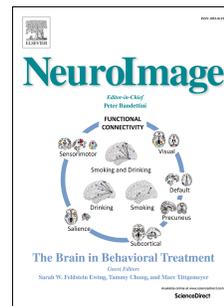


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Dissociable neural correlates of stimulation intensity and detection in somatosensation

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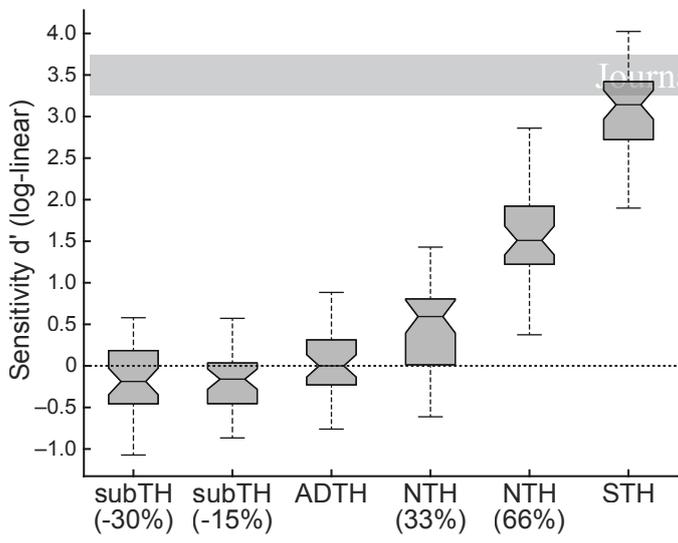
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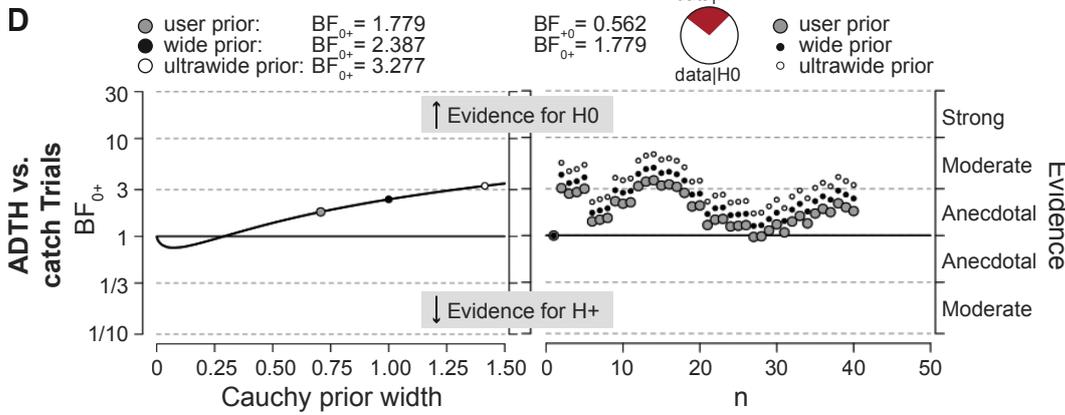
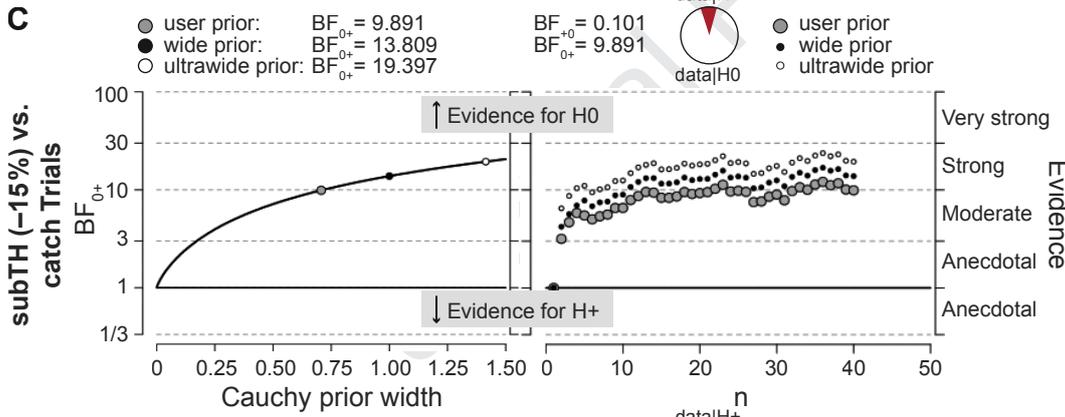
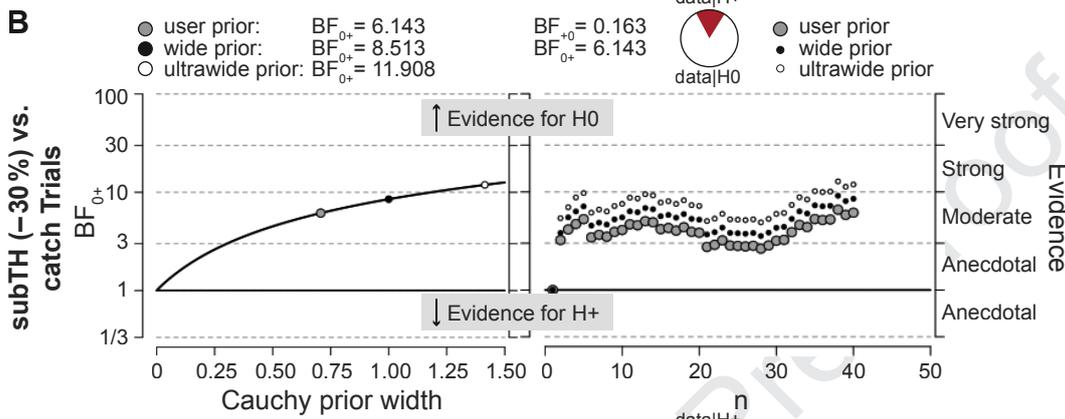
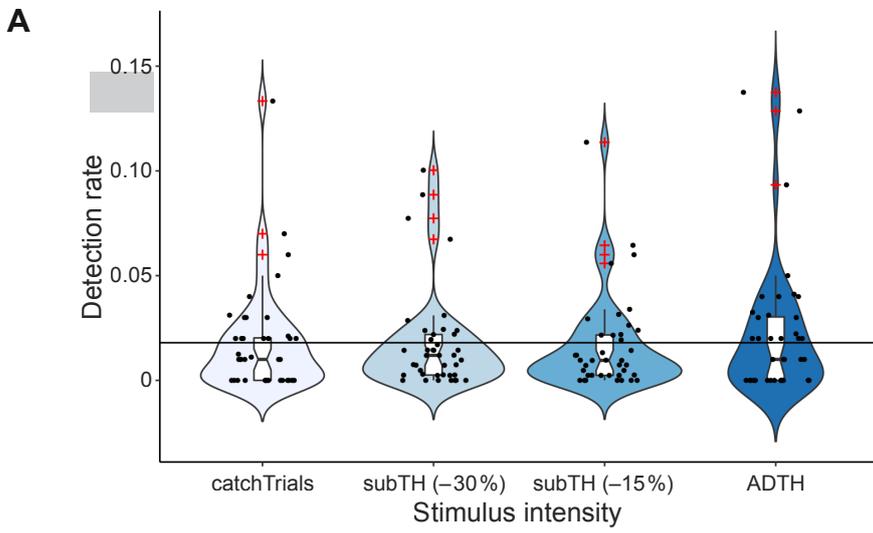
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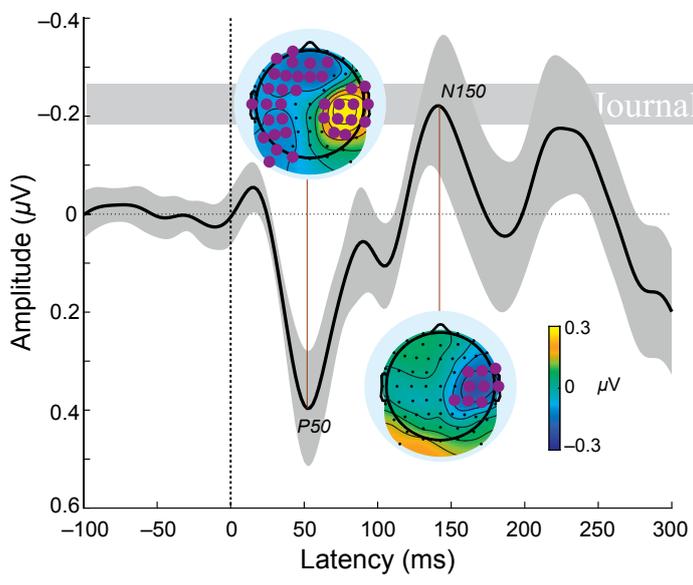
| <b>CONDITION</b>      | <b>subTH<br/>(-30%)</b> | <b>subTH<br/>(-15%)</b> | <b>ADTH</b> | <b>NTH<br/>33%</b> | <b>NTH<br/>66%</b> | <b>STH</b> |
|-----------------------|-------------------------|-------------------------|-------------|--------------------|--------------------|------------|
| <b><i>M</i> (mA)</b>  | 1.12                    | 1.35                    | 1.59        | 2.01               | 2.42               | 2.84       |
| <b><i>SD</i> (mA)</b> | 0.41                    | 0.51                    | 0.59        | 0.61               | 0.67               | 0.75       |
| <b>Range (mA)</b>     | 0.47–2.03               | 0.52– 2.5               | 0.66–2.91   | 0.91–3.39          | 1.11–3.87          | 1.24–4.35  |
| <b>Rel. Intensity</b> | 0.70                    | 0.85                    | 1           | 1.3                | 1.6                | 1.9        |

**Table 1.** Average electrical current in milliampere (mA) for all stimulation conditions. For the relative intensities, stimulation magnitudes were normalized to ADTH. subTH = subthreshold, ADTH = absolute detection threshold, NTH = near threshold, STH = supra threshold, M = mean, SD = standard deviation.

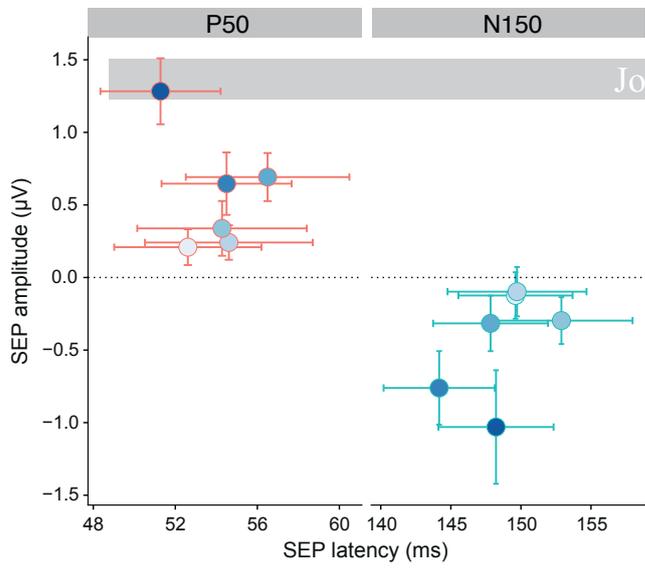


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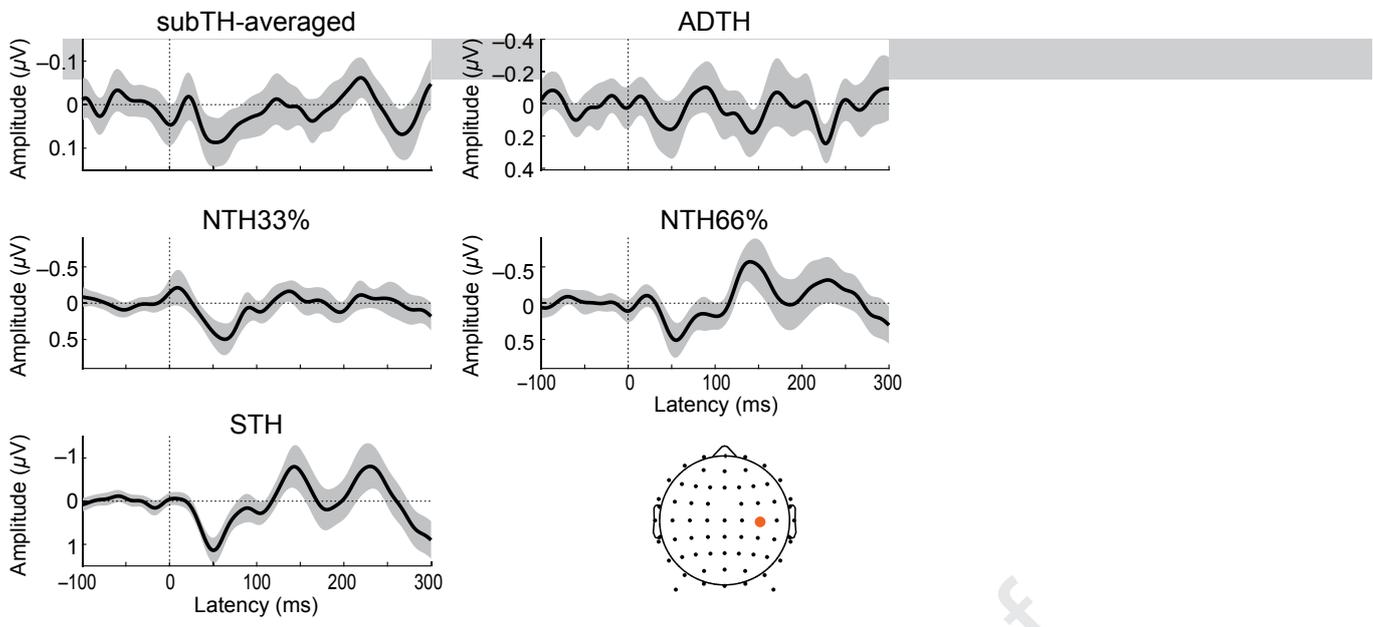




