039$ ;  $d =$   
325  $0.51$ ; Table 2; Figure 3). This was despite a similar fatigue index for  $EMG_{0-150}$  in both  
326 conditions ( $P = 0.286$ ;  $d = 0.39$ ; Table 2).

327

[INSERT TABLE 2 AND FIGURE 3 HERE]

328 *Tetanic Contractions.* There was a main effect of stimulation frequency on tetanic peak force  
329 fatigue index ( $P < 0.001$ ), due to greater fatigue at 10 Hz than all other frequencies ( $P < 0.001$ ;  $d$   
330  $= 0.62-1.27$ ), and greater fatigue at 20 Hz than 50 or 100 Hz ( $P < 0.001$ ;  $d = 0.60-0.76$ ), whilst  
331 fatigue at 50 and 100 Hz was similar ( $P = 1.000$ ;  $d = 0.01-0.11$ ), in both PLA and NIT (Figure  
332 4A). There was also a main effect of stimulation frequency on tetanic peak RFD ( $P < 0.001$ ),  
333 with fatigue tending to be greater at 10 than 20 Hz ( $P = 0.011-0.094$ ;  $d = 0.42-0.56$ ), greater at  
334 both 10 and 20 Hz than 50 or 100 Hz ( $P < 0.001$ ;  $d = 0.41-1.33$ ), and greater at 50 than 100 Hz  
335 ( $P < 0.001$ ;  $d = 0.43-0.54$ ), in both PLA and NIT (Figure 4B). The systematically greater fatigue  
336 at low ( $\leq 20$  Hz) compared with high ( $\geq 50$  Hz) frequencies resulted in reductions from pre- to  
337 post-fatigue protocol in the 20:50 Hz ratio for both peak force and peak RFD, in PLA and NIT  
338 (Figure 4C and D), showing the occurrence of low frequency fatigue in both conditions.

339 There was no main effect of supplementation ( $P = 0.615$ ) nor supplementation by frequency  
340 interaction effect ( $P = 0.253$ ) on the fatigue index for tetanic peak force. Whilst there was also  
341 no main effect of supplementation on the fatigue index for peak RFD ( $P = 0.496$ ), there was a  
342 supplementation by interaction effect ( $P = 0.042$ ); however, paired comparisons showed no  
343 differences in peak RFD fatigue index between PLA and NIT at any of the frequencies ( $P \geq$   
344  $0.647$ ;  $d = 0.05-0.27$ ; Figure 4B). Interestingly, there was a smaller reduction in the 20:50 Hz  
345 peak force ratio from pre- to post-fatigue protocol in NIT than PLA for 12 of the 14 participants  
346 (Figure 4C), resulting in a low-moderate effect of supplementation ( $d = 0.46$ ) that did not reach  
347 statistical significance ( $P = 0.110$ ). There was also a smaller reduction in the 20:50 Hz peak  
348 RFD ratio from pre- to post-fatigue protocol in NIT than PLA (Figure 4D) that was a large  
349 effect ( $d = 0.83$ ) and did reach statistical significance ( $P = 0.011$ ).



350

[INSERT FIGURE 4 HERE]

## 351 **Discussion**

352 This was the first study to investigate the influence of dietary nitrate supplementation on  
353 voluntary and involuntary contractile performance, in both unfatigued and fatigued conditions.  
354 We found no evidence of improved contractile performance in unfatigued conditions following  
355 nitrate supplementation, with PLA and NIT recording similar MVF, explosive voluntary  
356 impulse over all measured time periods, tetanic peak forces and tetanic peak RFDs at all  
357 stimulation frequencies. In contrast, nitrate supplementation reduced fatigue of voluntary  
358 explosive impulse by ~11%, during a bout of 60 MVCs. Furthermore, low-frequency fatigue  
359 (reduction in 20:50 Hz ratio) was lower in NIT compared with PLA by ~28% and ~39% for  
360 tetanic peak force and RFD, respectively, despite fatigue indexes of peak force and RFD being  
361 statistically similar for NIT and PLA, at each separate frequency. This suggests nitrate  
362 supplementation attenuated the disruption of excitation-contraction coupling caused by the  
363 fatiguing protocol, which might explain the reduced fatigue of voluntary explosive impulse in  
364 the NIT condition. The benefits of nitrate supplementation to voluntary force production in  
365 fatigued conditions were specific to the rising force-time curve, as total force-time impulse,  
366 end-test force, and mean MVC force fatigue index during the bout of 60 MVCs were similar  
367 for NIT and PLA.

