

1 Running head: SUBLIMINAL NEGATIVE AFFECT: A SYSTEMATIC REVIEW

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5 Peripheral physiological responses to subliminally presented negative affective stimuli:
6 A systematic review
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ABSTRACT

Negative affective information may be presented outside of awareness and change physiological activity. By increasing peripheral physiological activity, subliminally presented negative affective information may contribute to the development of disease. The current systematic review evaluated 65 studies in which negative affective stimuli were presented subliminally to a healthy sample while cardiovascular, electrodermal, electromyographical, hormonal, or immunological activity was measured. Overall, 41% of the tested contrasts indicated significant increases due to negative affective stimuli compared to control stimuli. These effects were most pronounced in fear-conditioning studies measuring skin conductance response amplitude and priming studies measuring systolic blood pressure. However, across the included studies the methodology varied substantially and the number of contrasts per physiological parameter was limited. Thus, although some evidence exists that subliminally presented negative affective stimuli can induce adverse peripheral physiological changes, this has not yet been addressed sufficiently.

Keywords: implicit processes, awareness, fear-conditioning, priming, cardiovascular activity, electrodermal activity, electromyographical activity, peripheral physiology

63 Peripheral physiological responses to subliminally presented negative affective stimuli:

64 A systematic review

65 Can information that occurs outside of awareness affect perception, motivation,
66 decisions, and emotions? Research addressing this question is flourishing in various fields
67 within psychology, including organizational (e.g., Uhlmann et al., 2012), emotion (e.g.,
68 Zajonc, 1980), clinical (e.g., Jones, Vilensky, Vasey, & Fazio, 2013), cognitive (Kihlstrom,
69 1987), and social psychology (e.g., Bargh & Chartrand, 1999; Fazio, 2001). Surprisingly, the
70 potential role of unconscious processes in the relationship between negative affective
71 information and health has remained understudied. In psychosomatic research, the limits of
72 conscious awareness have long been of interest and explored (Lane, 2008). For example in
73 the 1930s, a psychoanalytic approach was used to address unconscious emotional conflict in
74 the etiology of hypertension (Alexander, 1939), but experimental tests of this particular
75 method failed to provide supportive evidence (Lane, 2008). Notwithstanding, the possible
76 adverse influence of negative affective information outside of awareness on physiological
77 systems is consistent with current theoretical insights (Brosschot, 2010; Brosschot, Verkuil,
78 & Thayer, 2010; Brown, 2004; Damasio, 1994; Lane, 2008). However, experimental
79 evidence is still scarce. Given that several studies indeed showed that unconscious processes
80 influence the experience of emotions (e.g., Dannlowski et al., 2006; Murphy & Zajonc, 1993)
81 and behavior (e.g., Aarts, Custers, & Marien, 2008; Cohen, Moyal, Lichtenstein-Vidne, &
82 Henik, 2016) it seems crucial to examine whether physiological parameters can be affected
83 by negative affective stimuli when these are presented outside of awareness.

84 In fact, the quest for evidence of this kind appears to have a long history. In the early
85 days of psychological research, Jung (1907) and Peterson and Jung (1907) performed several
86 studies regarding the effect of word-associations on galvanic skin responses (GSRs). In these
87 studies they would repeatedly read out a list of neutral words to participants that had to

88 verbalize whatever associated word came to mind. The researchers observed that participants
89 gave different verbal responses to some of the same words and, importantly, that the GSRs
90 were larger than what they had seen before. Notably, this was one of the first
91 psychophysiological experiments and not much was known about the electrodermal response
92 at the time. An in-depth interview with the participants on these words revealed personal
93 affective associations and that the changes in verbal responses had been unintentional. It was
94 concluded that the GSR was able to detect affective associations with neutral words. The
95 different verbal responses and GSRs together were assumed to be a new method to measure
96 an attempt of the mind to prohibit further conscious processing of something that was
97 considered harmful to the self and was referred to as the *psycho-physical galvanic reflex*.
98 Although the authors faced considerable methodological restrictions using the electrodermal
99 response, it seems that these findings are the first (published) displays of the physiological
100 changes that involuntarily accompany an affective state. Later, McGinnies (1949) was able to
101 display negative affective words below threshold of awareness using a tachistoscope at an
102 interval of 10 ms. He found larger GSRs to the affective words compared to the neutral
103 words, which was interpreted as evidence for *perceptual defense*: a distortion of perception to
104 protect the individual from unpleasant experiences. Moreover, Lazarus and McCleary (1951)
105 provided evidence that after a conditioning procedure individuals were able to discriminate
106 between stimuli of different affective valence before conscious recognition as indicated with
107 changes in GSR, which was referred to as *subception*. Notably, the results of these studies
108 have been largely discussed in light of the *repression hypothesis* as they were believed to
109 indicate that individuals tend to reject and keep something out of consciousness when it may
110 negatively affect one's wellbeing. These experimental researchers were pioneers and gave
111 way to find ostensibly more objective evidence of physiological effects of subliminal
112 negative affective information. The research instigated fierce criticism from peers, who