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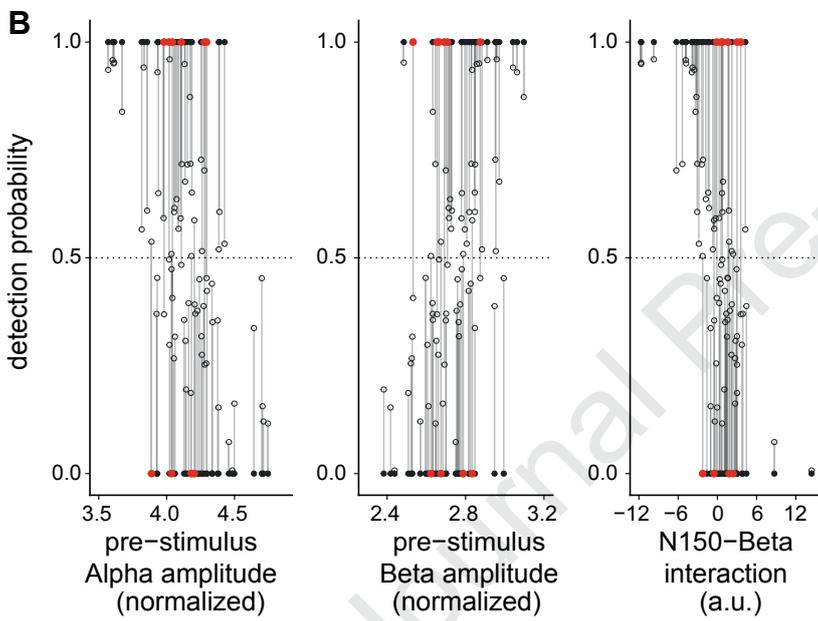
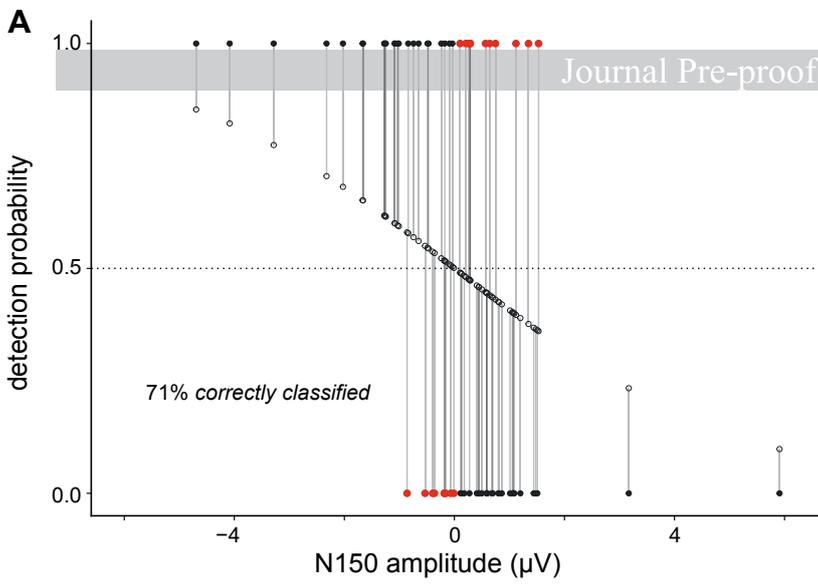


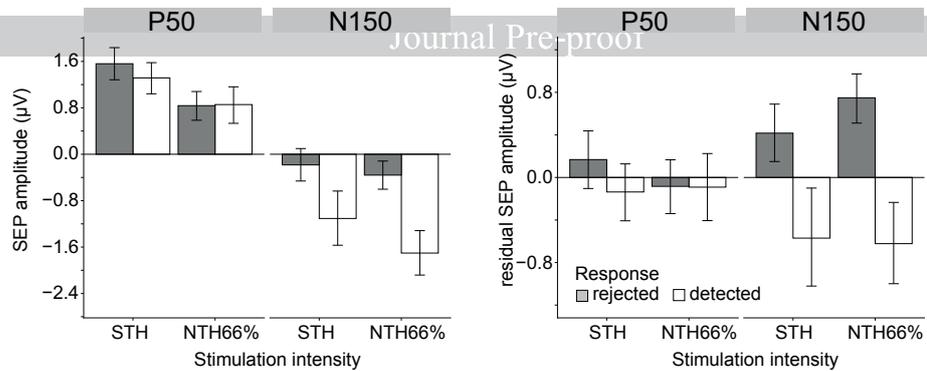
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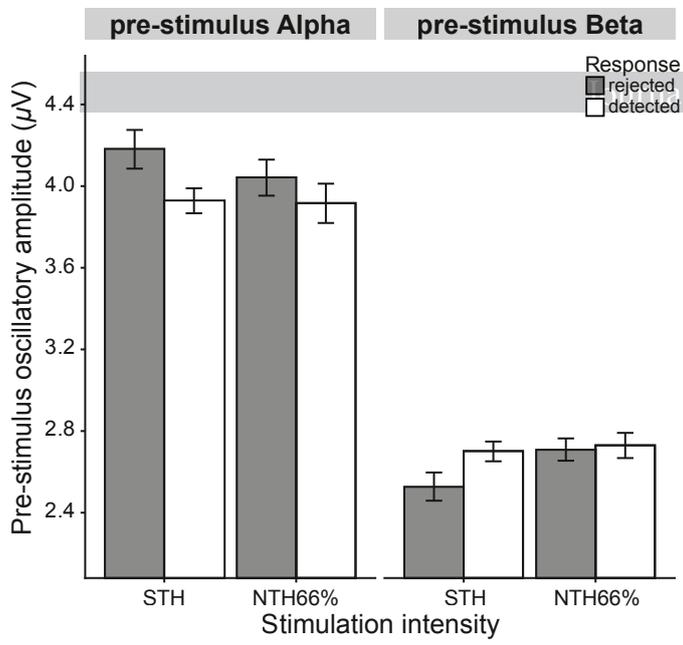
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**Author contributions**

N.F., T.N., M.M.M., and A.V. designed research; N.F. performed research; N.F., T.N. contributed unpublished reagents/analytic tools; N.F. analyzed data; N.F., T.N., M.M.M., and A.V. wrote and revised the paper.

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1 *Dissociable neural correlates of stimulation intensity*  
2 *and detection in somatosensation*

3 **Abbreviated title:** Intensity encoding precedes tactile stimulus detection

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## 39 Abstract

40 Somatosensory stimulation intensity and behavioral detection are positively related, and both  
41 correlate with neural responses. However, it is still controversial as to what extent stimulus intensity  
42 and early somatosensory evoked potentials (SEP) predict detection and how these parameters  
43 interact with pre-stimulus brain oscillatory states, which also influence sensory processing. Here we  
44 investigated how early SEP components encode stimulation intensity, how pre-stimulus alpha- and  
45 beta-band amplitudes interact with SEPs, and which neural markers predict stimulus detection. To  
46 this end, we randomly presented electrical finger nerve stimulation with various intensities  
47 distributed along the individual psychometric response function (including catch trials) while  
48 recording the EEG. Participants reported stimulus presence on a trial-by-trial basis (one-alternative-  
49 forced-choice). For the lowest (imperceptible) intensities, participants showed zero (behavioral)  
50 sensitivity despite measurable early cortical processing reflected by the P50 component. The P50  
51 amplitude scaled with increasing stimulation intensities but was not predictive of stimulus detection.  
52 Instead, detection was associated with the later negative N150 component, as well as with pre-  
53 stimulus lowered somatosensory alpha- and increased frontal beta-band amplitudes. Our results  
54 give evidence for a serial representation of stimulus intensity and detection, as reflected by the P50  
55 and N150 amplitude, respectively. Furthermore, stimulus detection seems to depend on the current  
56 brain state, rendering upcoming stimulation being reportable or not.

57

## 58 Keywords

59 somatosensory detection, event-related potentials, pre-stimulus Rolandic oscillations, subthreshold  
60 electrical stimulation, regularized logistic regression, bayesian null-hypotheses testing

61

## 62 Significance Statement

63 Investigating neural processes of perception without awareness might reveal prerequisites of the  
64 neural correlates of consciousness. In the current EEG study, we employed imperceptible  
65 stimulation, for which participants did not experience any sign of perceptual awareness. In addition,  
66 we presented stimuli of varying stimulation intensity above the detection threshold to dissociate the  
67 neural correlates of stimulus detection and intensity. We found that the amplitude of an early event-  
68 related component —the P50— (1) is measurable after imperceptible stimulation, (2) is driven by  
69 stimulation intensity, but (3) does not predict upcoming stimulus detection when we analyzed  
70 detected and rejected stimuli of the same intensity. The successive N150 best explains behavioral  
71 performance and might depend on endogenous content (re)activation that is signified by frontal  
72 beta band amplitudes. Lower central alpha and higher frontal beta amplitudes support stimulus  
73 detection and seem necessary to trigger perceptual awareness.

74

75

## 76 1. Introduction

77 Investigating neural processes of perception without awareness may disclose neural phenomena  
78 that preclude conscious perception (Baumgarten et al., 2017; Blankenburg et al., 2003; Forschack et  
79 al., 2017; Merikle and Daneman, 1998; Nierhaus et al., 2015). Additionally, it may reveal markers  
80 that are necessary but, apparently, not sufficient for conscious perception and, therefore could  
81 reflect prerequisites of the neural correlates of consciousness (NCC, Aru et al., 2012). Research  
82 dedicated to the identification of electrophysiological predictors of somatosensory detection agrees  
83 on the involvement of mid-range somatosensory event-related potentials (SEPs) occurring after  
84 stimulus presentation, however, differs on the involvement of earlier SEP components, specifically  
85 regarding the strength of the P50 (Aukstulewicz and Blankenburg, 2013; Aukstulewicz et al., 2012;  
86 Frey et al., 2016; Palva et al., 2005). These studies typically applied stimulation intensities  
87 individually tuned to exert detection on 50% of the trials, often called “near-threshold” (NTH)  
88 stimulation. Whereas Aukstulewicz and colleagues (2012, 2013) found the most prominent effect of  
89 perceptual awareness to occur locally as a negative potential over contralateral somatosensory  
90 areas roughly peaking 140 ms after stimulus presentation, both Frey and colleagues (2016) and Palva  
91 et al. (2005) reported global (i.e., across-area) awareness differences even before 60 ms.

92 A different line of research investigated electrophysiological responses to stimulation below the  
93 absolute detection threshold (ADTH, Forschack et al., 2017; Klostermann et al., 2009; Libet et al.,  
94 1967; Nierhaus et al., 2015; Ray et al., 1999). Detection rates to these imperceptible stimuli are  
95 comparable to false alarm rates to catch trials, i.e., trials without any stimulation. The above-  
96 mentioned studies reported, that stimulation below ADTH (i.e., subthreshold) evokes a P50 but no  
97 further components. While these results agree with the notion that the mere presence of the P50 is  
98 not sufficient for stimulus detection, a proper test to the hypothesis that its amplitude or latency  
99 might play a role in stimulus detection at different intensities along the individual psychometric  
100 function, is hitherto absent. On the contrary, data from a somatosensory extinction patient, i.e., a

101 patient showing detection performance loss due to unilateral brain damage, indicated that  
102 attenuation rather than elimination of somatosensory P50 in the damaged hemisphere might cause  
103 tactile extinction (Eimer et al., 2002). Furthermore, previous studies never proved the  
104 imperceptibility below ADTH intensity by bias-free sensitivity measures of stimulus detection  
105 (Baumgarten et al., 2017; Blankenburg et al., 2003; Iliopoulos et al., 2014; Klostermann et al., 2009;  
106 Libet et al., 1967; Nierhaus et al., 2015; Ray et al., 1999; Shevrin and Fritzler, 1968; Taskin et al.,  
107 2008) or assumed chance performance by non-significant d-prime values (Bernat et al., 2001a,  
108 2001b; Ferrè et al., 2016; Forschack et al., 2017; Shevrin, 2001). While the former studies cannot  
109 control for individual response tendencies (e.g., a general reluctance to report stimulus detection or  
110 the contrary), the latter do not provide a decisive test for imperceptibility. Thus, the current study  
111 set out to quantify the contribution of somatosensory electrophysiological response strength in  
112 stimulus detection by explicitly manipulating stimulation intensities along the individual  
113 psychometric function of healthy human volunteers. Specifically, we tested (1) whether stimulation  
114 below ADTH intensity can be shown to be reliably imperceptible using Bayesian statistics, (2)  
115 whether the amplitude of the P50 component only correlates with stimulus intensity and (3), for a  
116 sufficiently high intensity, would also reflect detection. Furthermore, pre-stimulus oscillatory  
117 amplitudes both in the alpha- and beta band have been observed to influence tactile perception  
118 (Anderson and Ding, 2011; Baumgarten et al., 2016; Craddock et al., 2017; Forschack et al., 2017;  
119 Linkenkaer-Hansen et al., 2004; Schubert et al., 2008; Weisz et al., 2014; Zhang and Ding, 2009).  
120 Thus, we explored (4) the contribution of pre-stimulus oscillatory amplitudes in the alpha- as well as  
121 the beta band on stimulus detection and their possible modulation of SEP components.