## 368 **Plasma Nitrate and Nitrite**

369 Seven days of nitrate supplementation successfully raised plasma nitrate and nitrite (10.3- and  
370 1.8-fold, respectively) compared to the nitrate-depleted placebo. We believe these changes  
371 measured in only 11 participants likely reflect the responses in all 17 participants, given  
372 consistent observations of raised plasma nitrate and nitrite following both acute ( $\leq 24$  hours)

373 and chronic (2-15 days) nitrate supplementation with smaller doses than the present study  
374 (<12.9 mmol per day; (5, 6, 26-28)). The measured increase in plasma nitrite is of particular  
375 importance as this appears to be required to realise typical physiological benefits (e.g., reduced  
376 blood pressure) of nitrate supplementation (29). Dietary nitrate intake was not restricted in the  
377 current study, and so baseline (PLA) plasma nitrite ( $352 \pm 61$  nm) was comparable to other  
378 studies without dietary nitrate restrictions (~216-454 nm; (6, 21)), but higher than that recorded  
379 in studies with dietary nitrate restrictions (~80-331 nm; (5, 27, 28)). In addition to not  
380 restricting dietary nitrate, our blood sampling method (capillary blood in EDTA microvettes)  
381 differed to that of other studies (venous blood in lithium heparin tubes (5, 6, 21, 27, 28)) and  
382 this may also have contributed to baseline plasma nitrite values in the upper end of the range  
383 reported in the literature. Dietary nitrate intake was not restricted in the current study,  
384 consistent with the first human study to measure improved contractile performance with nitrate  
385 supplementation (9).

### 386 **Unfatigued Conditions**

387 In unfatigued conditions, nitrate supplementation had no effect on tetanic peak forces or RFD  
388 at any stimulation frequency nor on the 20:50 Hz ratios for peak force or RFD. These results  
389 are consistent with Hoon et al. (12), but in contrast to two recent studies reporting  
390 improvements in low-frequency ( $\leq 20$  Hz) force (9, 11), increased 20:50 Hz peak force ratio  
391 (9), and increased twitch and 300 Hz tetanic explosive forces (9) following nitrate  
392 supplementation. The current investigation and the 3 cited studies all tested the quadriceps  
393 muscles of seemingly similar cohorts of healthy, young, low/recreationally active males, and  
394 involved chronic (4-7 days) supplementation of relatively high doses of nitrate ( $>9.7$   
395 mmol/day), so the reasons for the inconsistent findings are unclear. Nevertheless, here we offer  
396 4 possible explanations to help direct future research. (I) We and the three cited studies used

397 beetroot juice for nitrate supplementation, but only the current study and Hoon et al. (12)  
398 compared the nitrate condition to a placebo of nitrate-depleted beetroot juice rather than  
399 blackcurrant cordial with lemon juice (9) or no placebo (11). Thus, other nutrients (e.g.,  
400 polyphenols or antioxidants) in beetroot juice may have caused the effects observed by Haider  
401 and Folland (9) and Whitfield et al. (11). (II) Based on rodent models, it appears nitrate  
402 supplementation only improves excitation-contraction coupling in fast twitch fibres (10), so  
403 the contractile responses are likely to be diluted and variable in the mixed-fibre human  
404 quadriceps muscles, which are typically ~50% fast twitch (30) but can vary from 20-80% (31).  
405 (III) Increases in low-frequency force with nitrate supplementation appear to be negatively  
406 related to habitual dietary nitrate intake (9), so it is possible the habitual dietary nitrate intake  
407 of participants in the current study and that of Hoon et al. (12) was greater than that required  
408 to realise benefits from supplementation in unfatigued conditions. (IV) In a series of muscle  
409 contractions, such as those used in the methods of this and the other investigations, the first  
410 contraction/s in the series would potentiate force and RFD of subsequent low-frequency  
411 contractions, through phosphorylation of myosin regulatory light chains increasing  $Ca^{2+}$   
412 sensitivity of the myosin-actin cross-bridge (32). It is conceivable potentiation may mask the  
413 benefits of nitrate supplementation in unfatigued conditions, and that the amount of  
414 potentiation differed between this and previous investigations; but as potentiation was not  
415 quantified in any of these studies, this remains speculative.