113 performed what we would now call observational studies, and, as a result of the zeitgeist,
114 may have been overlooked in their importance (for a historical discussion the reader is
115 referred to MacKinnon and Dukes, 1962).

116 More recently, influential evidence of the effects of subliminally presented negative
117 affective stimuli on physiology is offered by neuroscience studies that have found amygdala
118 activation in response to fear-inducing stimuli that were presented below threshold of
119 awareness (e.g., Critchley, Mathias, & Dolan, 2002; LeDoux, 2000; Pessoa, 2005). These
120 findings suggest physiological arousal can be elicited using this type of stimulus presentation
121 and support the earlier findings with GSR that differences in affective valence of stimuli can
122 be determined even when these are presented outside of awareness. However, far less studies
123 seem to have addressed peripheral physiological parameters, such as blood pressure or
124 cortisol. Considering the potential relevance of unconscious processes in psychosomatic
125 research, the aim of the current study was to provide a systematic review of the evidence for
126 the physiological effects of subliminally presented negative affective stimuli from different
127 fields within psychology.

128 This systematic review focused on studies that manipulated awareness of negative
129 affective stimuli. In experimental designs, awareness is usually manipulated by presenting a
130 stimulus below the threshold of awareness, i.e., subliminally, typically followed (and often
131 preceded) by an irrelevant different stimulus, i.e., mask (e.g., Bargh & Chartrand, 2000;
132 Marcel, 1983; Tamietto & De Gelder, 2010; Wiens & Öhman, 2007). Typically, this
133 subliminal manipulation has been applied to two paradigms: priming with stimuli with an
134 innate affective valence (e.g., Van den Bussche, Van den Noortgate, & Reynvoet, 2009b),
135 from here on referred to as ‘priming studies’, and priming with fear-conditioned stimuli (e.g.,
136 Wiens & Öhman, 2007), from here on referred to as ‘fear-conditioning studies’. The
137 mechanism underlying the first paradigm, priming, is believed to be the activation of

138 cognitive representations of the prime content, which is reflected in a change in a variety of
139 behavioral responses such as reaction times to targets (Fazio, 2001). In addition to behavioral
140 responses, physiological responses have also been found to be influenced by subliminal
141 affective primes (e.g., Hull, Slone, Meteyer, & Matthews, 2002). In fear-conditioning, an
142 association between an unconditioned stimulus (US), such as a shock or a loud noise, that
143 automatically elicits a response (i.e., unconditioned conditioned response, UCS) and a novel
144 stimulus is formed. The result is a conditioned response (CR) to the now conditioned
145 stimulus (CS+). In contrast, the stimuli that are not combined with a US are referred to as CS-
146 . The participant is assumed to learn to differentiate between the CS+ and CS-. Presentation
147 of the CS+ is expected to elicit a physiological response that is similar to presentation of the
148 US alone, as if it was the negative experience itself (e.g., Öhman & Mineka, 2001). The
149 advantage of fear-conditioning over priming is that it offers more control over the specific
150 affective associations with the stimulus.