122

## 123 2. Materials and methods

### 124 2.1. Participants

125 The local ethics committee at the medical faculty of the University of Leipzig approved the study.  
126 Before participation, all volunteers underwent a comprehensive neurological examination that  
127 screened for a history of neurological or psychiatric diseases or any medication. Forty healthy  
128 volunteers participated (age range 20–35 yrs, mean  $27.2 \pm 3.8$  yrs S.D.; 21 females); all were right-  
129 handed (laterality score according to the Oldfield questionnaire: mean  $92.4 \pm 12.8$  S.D., over a range  
130 of –100 (entirely left-handed) to 100 (entirely right-handed), Oldfield, 1971). Data of four  
131 participants were discarded due to defective ( $n = 2$ ) or artifactual ( $n = 2$ ) EEG recordings, thus in total  
132 36 datasets were analyzed.

133 Based on our previous findings, we expected the smallest SEP component following 50 ms (P50)  
134 after subthreshold stimulation. One goal of the study was to show that despite zero behavioral  
135 sensitivity to subthreshold stimulation, the latter nevertheless evokes the P50. Thus, we calculated  
136 the required sample size for an effect size of 0.52 (Cohen's  $d$  based on the average P50-SEP potential  
137 contralateral to an attended finger receiving subthreshold stimulation, see Forschack et al., 2017)  
138 with a power ( $1-\beta$  error probability) of 0.85 and an  $\alpha$  error probability of 0.05 using G\*Power (Faul et  
139 al., 2007). The required minimum sample size is 35, so we considered 36 subjects to be of an  
140 adequate size to study the P50 potential modulations for stimuli of different intensities including the  
141 range below absolute detection threshold (see below).

142

## 143 **2.2. Experimental Procedures**

### 144 *2.2.1. Somatosensory Stimulation*

145 Electrical finger nerve stimulation was applied by constant-current stimulators (DS7, Digitimer,  
146 Welwyn Garden City, Hertfordshire, United Kingdom). Single current pulses (quantified in  
147 milliamperes, mA) are adjusted to have a monophasic square wave shape of 200  $\mu$ s consistent with  
148 previous studies (Blankenburg et al., 2003; Forschack et al., 2017; Iliopoulos et al., 2014; Nierhaus et

149 al., 2015; Taskin et al., 2008). A custom-built interface to the DS7 allowed automatic adjustment of  
150 stimulation magnitudes in steps of 0.1 mA. Custom scripts running in the stimulation software  
151 “Presentation” (Neurobehavioral Systems, San Francisco, U.S.A.) triggered electrical pulses.  
152 Stimulator output was delivered through a pair of steel wire ring electrodes attached to the middle  
153 (anode) and the proximal (cathode) phalanx of the left index finger.

154

### 155 *2.2.2. Threshold Assessment and Task Design*

156 The experimental session comprised ten blocks (duration about 7 minutes per block) each starting  
157 with the threshold assessment. Every block contained 134 trials with or without stimulation (i.e.,  
158 1340 trials overall). Preceding each block, a trained experimenter manually assessed the individual  
159 ADTH with the same two-step procedure as in our previous studies (Forschack et al., 2017; Nierhaus  
160 et al., 2015). Briefly, this procedure applies one trial of ascending stimulation intensities and asks the  
161 participant to indicate a conscious sensation as soon as one emerges. In the second step, comprising  
162 30–60 trials (about 5 minutes), the experimenter presented current intensities (with a resolution of  
163 0.1 mA) around this roughly estimated detection threshold to find the lowest current intensity at  
164 which participants report a sensation in a yes/no-detection-task scheme. Importantly, the  
165 experimenter also applied trials without any stimulation (“catch trials”), in about 20 % of all trials to  
166 control for individual response tendencies. ADTH is then the smallest stimulus magnitude for which  
167 participant’s detection rate (“hit rate”) exceeds the false alarm rate of the catch trials.

168 Furthermore, suprathreshold intensity (STH) was individually adjusted to be the first that is  
169 perceived throughout all trials during a stimulus detection run. This assessment applied five different  
170 intensities above ADTH and separated by 0.1 mA (five repetitions for each and five catch trials) that  
171 remained constant for two minutes (method of constants). If no STH intensity could be identified,  
172 stimulation intensities were increased by 0.2 mA, and further stimulus detection runs were

173 conducted until STH criterion was reached. Finally, we defined six different intensities relative to the  
174 estimated ADTH and STH, which were then applied during the experimental blocks: two different  
175 subthreshold intensities (subTH-30%, subTH-15%, i.e., 70% and 85% of ADTH intensity, 420 trials  
176 each), the ADTH intensity (100 trials), two near-threshold intensities (NTH33%, NTH66%: 100 trials  
177 each), whose current intensities equally divided the distance (in mA) between ADTH and STH, as well  
178 as the STH intensity (100 trials). Note that the number of subthreshold trials is more than four times  
179 higher than for the other intensities to increase the signal-to-noise ratio for the subthreshold P50.

180 Participants were informed that on every trial they would either receive a detectable, undetectable  
181 stimulus or no stimulation at all, but that they always have to decide whether a stimulus was there  
182 or not (forced-choice Yes/No detection (1AFC) task). Trial duration was fixed to 3000 ms and started  
183 with gaze fixation at a centrally presented cross on a monitor screen in front of the participants. In a  
184 period of 1200 ms up to 2000 ms after fixation onset, either a single current pulse with one of the six  
185 individually defined intensities was presented pseudo-randomly (1240 trials) or no stimulation was  
186 applied (100 catch trials). Upon switch from fixation cross to question mark (i.e., at 3000 ms after  
187 fixation onset), participants indicated detection of a stimulus by pressing the left (“detected”) or the  
188 right button (“nothing detected”) of a response box with the index or middle finger of the right  
189 hand, respectively. The question mark either disappeared after 1000 ms or as soon as participants  
190 pressed either button; then a new trial started.

191

### 192 2.2.3. EEG acquisition

193 During 10 stimulation blocks each lasting roughly seven minutes, we recorded EEG continuously  
194 from 62 channels (61 scalp electrodes plus 1 electrode recording the VEOG below the right eye;  
195 actiCap, BrainAmp, Brain Products, Munich, Germany) attached according to the 10-10 system  
196 (Oostenveld and Praamstra, 2001), referenced to midfrontal electrode (FCz) and grounded to an

197 electrode placed at the sternum. Impedances were kept  $\leq 5 \text{ k}\Omega$  for all channels, sampling frequency  
198 2.5 kHz, analog filter low-cutoff at 0.1 Hz and high cutoff at 1000 Hz.

199 Data analysis was performed offline using the R framework (R Core Team, 2014, RRID:SCR\_001905)  
200 together with the RStudio front end (RStudio Team, 2012, RRID:SCR\_000432) and MATLAB  
201 (MathWorks, RRID:SCR\_001622) applying custom-built scripts and toolbox algorithms from EEGLAB  
202 (Delorme and Makeig, 2004, RRID:SCR\_007292).

### 203 2.3. Behavioral Analysis

204 Behavioral data were aggregated into hit- and false alarm rates (HR, FAR), i.e., the probability of  
205 responding “yes” when a stimulus was presented or responding “no” when there was no  
206 stimulation, respectively. Both measures are affected by the observer’s perceptual sensitivity to a  
207 stimulation intensity and an individual response tendency towards reporting or not reporting a  
208 signal independent of whether one is presented or not (Green and Swets, 1966; Kingdom and Prins,  
209 2009; Macmillan and Creelman, 2004; Swets, 1961, 1964). Therefore, perceptual sensitivity is  
210 calculated as  $d$ -prime (Macmillan and Creelman, 2004):

$$211 d' = z(\text{HR}) - z(\text{FAR}),$$

212 where the function  $z(x)$  is the inverse-normal transformation and converts hit and false alarm rates  
213 ranging from 0 to 1 to  $z$  scores having zero mean and a standard deviation of one. We used the “log-  
214 linear” method to account for extreme portions of the data (i.e., hit and false alarm rates of zero or  
215 one) and pooled trials across blocks for the calculation of  $d$ -prime values to minimize the method’s  
216 biasing effect with respect to the true value.

217 With a  $d$ -prime value of zero, observers are not able to discriminate a stimulus at all, i.e.,  $\text{HR} = \text{FAR}$ . A  
218 stimulus that exerts zero perceptual sensitivity, therefore, satisfies the condition of escaping  
219 conscious perception, because objective performance is at chance. For two reasons this situation,  
220 though, is hard to meet: 1.  $d$ -prime values of exactly zero cannot be achieved with limited and noisy

221 data sets. 2. Testing the null hypothesis (NH), as it is required for proving chance performance,  
222 cannot be accomplished by classical test theoretic procedures. Frequentist statistics are designed to  
223 reject the null and to be sensitive for the alternative hypothesis (Rouder et al., 2009). If the NH is  
224 true, p-values are equally likely and may take on any value between 0 and 1 (Rouder et al., 2009).  
225 Bayes factors, instead, evaluate the probability of the NH, i.e., chance performance, against the  
226 probability of the alternative given the observed data, i.e., the odds ratio. An odds ratio of two  
227 means that the NH is two times more likely than the alternative. We adopt the common convention  
228 by Lee and Wagenmakers (2013) that classifies odds ratios of more than three as moderate and  
229 more than ten as strong evidence in favor of the hypothesis in the numerator.

230 Bayes Factors are influenced by the distribution of prior probabilities across different effect sizes.  
231 For an objective statistical proof of chance performance exerted by subthreshold stimulation, we  
232 chose priors with minimal assumptions about the range of effect sizes under the alternative.  
233 Therefore, we applied the so-called JZS prior—a combination of the Cauchy distribution on effect  
234 size and the Jeffreys prior on variance (Rouder et al., 2009)—as it neither defines a specific effect  
235 size nor a single value for its variance under the alternative hypothesis. The JZS prior might be scaled  
236 when smaller or larger effect sizes are expected a priori (ibid.). However, here we consider a range  
237 of scales,  $r$ , to relax strong expectations about the effect size.

238 Stimulation conditions that did not exert a significant effect in  $d$ -prime in a one-sample  $t$ -test against  
239 zero were submitted to a Bayes factor analysis incorporating the JZS-prior (scaling factor  
240  $r=\sqrt{2}\approx 0.707$ ) to evaluate the evidence for the NH against the AH. This approach was implemented  
241 in R using the “BayesFactor”-package by Richard D. Morey. To estimate the effect of JZS prior scaling  
242 on the odds ratio, Bayes factor analysis was repeated for different  $r$  ranging from 0.1 to 1.5 putting  
243 relatively more weight on small to large effect sizes, respectively. The resulting Bayes Factors have  
244 been visualized using the statistics software JASP (JASP Team, 2018, RRID:SCR\_015823). In the  
245 current study, there were fewer catch trials (by a factor of four) than trials with subthreshold

246 stimulation intensities. Therefore, false alarm rates to the former were expected to show more  
247 variance above zero compared to hit rates to the latter. The z-transformation used for the  
248 calculation of  $d'$  values would further amplify this difference especially for response rates below 0.1  
249 that might result in biased  $d'$  values below zero. We, therefore, implemented Bayes factor analysis  
250 as a paired two-sample test of hit rates to subthreshold stimulation versus false alarm rates to catch  
251 trials. Note that this procedure is comparable to testing  $d'$  values against zero but results in a more  
252 conservative estimate of the true (null) effect. To check whether observers are still able to classify  
253 stimulation below ADTH,  $d'$  values for both subthreshold stimulation intensities were compared via  
254 paired Bayes factor test. Any bias to the  $d'$  values – as described above – would affect both  
255 conditions and, thus, is negligible.

256

## 257 **2.4. EEG Data Analysis**

### 258 *2.4.1 Preprocessing*

259 First, we applied a low-pass finite impulse response filter (high cut-off: 150 Hz, transition bandwidth:  
260 50 Hz) before downsampling the continuous EEG to 500 Hz.

261 Next, we ran the standardized early-stage EEG processing pipeline (PREP, Bigdely-Shamlo et al.,  
262 2015) on the downsampled data. This algorithm first removes 50 Hz line noise by subtracting a  
263 frequency domain regression model of the best-fitting deterministic sinusoid in the range of 48 to 52  
264 Hz estimated by a sliding window multi-taper approach (Mullen, 2012). Then, the algorithm re-  
265 referenced the continuous data to a robust average reference signal derived by iteratively detecting  
266 and interpolating noisy channels (interpolation based on all but the VEOG electrode). Next,  
267 individual datasets underwent independent component analysis (ICA, adaptive mixture of  
268 independent component analyzers (AMICA), Palmer et al., 2011) both to remove sources of ocular  
269 and muscle artifacts as well as signals of other non-neural origin (Chaumon et al., 2015; Delorme et

270 al., 2012; Li et al., 2006). Prior to ICA, datasets were prepared by applying the following procedures:  
271 training datasets for ICA were high-pass filtered with 1 Hz, all blocks were concatenated, and  
272 contiguous epochs of one second were extracted, corrected for average epoch potential, screened  
273 for non-stereotypical artifacts and rejected if contaminated. Then, an initial ICA was performed after  
274 which artifactual epochs were identified in ICA space using improbable data estimation on single and  
275 across all components and removed semi-automatically (function “pop\_jointprob”, threshold limit  
276 for single channels: 4.5 SD, threshold limit for all channels: 2.5 SD, Delorme et al., 2007). The  
277 resulting datasets were submitted to a second ICA (again using AMICA algorithm). We visually  
278 inspected the new set of components and identified artifactual components based on various  
279 features of IC topographies and time courses calculated by SASICA (Semi-Automated Selection of  
280 Independent Components of the electroencephalogram for Artifact correction, Chaumon et al.,  
281 2015). Specifically, we rejected components showing correlations with VEOG channel higher than 0.6  
282 or horizontal EOG (bipolarized potential of channel “FT7” and “FT8”) higher than 0.4, blink or eye  
283 movement typical topographies and IC source activity, abnormal frequency spectrum, i.e., high  
284 frequency or line noise, focal topographies as indicative of non-neural origin. Only the unmixing and  
285 sphering matrices of artifact-free components were forward-projected to high-pass filtered  
286 *continuous* datasets for the subsequent analysis steps (function “pop\_firws” Widmann et al., 2015;  
287 low cut-off of 0.1 Hz, Kaiser window, maximum passband deviation: 0.001 and transition bandwidth:  
288 0.02 Hz, resulting filter order/ length of 9056 data points estimated by the *pop\_firwsord* function).  
289 On average, 25 (5 SD) out of 57 (2 SD) components were rejected. The median rank of rejected  
290 components, when sorted by descending mean projected variance variance is 33 (i.e., artifactual  
291 components contain less variance of the data as compared to the retained components).