416 Maximum voluntary force was unaffected by supplementation, which is consistent with  
417 previous findings (9, 12, 21), and expected given nitrate supplementation does not affect force  
418 at the firing frequencies (>20 Hz; (9, 11)) typically expected at MVF (~25-40 Hz; (33, 34)).  
419 Explosive impulse recorded over all measured time periods from force onset in explosive  
420 voluntary contractions in unfatigued conditions was also unaffected by nitrate supplementation  
421 in the current study. Theoretically, improved excitation-contraction coupling characterised by

422 increased force at low frequencies – and thus low free cytosolic  $\text{Ca}^{2+}$  – may benefit voluntary  
423 explosive force where cytosolic  $\text{Ca}^{2+}$  is rising. However, given we found no evidence of  
424 improved excitation-contraction coupling in unfatigued conditions, it is no surprise that  
425 voluntary explosive impulse was also unaffected. Furthermore, nitrate supplementation does  
426 not appear to improve voluntary explosive force in unfatigued conditions, even when there is  
427 evidence of enhanced excitation-contraction coupling (9). The effects of nitrate  
428 supplementation on contractile performance might become more evident in fatigued conditions  
429 where excitation-contraction coupling is disrupted.

### 430 **Fatigued Conditions**

431 The fatigue protocol of 60 MVCs resulted in a decline in mean MVC force to a plateau  
432 reflecting a critical threshold, in both NIT and PLA. This threshold is thought to represent the  
433 highest force that can be maintained with metabolic steady state (22), which likely could not  
434 be overcome in the last 6 MVCs of the protocol because of high-energy phosphate depletion  
435 and considerable metabolite accumulation (23). Thus, we are confident a plateau in the fatigue  
436 and metabolic responses was reached in both conditions. As predicted, the 60 MVCs provided  
437 sufficient force-time impulse and metabolic perturbation to elicit the first component of low-  
438 frequency fatigue (19, 20), evidenced by greater fatigue at low ( $\leq 20$  Hz) compared to high ( $\geq 50$   
439 Hz) frequencies, and a decline in 20:50 Hz ratios for tetanic peak force and RFD, in both NIT  
440 and PLA. This low-frequency fatigue reflects disruption of excitation-contraction coupling in  
441 both conditions, probably caused by a decline in SR  $\text{Ca}^{2+}$  release (16-18).

442 The disrupted excitation-contraction coupling likely contributed to the decline in voluntary  
443 explosive impulse from the first 6 to the last 6 MVCs in both NIT and PLA, during the fatiguing  
444 protocol. Interestingly, nitrate supplementation attenuated the decline in voluntary explosive  
445 impulse, as evidenced by the significantly smaller fatigue index in NIT compared with PLA;

446 although this effect was only observed in 8/13 participants, suggesting some variability in  
447 individual responses. Nevertheless, this study provides novel evidence that nitrate  
448 supplementation benefits explosive force production in fatigued but not unfatigued conditions.  
449 The reduced explosive impulse fatigue in NIT does not appear to be due to differences in neural  
450 drive between the conditions, as the explosive EMG fatigue index was similar for NIT and  
451 PLA. Therefore, mechanisms at the muscle, which may be associated with attenuated  
452 disruption of excitation-contraction coupling (discussed below), likely explain the effects of  
453 nitrate supplementation on explosive impulse fatigue index.

454 Nitrate supplementation did not affect total impulse, end-test force, or mean MVC force fatigue  
455 index recorded during the 60 MVCs. Thus, the benefits of nitrate supplementation on voluntary  
456 force during fatiguing exercise appear to be specific to the rising slope of the force-time curve.  
457 This provides some evidence for attenuated disruption of the excitation-contraction coupling  
458 in NIT, which would theoretically have its greatest influence during contractile conditions of  
459 low or rising free cytosolic  $\text{Ca}^{2+}$ , such as during the rising slope but not necessarily the plateau  
460 of MVC force-time curves. One other study (21) has assessed voluntary forces during repeated  
461 MVCs (50 MVCs) following nitrate supplementation and, similar to our results, found no  
462 differences in the MVC forces recorded over the plateau of the force-time curve, but they did  
463 not measure explosive forces during the rising slope.

