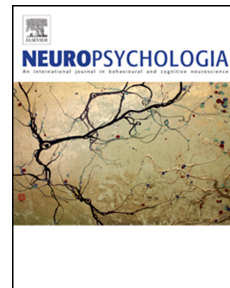


# Journal Pre-proof

Effect of tool-use observation on metric body representation and peripersonal space

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**Author contributions**

MG, MB and FG designed the study; MG, NC, CZ and MF performed the experiments; MG, BD, MF, CZ and MB analyzed the data; BD, MG and MB prepared the figures; MG, MB and FG wrote the manuscript; BD, MF, NC, CZ and LA reviewed the manuscript.

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24

25 **Abstract**

26 In everyday life we constantly act and interact with objects and with others' people through our body.  
27 To properly perform actions, the representations of the dimension of body-parts (metric body  
28 representation, BR) and of the space surrounding the body (peripersonal space, PPS) need to be  
29 constantly updated. Previous evidence has shown that BR and PPS representation are highly flexible,  
30 being modulated by sensorimotor experiences, such as the active use of tools to reach objects in the far  
31 space. In this study, we investigate whether the observation of another person using a tool to interact  
32 with objects located in the far space is sufficient to influence the plasticity of BR and PPS  
33 representation in a similar way to active tool-use. With this aim, two groups of young healthy  
34 participants were asked to perform twenty minutes trainings based on the active use of a tool to retrieve  
35 far cubes (active tool-use) and on the first-person observation of an experimenter doing the same tool-  
36 use training (observational tool-use). Behavioural tasks adapted from literature were used to evaluate  
37 the effects of the active and observational tool-use on BR (body-landmarks localization task- group 1),  
38 and PPS (audio-tactile interaction task – group 2). Results show that after active tool-use, participants  
39 perceived the length of their arm as longer than at baseline, while no significant differences appear  
40 after observation. Similarly, significant modifications in PPS representation, with comparable  
41 multisensory facilitation on tactile responses due to near and far sounds, were seen only after active  
42 tool-use, while this did not occur after observation. Together these results suggest that a mere  
43 observational training could not be sufficient to significantly modulate BR or PPS. The dissociation  
44 found in the active and observational tool-use points out differences between action execution and  
45 action observation, by suggesting a fundamental role of the motor planning, the motor intention and the  
46 related sensorimotor feedback in driving BR and PPS plasticity.

47

48 **Keywords (5):** body representation, peripersonal space, tool-use, action observation, motor intention

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**531. Introduction**

54 To efficiently interact with the environment, as to plan and execute properly the action of reaching for  
55 an object positioned in front of the body, the brain needs updated representations related to the shape  
56 and the dimension of the involved body parts (i.e. metric body representations, BR) (de Vignemont,  
57 2010; Longo et al., 2010; Schwoebel and Coslett, 2005), and of the space closely surrounding the body  
58 in which the interactions with the environment take place (i.e. peripersonal space, PPS) (Rizzolatti et  
59 al., 1997; Serino, 2019). During the last years, many studies have been dedicated to investigating these  
60 representations, that contribute, in different ways, to the conscious experience of the self as an acting  
61 body (Garbarini et al., 2015).

62 As far as concerns BR, since no unique sensory signal directly conveys to the brain information about  
63 the size and the shape of the different body parts, authors have hypothesized that an implicit  
64 representation of the body metric is stored in the brain (Longo and Haggard, 2012, 2010; Tamè et al.,  
65 2019). This representation is constantly updated through on-line peripheral signals related to body  
66 parts, such as somatosensory, proprioceptive and kinaesthetic inputs coming from the skin, the muscles  
67 and the joints, as well as through visual bodily information, during the interactions with the  
68 environment (de Vignemont, 2010; Longo et al., 2010; Medina and Coslett, 2011; Riva, 2018; Serino  
69 and Haggard, 2010).

70 On the other hand, PPS representation has been originally studied in primates, where specific  
71 populations of multisensory neurons integrating visual and/or auditory stimuli near the body with  
72 tactile information on the body surface (Duhamel et al., 1997; Fogassi, 1996; Graziano et al., 1997;  
73 Graziano and Cooke, 2006) have been identified within a fronto-parietal network. Evidence for this has  
74 been corroborated by results also obtained in humans through neuropsychological (Di Pellegrino et al.,  
75 1997; Ladavas, 1998; Lådavas et al., 1998), neuroimaging (Grivaz et al., 2017; Makin et al., 2008) and  
76 behavioural (Bassolino et al., 2010; Canzoneri et al., 2012; Teneggi et al., 2013) studies. These works  
77 demonstrated a speed-up effect in responding to tactile stimuli when these were associated to visual or  
78 auditory stimuli presented close (i.e. within PPS), but not far from the body (Cléry and Ben Hamed,  
79 2018; de Vignemont and Iannetti, 2015; di Pellegrino and Lådavas, 2015). This form of multisensory  
80 facilitation within PPS allows the brain to detect and anticipate potential interactions between the body  
81 and external objects and to trigger appropriate motor responses both in terms of defensive behavior  
82 (e.g. prevents a potential threat) or approaching (reaching/grasping) actions (Bufacchi and Iannetti,  
83 2018; Serino, 2019).

84 Taking together, previous studies indicate that both BR and PPS have a multisensory nature, being built  
85 and constantly updated thanks to the integration of signals from different sensory modalities  
86 (Dijkerman and Lenggenhager, 2018; Kandula et al., 2017; Maravita et al., 2003; Salomon et al.,  
87 2017). This implies that BR and PPS are not fixed, but could be plastically modified through actions,  
88 and specifically through changes in the in- and out- flows of sensorimotor information arising from the  
89 interactions with the environment (e.g. reaching for an object). From this perspective, the nature of  
90 those representations is not only multisensory but also sensorimotor in the sense that the action  
91 execution can modulate both PPS and BR (Gallese and Sinigaglia, 2010).

92 A classic example of the plasticity of BR and PPS after action execution is the use of the tools allowing  
93 to reach objects located in the far space (Canzoneri et al., 2013; Cardinali et al., 2009; Maravita and  
94 Iriki, 2004; Martel et al., 2016). Using a tool to reach far objects allows to act outside PPS making  
95 outside-reach objects ready-to-hand (Iriki et al., 1996), and modifies the functional dimension of the  
96 effector holding the tool (e.g. the arm) (Martel et al., 2016). More specifically, it has been shown that  
97 tool-use re-shapes BR, by extending the estimated length of the body part (arm/hand) using the tool or  
98 by altering the subsequent hand free movement kinematic profile (Bassolino et al., 2014; Canzoneri et  
99 al., 2013; Cardinali et al., 2009; Garbarini et al., 2015; Romano et al., 2018; Sposito et al., 2012).  
100 Analogously, previous research has shown that, after tool-use, PPS representation is modified. In  
101 primates, PPS neurons normally coding tactile stimuli on the hand and associated external visual or  
102 auditory stimuli presented close to the hand started also to respond to associated visual/auditory stimuli  
103 located in the more distant space of the tool's reach (Iriki et al., 1996; Maravita and Iriki, 2004;  
104 Radman, 2013). Similarly, studies with both healthy participants and patients have found that after  
105 tool-use, it is possible to extend the representation of the PPS, by increasing the multisensory  
106 interaction between tactile stimuli on the body and visual or auditory cues presented in the far space, in  
107 particular at the functional location where the tool was used (Farnè and Làdavas, 2000; Galli et al.,  
108 2015; Holmes and Spence, 2004; Maravita et al., 2001). This effect was reported after a short  
109 experience with a tool (around 15 minutes) as well as after persistent use of specific tools in different  
110 populations, such as blind people using the cane (Serino et al., 2007), computer mouse users (Bassolino  
111 et al., 2010) or professional tennis players (Biggio et al., 2017). In line with this, it has been argued that  
112 the space is accurately represented in relation to action capabilities by allowing the brain to determine  
113 whether a certain spatial sector is accessible and to select the most appropriate motor actions in the  
114 accessible space (Bufacchi and Iannetti, 2018; Serino, 2019).