292 Data for SEP analysis was further low-pass filtered by a Kaiser windowed sinc finite impulse response  
293 filter with a high cut-off of 41 Hz (high cut-off maximum pass-band deviation: 0.0001 and transition  
294 bandwidth: 10.25 Hz, resulting filter order/ length of 124 data points). Proper epochs were cut from

295 the continuous channel signals ranging from -1200 to 3600 ms relative to stimulus onset ( $t=0$ ), from  
296 which the individual epoch mean was subtracted. Epochs exceeding the joint logarithmic probability  
297 of 4.5 or 2.5 SD within or across all independent components (i.e., including artifactual components),  
298 respectively, were discarded after manually reviewing the alleged artifactual epochs (Delorme et al.,  
299 2007). Additionally, trials that contained behavioral response within -800 to 800 ms relative to  
300 stimulus onset, as well as reaction times smaller than 150ms or higher than 1100ms, have been  
301 excluded. Finally, the following average number of trials per stimulation condition remained for the  
302 primary analyses: 374 (21 S.D.) subTH-30%, 371 (22 S.D.) subTH-15%, 90 (5 S.D.) ADTH, 90 (5 S.D.)  
303 NTH33%, 88 (6 S.D.) NTH-66%, 87 (6 S.D.) STH and 89 (5 S.D.) for catch trials. Linear detrending was  
304 applied to these remaining trials over a time range of -0.6–1.2 s to remove any sustained potential  
305 drifts.

306

#### 307 *2.4.2. Amplitude and latency extraction of SEP components and their statistical analysis concerning* 308 *stimulation intensity*

309 From our previous studies, we had strong a-priori hypotheses concerning the presence of the P50  
310 and N150 and, therefore, we focused our analyses on these components in the signal of the  
311 contralateral central “C4” electrode (Nierhaus et al., 2015; Forschack et al., 2017). A topographical  
312 test of the post-stimulus period (0–300 ms) averaged across all stimulation conditions compared to a  
313 pre-stimulus baseline ranging from -100 to 0 ms to stimulus onset was conducted to estimate the  
314 sensibility of this selection. For multiple comparisons correction (i.e., time and electrodes), we  
315 applied threshold-free cluster enhancement (TFCE) with a cluster threshold of  $p = 0.05$  (cluster size  
316 exponent  $E = 0.5$ , statistical intensity exponent  $H = 2$ , Mensen and Khatami, 2013; Smith and Nichols,  
317 2009). For this, topographical isocontour voltage maps of P50 and N150 component peaks are  
318 represented.

319 Baseline corrected (-100 to 0 ms) P50 and N150 SEP peak amplitudes and latencies of the stimulation  
320 condition averages were extracted for each participant as neural markers indicative of perceptual  
321 changes along the psychometric response function. To this end, we ran a peak and latency detection  
322 algorithm within time windows of interest: 32 to 76 ms for the P50 peak latency and 128 to 172 for  
323 the N150 peak latency, based on the SEP from the tfce permutation test (see above). Average  
324 maximal component amplitudes and latency values were plotted together with respective within-  
325 subject confidence intervals (Cousineau et al., 2005; Loftus and Masson, 1994; Morey, 2008).  
326 Pairwise two-tailed t-tests ( $p < 0.05$ ) were calculated for each stimulation condition pair and  
327 corrected for multiple comparisons using false discovery rate (fdr,  $q = 0.05$ , Benjamini and Hochberg,  
328 1995; Genovese et al., 2002). Additionally, we performed one post-hoc t-test on the time-course of  
329 the averaged subTH SEP against baseline to reveal potential further components following P50 (fdr-  
330 corrected).

331

332 The six different stimulation intensities were fixed within each block. To test whether detected and  
333 rejected trials are comparable with regard to stimulation intensities across blocks, we calculated  
334 average stimulation current for each participant and stimulation condition, separately for all trials  
335 classified being detected and rejected, respectively. Resulting values were subjected to a paired one-  
336 sample *t*-test.

337

### 338 2.4.3. Rolandic Rhythms

339 To discern Rolandic rhythms from occipital alpha activity, we used an a priori selection of central  
340 contralateral electrodes ("C2", "C4", "C6", "CP2", "CP4", and "CP6"), based on the electrodes found  
341 to be predictive for somatosensory masking (Schubert et al., 2008). For this, we convolved every trial  
342 of each stimulation condition with complex Morlet wavelets tuned to include 5.5 cycles of

343 frequencies ranging from 4 to 42 Hz. Frequency bands of interest were defined based on the results  
344 by Schubert et al. (2008). However, neighboring alpha and beta bands in Schubert and colleagues  
345 (2008) were slightly overlapping. We, therefore, redefined frequency bands of interest to be more  
346 distinct. I.e., the alpha band ranged from 9 to 14 Hz and the beta band from 20 to 30 Hz. Wavelet  
347 parameters resulted in the following frequency and time smoothing: 3.85 Hz at full-width-half-  
348 maximum (FWHM) and 114.5ms (+/- FWHM) at 9 Hz; 5.99 Hz (FWHM) and 73.6 ms (+/- FWHM) at 14  
349 Hz; 8.56 Hz (FWHM) and 51.5 ms at 20 Hz (+/- FWHM). The pre-stimulus window that was going to  
350 be tested for its relation to stimulus detection, we chose it to be as close as possible to stimulus  
351 presentation but without smearing into the post-stimulus window; i.e., this window should not  
352 include latencies higher than -114.5 ms relative to stimulus onset for the 9 Hz frequency response.  
353 This procedure avoids that power from the stimulus related SEPs leak into the pre-stimulus window.  
354 This window we defined from -400 to -150 ms relative to stimulus onset for all analyzed frequencies,  
355 which is congruent with the time window in which Schubert and colleagues (2008) found the  
356 frequency band effects. Statistical analysis was performed by testing the pre-stimulus time-  
357 frequency-band-of-interest response of the central contralateral and frontal electrode cluster for  
358 detected versus rejected stimulation (NTH66% and STH only) with cluster-based two-tailed paired *t*-  
359 tests (*p*-level was set to 0.01 and corrected for multiple comparisons by tfce, Mensen & Khatami,  
360 2013).

361

#### 362 *2.4.4. Prediction of stimulus detection by SEP amplitude and latency and Rolandic alpha and beta* 363 *amplitude*

364 To identify neural markers generally predictive for stimulus detection, we calculated SEPs separately  
365 for detected and rejected finger pulses at the same central contralateral electrode cluster (see  
366 above) and averaged these across NTH66% and STH stimulation intensities. Specifically, we tested  
367 whether P50 and N150 latency and amplitude are predictive for behavioral classification. To this

368 end, we applied binomial regularized logistic regression together with six-fold cross-validation  
369 (James et al., 2015) to select the essential neural markers for stimulus detection. This procedure  
370 selects the best model out of a set of regressors. Regularization was achieved by adding the so-called  
371 lasso penalty—or  $\ell_1$  norm—to the standard maximum-likelihood model coefficient optimization. The  
372 influence of this penalty was controlled by the tuning parameter  $\lambda$  ranging from 0 to 100, where zero  
373 puts no penalty on the coefficients of the full model and corresponds to standard generalized linear  
374 modeling (glm). With increasing  $\lambda$ , regressor coefficients are shrunk towards zero depending on their  
375 predictive value for behavioral response classification; thus, the higher  $\lambda$ , the simpler the model. For  
376 model selection, we chose the model that shows the smallest cross-validation error (CVE) across all  
377  $\lambda$ . Model fit was further evaluated by statistically evaluating classification accuracy with one-sided  
378 binomial tests against 0.5 (i.e., 50% accuracy for random choices).

379 To assess a probable influence of pre-stimulus Rolandic rhythms on neural markers of stimulus  
380 processing and detection, i.e., SEPs, we averaged spectral amplitudes within the alpha- (9 to 14 Hz)  
381 and beta band (20 to 30 Hz) for each participant and those time-frames that showed the peak  
382 significant difference between detected and rejected trials for averaged near-threshold stimulation  
383 conditions (i.e., NTH66% and STH). After normalizing to the individual condition means (Cousineau et  
384 al., 2005), these oscillatory amplitudes were added as additional predictors to the mentioned model  
385 and were allowed to interact with the P50 and N150 amplitude. Again, we used 6-fold cross-  
386 validation in order to identify the optimal tuning parameter for regularization of the logistic  
387 regression model. Regularized logistic regression was implemented with the “glmnet” package in R  
388 (Friedman et al., 2010).

389 As we find a difference in average stimulation intensities for the STH stimulation condition (reported  
390 later), the observed effects on prediction might be confounded by the physical stimulation intensity.  
391 Thus, we partialled out the shared variance of stimulus intensity and SEP amplitude to control for this  
392 potential bias and re-ran the forgoing analysis. For this, we normalized every NTH66 and STH

393 stimulation intensity for detected and rejected trials relative to the individually maximum  
394 stimulation current (either detected or rejected trials) so that normalized intensity values were  
395 either one or less. These normalized intensities correlate moderately with P50 amplitude (0.22). The  
396 variance of the normalized intensities was then paritaled out from each neural marker that we used  
397 in the regression and ANOVA models (see next section) by calculating a linear regression for the  
398 neural marker on normalized stimulation intensity and storing the residuals of the individual model  
399 fits. These residuals were then taken as new predictors in the regularized regression analysis and  
400 dependent variables in the ANOVA.

401 *2.4.5. Statistical analysis concerning the interaction of stimulation intensity and pulse detection for*  
402 *SEP and Rolandic rhythm amplitudes*

403 We tested the effect of stimulus detection and stimulation intensity on somatosensory  
404 electrophysiological response strength by calculating SEPs separately for detected and rejected  
405 trials. Average potentials were required to consist of, at least, seven trials per condition to assure  
406 reasonable noise reduction. The majority of participants (N=22) had less than seven detected trials  
407 for stimulus intensities below NTH66%. Therefore, only NTH66% and STH trials were analyzed  
408 subsequently, and data of four additional participants had to be rejected for falling below this trial  
409 threshold in the remaining stimulation conditions, resulting in on average 25 (13 SD) and 68 (10 SD)  
410 detected and 64 (14 SD) and 19 (8 SD) rejected trials for NTH66% and STH stimulation intensities.  
411 P50 and N150 amplitudes of the remaining 32 participants were subjected to a 2 x 2 repeated  
412 measures ANOVA's with factors "detection" (stimulus detected vs. rejected) and "stimulus intensity"  
413 (STH vs. NTH66%). ANOVA statistics and bootstrapped confidence intervals (resampling of subject  
414 indices for each condition with 10,000 iterations) were computed with the ez-package developed by  
415 Mike Lawrence (2013, version 4.2-2, <https://github.com/mike-lawrence/ez>). Effect sizes were  
416 quantified as generalized eta-squared ( $\eta^2_G$ , Bakeman, 2005).

417 We conducted similar repeated measures ANOVAs for the pre-stimulus alpha and beta amplitude on  
 418 stimulus detection as for the SEP potentials with the factors “detection” and “stimulus intensity” to  
 419 test a potential effect of covariates introduced by post-hoc condition sorting into detected and  
 420 rejected trials. To be clear, any detection related effect through pre-stimulus oscillatory amplitude  
 421 differences should be present for both stimulation intensities. If not, this could point to the  
 422 confounding influence of another variable for which the experimental design does not control.

423

### 424 3. Results

#### 425 3.1. Behavioral responses

426 Table 1 lists the mean intensity of electrical stimuli across all subjects for the six conditions,  
 427 respectively.