464 Whilst the fatigue index for tetanic peak force at each frequency was similar for NIT and PLA,  
465 there was evidence of reduced low-frequency fatigue in NIT compared to PLA. Specifically,  
466 the decline in 20:50 Hz peak force ratio (a typical measure of low-frequency fatigue; (35)) was  
467 ~28% lower in NIT compared to PLA. This difference was not statistically significant ( $P =$   
468 0.110), but there was a low-moderate effect ( $d = 0.46$ ), and it occurred in 12/14 participants.  
469 The reduced low-frequency fatigue in NIT compared with PLA becomes more evident when

470 considering the tetanic peak RFD results, where the decline in the 20:50 Hz ratio for peak RFD  
471 was ~39% lower following nitrate supplementation, which was a large and statistically  
472 significant effect ( $P = 0.011$ ;  $d = 0.83$ ). Furthermore, there was a supplementation by frequency  
473 interaction effect on tetanic peak RFD fatigue index, which appears to be due to the low  
474 frequencies ( $\leq 20$  Hz) typically displaying less fatigue and the high frequencies ( $\geq 50$  Hz) more  
475 fatigue, in NIT compared with PLA (Figure 4B), although paired differences at each frequency  
476 were not statistically significant. Collectively, these results provide novel evidence of reduced  
477 low-frequency fatigue following nitrate supplementation, which is more evident during the  
478 rising slope of the tetanic force-time curve compared to the peak, and suggests reduced  
479 disruption of the excitation-contraction coupling during fatiguing exercise. The first  
480 component of low-frequency fatigue appears dependent on metabolite accumulation causing  
481 reductions in SR  $\text{Ca}^{2+}$  release (16, 17). In the current study, nitrate supplementation may have  
482 attenuated the first component of low-frequency fatigue by: (i) lowering the PCr cost of force  
483 production (21) and thus blunting the metabolite accumulation thought to cause reduced  $\text{Ca}^{2+}$   
484 release; and/or (ii) increasing SR  $\text{Ca}^{2+}$  release for a given excitation in the fast (fatiguing) twitch  
485 fibres (10). The same mechanisms likely also explain the reduced fatigue index of voluntary  
486 explosive impulse during the 60 MVCs following nitrate supplementation. Furthermore, whilst  
487 the current study assessed the first component of low-frequency fatigue, it is possible nitrate  
488 supplementation – via mechanism (ii) – might similarly benefit the second component of low-  
489 frequency fatigue, which is also caused by reduced SR  $\text{Ca}^{2+}$  release, but independently of  
490 metabolite accumulation following several minutes of recovery (15, 16, 18).

491 In conclusion, we provide novel evidence that nitrate supplementation attenuates the reduction  
492 in explosive force production during fatiguing exercise, which appears likely due to attenuated  
493 disruption of excitation-contraction coupling, evidenced by decreased low-frequency fatigue  
494 in NIT compared to PLA. However, nitrate supplementation had no effect on voluntary or

495 involuntary contractile performance in unfatigued conditions, which is in contrast to two recent  
496 studies showing increased low-frequency tetanic force following nitrate supplementation.

### 497 **Practical Implications**

498 Explosive force production is functionally important where time to develop force is limited,  
499 such as during sprinting (36), joint stabilisation (37), and balance recovery (38). Thus, the  
500 considerable declines in explosive force observed during fatiguing exercise (39) and match  
501 play (40), will greatly impair exercise performance and increase injury risk. In the current  
502 study, nitrate supplementation reduced the decline in explosive force during fatiguing exercise  
503 and so may benefit exercise performance and reduce the risk of injury during fatiguing activity  
504 where explosive contractions are required.

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### 513 **Conflict of Interest**

514 The authors have no professional relationships with companies or manufacturers that may  
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517 honestly, and without fabrication, falsification, or inappropriate data manipulation.

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621

622 **Tables**

623 Table 1. Force parameters recorded in the unfatigued knee extensors during MVCs and  
 624 electrically stimulated tetanic contractions, in placebo and nitrate supplemented conditions.  
 625 Explosive impulse (force-time integral) was recorded over the first 0-50 (IMP<sub>0-50</sub>), 0-100 (IMP<sub>0-</sub>  
 626 <sub>100</sub>), and 0-150 ms (IMP<sub>0-150</sub>) from force onset. Tetanic peak force and peak rate of force  
 627 development (RFD) at stimulation frequencies of 10, 20, and 50 Hz are reported relative to  
 628 respective values at 100 Hz. Data are means  $\pm$  SD (N = 17).