115 The evidence of BR and PPS modifications after tool-use would drive the question if mere observation  
116 of someone else acting with a tool in far space may impact on bodily and spatial representations as  
117 execution. Previous works in monkeys and humans suggest that visual perception of an action  
118 performed by others is mapped onto the motor representation of the same action in the observer, by  
119 activating a shared representation between the observer and the agent (e.g. Buccino, 2014; Rizzolatti et  
120 al., 2001). The cortical activation induced by action observation in the observer partially overlapped  
121 with that activated by movement execution (Filimon et al., 2007; Jeannerod, 2001; Rizzolatti and  
122 Craighero, 2004) and maintains some specific proprieties of the observed action, such as the temporal  
123 structure and the muscular organization (Borroni et al., 2005; Finisguerra et al., 2015). Importantly,  
124 action observation may also induce plastic effects. For instance, trainings based on action observation  
125 can significantly change the preferential direction of thumb motion evoked by transcranial magnetic  
126 stimulation (Stefan et al., 2005), prevent cortical modifications observed after immobilization in  
127 healthy participants (Bassolino et al., 2014a) and seem to have positive effects in motor rehabilitation  
128 (e.g. Bassolino et al., 2015; Buccino, 2014). Considering this evidence, it is possible to hypothesize that  
129 observing an action performed by another person would be sufficient to drive plastic effects on PPS  
130 and BR similar to action execution. Coherently, the only study on space representation after  
131 observational tool-use so far (Costantini et al., 2011), reported an extension of the explicit perceived  
132 reaching space of the observer in a visual distance judgment task, in which participants had to judge the  
133 distance of a graspable object with respect to their body. Importantly, these authors found that  
134 observing tool actions can extend the representation of reaching space only when observers shared the  
135 same action potentialities with the agent, namely holding a tool compatible with the goal and the spatial  
136 range of the observed action. However, Garbarini and colleagues (2015) did not find any modification  
137 in the perceived length of the arm (BR) evaluated with a “body bisection task” (Sposito et al., 2012)  
138 after observational tool-use. These contrasting results would lead to the hypothesis of a possible  
139 dissociation in the effects of tool-use observation on BR and PPS. Nevertheless, the different results  
140 previously reported on reaching space and BR modifications after observational tool-use could be  
141 related to participants’ age. Indeed the study by Costantini and colleagues was performed in young  
142 adults, while the one by Garbarini and collaborators was done in healthy elderly controls, who could  
143 potentially show reduced plasticity after tool-use because of age (Costello et al., 2015).

144 To solve this issue, the present study aims to investigate the effects of active and observational tool-use  
145 on BR and PPS representations in young healthy adults. Although previous studies have demonstrated  
146 similar effects of the extension of both BR and PPS representations after active tool-use (Canzoneri et

147 al., 2013), one can hypothesise dissociable effects after observational tool-use. Indeed, if BR  
148 modifications could be mainly mediated by multisensory and sensorimotor information related to *one's*  
149 *own* body (Bassolino et al., 2014b), the mere visual observation of *another person* using the tool could  
150 be not enough to induce alterations of BR in the observer. In contrast, if plastic changes in PPS are  
151 mostly dependent on the motor representation of the space in which the body potentially acts, the  
152 activation of a shared motor representation between the person using the tool and an observer holding  
153 the same tool (Costantini et al., 2011) through action observation (Rizzolatti and Craighero, 2004b)  
154 could be sufficient to affect PPS. However, alternative hypotheses could be considered; first, given that  
155 PPS is strictly anchored to one's own body and related somatosensory information (Serino, 2019), the  
156 mere observation of someone else acting in the same space could be not sufficient to modify the  
157 representation of the observer's PPS, as in the case of BR. Second, we can anticipate that the mere  
158 visual observation of *another person* using the tool could be enough to drive a plastic change of both  
159 PPS and BR, suggesting that the lack of modification of the BR after observational tool-use found by  
160 Garbarini and colleagues (2015) was mainly due to the age of their sample.

## 161 **2. Materials and methods**

### 1622 **2.1 Participants**

163 Two groups of twenty-one healthy, right-handed participants were included in the study. According to  
164 a prior power analysis (GPower version 3.1) conducted on previous data from Canzoneri (Canzoneri et  
165 al., 2013), a sample of 14 subjects would be sufficient to detect possible forearm BR modifications due  
166 to active tool-use in healthy young participants (Cohen's  $d_z = 0.843$ , with significance level = 0.05 and  
167 power = 0.8). Concerning PPS, the prior power analysis (GPower version 3.1) conducted on  
168 unpublished data (Ronga et al., *under review*) indicates that a sample of 20 subjects would be sufficient  
169 to detect possible modifications in PPS representation (i.e. in the difference between RTs to audio-  
170 tactile stimuli in near and far condition, see below) due to active tool-use in healthy young participants  
171 (Cohen's  $d_z = 0.672$ , with significance level = 0.05 and power = 0.8). We decided to recruit more  
172 participants (i.e.  $n=21$ ) to prevent any reduction in statistical power due to potential technical problems  
173 during data acquisition (e.g. missing data) or a posteriori data exclusion (outliers). This sample size is  
174 also in line with previous studies on observational tool-use (Costantini et al., 2011; Garbarini et al.,  
175 2015).

176 Participants in group 1 (age:  $24.50 \pm 3.02$ , range: 19-31, gender: 57% of female) underwent a task  
177 previously reported to assess the implicit perceived length of their arm, the body-landmarks



178 localization task (BL) (e.g. Bassolino et al., 2014b; Longo, 2017), while subjects in group 2 (age: 23.71  
179  $\pm$  1.49, range: 20-26 gender: 67% of female) performed a task previously described to capture  
180 multisensory characteristics of PPS representation around their right hand. i.e. audio-tactile interaction  
181 task (e.g. Bassolino et al., 2010; Ronga et al., *under review.*; Serino et al., 2007). The subjects'  
182 handedness was evaluated with the Flinders Handedness survey (FLANDERS) (Nicholls et al., 2013).  
183 The following exclusion criteria were considered: the presence of neurological or psychiatric diseases  
184 or any other deficits impairing their capacities to perform the tasks (e.g. visual deficits, acoustic  
185 deficits, the presence of chronic pain in the upper limbs, sensorimotor deficits or recent fractures < 1  
186 year). All the participants were naive to the experimental procedures and the purpose of the study and  
187 participated after having signed the informed consent. The study was conducted with the approval of  
188 the local ethics committee (group 1: Commission Cantonale Valaisanne d'Ethique Medicale, CCVEM  
189 107/14, group 2: Ethics Committee of the University of Torino, prot. n. 125055, 12/07/16).