428

| CONDITION             | subTH<br>(-30%) | subTH<br>(-15%) | ADTH      | NTH<br>33% | NTH<br>66% | STH       |
|-----------------------|-----------------|-----------------|-----------|------------|------------|-----------|
| <b>M (mA)</b>         | 1.12            | 1.35            | 1.59      | 2.01       | 2.42       | 2.84      |
| <b>SD (mA)</b>        | 0.41            | 0.51            | 0.59      | 0.61       | 0.67       | 0.75      |
| <b>Range (mA)</b>     | 0.47–2.03       | 0.52– 2.5       | 0.66–2.91 | 0.91–3.39  | 1.11–3.87  | 1.24–4.35 |
| <b>Rel. Intensity</b> | 0.70            | 0.85            | 1         | 1.3        | 1.6        | 1.9       |

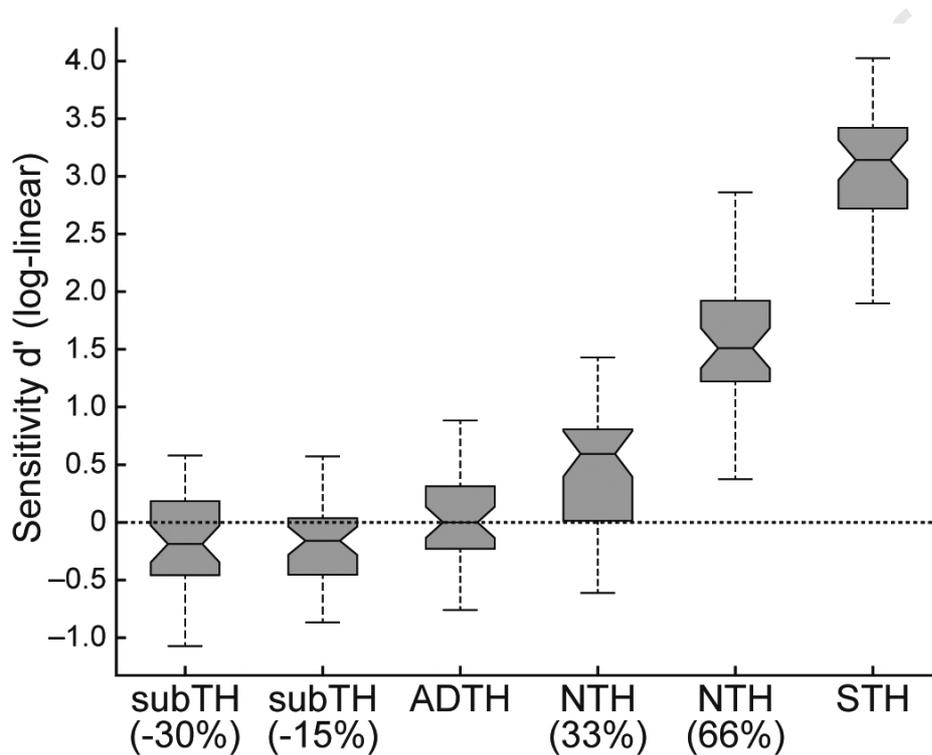
429

430 **Table 1. Average electrical current in milliamper (mA) for all stimulation conditions. For the relative**  
 431 **intensities, stimulation magnitudes were normalized to ADTH. subTH = subthreshold, ADTH = absolute**  
 432 **detection threshold, NTH = near threshold, STH = supra threshold, M = mean, SD = standard deviation.**

433

434 Participant's sensitivity to single electrical current pulses increased, as expected, with the  
 435 stimulation intensity from ADTH to STH (ADTH:  $d'=0.05$ ;  $t(35)=0.82$ ;  $p=0.21$ ; NTH33%:  $d'=0.48$ ;  
 436  $t(35)=5.81$ ;  $p<0.000001$ ; NTH66%:  $d'=1.53$ ;  $t(35)=16.87$ ;  $p<1.0*10^{-15}$ ; STH:  $d'=3.03$ ;  $t(35)=34.77$ ;  
 437  $p<1.0*10^{-15}$ ). Subthreshold stimulation trials, however, exerted  $d'$  values close to zero (Figure 1;  
 438 subTH-30%:  $d'=-0.16$ ; subTH-15%:  $d'=-0.19$ ; all  $t(35)<-2.5$ ).

439

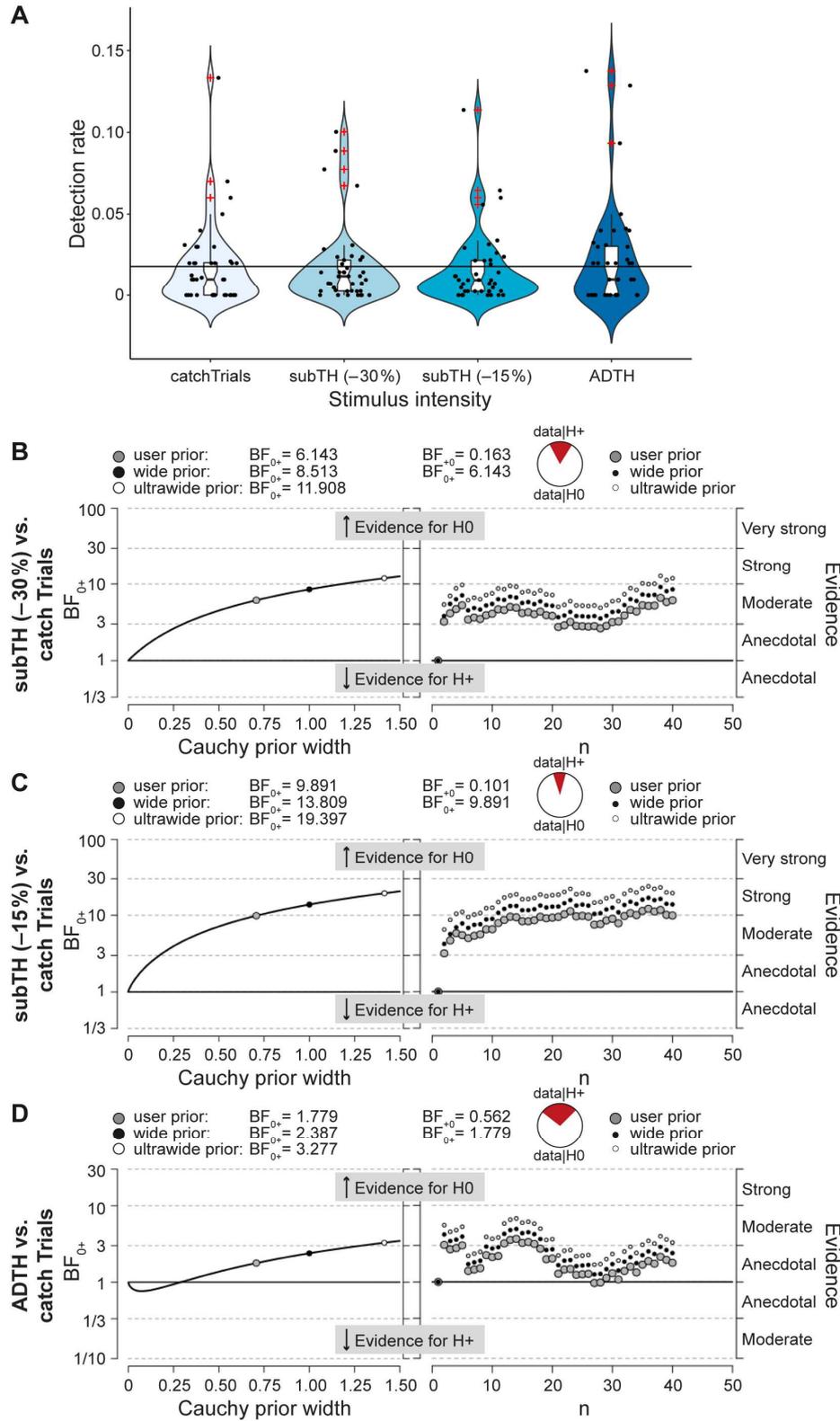


440

441 **Figure 1. Boxplots depict individually group-averaged  $d'$ -prime values for the six different**  
 442 **stimulation intensity categories showing that participants are zero sensitive to stimulation**  
 443 **intensities below the individually adjusted absolute detection threshold (ADTH). Subthreshold**  
 444 **(subTH) stimulation intensities were individually adjusted to 15% and 30% below ADTH. Near-**  
 445 **threshold (NTH) intensities were tuned to 33% and 66% of the distance between ADTH and supra**  
 446 **threshold (STH) intensity. Raw hit and false alarm rates were corrected according to Hautus (1995)**  
 447 **to account for extreme values (i.e., no responses to target or catch trials). Notches indicate 95%**  
 448 **confidence intervals.**

449

450  $D$ -prime of ADTH intensities and below are not significantly higher than zero. This null-difference is,  
451 however, not proof of chance performance and therefore evidence for the Null hypothesis (NH) was  
452 evaluated against evidence for the alternative hypothesis of above chance performance by Bayes  
453 factor statistics (Rouder et al., 2009). As subthreshold intensities might suffer from oversampling  
454 compared to catch-trials, the  $z$ -transformation of low “yes”-response rates would artificially amplify  
455 any difference between both conditions concerning  $d'$  values. Thus, Bayes factors are calculated as  
456 paired one-sample one-sided test of the hit against false alarm rates and confirm chance  
457 performance with moderate to strong evidence in favor for the NH (FAR=0.018; subTH-30%:  
458 HR=0.018,  $BF_{01}$ =6.1; subTH-15%: HR=0.016,  $BF_{01}$ =10.8). Widely different scaling of the JZS prior  
459 revealed that evidence for the null hypothesis, i.e., chance performance after subthreshold  
460 stimulation, outweighs evidence for the alternative for virtually all prior widths between 0.1 and 1.5  
461 (*Figure 2 b-c, left*). Evidence for the ADTH data is mixed: the posterior odds favor the alternative  
462 when the expected effect size is small (i.e., narrow prior,  $r=0.0757$ ) as compared to when the prior  
463 weights bigger effects more strongly (wide prior, *Figure 2 d, left*). Sequential tests show that the  
464 Bayes Factor reliably favors the NH across different sample sizes.



465

466 **Figure 2. A: Distributions of “yes”-response rates across all participants (dots) for those stimulation**  
 467 **conditions for which d-prime values were not different from zero and the condition without**  
 468 **stimulation (catch trials). The horizontal black line indicates the average false alarm rate. B-D:**

469 **Bayes factor tests of hit rates of subTH-30% (B), subTH-15% (C) and ADTH (D) stimulus intensities**  
470 **against catch trial condition. Evidence for the null hypothesis (hit rates not different from false**  
471 **alarm rates) against the alternative hypothesis (hit rates greater than false alarm rates) along**  
472 **various Cauchy prior widths (left) is depicted as likelihood values higher than one. The grey filled**  
473 **circle marks the prior width used in the main analysis. On the right, sequential tests show**  
474 **evidence accumulation when adding single participants until the final sample size for three**  
475 **different prior widths. For subthreshold intensities, there is at least moderate evidence favoring**  
476 **the null hypothesis for all sample sizes.**

477

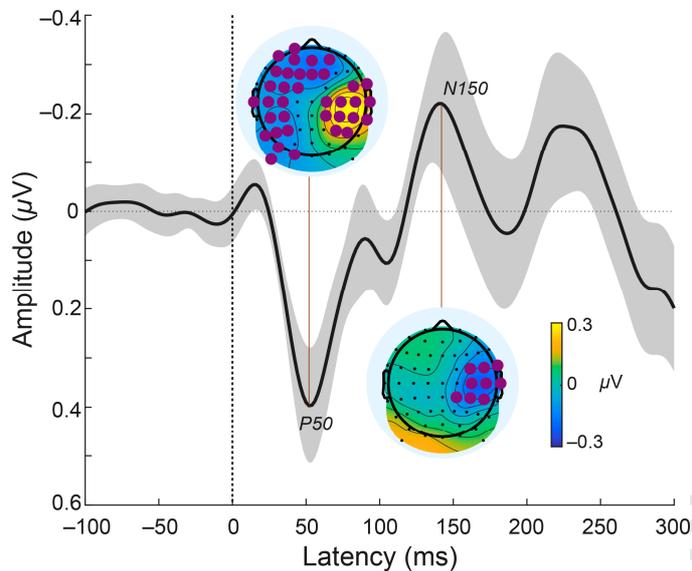
478 To test further evidence for the NH, we calculated a Bayes factor meta-analysis (Rouder and Morey,  
479 2011) based on the current detection rates of subthreshold stimulation intensities and a similar but  
480 independent psychophysics dataset published in Forschack et al. (2017). Accumulated evidence  
481 moderately to strongly favors chance performance for subthreshold stimulation magnitudes ( $r=\sqrt{2}/2$ ,  
482 subTH-30%:  $BF_{01}=6.73$ , subTH-15%:  $BF_{01}=12.18$ ). The Bayes factor for the comparison between  $d'$   
483 values of stimulation magnitudes 85% against 70% of ADTH electrical current (JZS prior width  
484  $r=\sqrt{2}/2$ ) revealed that there is 8.14 times more evidence that perceptual sensitivity to the higher  
485 subthreshold intensity (subTH-15%) is equal to the lower intensity (subTH-30%) as compared to the  
486 alternative hypothesis.

487

### 488 *3.2. SEP amplitudes and latencies change along the psychometric function*

489 The grand-average SEP across all stimulation conditions over contralateral central electrode sites  
490 (Figure 3) shows a positive and negative deflection that peaked at 52ms (P50) and 142ms (N150)  
491 after stimulus onset, respectively. Statistical comparison of the post-stimulus window (0 to 300 ms)  
492 against pre-stimulus baseline (-100 to 0 ms) via TFCE showed two lateralized cluster being significant

493 for the P50 and a contralateral cluster of electrodes being significant for the N150. As our a-priori  
 494 electrode selection for SEP analysis matched the result of the permutation test, we went on  
 495 analyzing C4 for all further statistical tests concerning the SEP.