151 Theoretically, the subliminal presentation of negative affective stimuli in experimental
152 paradigms activates unconscious negative affectivity and should result in measurable changes
153 in physiological activity (Brosschot, 2010; Brosschot et al., 2010; Lane, 2008). Since the
154 dysregulation of adaptive peripheral physiological activity is assumed to be the final step in
155 the relation between psychological negative affect and adverse health outcomes (e.g.,
156 McEwen, 1998b), we only included studies using peripheral physiological parameters. Most
157 of these parameters are believed to be more directly involved in increased somatic health
158 risks than central nervous system parameters. For example stronger responses of systolic
159 blood pressure (SBP), diastolic blood pressure (DBP), and heart rate variability (HRV) to
160 mental stress were found to be predictive of cardiovascular (CV) disease risk and other
161 health-related outcomes (e.g., Chida & Steptoe, 2010; Malik et al., 1996; Thayer, Yamamoto,
162 & Brosschot, 2010). Furthermore, chronically elevated cortisol increases vulnerability for

163 disease states, for example through immunosuppression and numerous other
164 pathophysiological effects (McEwen, 1998a). As described, results generally confirm that
165 subliminally presented stimuli affect the brain (e.g., Critchley et al., 2002; LeDoux, 2000;
166 Pessoa, 2005), but this central activity does not necessarily provide information on peripheral
167 activity. Moreover, findings regarding central activity have already been substantially
168 elaborated on elsewhere (e.g., Brooks et al., 2012; Gianaros & Wager, 2015). In contrast,
169 results on peripheral activity have scarcely been addressed and the potential health risks have
170 not been evaluated. Thus, we focused on the peripheral physiological parameters that indicate
171 physiological changes within the organism: CV and electrodermal (EDA) parameters of
172 autonomic activity, musculoskeletal, i.e., electromyographical (EMG), hormonal, and
173 immunological parameters. Additionally, by including only studies that tested a healthy
174 population we attempted to elucidate the more general mechanisms that theoretically precede
175 physical illnesses.

176

177 Searching the literature for research on the main concepts of this study, i.e.,
178 ‘unconscious’ is considerably hindered by a lack of consensus on terminology, (see also
179 Brosschot et al., 2010; Eriksen, 1960; Merikle, 1984). To overcome this issue we paid special
180 attention to building a comprehensive keyword profile in an attempt to find all relevant
181 studies. The complex method of building this profile is explained in detail in the method
182 section. Basically, we systematically expanded an initial simple keyword profile with a large
183 set of new keywords. Possible relevant keywords for ‘unconscious’ were for example
184 alternatives such as ‘subconscious’ and ‘without awareness’. A comprehensive and
185 systematically built topic-specific profile increases the degree of certainty in finding all
186 relevant articles. Moreover, it ensures replicability across databases and researchers while
187 facilitating updates with exactly the same search profile over time.

188 Furthermore, we addressed two methodological issues regarding subliminal stimulus
189 presentation. First, as pointed out by Eriksen (1960) and Merikle (1984), to obtain valid
190 results regarding the effects of subliminally presented stimuli, a check of awareness of the
191 presented stimuli is required to ensure that the stimuli are indeed not consciously perceived.
192 Moreover, verbal report of awareness is subjective and objective measures of (non)awareness
193 should be used (Merikle, 1984). However, when recognition is reported using an objective
194 measure, it implies that a participant has also consciously perceived (or processed) the
195 stimulus, which is not necessarily true (Merikle, Smilek, & Eastwood, 2001). To overcome
196 this conundrum, we have extracted information on the type of awareness check without
197 ascribing any value to the specific type of check. Second, changes in physiology after
198 subliminal presentation of stimuli may be a consequence of the procedure itself, for example
199 by seeing flashes on the screen or the use of masks that might have been arousing in some
200 way. We addressed this by selecting studies with adequate control stimuli, i.e., stimuli that
201 had no negative affective connotation, that were presented in the same way as the negative
202 affective stimulus, either in between or within-group designs.

203

204 Taken together, the primary research question of this systematic review is whether
205 subliminally presented negative affective stimuli increase peripheral physiological activity
206 compared with control stimuli. By providing an overview of studies regarding the role of
207 non-conscious processes and potentially pathophysiologic mechanisms, this systematic
208 review may add significant overarching knowledge about the effect of negative affective
209 information on somatic health.