190

191

## 1922 **2.2 Procedure**

### 193 2.2.1 Active tool-use training

194 During the training session, participants were comfortably seated on a chair in the experiment room and  
195 they were asked to place their left hand on their left leg and the right one in a prone position on a table  
196 by holding a standardized tool (aluminium rake, length: 100 cm, width: 8 mm diameter, with at the end  
197 a 15 x 10 cm plastic plate with two rectangular 6 x 10 cm sides at 90°, total weight of the tool: around  
198 1kg) in the starting position (i.e. on the right side) (see Fig.1.A). They had to then perform a tool-use  
199 training session, inspired by similar works (Canzoneri et al., 2013; Costantini et al., 2011; Garbarini et  
200 al., 2015; Sposito et al., 2012). The training consisted in using the tool to retrieve 30 wooden coloured  
201 (red or blue) cubes (5.5 cm<sup>3</sup>) that had to be placed into the coherent coloured squares (blue or red  
202 depending on the colour of the cube. The use of the tool produced auditory effects due to the tool  
203 sliding on the table and dragging the target wooden cubes. This choice was motivated by the fact that  
204 the post-training task used to assess the PPS representation involved auditory stimuli. During the  
205 training, participants were not blindfolded and could freely decide which objects to reach. They were  
206 asked to retrieve an object every time they heard a “bip” sound coming from an audio track, made to  
207 emit a “bip” every 5 seconds. This procedure was chosen to standardize the duration of the training  
208 among participants. Before the training, participants were familiarized with the tool to ensure that they

209 could perform the task easily (few minutes). Overall, participants retrieved all the objects in 150  
210 seconds and had a 60 second break while the experimenter recomposed the initial objects' composition  
211 on the table. During the break, participants were asked to hold the rake in their hand in the starting  
212 position. The task was performed in 6 blocks lasting 20 minutes in total.

213

### 214 2.2.2 Observational tool-use training

215 The observational procedure was the same as for the active condition, but in this case, the experimenter  
216 actively retrieved the objects at each “bip” by using the tool, while the participant observed the  
217 experimenter's actions while holding an identical tool with his/her right hand in the starting position  
218 (i.e. on the right side). Participants also perceived the auditory effects of the observed action due to the  
219 tool sliding on the table and dragging the wooden cubes. As for the active tool-use training, this was  
220 designed because the task used to assess the PPS representation involved auditory stimuli. The  
221 experimenter stood behind and slightly to the side of the participant during this condition, with the back  
222 anteriorly flexed at around 45°, so that the participant could see the arm and the trunk of the  
223 experimenter in first-person perspective (Garbarini et al., 2015; Costantini et al., 2011) (see Fig.1.B).  
224 We opted to place the experimenter in this position in order to design an observational tool-use training  
225 by keeping the visual aspects more similar as possible to the active training (i.e., exploiting a first-  
226 person perspective) and by manipulating only the agent of the tool-use. To maintain participants'  
227 attention during the training, the subjects were specifically asked to carefully observe the action  
228 performed by the examiner and orient their gaze to the left or to the right, according to the location of  
229 the target, as already described elsewhere (Garbarini et al., 2015). Experimenters checked that  
230 participants complied with these instructions by visual inspection.

231

232

233 **INSERT FIGURE 1 AROUND HERE**

234 Figure 1. Experimental task: (A) Active tool-use training: schematic aerial view of the experimental  
235 setting depicting the participant holding the tool in the starting position (black circle); (B)  
236 Observational tool-use training: schematic aerial view of the experimental setting depicting the  
237 participant holding the tool in the starting position and the experimenter actively using the tool. The  
238 experimenter was standing behind and slightly to the side of the participant with the back anteriorly  
239 flexed at around 45°, so that the participant could see the arm and the trunk of the experimenter in first-

240 person perspective.

241

### 242 2.2.3 Group 1: Body-landmarks Localisation task (BL)

243 In group 1, the implicit perceived dimension of the upper limb (arm length) was measured before (pre)  
244 and after (post) the training (active and observational) with the body-landmarks localisation task (BL),  
245 already described in previous works (Bassolino et al., 2014; Canzoneri et al., 2013). The order of the  
246 sessions was balanced between participants, with half of the participants doing the observational  
247 training as first, and the other half beginning with active tool-use training.

248 The BL task can be considered an implicit measure of BR because participants had to indicate only the  
249 locations of some anatomical landmark, without explicit judgements about the perceived length of the  
250 body parts (Fuentes et al., 2013). To evaluate the perceived arm length, we considered two anatomical  
251 landmarks: the external part of the wrist (ulnar styloid) and the elbow joint (olecranon). The perceived  
252 arm length was then reconstructed a posteriori during the data analysis and compared with the  
253 individual real arm length captured at the beginning of the experiment, while participants were  
254 blindfolded.

255 During the task, participants were seated on a chair with the right forearm resting palm-down on a table  
256 in front of them. The forearm and hand positions were standardized. Participants' right forearm was  
257 aligned with the shoulder, positioned 20 cm away from the body midline without any contact between  
258 the elbow and the edge of the table and it was fixed to the table. In addition, the hand was resting on a  
259 not-working computer mouse. The left forearm was relaxed on the left leg.

260 After having acquired the actual position of the 2 landmarks, the experimenter positioned a wooden  
261 table (80 cm x 80 cm) above their arm and put an additional cloth to occlude the shoulders, in order to  
262 prevent participants from viewing their own arm during the task. Afterwards, subjects removed the  
263 eyeshades, and, in every trial, the experimenter showed to the participant the location of the target  
264 landmark on her body. Participants were instructed to verbally indicate, by saying "stop", when a retro-  
265 reflective marker (see below) attached to a wooden stick and moved by the experimenter along the  
266 table's longitudinal axis, reached the felt position of the target non-visible anatomical landmarks (wrist  
267 or elbow depending on the trial). Before recording the marker position, subjects were allowed to adjust  
268 their judgement, by verbally asking the experimenter to move it backward or forward, to the left or to

269 the right. Ten randomized trials were repeated for each landmark. This exact procedure was reproduced  
270 after the training (post), taking care of placing the participants' upper limb in the same position of the  
271 pre-training session.

272 Retro-reflective markers (1 cm of diameter) captured by means of an optical motion capture system  
273 (Optitrack V120: TRIO; Motive 1.7.5 Final 64-bit, 2015) and a custom-made script written in Matlab  
274 (R2018a) were used for the recording. The positions of the markers on the limb and of the limb on the  
275 table were also marked to be used for the post training session.

276

277

278

INSERT FIGURE 2 AROUND HERE

279 Figure 2. (A) The anatomical landmarks recorded during the body landmark (BL) task: the external part  
280 of the wrist (ulnar styloid, cross) and the elbow joint (olecranon, circle). (B) The reconstruction of the  
281 anatomical landmarks, recorded at the beginning of the experiment (black) as well as the reconstruction  
282 of the perceived position recorded for each landmark on every single trial (ten repetitions for each  
283 landmark, light grey) and averaged among repetitions (dark grey) in one representative subject (the  
284 horizontal displacement is depicted on the x, mm, while the vertical ones on the y, mm). The data of  
285 the subject displayed in the figure are representative of the group and show overall general biases  
286 similar to those previously reported in literature, with an horizontal shift towards the body midline (see  
287 for instance Fuch et al., 2016; Ghilardi et al., 1995; Wann & Ibrahim, 1992) and an underestimation of  
288 the location of the wrist and the elbow (e.g. Canzoneri et al., 2013).