	Placebo	Nitrate
<u>Voluntary Forces</u>		
MVF (N)	739 $\pm$ 135	741 $\pm$ 136
IMP <sub>0-50</sub> (Ns)	1.58 $\pm$ 0.52	1.52 $\pm$ 0.59
IMP <sub>0-100</sub> (Ns)	15.2 $\pm$ 3.6	15.1 $\pm$ 4.2
IMP <sub>0-150</sub> (Ns)	39.4 $\pm$ 7.6	39.4 $\pm$ 8.9
<u>Tetanic Peak Forces</u>		
10 Hz (%100 Hz)	40.0 $\pm$ 8.5	39.2 $\pm$ 8.1
20 Hz (%100 Hz)	66.8 $\pm$ 5.6	66.4 $\pm$ 5.4
50 Hz (%100 Hz)	90.4 $\pm$ 4.3	90.9 $\pm$ 3.8
20:50 Hz	0.74 $\pm$ 0.06	0.73 $\pm$ 0.05
<u>Tetanic Peak RFDs</u>		
10 Hz (%100 Hz)	50.1 $\pm$ 9.9	50.9 $\pm$ 10.4
20 Hz (%100 Hz)	51.4 $\pm$ 6.2	50.6 $\pm$ 7.5
50 Hz (%100 Hz)	80.7 $\pm$ 3.5	80.3 $\pm$ 3.6
20:50 Hz	0.64 $\pm$ 0.07	0.63 $\pm$ 0.08

629

630 Table 2. Force and EMG parameters recorded in the knee extensors during a fatigue protocol  
 631 involving 60 MVCs, in placebo and nitrate supplemented conditions. The fatigue indexes (FI)  
 632 document the percentage decline from the first 6 to last 6 MVCs for mean MVC force, average  
 633 MVC EMG amplitude, explosive impulse over the first 0-150 ( $IMP_{0-150}$ ), and explosive EMG  
 634 over the first 0-150 ( $EMG_{0-150}$ ). Data are means  $\pm$  SD (N = 13 for  $IMP_{0-150}$  and  $EMG_{0-150}$ ; N =  
 635 14 for all other variables). Paired difference is denoted by \*(P<0.05).

	Placebo	Nitrate
Total impulse (kNs)	70.5 $\pm$ 14.6	71.2 $\pm$ 14.4
End-test force (N)	261 $\pm$ 68	266 $\pm$ 61
MVC force FI (%)	54.2 $\pm$ 10.0	52.3 $\pm$ 8.5
MVC EMG FI (%)	31.2 $\pm$ 16.9	27.7 $\pm$ 17.2
$IMP_{0-150}$ FI (%)	57.3 $\pm$ 12.4	51.1 $\pm$ 13.9*
$EMG_{0-150}$ FI (%)	10.8 $\pm$ 18.8	3.5 $\pm$ 29.5

636

## 637 **Figure Legends**

638 Figure 1. Plasma nitrate (A) and nitrite (B) concentration, in placebo (PLA) and nitrate (NIT)  
639 supplemented conditions. Data are condition means (grey bars) and individual responses (black  
640 lines) for N = 11. Between-condition paired comparisons (P) and effect sizes (*d*) are presented.