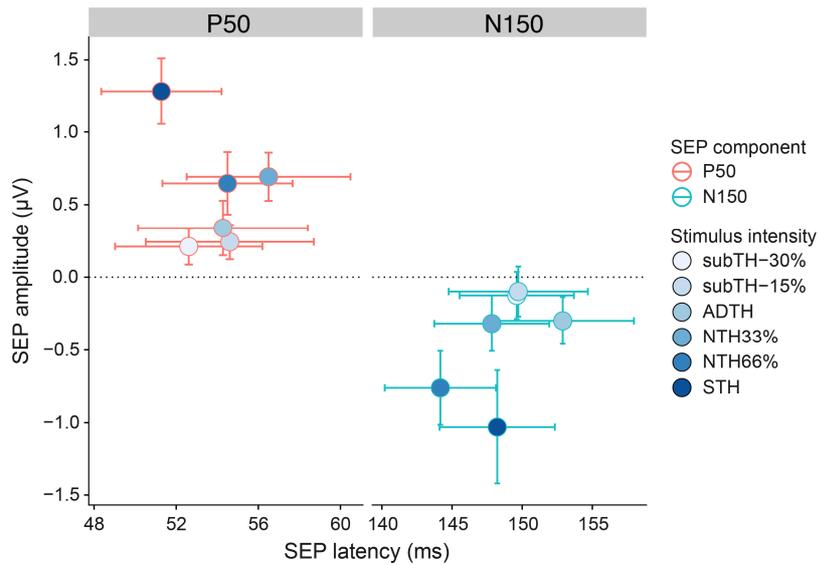


496

497 **Figure 3: Grand-average SEP waveform at C4 across all stimulation conditions together**  
 498 **with topographic voltage maps for the P50 and N150, respectively. Shaded areas around**  
 499 **the curve represent 95% confidence intervals of a running t-test for each time point**  
 500 **against baseline. Purple colored electrodes in the topographic maps mark significant**  
 501 **voltage changes compared to baseline at the indicated time point tested with a non-**  
 502 **parametric permutation test (10000 iterations) of the time window from 0 to 300 ms post-**  
 503 **stimulus. Correction for multiple comparisons achieved by tfce (Mensen & Khatami,**  
 504 **2013).**

505

506 Imperceptible stimulation ( $d$ -prime around 0, both subTH-30%, and subTH-15%) elicited a P50 after  
 507 stimulation, but no N150. In contrast, above threshold stimulation evoked both components (*Figure*  
 508 4).



509

510 **Figure 4: Grand-averaged SEP amplitudes and latencies resulting from individual peak**  
 511 **selection. Colored circles represent the sample average, for the P50 and N150,**  
 512 **respectively. Circle filling color corresponds to the stimulation condition. Error bars based**  
 513 **on within-subject error (i.e., between-subject variance removed, according to Morey,**  
 514 **2008), both for amplitude (vertical bars) and latency (horizontal bars) at 95% of statistical**  
 515 **confidence.**

516

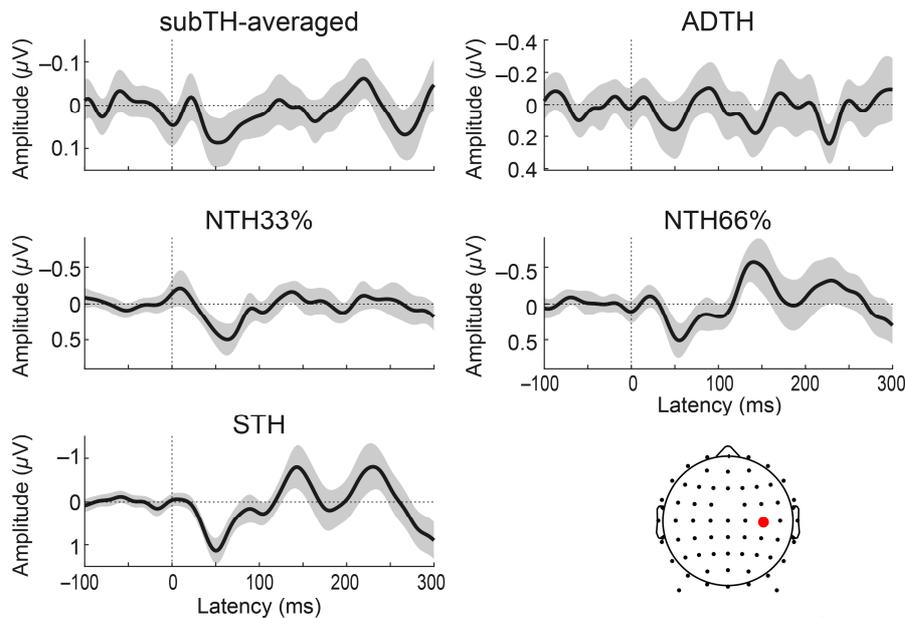
517 Generally, both P50 and N150 component peak amplitudes were largest for the highest and lowest  
 518 for the smallest stimulation intensity, respectively. In *Figure 4*, sample means for each condition are  
 519 plotted together with within-subject 95%-confidence intervals, so that significant differences are  
 520 directly observable. Pairwise  $t$ -tests for all possible intensity pairs revealed significant P50 amplitude  
 521 differences ( $fdr$ -corrected) from both subthreshold intensities to all above threshold intensities (all  
 522  $t(35) < -3.1$ ,  $p_{fdr} < 0.01$ ) but no difference was observed to the ADTH intensity (all  $t(35) > -1.35$ ). ADTH  
 523 P50 amplitude was significantly smaller than NTH33% and STH ( $t(35) < -2.8$ ,  $p_{fdr} < 0.02$ ), however, the  
 524 amplitude difference to NTH66% was not significant ( $t(35) = -1.85$ ). Both NTH33% and NTH66% P50  
 525 amplitudes were significantly smaller than P50 amplitude of STH (all  $t(35) < -4$ ,  $p_{fdr} < 0.001$ ). No

526 statistical difference was observed between the P50 amplitudes of the subthreshold stimulation  
527 conditions (subTH-30%-subTH-15%:  $t(35) = -0.77$ ,  $p_{fdr} = 0.48$ ) and the near-threshold conditions  
528 (NTH33%-NTH66%:  $t(35) = 0.36$ ,  $p_{fdr} = 0.72$ ).

529 Estimates of N150 amplitudes of the subthreshold stimulation conditions were not different from  
530 zero and therefore significantly smaller than all other N150 amplitudes of the above threshold  
531 stimulation conditions (all  $t(35) \geq 2.2$ ,  $p_{fdr} \leq 0.04$ , except for the subTH-30%-ADTH difference:  $t(35) =$   
532  $1.92$ ,  $p_{fdr} = 0.08$ ). There was no significant difference between ADTH and NTH33%, as well as  
533 between NTH66% and STH N150 amplitudes (all  $t(35) \leq 1.35$ ). All other above threshold stimulation  
534 conditions differed significantly in N150 amplitude (all  $t(35) > 2.5$ ,  $p_{fdr} < 0.03$ ).

535 In two previous studies (Forschack et al., 2017; Nierhaus et al., 2015), we noticed a P50 latency shift  
536 for subTH-15% compared to STH stimulation intensities but did not explicitly test this difference.  
537 Here, a direct test of the two conditions was not significant ( $t(35) = 1.4$ ,  $p = 0.17$ ). P50 of NTH33%  
538 stimulation intensity peaked significantly later than P50 of STH ( $t(35) = 2.05$ ,  $p = 0.048$ ). However,  
539 no test survived correction for multiple comparisons when all possible condition combinations were  
540 tested ( $-1.5 < t(35) < 1.6$ ). N150 latencies were significantly different only for the peak latency  
541 comparison between ADTH and NTH66% ( $t(35) > 2.97$ ,  $p_{fdr} < 0.01$ , all other:  $-1.4 < t(35) < 1.9$ ).

542 The SEP waveforms of the different stimulation conditions are shown in *figure 5*. The post-hoc *t*-test  
543 of the averaged subTH waveform against baseline showed no significant components ( $p_{fdr} \geq 0.05$ ).



544

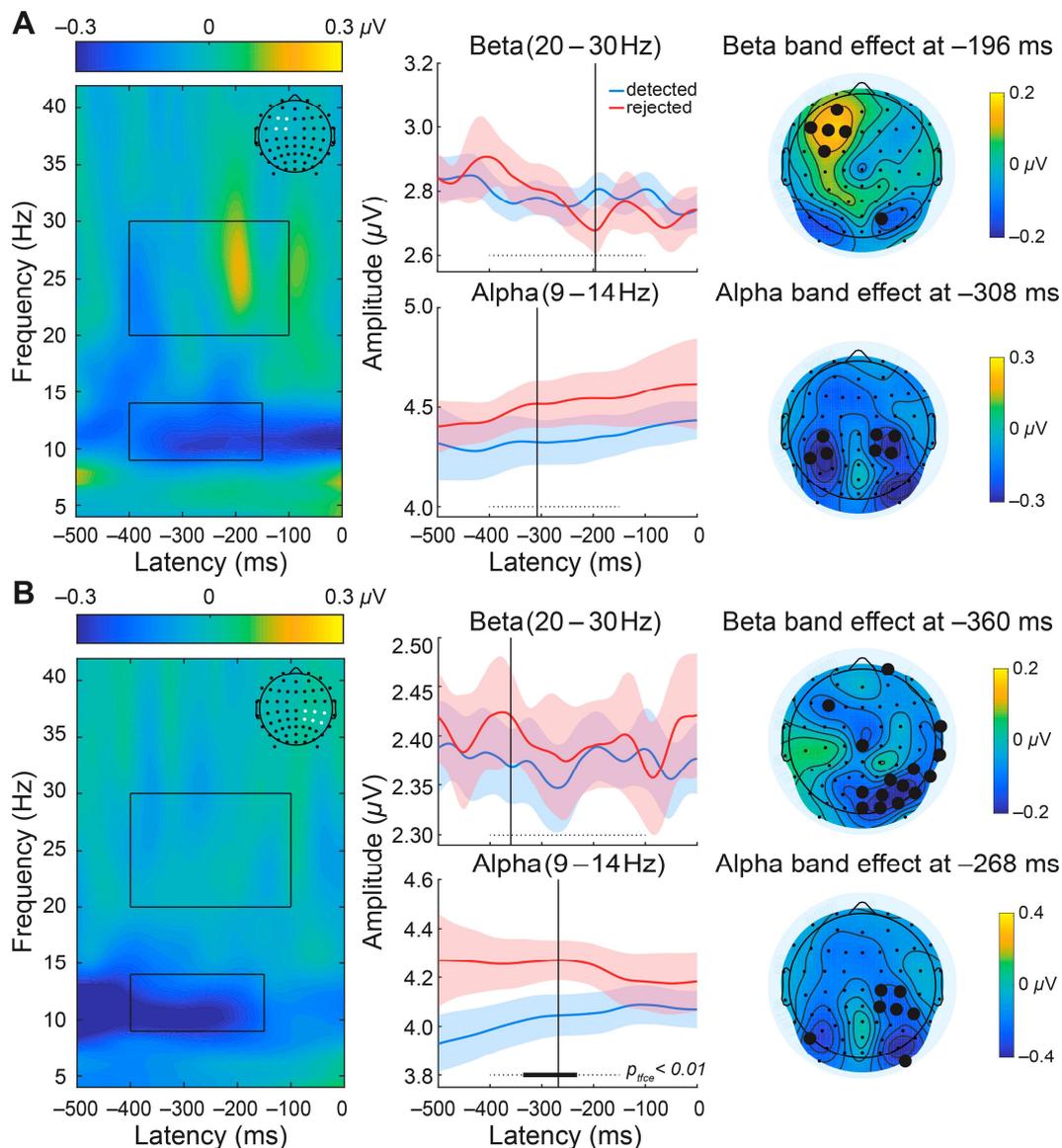
545 **Figure 5: Grand average SEP waveforms for all stimulation conditions at contralateral C4**  
 546 **electrode as indicated by the red dot in the bottom right plot. Shaded areas around the**  
 547 **curve represent 95% confidence intervals of a running  $t$ -test for each time point against**  
 548 **baseline. subTH-averaged: all trials with stimulus intensities below absolute detection**  
 549 **threshold (ADTH). Note the different ordinate scaling.**

550

### 551 3.3. Pre-stimulus Rolandic rhythms predict stimulus detection

552 We assessed the overall effect of pre-stimulus alpha (9–14 Hz), and beta band (20–30 Hz) amplitudes  
 553 on near-threshold stimulus detection by comparing the averaged STH and NTH66% stimulation  
 554 conditions between detected and rejected stimuli at a contralateral central and an ipsilateral frontal  
 555 electrode cluster. As depicted in *Figure 6*, the difference in beta-band amplitude did not survive  
 556 correction for multiple comparisons at a  $p$ -level of 0.01. However, according to Schubert and  
 557 colleagues (2008), who found a frontal electrode cluster showing a significant beta-band amplitude  
 558 difference around 200 ms preceding detected and rejected stimuli, we had a strong a priori  
 559 hypothesis about where and when pre-stimulus beta-band amplitude differs with respect to

560 stimulus onset. In fact, the frontal beta amplitude here was significantly larger 196ms preceding  
 561 detected stimuli (indicated as vertical line in *Figure 6a*, upper-middle panel,  $t(35) = 2.74$ ,  $p < 0.01$ ,  
 562 uncorrected) as compared to rejected stimuli. When testing it with a two-way repeated-measures  
 563 ANOVA modeling the factors “detection” (detected vs rejected) and “time” (-400 to -100 ms) as  
 564 indicated by none-overlapping confidence intervals of figure 6a (upper middle panel), the peak  
 565 difference was still significant.