289

#### 290 **2.2.4 Group 2: Audio-tactile interaction task**

291 In group 2, to investigate performed the task after the tool-use training, they had ceiling RTs likely due  
292 to a learning effect because of the repetition of the task, with a relevant speeding up of RTs in response  
293 to unimodal tactile stimulation. This would reduce the effect of sound in speeding up the RTs to tactile  
294 stimuli and thus decrease any difference between near and far bimodal conditions. Based on those data,  
295 in group 2, we adopted an only-post design to compare the effect of the three different trainings on the  
296 audio-tactile interaction task. The baseline is represented by the unimodal tactile condition, that is  
297 expected to be comparable among the three experimental sessions, thus ensuring that any differences in  
298 the audio-tactile interaction task is due to the different trainings (i.e. active, observational, and  
299 cognitive). In the cognitive training participants underwent a task in the far space without performing

300 any motor action. They performed a visual task, in which they were asked to judge whether two  
301 sequentially presented (50 ms of duration; 1 s of interstimulus interval) configurations were identical or  
302 different. Visual stimuli consisted of four configurations of three dots, forming triangles pointing  
303 upwards, downwards, rightwards or leftwards, and were presented on a computer screen placed at a  
304 100 cm of distance from the hand (a distance corresponding to the length of tool-use). In this way, the  
305 cognitive training allows also to control for possible unspecific attentional shifts, merely driven by  
306 operating in a more distant portion of space (Holmes, 2012).

307  
308 In the audio-tactile interaction task, participants were seated on a chair with their right hand placed on  
309 the table while holding the tool, and tactile and auditory stimuli were administered by an Arduino  
310 system (<https://www.arduino.cc>) – E-Prime system.

311 *Tactile stimuli* consisted of non-painful transcutaneous electrical, constant current square-wave pulses  
312 (duration: 200  $\mu$ s, delivered by DS7A, Digitimer) applied to the right-hand dorsum, using surface  
313 bipolar electrodes (1 cm between electrodes). The stimulus intensity, adjusted according to  
314 participants' sensitivity, corresponded to the individual threshold \* 2. The individual sensory threshold  
315 was estimated before each experimental session, using the methods of limits (Gescheider, 1997). The  
316 mean stimulus intensity was  $3.14 \pm 0.97$  mA (Active session:  $3.55 \pm 1.24$  mA; Observational Session:  
317  $3.1 \pm 0.88$ ; Cognitive session:  $3.18 \pm 0.71$  mA). To prevent habituation, three electrodes were placed at  
318 a constant distance between each other (i.e. about 1 cm) and connected to the electrical stimulator, so  
319 that the one with the negative polarity was kept always active, whereas the other two electrodes with  
320 positive polarity were activated on at a time. In this way, participants might perceive the stimulation  
321 coming from two distinct sites of the hand dorsum as if the stimulation was randomly shifted by  
322 displacing the electrodes' position of about 1 cm.

323 *Auditory stimuli* consisted of 784 Hz tones (intensity  $\cong$  65 dB; 50 ms duration) delivered by two  
324 different loudspeakers: the first loudspeaker was placed near ( $< 5$  cm) to participants' right (stimulated)  
325 hand (henceforth *near position*), the second loudspeaker was positioned 100 cm (i.e. a distance  
326 corresponding to length of tool-use) from subjects' right hand (henceforth *far position*).

327  
328 To explore multisensory integration effects within PPS, tactile and auditory stimulations could occur  
329 either in isolation (i.e. *unimodal conditions*: Touch, henceforth *T*; Auditory stimulus, catch trials,  
330 coming from near position, henceforth *ANear*; Auditory stimulus coming from far position, henceforth  
331 *AFar*) or combined (i.e. *bimodal conditions*: Touch+Auditory stimulus coming from near position,

332 henceforth *TANear*; Touch+Auditory stimulus coming from far position, henceforth *TAFar*). Between  
333 each stimulation, the inter-trial interval was randomly jittered between 7 and 9 s, in a way that  
334 participants could not anticipate stimulus occurrence.

335 Participants were asked to respond as fast as possible to tactile stimuli, ignoring auditory ones, by  
336 pressing a button on the response box with their right index finger. The audio-tactile interaction task  
337 consisted of a 16 minutes experimental block and 24 trials per condition were delivered. Stimulus  
338 delivering and RTs were controlled and recorded by Eprime V2.0 software (Psychology Software  
339 Tools Inc., Pittsburgh, PA, USA).

340 During the piloting phase we ensured that subjects perceived synchronously the tactile and the auditory  
341 stimuli and we calculated that our Arduino-E-Prime system administered the two stimuli with a  
342 maximum delay of 40 ms, with the auditory stimulus occurring later.

343

344 INSERT FIGURE 3 AROUND HERE

345 Figure 3. Audio-tactile interaction task, setup: tactile stimulation was administered alone (T condition)  
346 or simultaneously with an auditory stimulation coming from near position (*TANear* condition) or  
347 coming from far position (*TAFar* condition). During the stimulation, participants always hold the tool.

348

349 Please see Figure 4, for a schematic representation of the experimental procedures used in group1 and  
350 2.

351

352 INSERT FIGURE 4 AROUND HERE

353 Figure 4. Schematic representation of the experimental procedures applied in group 1 and group 2. (A)  
354 Participants in group 1 performed the body-landmarks localization task before (PRE) and after (POST)  
355 a training based on the active tool-use or observational tool-use. (B) Participants in group 2 underwent  
356 the audio-tactile interaction task (POST) after three different trainings (active tool-use, observational  
357 tool-use and cognitive session). In both groups, the order of the trainings has been counterbalanced  
358 among participants.

359

### 360 **2.2.5. Data analysis**

361 *Body-landmarks localization task.* For each participant, the mean estimated location of the elbow and  
362 wrist among trials was computed and the distance between the two landmarks was considered as an

363 indirect measure of the perceived arm length. We then calculated an index of the bias in the perceived  
364 dimension with respect to the actual one (estimated dimension, e.g. Peviani and Bottini, 2018), as the  
365 ratio between the perceived and the real length of the arm. In this way, we obtained an index of  
366 *estimated arm length* with respect to the real length of the arm, with values  $> 1$  indicating an  
367 overestimation of the perceived arm length with regard to the real one and values  $< 1$  referring to an  
368 underestimation (see Fig. 4). One subject was excluded from the final analysis because his index of  
369 *estimated arm length* at baseline (A\_pre and O\_pre) was greater than 2 standard deviations from the  
370 group mean. In addition, another subject was excluded because of a technical error during the  
371 acquisition of the real position of the landmarks. To compare the *estimated arm length* of the remaining  
372 19 participants before and after the active and observational tool-use, we ran a 2x2 RM- ANOVA  
373 (Statistica Software 7.0 – StatSoft Inc.) with the within-in subject factors “Session” (pre or post) and  
374 “Training” (active or observational). Planned comparisons, Bonferroni corrected (with significance  
375 level set at 0.05/4 comparisons) were used to explore significant interactions. Moreover, one sample t-  
376 tests against the value of 1, where 1 indicates the equivalence between the perceived and the real  
377 dimension, have been performed on each condition: active\_pre, active\_post, observational\_pre,  
378 observational\_post (significance level set at 0.05/4 comparisons, Bonferroni corrected).