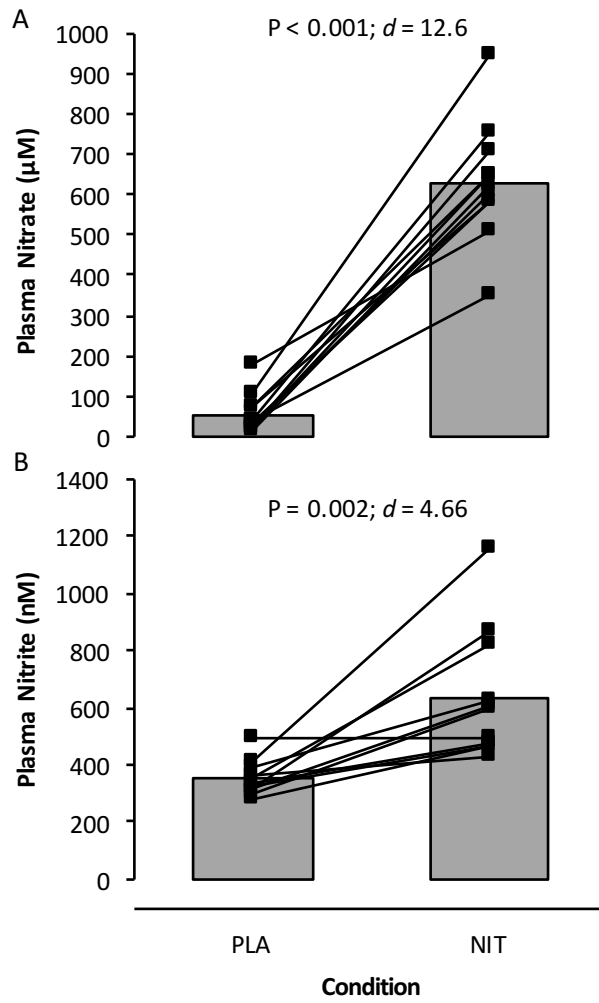
641 Figure 2. Mean MVC force averaged across the MVCs within each consecutive bin of 6 MVCs,  
642 during a 60-MVC fatigue protocol, performed in placebo (black diamonds) and nitrate (white  
643 squares) supplemented conditions. Force is reported as a proportion of unfatigued maximal  
644 voluntary force (MVf) recorded in the same session. Data are means  $\pm$  SD (N = 14).

645 Figure 3. Fatigue index of explosive impulse recorded over 0-150 ms (IMP<sub>0-150</sub>) from force  
646 onset, in placebo (PLA) and nitrate (NIT) supplemented conditions. Fatigue Index is the %  
647 decline from the first 6 to the last 6, of 60 MVCs. Data are condition means (grey bars) and  
648 individual responses (black lines) for N = 13. Between-condition paired comparison (P) and  
649 effect size (*d*) are presented.

650 Figure 4. Fatigue indexes of tetanic peak forces (A and C) and RFD (B and D) recorded at 10,  
651 20, 50, and 100 Hz (A and B) and the 20:50 Hz ratio (C and D), in placebo (PLA) and nitrate  
652 (NIT) supplemented conditions. Fatigue Index is the % decline from pre- to immediately post-  
653 60 MVCs. Data are condition means  $\pm$  SD (A and B), or condition means (grey bars) and  
654 individual responses (black lines; C and D) for N = 14. Between-condition paired comparisons  
655 (P) and effect sizes (*d*) are presented for the 20:50 Hz fatigue indexes (C and D).

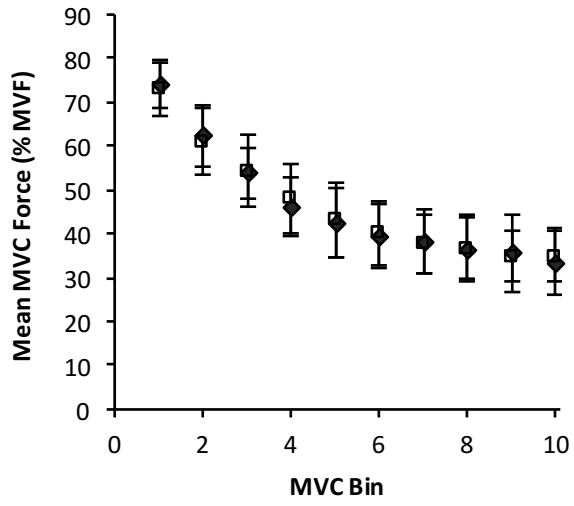
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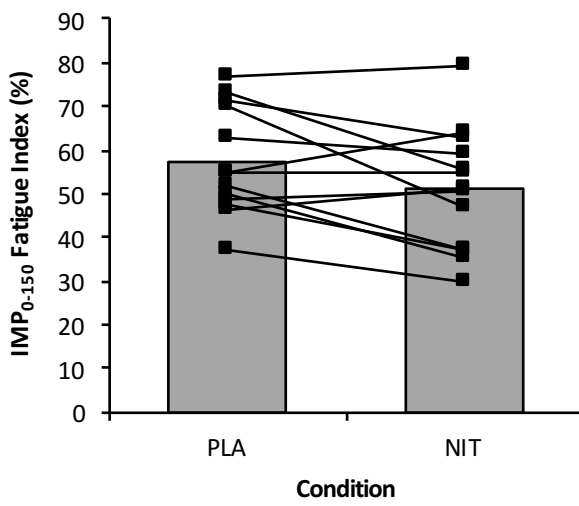
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658 Figure 1.