566

567 **Figure 6: Grand average pre-stimulus oscillatory amplitude effects on subsequent stimulus**

568 **detection for an ipsilateral frontal (A) and contralateral central electrode cluster (B) and a**

569 **time window of interest according to Schubert et al. (2008). Left panels: Time-frequency**  
570 **amplitude difference of averaged NTH66% and STH stimulation conditions at the averaged**  
571 **frontal (A) and central (B) electrode cluster, respectively, highlighted as white dots in the**  
572 **topographic map insets. Black boxes mark the a-priori defined time-frequency-windows**  
573 **for subsequent statistical analysis of alpha- and beta band responses, respectively. Middle**  
574 **panels: Grand average Alpha- and beta band pre-stimulus time courses preceding**  
575 **detected and rejected stimuli. Average values are plotted together with within-subject**  
576 **confidence intervals according to Cousineau et al. (2005) and Morey (2008) at a 95%**  
577 **confidence level. Horizontal dotted line indicates a paired  $t$ -test, thresholded at  $p = 0.01$ ,**  
578 **and cluster-corrected for multiple comparisons with tfce (Mensen & Khatami, 2013). The**  
579 **bold line depicts the period with amplitude differences exceeding this threshold. Vertical**  
580 **lines indicate the amplitude difference showing the smallest  $p$ -value, subsequently used**  
581 **for representing the topographic changes across all electrodes. Right panels: Topographic**  
582 **amplitude difference at the most prominent time point (indicated by the vertical lines of**  
583 **the middle part of the figure) for both alpha- and beta band. Thick black electrodes**  
584 **showed a difference at an uncorrected  $p$ -level of 0.05. No test survived multiple**  
585 **comparisons correction.**

586

587 Furthermore, there is a pronounced alpha-band amplitude difference with alpha being lower for  
588 successively detected stimuli as compared to rejected stimuli that survive multiple comparison  
589 correction at  $p < 0.01$  for a time range that extended from -336 to -232 ms relative to stimulus onset  
590 (lower middle part of *Figure 6*). Topographic maps (right panels of *Figure 6*) depict beta- and alpha-

591 band scalp amplitude distributions for the time-frame with the smallest (uncorrected)  $p$ -values  
592 (indicated by the vertical line in the middle panels of *Figure 6*).

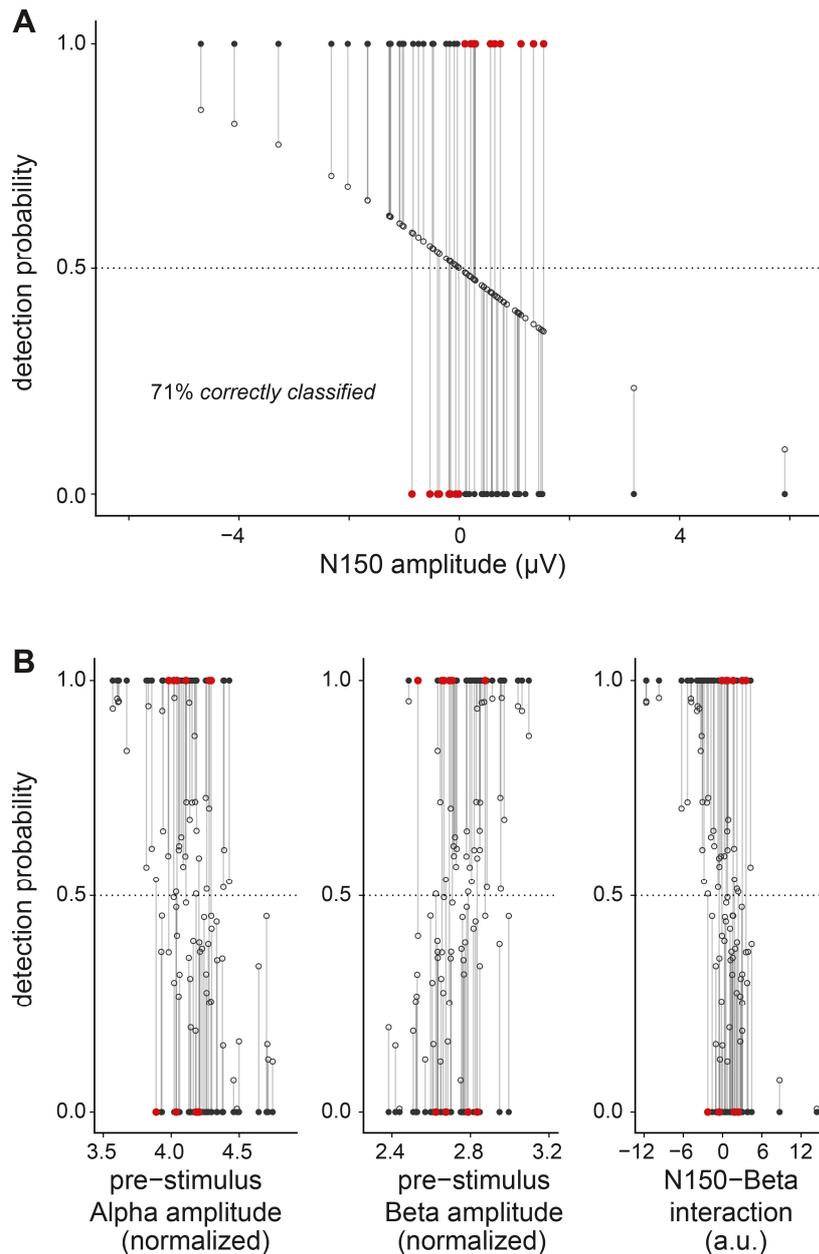
593

#### 594 *3.4. N150 amplitude and pre-stimulus Rolandic rhythms best explain stimulus detection*

595 To assess whether additional neural features besides the amplitude of the respective SEP  
596 component are relevant for stimulus detection and rejection, we ran regularized binomial logistic  
597 regression models including both amplitude and latencies of the P50 and N150. The model with the  
598 smallest cross-validation error (CVE) only contains N150 amplitude as a regressor for stimulus  
599 detection and is accurate in 71% of the tested cases ( $p < 0.001$ , *Figure 8 top*). Model complexity was  
600 reduced by shrinking the non-predictive coefficients (N150 latency as well as P50 amplitude and  
601 latency) to zero.

602 As we noticed in the previous analysis that pre-stimulus central alpha amplitude is higher during  
603 rejected stimulation than during detected stimulation and frontal beta amplitude is lower during  
604 rejected stimulation than during detected stimulation, we included both as a factor in the binomial  
605 regression model and allowed them to interact with the P50 and N150 amplitude. Interestingly, the  
606 model with the smallest CVE was accurate in 86% of the cases, contained alpha, and beta amplitude  
607 as main regressors and a beta - N150 amplitude interaction regressor (*Figure 8, bottom*). That is,  
608 alpha amplitudes are inversely correlated with detection, whereas higher beta amplitudes are  
609 associated with detected stimuli. The interaction between N150 and beta amplitude signifies that a  
610 reduction in both measures goes in hand with rejected stimuli.

611



612

613 **Figure 7: Detection probability predicted by the lasso regularized binomial logistic**614 **regression showing the smallest cross-validation error (empty circles) together with the**615 **actual subject-level response data (filled circles). A: Response prediction when only SEP**616 **features were included as predictors, i.e. P50 and N150 amplitude and latency. Winning**617 **model only contains N150 amplitude as significant regressor for behavioral responses.**618 **Grey lines represent the model error, the shorter the better. Black circles correspond to**619 **correctly, red circles to incorrectly classified responses. B: Winning model when including**

620 **pre-stimulus central alpha and frontal beta amplitudes averaged at 268 ms and 196 ms,**  
621 **respectively, preceding detected and rejected stimuli. This model correctly classifies 86%**  
622 **of the cases. Between subject-variance was removed for alpha and beta band amplitude**  
623 **values in order to center them along the behavioral response differences.**

624

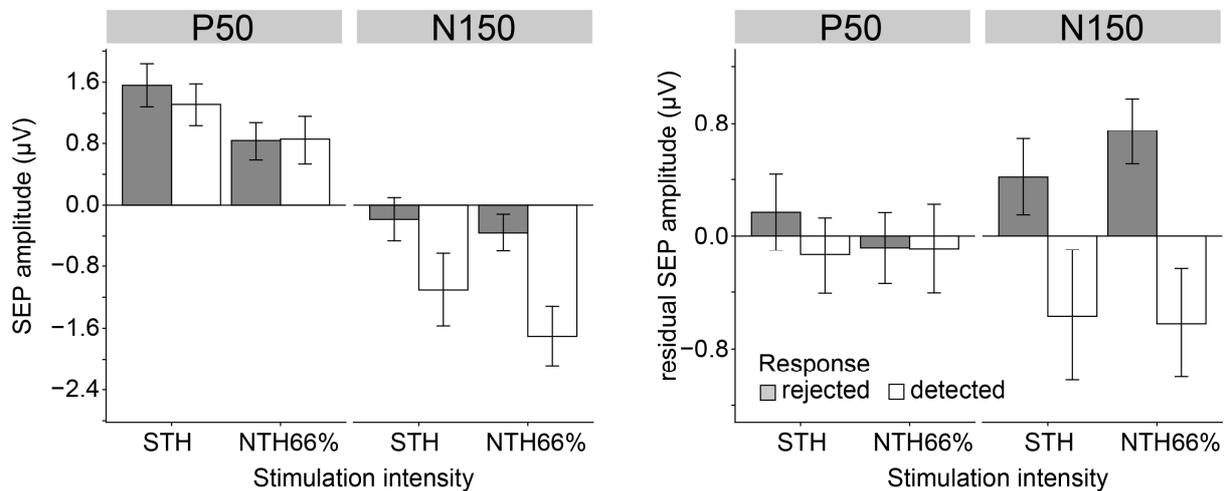
### 625 *3.4 P50 amplitude is sensitive for stimulation intensity but not detection*

626 To test the influence of stimulation intensity and detection on the early event-related potential, we  
627 modeled P50 and N150 amplitudes following detected and rejected NTH66% and STH stimulation  
628 intensities in a repeated measures design. The ANOVA revealed a significant main effect of  
629 stimulation intensity on P50 amplitude ( $F(1,31) = 15.2, p = 0.0005, \eta_G^2 = 0.07$ ), but interestingly,  
630 neither the effect of detecting a successive stimulus ( $F(1,31) = 0.57$ ) nor the interaction of intensity  
631 and detection was significant ( $F(1,31) = 0.62$ ). In contrast, the detection of a successive stimulus  
632 showed a pronounced effect on the N150 amplitude (*detection*:  $F(1,31) = 32.97, p = 0.00001, \eta_G^2 =$   
633  $0.16$ ), but neither stimulation intensity ( $F(1,31) = 3.83, p = 0.06, \eta_G^2 = 0.06$ ), nor the intensity-  
634 detection-interaction ( $F(1,31) = 1.56, p = 0.22, \eta_G^2 = 0.006$ ) was significant. As depicted in *Figure 8a*,  
635 all stimulation conditions resulted in a measurable P50. This is also true for the N150—except for  
636 rejected STH intensities—as indicated by the bootstrapped confidence intervals.

637 Average stimulation intensities across blocks differed significantly between detected and rejected  
638 trials for the STH stimulation condition ( $M_{detected} = 2.84$  mA,  $M_{rejected} = 2.79$  mA,  $t(31) = 3.53, p =$   
639  $0.0013$ , maximum difference: 0.23 mA, i.e., two step sizes of the constant current stimulator,  
640 median difference: 0.04 mA), but not for NTH66% ( $M_{detected} = 2.43$  mA,  $M_{rejected} = 2.42$  mA,  $t(31) =$   
641  $1.26, p = 0.22$ , maximum difference: 0.17 mA, median difference: 0.04 mA). However, after  
642 partialing out stimulation intensity variance from the SEP measures, P50 amplitude vanished for all

643 factors (*Figure 8b*, all  $F(1,31) < 1.06$ ) but the effect of detection on N150 amplitude prevailed ( $F(1,31)$   
 644 = 33.52,  $p < 0.00001$ ,  $\eta_G^2 = 0.17$ , all other  $F(1,31) < 1.32$ ).