379 *Audio-tactile interaction task.* First, the accuracy of each participant was calculated to ensure that they  
380 detected correctly at least the 97% of the trials (bimodal and unimodal) (e.g. Bassolino et al., 2010;  
381 Serino et al., 2015, 2007). Second, outliers were discarded if participants’ RTs exceeded two standard  
382 deviations from the average of RTs collected within all the repetitions of any specific distance (Ronga  
383 et al., 2018; Sarasso et al., 2019). This procedure was applied for both bimodal and unimodal trials.  
384 The average number of discarded responses among all the types of stimulation in all conditions (active,  
385 cognitive and observational) was around 5%. Then, subjects’ RTs in response to T, TANear and TAFar  
386 conditions were averaged.

387 To investigate the multisensory integration effect (i.e. significant differences between unimodal and  
388 bimodal stimulation) and to explore the presence/absence of a space-dependent effect (i.e. significant  
389 differences between near and far positions), we ran a 3x3 RM- ANOVA (Statistica Software 7.0 –  
390 StatSoft Inc.) with RTs as dependent variable, and “Condition” (three levels: T, TANear and TAFar)  
391 and “Training” (three levels: cognitive, active, observational) as within-subject factors. Planned  
392 comparisons were performed to investigate a possible significant interaction effect (significance was  
393 set at  $=0.05/18$  comparisons, Bonferroni corrected).

394

395 **3. Results**396 **3.1. Differentials effects on active and observational tool-use on BR and PPS representation**

397 *Body-landmarks localization task.* Results to the body-landmarks localization task are represented in  
398 Figure 5.

399 The repeated measures ANOVA performed on the estimated arm length, with “Training” (active or  
400 observational) and “Session” (pre and post training session) as within subjects factors, revealed a  
401 significant interaction between “Training and Session” ( $F(1,18) = 7.11$ ;  $p = 0.016$ ;  $\eta_p^2 = 0.283$ ) (main  
402 significant effects: training [ $F(1,18) = 8.27$ ;  $p = 0.010$ ;  $\eta_p^2 = 0.314$ ], session [ $F(1,18) = 15.4$ ;  $p < 0.001$ ;  $\eta^2$   
403  $= 0.462$ ]). Planned comparisons, Bonferroni corrected (with significance level set at  $0.05/4 = 0.0125$ )  
404 revealed that the arm length before (pre) the active tool-use training and after (post) were significantly  
405 different (*active\_pre* vs *active\_post*:  $p = 0.001$ ; mean $\pm$ SD: *active\_pre*:  $0.89 \pm 0.12$  mm; *active\_post*:  
406  $1.03 \pm 0.18$  mm), with the arm length perceived significant longer after active tool-use than at baseline.  
407 In contrast, the perceived arm length before and after (post) the observational tool-use training was not  
408 significantly different (*observational\_pre* vs *observational\_post*:  $p = 0.91$ ; mean $\pm$ SD:  
409 *observational\_pre*:  $0.86 \pm 0.16$  mm; *observational\_post*:  $0.86 \pm 0.21$  mm). This finding indicates that the  
410 observational tool-use training does not induce a significant change in the perception of the arm length.  
411 Accordingly, further planned comparisons show that even if the perceived arm length at the baselines  
412 was not significantly different (*active\_pre* vs *observational\_pre*:  $p = 0.35$ ), the perceived arm length  
413 after the active training was significantly larger than after the observational tool-use (*active\_post* vs  
414 *observational\_post*:  $p = 0.003$ , see Fig.4).

415 We noted also that the perceived arm length was statistically different from 1-value (where 1 indicates  
416 the equivalence between the perceived and the real length of the arm, see Fig.4) at baseline (*active\_pre*,  
417  $p$  value  $< 0.0125$ , significance level set at  $0.05/4$  comparisons, Bonferroni corrected), while this was not  
418 the case after the active tool-use ( $p = 0.47$ ). This indicates that the significant underestimation observed  
419 at the baseline was no more significant after active tool-use. This effect was not found after  
420 observational tool-use, where the perceived arm length remained statistically different from 1-value  
421 both before and after the training (all  $p$  values  $< 0.0125$ , significance level set at  $0.05/4$  comparisons,  
422 Bonferroni corrected).

423

INSERT FIGURE 5 AROUND HERE



424 Figure 5. The figure shows the results of the body-landmarks localization task (BL), expressed as the  
 425 ratio between the perceived and the real arm length (mean  $\pm$  SD). Values below 1 (dashed line) indicate  
 426 an underestimation of the perceived dimension with respect to the real one, while values above 1  
 427 indicate an overestimation. After (post) active tool-use (dark red) the arm length was perceived  
 428 significantly longer than before (pre), while no significant changes emerged after observational tool-  
 429 use (green). The perceived arm length was statistically smaller than 1 (i.e. underestimation) at the  
 430 baselines and after observational tool-use, but not after the active training. Error bars represents SD;  
 431 asterisks indicate significant differences ( $p < 0.0125$ , significance level set at  $0.05/4$  comparisons,  
 432 Bonferroni corrected).

433

#### 434 *Audio-tactile interaction task with corrected RTs*

435 Results to the audio-tactile interaction task are represented in Figure 6.

436 The repeated measures ANOVA on RTs revealed a main effect of Condition ( $F=(40;2)=26.609$ ;  
 437  $p < 0.001$ ;  $\eta_p^2=0.571$ ), with overall faster RTs in TANear (mean $\pm$ SD: 353.63 $\pm$ 113.12 ms) and TAFar  
 438 (mean $\pm$ SD: 367.96 $\pm$ 113.00 ms) as compared to T (mean $\pm$ SD: 390.63 $\pm$ 104.91 ms) (TANear vs T:  
 439  $p < 0.001$ ; TAFar vs T:  $p=0.001$ ). Crucially, RTs in TANear were faster than those in than TAFar  
 440 (TANear vs TAFar:  $p < 0.001$ ). The main effect of Training was not significant ( $F=(40;2)=0.648$ ;  
 441  $p=0.529$ ;  $\eta_p^2=0.031$ ). Crucially, we found a significant interaction between “Condition and Training”,  
 442 ( $F=(80;2)=3.192$ ;  $p=0.017$ ;  $\eta_p^2=0.138$ ). Planned comparisons corrected with Bonferroni ( $p < 0.003$ ,  
 443 significance level set at  $0.05/18$  comparisons) showed that after the cognitive training RTs were faster  
 444 in TANear (mean $\pm$ SD: 350.29 $\pm$ 126.90 ms) as compared to TAFar (mean $\pm$ SD: 373.31 $\pm$ 134.96 ms) and  
 445 T (mean $\pm$ SD: 401.08 $\pm$ 128.91 ms), whereas RTs in TAFar and T did not significantly differ (TANear vs  
 446 T:  $p < 0.001$ ; TANear vs TAFar:  $p < 0.001$ ; TANear vs TAFar:  $p=0.011$ ). After the active training we  
 447 found significant differences comparing bimodal conditions with unimodal tactile condition, with  
 448 smaller RTs in TANear (mean $\pm$ SD: 367.31 $\pm$ 123.48 ms) and TAFar (mean $\pm$ SD: 370.09 $\pm$ 118.64 ms)  
 449 than in T (mean $\pm$ SD: 392.05 $\pm$ 114.52 ms), while RTs in TANear and TAFar were not significantly  
 450 different (TANear vs T:  $p < 0.001$ ; TAFar vs T:  $p < 0.001$ ; TANear vs TAFar:  $p=0.347$ ). Moreover, after  
 451 the observational training, RTs were faster in TANear (mean $\pm$ SD: 343.55 $\pm$ 107.64 ms) as compared to  
 452 TAFar (mean $\pm$ SD: 359.69 $\pm$ 107.75 ms) and T (mean $\pm$ SD: 378.73 $\pm$ 97.40 ms), whereas RTs in TAFar  
 453 and T did not significantly differ (TANear vs T:  $p < 0.001$ ; TANear vs TAFar:  $p < 0.001$ ; TANear vs

454 TAFar:  $p=0.019$ ). Finally, as expected, no significant differences emerged on RTs in T (unimodal  
455 tactile condition) among the different trainings (i.e. active, observational, and cognitive) (all  $p$   
456 values  $>0.272$ ).