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Methods

Keyword profile

We composed an elaborative keyword profile using BOOLEAN logic to formulate and combine the three sets of keywords pertaining to the three concepts: “unconscious”, “negative affect”, and “physiology”. We started with a basic keyword profile in which the sets were separated by ‘AND’: (*unconscious* OR subconscious* OR nonconscious OR non-conscious OR preconscious OR pre-conscious OR sublimin* OR implicit**) AND (*stress* OR arousal* OR (negative and (affect* OR emot*)) OR anxi* OR anger OR angr* OR fear OR threat**) AND (*cortis* OR glucocort* OR adren* OR noradren* OR SCL* OR GSR* OR blood* OR blood-pressure OR systol* OR diastol* OR cardiac* OR heart* OR cardiovasc* OR immun**). Subsequently, for each set we aimed to gather an exhaustive list of alternative keywords through the help of a native English speaker, the Thesaurus of PsycINFO, the synonym list of MS Word 2010, and previously found articles. For example in the case of the set “unconscious” we came up with 64 different conceptualizations, such as “nonconscious”, “proprioception”, and “repressed”, see Table 1. Some keywords were written differently across the articles and were thus formulated in all possible ways, for example “mindwandering”, “mind-wandering”, and “mind wandering”. Instead of adding all keywords at once to the basic keyword profile each new keyword was added individually and its additional value was evaluated in terms of the number of new relevant articles found. This was established by searching the databases with a profile containing the new word and the two sets to which the word did not belong, while the set to which the new word did belong was “excluded” by using the NOT function of BOOLEAN logic. For instance in the case of the word “repressed” the evaluative profile would be: *repressed AND (set keywords for “stress”) AND (set keywords for “physiology”) NOT (set keywords for “unconscious” without the new keyword)*. This profile would yield *only* the articles that the keyword

238 “repressed” added to the basic profile. When these articles were considered to be relevant, the
 239 keyword was added to its set in the basic profile. When the new keyword did not yield
 240 relevant articles it was not used anymore. The final profile that was build using this procedure
 241 is provided in Table 2.

242 **Table 1.** Keywords for “unconscious”

absence of awareness	latent inhibition	repressed
absent-minded	less conscious	represser
access dissociation	masked	repressing
affective stimuli	masked pictures	routinized
affective valence	masked stimuli	stimulus awareness
automatic processing	meta-consciousness	subconscious
automatic emotional	mind-wandering	subliminal
aware	non verbal	suboptimal
awareness	nonattended	suppressed
conscious awareness	nonconscious	suppressor
daydreaming	oblivious	suppressing
degree of awareness	outside of awareness	train of thought
emotional awareness	preattended	unaware
first order mental states	preattentive	unawareness
habitual	preconscious	unconscious
implicit	pre-cognition	unknowing
interoceptive awareness	precognitive	unnoticed unwanted thoughts
intuition	primary proces-level	unpremeditated
intuitive	prime	unwitting
involuntary	priming	without attention
lack of attention	proprioception	
latent	proprioceptive	

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245 **Table 2.** Keyword profiles as inserted into the databases

Database	Web of Science	PsycINFO
<i>Search details</i>	Core Collection Advanced Search	Basic Search
<i>Keyword profile</i>	((TS=(unconscious* or subconscious* or nonconscious or non-conscious or preconscious or pre-conscious or sublimin* or implicit* or "automatic emotional" or "automatic emotion" or "automatic affect" or "automatic affective" or unattend* or mind-wandering or "emotional awareness" or "interoceptive awareness" or "degree of awareness" or "stimulus awareness" or "conscious awareness" or "involuntary stress" or "latent inhibition" or precogn* or pre-attent* or "automatic processing" or masked* or nonverbal or "non verbal communication") AND TS=(stress* or arousal* or (negative and (affect* or emot*)) or anxi* or anger or angr* or fear or threat* or ruminat* or worr* or "psychological tension" or shock* or "affective stimuli" or "priming" or "prime" or (emotional and (stimuli or circuit* or content* or state* or stimulation or expression))) AND TS=(cortis* or glucocort* or adren* or noradren* or SCL* or GSR* or blood* or blood-pressure or systol* or diastol* or cardiac* or heart* or cardiovasc* or immun* or "physiological arousal" or "physiological measures" or "physiological correlates" or "physiological activity" or "skin conductance" or autonomic* or EMG or (fac* AND (electromyography or muscle*)))) AND LANGUAGE: (English) AND DOCUMENT TYPES: (Article)	(unconscious* or subconscious* or nonconscious or non-conscious or preconscious or pre-conscious or sublimin* or implicit* or "automatic emotional" or "automatic emotion" or "automatic affect" or "automatic affective" or unattend* or mind-wandering or "emotional awareness" or "interoceptive awareness" or "degree of awareness" or "stimulus awareness" or "conscious awareness" or "involuntary stress" or "latent inhibition" or precogn* or pre-attent* or "automatic processing" or masked* or nonverbal or "non verbal communication") AND (stress* or arousal* or (negative and (affect* or emot*)) or anxi* or anger or angr* or fear or threat* or ruminat* or worr* or "psychological tension" or shock* or "affective stimuli" or "priming" or "prime" or (emotional and (stimuli or circuit* or content* or state* or stimulation or expression))) AND (cortis* or glucocort* or adren* or noradren* or SCL* or GSR* or blood* or blood-pressure or systol* or diastol* or cardiac* or heart* or cardiovasc* or immun* or "physiological arousal" or "physiological measures" or "physiological correlates" or "physiological activity" or "skin conductance" or autonomic* or EMG or (fac* AND (electromyography or muscle*)))
<i>Limiters</i>	Indexes=SCI-EXPANDED, SSCI Timespan=All years	Peer-reviewed Human subjects