645



646

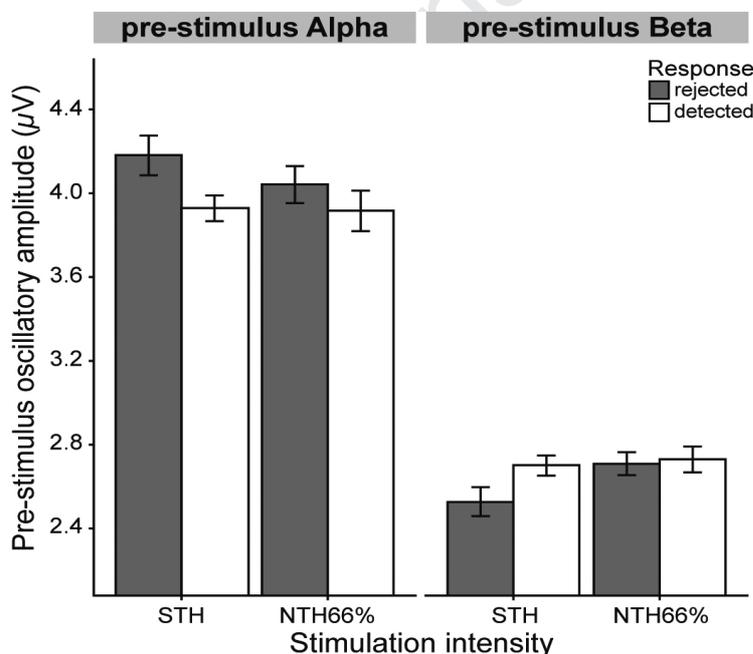
647 **Figure 8: Left: Grand mean P50 and N150 amplitudes for the strongest stimulation**  
 648 **intensities (NTH66% and STH) and relative to the behavioral response (white bars =**  
 649 **detected; grey bars = undetected stimuli). Right: The main effect of stimulation intensity**  
 650 **on P50 amplitude disappears when stimulus intensity variance is partialled out, however,**  
 651 **the main effect of detection on the N150 amplitude remains. Bootstrapped 95%**  
 652 **confidence intervals were obtained by shuffling condition labels across participants 10000**  
 653 **times and indicate presence of the component within the specific condition when not**  
 654 **overlapping with the line at zero (i.e., amplitude is significant from zero).**

655

656 The experimental design required post-hoc condition labeling for the factor 'detection', which might  
 657 introduce a collinearity between the detection of a stimulus and its stimulation intensity concerning  
 658 the effect of pre-stimulus oscillatory amplitudes. Specifically, we suspected that if the nature of the  
 659 alpha amplitude on detection is inhibitory, this might be easier to catch for relatively strong

660 stimulation intensities. This is because missing a strong stimulus would then require relatively larger  
 661 pre-stimulus alpha amplitudes, i.e., more functional inhibition. *Figure 9* and the corresponding  
 662 ANOVA seem to support this suspicion. There is a main effect of detection on pre-stimulus central  
 663 alpha amplitude ( $F(1,31) = 5.85, p = 0.02, \eta_G^2 = 0.08$ ; stimulation intensity:  $F(1,31) = 1.33, p = 0.26, \eta_G^2$   
 664  $= 0.01$ ; intensity-detection-interaction:  $F(1,31) = 1.38, p = 0.25, \eta_G^2 = 0.01$ ) and average pre-stimulus  
 665 alpha amplitudes are significantly higher for rejected than detected STH trials only ( $t(31) = -3.07, p$ -  
 666 value  $= 0.004$ ). For pre-stimulus frontal beta amplitude, we observe a stimulus intensity main effect  
 667 ( $F(1,31) = 9.27, p = 0.005, \eta_G^2 = 0.05$ ; detection:  $F(1,31) = 4.08, p = 0.052, \eta_G^2 = 0.05$ , intensity-  
 668 detection-interaction:  $F(1,31) = 2.1, p = 0.16, \eta_G^2 = 0.03$ ) that is driven by a significant reduction of  
 669 beta amplitude preceding rejected STH intensity compared to all other conditions (detected STH:  
 670  $t(31) = -2.4, p = 0.02$ ; rejected NTH66%:  $t(31) = -2.67, p = 0.01$ ; detected NTH66%:  $t(31) = -2.88, p =$   
 671  $0.007$ ).

672



673

674 **Figure 9: Grand mean pre-stimulus alpha and beta amplitudes for the two strongest**  
 675 **stimulation intensities (NTH66% and STH) plotted for the factors stimulation intensity and**

676 **behavioral response (white bars = detected; grey bars = undetected stimuli). Bootstrapped**  
677 **95% confidence intervals were obtained by shuffling condition labels across participants**  
678 **10000 times.**

679

## 680 4. Discussion

681 We investigated, which early electrophysiological features are related to the encoding of stimulation  
682 intensity and the decoding of stimulus detectability in a two-response-classification-task for various  
683 stimulation intensities along the individual psychometric response function. Importantly, by  
684 including stimulation intensities below absolute detection threshold (ADTH), we quantified how  
685 measures of imperceptible stimulation (subthreshold) dissociate from stimulation above ADTH that  
686 may or may not be detected. For the subthreshold stimuli, the SEP exhibited only a P50 component,  
687 thereby replicating previous research (Forschack et al., 2017; Libet et al., 1967; Nierhaus et al., 2015;  
688 Ray et al., 1999). Despite this early cortical processing participants are clearly null sensitive for the  
689 subthreshold stimuli. P50 amplitude scaled with increasing stimulation intensities but was not  
690 predictive for detection; N150 is the earliest component reflecting stimulus detection. A model with  
691 lower pre-stimulus somatosensory alpha and higher frontal beta amplitudes together with an  
692 interaction of pre-stimulus frontal beta and the negative potential 150 ms after stimulus onset  
693 (N150) best explained somatosensory stimulus detection.

694 Investigations on perception without awareness require testing of the null-hypothesis (NH) that  
695 stimuli cannot be detected. In our experiment, Bayes Factors clearly supported chance performance  
696 of detection when subjects were stimulated below ADTH, i.e., false-positive responses upon null  
697 stimulation were equally likely. Nevertheless, these stimuli evoke the P50 component. In contrast,  
698 for stimulation above ADTH, participants show increasing perceptual sensitivity with stronger  
699 stimulation intensities and the largest P50 component after suprathreshold (STH) stimulation. Thus,

700 the presence of the P50 does not provide sufficient evidence for perceptual awareness (Forschack et  
701 al., 2017; Nierhaus et al., 2015) but together with the absence of the N150 component dissociates  
702 processing of stimulation below ADTH from stimulation above it.

703 Above ADTH, stimulation evokes the N150 even for rejected near-threshold (NTH) stimuli,  
704 suggesting that mere presence of the N150 also does not provide sufficient evidence for detection.  
705 However, the N150 was not present for rejected stimuli at the highest intensity (STH). comparisons  
706 might be a result of different trial numbers for detected and rejected stimulation conditions: STH-  
707 SEPs are based on the smallest number of rejected trials, thus SNR for these trials is poor, thereby  
708 reducing the likelihood of capturing a small potential. Another explanation would be that it is less  
709 likely to make a negative report (“rejected”) after a relatively strong stimulation.

710 So far, we discussed the effect of perceptual sensitivity and detection on the *presence or absence* of  
711 the P50 and N150. However, sensitivity or detection may relate to the component’s *amplitude*  
712 *difference* between detected and rejected stimulation trials. Despite being positively dependent, our  
713 results suggest two independent mechanisms for encoding stimulus intensity and detection within  
714 the event-related potential. First, P50 amplitudes scale to stimulus intensity but, second, only higher  
715 N150 amplitudes, i.e., a more negative potential, appeared to be predictive for detecting a given  
716 stimulus. Importantly, this finding shows that investigating the influence of perceptual awareness on  
717 early SEP amplitudes with near-threshold stimulus intensities (50% detection performance) requires  
718 the stimulation intensities to be fixed. Otherwise, the effects of stimulation intensity and perceptual  
719 reports are conflated concerning SEP amplitudes. The studies by Weisz and colleagues (2014) and  
720 Wühle and colleagues (2010) showed that ongoing staircase produces different stimulation  
721 intensities for detected and undetected (however, they did not analyze early SEP to these stimuli). In  
722 our study, we kept stimulation intensities constant for a given block; however, we adjusted these  
723 between blocks to account for threshold shifts. Although stimulation intensities differed slightly for  
724 the STH condition between detected and rejected trials (< 0.1–0.2 mA, current step size of the DS7:

725 0.1 mA), there was no significant difference regarding the P50 amplitude, which is sensitive to  
726 stimulation intensity (see above). Stimulation intensities did not differ for the detected and rejected  
727 trials of the NTH66% condition, but N150 nevertheless was more pronounced (more negative) for  
728 detected trials. These results were still confirmed when accounting for physical stimulation  
729 intensities between blocks by partialing out stimulation current variances. Taken together, STH  
730 electrical current differences did not affect SEP amplitudes concerning the detectability of the  
731 stimuli.

732 Past research, however, found the P50 amplitude indicative for stimulus detectability. Eimer and  
733 colleagues (2002) studied an extinction patient suffering from a right-hemispheric stroke. The  
734 patient was able to recognize left unilateral stimuli to the index finger; however, contralesional  
735 stimuli were missed—i.e., extinguished—on 75% of the trials when concurrently presented together  
736 with a stimulus at the right index finger. Contralateral SEP responses to these extinguished left  
737 stimuli contained a P50 and N110, which were not present at the same sites during unilateral right  
738 stimulation but were numerically, however not statistically, smaller as compared to (felt) unilateral  
739 left stimulation. Furthermore, unilateral contralesional left stimulation resulted in smaller  
740 components over the damaged hemisphere as compared to left hemisphere responses found after  
741 unilateral right stimulation. These results led to the hypothesis that extinction may arise from  
742 attenuation rather than the absence of early event-related components. Interestingly, components  
743 over the damaged hemisphere on bilateral extinguished trials were not different from felt unilateral  
744 left stimulation, suggesting that concurrent right tactile events might trigger competitive  
745 mechanisms that influence early tactile processing. Modulations of the P50 amplitude affecting  
746 perceptual awareness, therefore, seem to be less pronounced when stimuli are presented in  
747 isolation (Eimer et al., 2002), as it is the case for our study.

748 In previous studies (Nierhaus et al., 2015; Forschack et al., 2017), P50 to the suprathreshold  
749 stimulation intensity peaked roughly 10 ms earlier than to the subthreshold intensity. At the

750 physiological level, this latency effect might indicate a shifted excitation-inhibition-balance towards a  
751 dominant rapid activation of principal excitatory neurons (Isaacson and Scanziani, 2011; Nierhaus et  
752 al., 2015). On the cognitive level, one might argue that STH stimuli trigger exogenous attention more  
753 reliably than weaker stimulation intensities. Thus, SEPs evoked by attended stimuli show a shorter  
754 latency than those evoked by unattended stimuli (see Spence and Parise (2010) for an overview of  
755 “Titchener’s law of prior entry”). Here, however, we could only find an uncorrected significant  
756 latency shift for the STH versus NTH33% intensity and SEP latencies were not predictive for stimulus  
757 detection in the regression models. Thus, SEP latency shifts do not seem to be indicative of stimulus  
758 intensity or stimulus detectability.

759 Regarding the role of the N150 as a marker of stimulus detection, our results are in line with  
760 previous research (Aukstulewicz et al., 2012; Cauller and Kulics, 1991; Schubert et al., 2006; Zhang  
761 and Ding, 2009). However, none of these studies, including our own, provide evidence for a proper  
762 neural correlate of consciousness (NCC, Aru et al., 2012), because task paradigms will necessarily  
763 conflate perceptual awareness with decisional processes (but see Schröder et al., 2019). It has been  
764 pointed out that an NCC proper must not cease when participants passively perceive suprathreshold  
765 stimuli without any task (Hillyard et al., 1971; Squires et al., 1973; Verleger, 2010). In Nierhaus et al.  
766 (2015), we found the N150 during electrical finger stimulation well above ADTH while participants  
767 had no task. This provides initial suggestive evidence for the N150 resembling an NCC proper (Aru et  
768 al., 2012). Future studies should include a passive and an active condition within one experiment  
769 while sampling intensities close to NTH50% threshold. To re-evaluate the effect of the P50 amplitude  
770 on perceptual awareness, these studies might present bilateral tactile stimuli that trigger  
771 competitive early-stage processes and hence could increase the influence of the P50 amplitude on  
772 the perceptual fate of near-threshold stimuli (Eimer et al., 2002).

773

774 Finally, the current study replicates a large body of research showing that pre-stimulus alpha  
775 amplitude is predictive for the detectability of upcoming events (Chaumon and Busch, 2014;  
776 Craddock et al., 2017; Iemi et al., 2017; Limbach and Corballis, 2016; Linkenkaer-Hansen et al., 2004;  
777 Ruhnau et al., 2014; Schubert et al., 2008; Weisz et al., 2014; Zhang and Ding, 2009). Like these  
778 studies, we found that higher pre-stimulus alpha went along with negative behavioral responses.  
779 Additionally, higher frontal beta amplitudes preceded detected trials. This is in contrast to findings  
780 where smaller beta amplitudes paralleled decreased alpha-band activity that either indicated  
781 sensorimotor processing, e.g., in motor preparation (Pfurtscheller and Lopes da Silva, 1999),  
782 prevented intrusions from task-irrelevant competing stimuli (Schubert et al., 2008), or reflected  
783 anticipatory activity (Bauer et al., 2006; Ede et al., 2014; Schubert et al., 2008; but see Haegens et al.  
784 (2012) for a concomitant increase of alpha in subjects awaiting stimulation). Whereas a higher  
785 central alpha amplitude preceding *rejected* stimulation seems consistent with its presumed  
786 inhibitory function, a higher frontal beta amplitude preceding *detected* stimulation might indicate an  
787 endogenous content (re)activation that supports the transition from latent to active task  
788 representations thereby forming functional neural ensembles in the service of the current demands  
789 (Spitzer and Haegens, 2017). It may appear surprising that the pre-stimulus oscillatory amplitude  
790 effect on detection is only present preceding the strongest stimuli but not the second strongest.  
791 However, this might be an effect of the post-hoc condition split according to detected and rejected  
792 stimuli: a high pre-stimulus (inhibitory) alpha amplitude might be required to miss a strong stimulus;  
793 likewise, an improperly formed neural ensemble reflected by (too) small content-specific frontal  
794 beta amplitudes may turn a strong stimulus undetectable.

795

796 In conclusion, stimulus detection might emerge from a serial process where early intensity encoding  
797 precedes stimulus recognition. While the earliest evoked potential related to stimulus detection  
798 (N150) was absent during completely imperceptible stimulation, thus emphasizing its involvement in  
799 stimulus recognition, the preceding P50 was clearly measurable during all stimulus conditions.

800 Besides the neural representation of stimulus intensity, the P50 did not predict stimulus recognition  
801 of detectable stimuli. Furthermore, alpha- and beta amplitude dynamics seem to render upcoming  
802 stimulation being reportable or not, but probably support different aspects of the stimulus  
803 recognition process. Future studies are required to disentangle the contribution of those frequency  
804 bands to the emergence of perceptual awareness.

805

Journal Pre-proof

## 806 5. References

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