457 Overall, these results suggest that, after all the three trainings, a greater RT facilitation occurred when  
458 the tactile stimulation was coupled with a sound originating from near position, in line with the spatial  
459 congruency law and according to multisensory facilitation within PPS (e.g. Serino, 2019). Importantly,  
460 we found this RT facilitation also when the sound originated from the far position only after the active  
461 training, pointing out that the active tool-use, but not the observational tool-use and the cognitive task,  
462 induced a PPS remapping, eliminating the space-dependent effect of multisensory integration.

463

464 INSERT FIGURE 6 AROUND HERE

465 Figure 6. (A) Mean of reaction times (RTs) in the three conditions: after cognitive training (on the left),  
466 after active-tool use training (on the middle); after observational tool-use training (on the right). Only  
467 after active tool-use training, the two bimodal conditions (TA, tactile+auditory stimuli) did not  
468 significantly differ, suggesting that the PPS remapping occurs only when the subject actively use the  
469 tool. Error bars represents SEM; asterisks indicate significant differences ( $p<0.003$ , significance level  
470 set at 0.05/18 comparisons, Bonferroni corrected).

#### 471 4. Discussion

472 The present study aimed at investigating whether the mere observation of someone else acting with a  
473 tool in far space impacts on bodily and spatial representations as execution. To answer this question,  
474 BR and PPS were assessed with a body-landmarks localization task and an audio-tactile interaction  
475 task. Our results show that, as expected, active tool-use induced a modulation of BR and PPS,  
476 respectively highlighted by an increased perceived length of the arm, and comparable multisensory  
477 facilitation on tactile responses due to near and far sounds after active training. On the contrary, such  
478 modulations were not found after observational tool-use, pointing out that a mere observational training  
479 is not sufficient to affect BR and PPS.

480 *Body-landmarks localization task.* The findings from the BL task, aiming to capture the implicit metric  
481 representations of the upper limb, suggest that participants underestimated the arm length (i.e.  
482 perceived length smaller than real length) at baseline (before the training) similarly in both conditions

483 in agreement with earlier studies (e.g. Longo, 2017).

484 As expected, after the active condition, a significantly longer perception of the arm length after the  
485 training compared to the baseline was found. This is in line with an extension of the arm length after  
486 tool-use demonstrated in previous studies using the same task as in the present work (Canzoneri et al.,  
487 2013), an arm bisection task (Garbarini et al., 2015; Sposito et al., 2012), or by analysing free hand  
488 movements kinematics (Cardinali et al., 2009). In the present work, the increased perceived length of  
489 the used arm in the active condition could be also interpreted as a bias reduction (see Fig. 5),  
490 considering the fact that the post session was not statistically different from the 1 ratio representing the  
491 correct estimation of the perceived arm length. Importantly, the bias reduction in the arm length  
492 perception after active tool-use (Bassolino et al., 2014; Canzoneri et al., 2013; Cardinali et al., 2009;  
493 Sposito et al., 2012), could be interpreted as driven by the flow of sensorimotor information, as well the  
494 motor planning and intention, related to the active movement performed during the training, which  
495 contribute to update the representation and to correct the underestimation found at the baseline.

496 In contrast, after the observational condition, the arm length was not statistically different from  
497 baseline: both pre and post assessment demonstrated an underestimation of the arm length (values  
498 significantly different from 1). This result is also line with a previous study demonstrating no change in  
499 BR after observational tool-use in older adults (Garbarini et al., 2015). Considering together the two  
500 studies, it is possible to suggest that observing an actor using a tool while holding the same tool could  
501 be sufficient to modify BR neither in young nor in elderly participants. It has been demonstrated that  
502 action observation could activate motor areas (Jeannerod, 2001), but here these results suggest that a  
503 central brain activation of motor region through observation is not enough to shape BR. If BR  
504 modifications could be mainly mediated by multisensory and sensorimotor information related to *one's*  
505 *own* body, it is possible that the mere visual observation of *someone else* using the tool could not be  
506 sufficient to induce alterations of one's own BR (Bassolino et al., 2014b), because of a lack of updated  
507 afferent information from ones' own body. In line with this assumption, a previous study on a patient  
508 with proprioception impairment demonstrated that only visual information of the movement in absence  
509 of the perception of one's own arm in motion is not sufficient to induce an incorporation of the tool,  
510 pointing out the role of afferent information in shaping BR (Cardinali et al., 2016). However, recently  
511 Bruno and colleagues (Bruno et al., 2019) showed that the mere sensorimotor feedback of the arm  
512 movement action is not sufficient either to induce plastic changes of BR. Indeed, authors found no  
513 plastic changes in BR when participants performed a passive tool-use. In that study, the active session

514 consisted of the execution of “enfold-and-push” movements with a tool in order to place cubes in a  
515 target area; instead, in the passive session, participants were asked to be completely relaxed, and the  
516 movements towards the target area were performed with robotic assistance. Results displayed a  
517 significant increase of the perceived arm length only after active training, suggesting that the passive  
518 execution of tool action is not enough to shape the BR. Together, these two studies in line with the  
519 present results seem to suggest that sensorimotor feedback are necessary to induce plasticity of BR  
520 (Cardinali et al., 2016), although not sufficient (Bruno et al., 2019). This may indicate that the  
521 congruency between sensorimotor feedback, and motor planning and intention are crucial to induce a  
522 plastic modulation of BR.

