

Department of Sport and Health Sciences Chair of Human Movement Science









Start:

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Looking for a master thesis? Fascinated by TMS? Interested in apraxia research?



Using a key to open a lock, a pen to write down some notes or a spoon to eat a soup - all these activities include the correct handling of a tool and play an important role in our daily lives. Apraxia represents a severe health issue, which is associated with impairments in these daily activities. It often occurs as a consequence of stroke or neurodegenerative diseases.

Besides the proper recall of semantic knowledge also mechanical problem solving strategies (MPS) play an important role in tool use performance. Whereas semantic knowledge includes information of how, when, where a tool was used in the past, MPS allow to relate physical properties of a tool to its recipient. In order to investigate an individuals' ability to apply MPS, tests were generated, including **novel**, **unfamiliar tools**, that do not allow to build bridges to past tool-related experiences.

Previous research focused on the identification of brain regions, involved in tool use performance. A mainly left-lateralized network, called **praxis representation network** (PRN), including widely distributed regions in occipital, parietal, frontal and temporal areas, was reported relatively consistent in past fMRI studies.

A prior fMRI study conducted at our chair, was also able to identify activated brain areas in response to a novel tool use task. As fMRI data does not allow to infer causal relationships between a stimulus and localized brain activity, TMS could additionally help to elucidate the causal role of different brain areas in those novel tool use tasks, including MPS. By applying an inhibitory TMS protocol, we want to investigate the role of the ventral, ventro-dorsal and dorsodorsal stream in a mechanical problem solving task. Answering this question provides important insights into the **neural correlates** underlying tool use performance in healthy individuals, which are further relevant for an increased understanding of impaired tool use performance in apraxia.

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Does this sound interesting to you or do you have further questions? Looking forward to your email!