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247 **Search strategy**

248 The procedures described by the PRISMA (Preferred reporting Items for Systematic
249 Reviews and Meta-Analyses) Statement (Moher et al., 2009) were applied, to the extent that
250 they apply to experimental research, to the literature search, data collection, and reporting of
251 the results. The final keyword profile was used in Web of Knowledge (Core collection; field:
252 ‘topic’) and PsycINFO (field: ‘all text’) on June 16, 2015. In Web of Science the search was
253 limited to ‘Article’ as document type and ‘English’ as language. The used indexes were ‘SCI-

254 Expanded' and 'SSCI'. No limit to the time span was applied. In PsycINFO the limiters
255 'peer-reviewed' and 'human subjects' were applied. All duplicate publications were removed.
256 For seven eligible articles the full-text could not be obtained through online methods; in one
257 case we received the full-text version of the article from the authors, in two cases the authors
258 were already deceased, and in the remaining four cases there was no response from the
259 authors. The latter studies were discarded (Esteves, Dimberg, & Öhman, 1994; Esteves,
260 Parra, Dimberg, & Öhman, 1994; Ohira, 1992, 1994). Finally, we checked all references of
261 the final selection of articles, i.e., a snowballing procedure, for articles that might not have
262 been picked up by the keyword-profile. This resulted in ten possible new inclusions, of which
263 three were eligible for inclusion. The databases were checked again for new articles on 16
264 December 2015 and resulted in one additional relevant article. Finally, one eligible article
265 was accepted for publication at time of the second search and was obtained through personal
266 communication.