523 *Audio-tactile interaction task.* The audio-tactile interaction task aimed at investigating the effect of  
524 active and observational tool-use on the PPS plasticity exploiting the multisensory integration  
525 phenomenon, i.e. speeding up in RTs to tactile stimuli due to simultaneous auditory stimuli appearing  
526 near the hand, within PPS (e.g. Bassolino et al., 2010; Sambo and Forster, 2009; Serino et al., 2007).  
527 As expected, after the active tool-use condition, we found comparable RTs in near and in far position  
528 (see Fig 5A), pointing out that following tool-use the auditory stimulus delivered in the far space  
529 induced similar multisensory facilitation as in the near space. The present results are fully in agreement  
530 with previous studies (Bassolino et al., 2010; Biggio et al., 2017; Iriki et al., 1996; Neppi-Mòdona et  
531 al., 2007; Ronga et al., *under review*; Serino et al., 2007), showing that tool-use results in a  
532 modification of PPS by extending the typical multisensory integration of the space surrounding the  
533 body to the farther spatial sector where the tool is used. In contrast, after cognitive training (i.e. a visual  
534 discrimination task performed at a distance from participants’ chest corresponding to the length of tool  
535 radius action), we found a greater multisensory facilitation effect in the near space as compared to the  
536 far space (see Fig. 6A), revealed by significantly faster RTs when the auditory stimulus occurred close  
537 to the stimulated hand as compared to when it occurred in far positions. This finding excludes that an  
538 attentional shift towards the far space is the only determinant of PPS remapping after tool-use (Holmes,  
539 2012). Similarly to cognitive training, also following observational tool-use we found a differential  
540 behavioural performance between bimodal near and bimodal far conditions (see Fig. 6A). These results  
541 suggest that the observation of another individual performing a tool-use does not modify the PPS  
542 representation. However, some effects of tool-use observation on space representation were found in  
543 previous works. In particular, Costantini and colleagues (2011) showed that observing an alien arm  
544 performing actions extends the reaching space of the observers if they hold a similar tool in the hand. It  
545 could be then possible that during the observation of goal-oriented actions in the extrapersonal space, a

546 mirror mechanism is activated (Rizzolatti et al., 2001) that is robust enough to remap a spatial  
547 representation of the observer in an explicit reachability task such as that employed in the Costantini's  
548 et al. (2011) study, but not sufficient to significantly modify the implicit multisensory representation of  
549 the observers' PPS as evaluated with the present paradigm. Accordingly, in the Costantini and  
550 colleagues' work, the mirrored movement experienced during the training (i.e. grasping with a rake)  
551 reflects the same movement involved during the reachability judgment task (i.e. grasping); thus, it is  
552 reasonable to hypothesize that the effect may be due to the fact that the "grasping network" is recruited  
553 both in the training and in the task phase. Furthermore, we can also speculate that, in Costantini and  
554 colleagues' work, the visuo-motor similarity between observational tool-use training, based on visual  
555 perception, and the post-training task, again based on vision, may have induced a direct transfer from  
556 tool-use training to the post-training task. On the contrary, in our present work we exploited a post-  
557 training task based on audio-tactile interaction, where vision was not involved, thus possibly leading to  
558 the lack of significant effects after observational tool-use. However, the observational tool-use training  
559 in the present experiment was not simply based on visual perception, but also on the auditory effects of  
560 the action (i.e. the noise of the tool sliding on the table and the noise of the contact between the tool  
561 and the target wooden cubes), thus making unlikely an explanation of our results based on the absence  
562 of the visual component during the PPS task. In this regard, it is interesting to note that the  
563 effectiveness of active tool-use in modulating PPS has been previously tested with multimodal tasks  
564 always involving the same sensory modalities, which were pivotal in the realization of the tool-use  
565 training (i.e., a visuo-tactile tool-use training matched with a visuo-tactile multimodal task in (Forsberg  
566 et al., 2019); and an audio-tactile tool-use training matched with an audio-tactile multimodal task in  
567 (e.g. Canzoneri et al., 2013)). Interestingly, in the present study, the audio-tactile interaction task was  
568 preceded by a visuo-auditory-tactile tool-use training, thus providing evidence that tool-use dependent  
569 plasticity arises even when the post-training assessment task does not include all the sensory  
570 modalities involved in the training.

571 A third explanation refers to the kind of PPS assessed; Costantini and colleagues tested the reaching-  
572 related spatial representation, whereas our task specifically focused on PPS representation as the  
573 preferential space for multisensory integration, thus directly contributing to the emergence and  
574 maintenance of a coherent multimodal bodily self-representation (i.e., self-consciousness purpose – for  
575 a recent review see e.g., (Noel et al., 2018)). Hence, we can suppose a dissociation between a reaching-  
576 related spatial representation, assessed by Costantini and co-authors' task, and a multisensory PPS  
577 representation, assessed by the task in the present study, assuming a different effect of observation of  
578 another agent performing the tool-use in modifying such representations. The lack of remapping of

579 multisensory PPS after observational tool-use may indicate that PPS plasticity could rely on the  
580 feedback related to the effects of the action in the far space, coupled with the sensory feedback arising  
581 from one's own hand during this movement. In line with this, Serino and colleagues (Serino et al.,  
582 2015) proposed that the plasticity of multisensory PPS is triggered by the association between  
583 synchronous tactile stimulation at the hand, due to holding the tool, and multisensory -auditory or  
584 visual stimulation - from the far space, where the tool is operated.

585

586 *Similar dissociable effects of active and observational tool-use in BR and PPS representation*

587 To sum up, the present findings suggest different effects both on the BR and PPS representation during  
588 the active and observational tool-use. In line with previous studies (Bassolino et al., 2014; Berti and  
589 Frassinetti, 2000; Biggio et al., 2017; Canzoneri et al., 2013; Cardinali et al., 2009; Sposito et al.,  
590 2012), after active tool-use, BR and PPS were modified. In particular, after active tool-use participants  
591 reported a longer perceived length of the arm than at baseline (group 1) and equally facilitated RTs to  
592 tactile stimuli when combined with near and far sounds (group 2). Crucially, no significant plastic  
593 effects in BR or PPS occur after a training of the same duration based on observational tool-use. More  
594 precisely, after observational tool-use, no significant modification of the perceived length of the arm  
595 occurred (group 1), and higher facilitation in RTs to tactile stimuli associated with near sounds as  
596 compared to far sounds occurred as in the control condition (cognitive) (group 2). The absence of  
597 effects on BR and PPS in the observational condition suggests that, at least in our sample, active tool-  
598 use is necessary to induce plastic changes of these representations, whereas tool-use observation is not  
599 sufficient. In line with this assumption, previous studies demonstrated that sensorimotor feedback is  
600 necessary, but not sufficient, to drive BR plasticity (Bassolino et al., 2010; Bruno et al., 2019; Cardinali  
601 et al., 2016). This evidence seems to highlight a fundamental role of motor intention and planning in  
602 reshaping own BR and PPS, as pointed out by previous studies that pinpointed the role of motor  
603 intention and motor planning in inducing tool-use related effects (Osiurak and Badets, 2014; Patané  
604 et al., 2019; Witt et al., 2005). This is also supported by evidence provided by Garbarini and coauthors  
605 (2015). They showed that brain-damaged hemiplegic patients, manifesting a pathological embodiment  
606 of someone else's arm, exhibited an increase of the perceived length of their forearm after a training  
607 phase in which an experimenter was aligned to them and performed movements with a tool in the far  
608 space. The crucial aspect of this study is that these patients, while observing the experimenter's arm  
609 performing the tool-action, were firmly convinced to perform it with their own (paralyzed) arm. It has  
610 been proposed that the pathological embodiment of the experimenter's arm movement automatically