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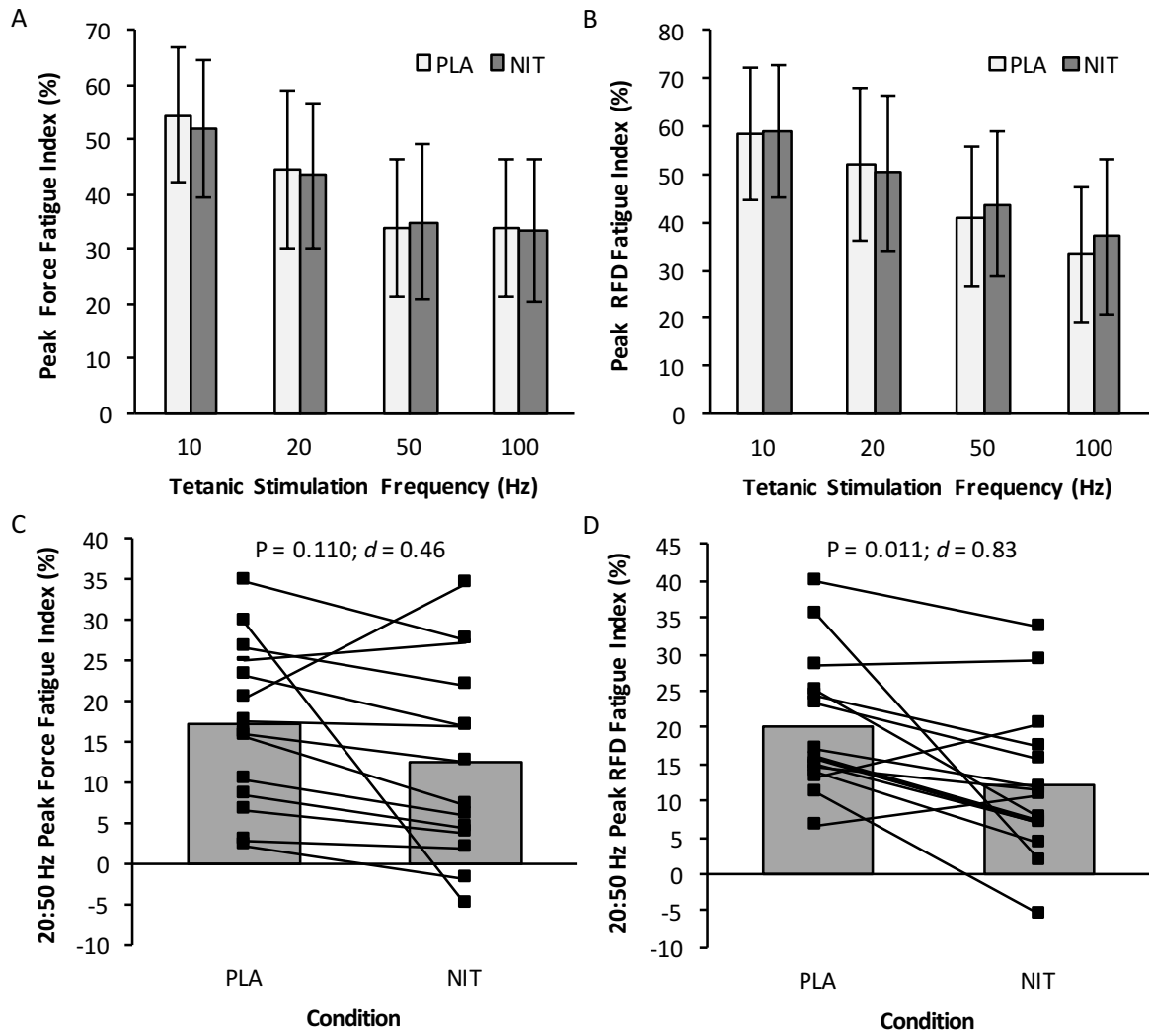
660 Figure 2.



661

662 Figure 3,

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664

665 Figure 4.