267

268 **Study selection and data collection**

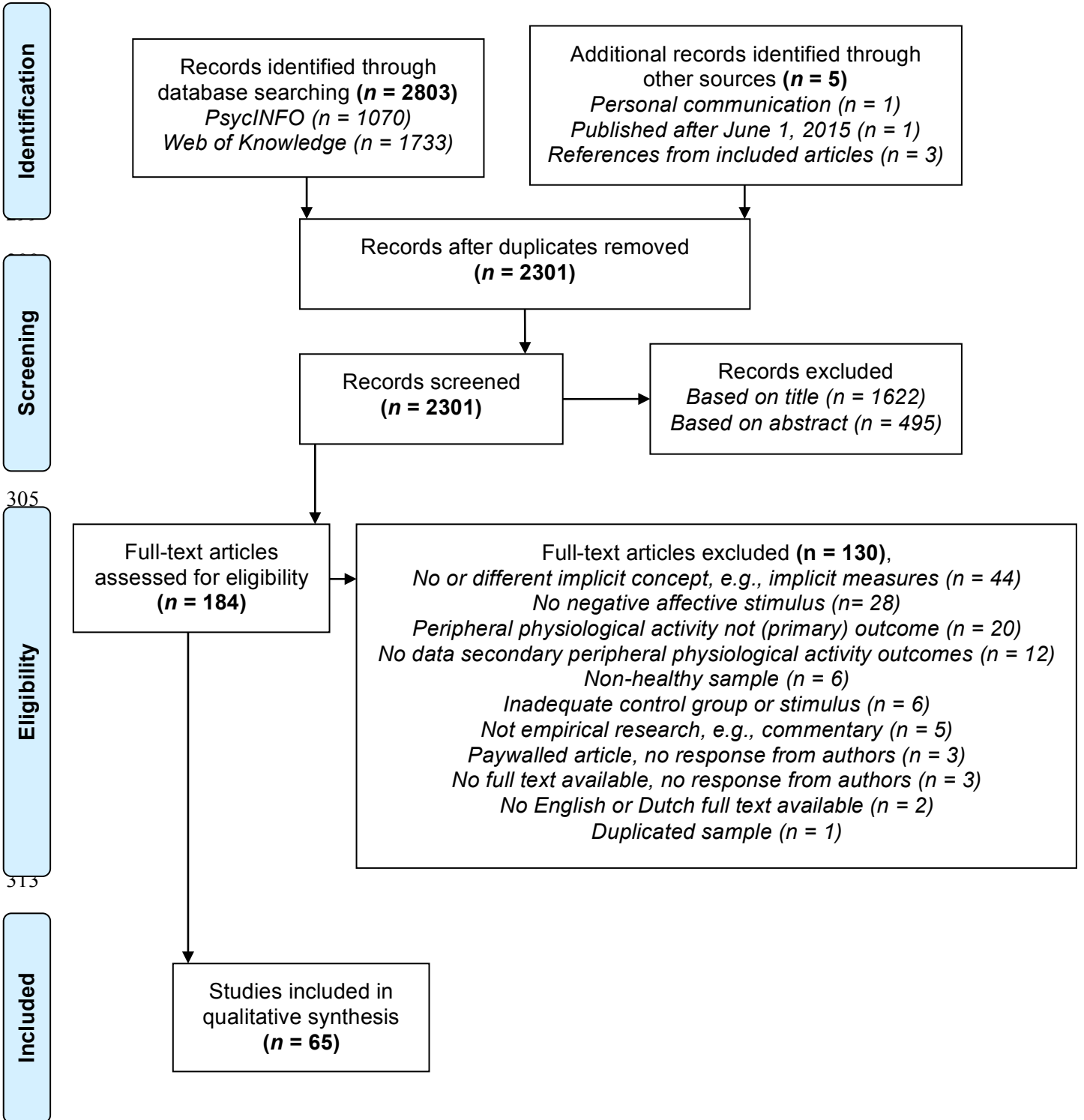
269 In total 2301 articles were evaluated for eligibility (See Figure 1). Articles were
270 included when (1) subjects were healthy human adults, (2) an experimental design was used,
271 (3) manipulation involved a negative affective stimulus, (4) the negative affective stimulus
272 was manipulated out of the subject's awareness, i.e., processed without requiring conscious
273 processing, (5) a control stimulus was used that was presented exactly like the negative
274 affective stimulus for either between or within-group designs but was either of positive or
275 neutral valence, (6) the dependent measure was a peripheral physiological outcome measure,
276 (7) the article was peer-reviewed (e.g., no dissertations, conference proceedings, or
277 editorials), (8) full-text was available in either English or Dutch.¹

278 Eligibility was evaluated independently by two reviewers, the first and third author. A
279 third reviewer, the second author, was consulted in case of disagreement. Articles that could
280 not unanimously be excluded based on the information available at one step automatically
281 were included in the next step to prevent invalid exclusion. The first round of exclusion was
282 based on title; articles with titles that clearly implied an unrelated subject were discarded.
283 After this round 679 articles were left. In the second round, exclusion was based on abstract
284 and resulted in 184 potential eligible articles. Finally, in the third round the full-texts were
285 evaluated which lead to the final inclusion of 54 articles. From articles that discussed
286 multiple experiments studies that met the inclusion criteria were included as separate studies,
287 resulting in a final selection of 65 studies.

288 The main features of the studies were extracted, as displayed in Table 3: Sample
289 description, the nature of the negative affective stimulus, the key features of the design such
290 as type of stimuli and presentation method, the type and data handling of the physiological
291 parameters, awareness check, and the results. Data extraction was checked by at least one
292 other author.

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319 **Figure 1.** Flow chart of the selection process. Adapted from Moher et al. (2009).