611 triggers intentional motor processes of the own arm that, in turn, induces a forearm length remapping  
612 comparable to that found in healthy subjects actually performing the tool-use training. Thus, these  
613 findings point out that having real motor intentions to move the tool, even in absence of actual  
614 movement execution, induces a modulation of BR. Coherently, BR and the reaching space (evaluated  
615 with a reaching distance estimation task) have been shown to be affected by the sense of agency  
616 (D'Angelo et al., 2018); in this study, BR and the reaching space were assessed after a training phase,  
617 in which participants virtually grasped objects by controlling the virtual hand in a 3D environment. In  
618 the training phase, the sense of agency was modulated introducing a synchronous condition, wherein  
619 participants were shown virtual hands movements responding in real-time to their own movements, and  
620 an asynchronous condition, wherein a 3-second delay was interposed between the participant's actual  
621 hand and the virtual hand movements. Crucially, only when subjects sensed agency for the virtual  
622 hand, induced by the synchronicity between motor and visual feedbacks, BR and the reaching space  
623 enlarged. Therefore, the modulation of BR seems strictly dependent to the sense of congruency  
624 between the intention to perform an action and the resulting sensorimotor feedback. Overall, this would  
625 suggest that motor planning and intention related to performing tool-actions and consequent  
626 sensorimotor feedback may play a crucial role in driving BR, and probably also PPS plasticity.  
627 Alternatively, two further explanations could account for the lack of BR and PPS modifications after  
628 observational tool-use. First, in the observational training the experimenter stood beside the  
629 participants, by keeping the arm in a posture anatomically compatible with that assumed by the  
630 participants during the action execution. This could evoke a "feeling of embodiment" towards the  
631 experimenter's arm in the participants. However, this feeling would be inconsistent with the  
632 observation of their own non-moving arm, thus creating a sort of conflict that, in turn, might have  
633 reduced the effects of the tool-use training. Second, previous studies showed that in order to evoke  
634 plastic changes in motor cortex activity and motor learning, action observation (as well as motor  
635 imagery) should be coupled with peripheral stimulations (Bisio et al., 2019, 2017b, 2017a, 2015a,  
636 2015b; Bonassi et al., 2017), which were not present in our observational tool-use training. While the  
637 absence of a peripheral stimulation coupled with action observation could represent an explanation of  
638 our present results on BR and PPS, however, it worth noting that other researches pointed out effects  
639 on motor processes after action observation and motor imagery also in absence of afferent feedbacks  
640 (Bruno et al., 2020; Garbarini et al., 2014; Piedimonte et al., 2014).

641 In view of the foregoing, further studies would be addressed to investigate whether the mere motor  
642 intention and planning are sufficient to induce plastic changes of BR and PPS, or whether the

643 congruency between the intention to perform an action and the resulting sensorimotor feedback are  
644 necessary to cause these modulations. Motor imagery could help to disentangle between the role of  
645 motor intention and sensorimotor consequences, allowing to isolate the contribution of motor planning.  
646 Motor imagery can be considered as a promising tool, also in light of previous results showing that  
647 kinematics of free-hand movements was affected after tool-use imagery, in a similar way to that  
648 previously documented after active tool-use (Baccarini et al., 2014). Then, if motor intention and motor  
649 planning are sufficient to induce a tool-related BR and PPS broadening, we should expect a modulation  
650 of these representations following tool-use imagery. Alternatively, if PPS, and also BR plasticity is  
651 triggered by the congruency between the intention to perform an action and the resulting actual  
652 sensorimotor feedback, we should expect any change on these representations after motor imagery-  
653 based tool-use, as found here after observational tool-use.

## 654 **5. Conclusion**

655 In conclusion, ~~the present findings seem to provide evidence that the observation of another person~~  
656 ~~using a tool to interact with objects located in the far space is not sufficient to influence the plasticity of~~  
657 ~~PPS and BR. Thus,~~ the dissociation found in the active and observational tool-use highlights  
658 differences between action execution and action observation, pointing out a crucial role of motor  
659 intention and planning and the related sensorimotor feedback in driving BR and PPS plasticity.

660

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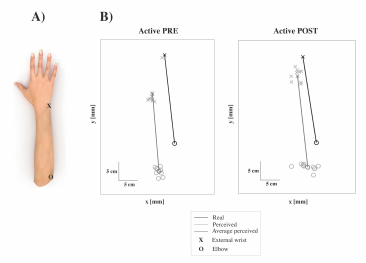
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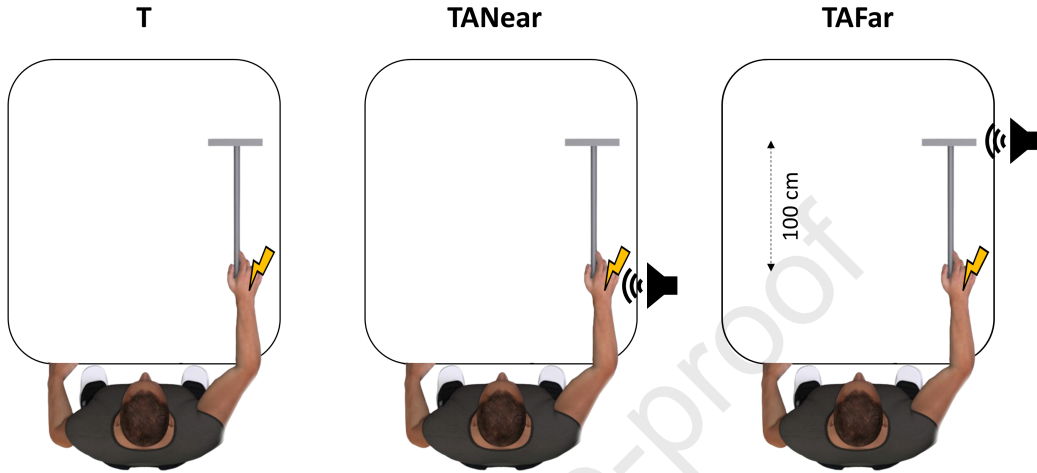


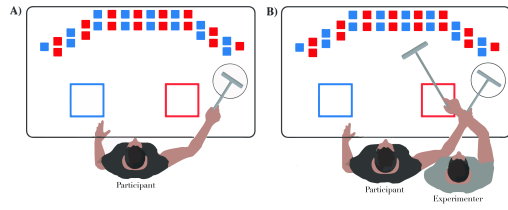
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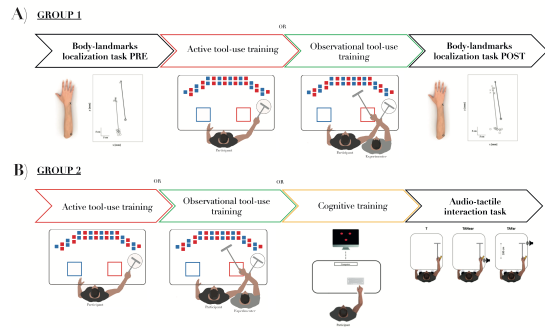


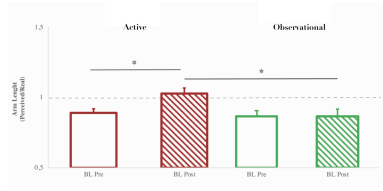
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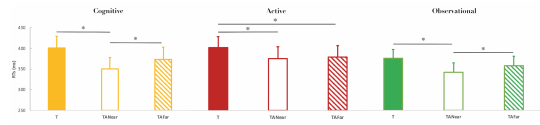


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- **Highlight**

1. Does observational tool-use affect body and peripersonal space representations?
2. A longer perceived arm length is reported after active but not observational tool-use
3. Active, but not observational tool-use induces a peripersonal space remapping
4. Observational tool-use is not sufficient to affect body and space representations
5. Motor intention and sensory feedback seem necessary to alter these representations

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