

Supplementary Table 2. Summary of excitability changes of peripheral nerves in ALS patients. Abbreviations: asymp., asymptomatic; CMAP, compound muscle action potential; EMG, electromyography; fALS, familial ALS; FPs, fasciculation potentials; H'H ratio, H' response to the maximum H-reflex response; MUs, motor units; n.s., not specified; MUAP, muscle unit action potentials; NCS, nerve conduction studies; SOD1, superoxide dismutase 1; sALS, sporadic ALS; TE_d, depolarizing threshold electrotonus; TE_h, hyperpolarizing threshold electrotonus; τ_{SD} , strength-duration constant.

region	ALS type	age (average)	method	finding	references	
Peripheral nerves	sALS	51 years	NCS in median, sural and peroneal nerves; EMG of interosseus, biceps brachii, vastus lateralis and tibialis anterior muscles	hyperexcitability: FP \uparrow , double discharging MUs \uparrow	(Kostera-Pruszczyk et al., 2002)	
	sALS	63 years	NCS of median nerve and CMAP recordings of abductor pollicis brevis	CMAP \downarrow axonal hyperexcitability: τ_{SD} \uparrow (CMAP > 5 mV group), TE _d \uparrow , supernormality \uparrow	(Kanai et al., 2006)	
		59.6 years		CMAP \downarrow axonal hyperexcitability: τ_{SD} \uparrow , TE _d \uparrow , TE _h \uparrow superexcitability \uparrow	(Vucic and Kiernan, 2006)	
	fALS	58 years	threshold tracking and current-threshold measurements of median nerve	CMAP \downarrow axonal hyperexcitability: τ_{SD} \uparrow	(Vucic and Kiernan, 2009)	
	sALS	59 years		axonal excitability \leftrightarrow , τ_{SD} \leftrightarrow		
	fALS (asyp. SOD1)	40 years		axonal hyperexcitability (7 patients): TE _d \uparrow axonal hypoexcitability (4 patients): TE _d \downarrow	(Bostock et al., 1995)	
	n.s.	n.s.	59.6 years	threshold tracking measurements of ulnar nerve	axonal hyperexcitability: TE _d \uparrow , TE _h \uparrow	(Horn et al., 1996)
		n.s.	n.s.	threshold tracking measurements of median nerve	axonal hyperexcitability: TE _d \uparrow , TE _h \uparrow	(Horn et al., 1996)
		n.s.	59.1 years	NCS of median nerve and CMAP recordings of abductor pollicis brevis; threshold tracking of median nerve	CMAP \downarrow axonal hyperexcitability: τ_{SD} \uparrow , rheobase \downarrow	(Mogyoros et al., 1998)
		n.s.	64 years	NCS of median nerve and CMAP recordings of abductor pollicis brevis	CMAP \downarrow , conduction velocity \downarrow	(Tamura et al., 2006)
		n.s.		latent addition with threshold tracking of the median nerve	axonal hyperexcitability: nodal persistent Na ⁺ conductance \uparrow , TE _d \uparrow	
		n.s.	66 years	NCS of median nerve and CMAP recordings of abductor pollicis brevis; threshold tracking of median nerve at wrist (nerve trunk) and at abductor pollicis brevis (distal axons)	CMAP \downarrow axonal hyperexcitability: TE _d \uparrow , TE _d \uparrow (distal axons) > TE _d \uparrow (nerve trunk)	(Nakata et al., 2006)
		n.s.	54.7 years	single MUAP recordings of the brachial biceps	hyperexcitability: double discharge firing MUs \uparrow	(Piotrkiewicz et al., 2008)
		n.s.	64.0 years	EMG of tibialis anterior	hyperexcitability: complex FPs \uparrow	(de Carvalho and Swash, 2013)
	n.s.	46.3 years	soleus H-reflex measurement with EMG	recurrent inhibition \downarrow , H'/H ratio \downarrow	(Raynor and Shefner, 1994)	
	Riluzole treated ALS patients	54 years	threshold tracking and single MUAP recordings of the abductor pollicis brevis and abductor digiti minimi	CMAP \downarrow axonal hypoexcitability: rheobase \uparrow , threshold for single MU \uparrow , axonal hyperexcitability: TE _d \uparrow , superexcitability \uparrow	(Howells et al., 2018)	

References

- Bostock, H., Sharief, M.K., Reid, G., and Murray, N.M. (1995). Axonal ion channel dysfunction in amyotrophic lateral sclerosis. *Brain* 118 (Pt 1), 217-225. doi: 10.1093/brain/118.1.217.
- de Carvalho, M., and Swash, M. (2013). Fasciculation potentials and earliest changes in motor unit physiology in ALS. *J Neurol Neurosurg Psychiatry* 84(9), 963-968. doi: 10.1136/jnnp-2012-304545.
- Horn, S., Quasthoff, S., Grafe, P., Bostock, H., Renner, R., and Schrank, B. (1996). Abnormal axonal inward rectification in diabetic neuropathy. *Muscle Nerve* 19(10), 1268-1275. doi: 10.1002/mus.880191002.
- Howells, J., Matamala, J.M., Park, S.B., Garg, N., Vucic, S., Bostock, H., et al. (2018). In vivo evidence for reduced ion channel expression in motor axons of patients with amyotrophic lateral sclerosis. *The Journal of physiology* 596(22), 5379-5396. doi: 10.1113/JP276624.
- Kanai, K., Kuwabara, S., Misawa, S., Tamura, N., Ogawara, K., Nakata, M., et al. (2006). Altered axonal excitability properties in amyotrophic lateral sclerosis: impaired potassium channel function related to disease stage. *Brain* 129(4), 953-962. doi: 10.1093/brain/awl024.
- Kostera-Pruszczyk, A., Niebroj-Dobosz, I., Emeryk-Szajewska, B., Karwanska, A., and Rowinska-Marcinska, K. (2002). Motor unit hyperexcitability in amyotrophic lateral sclerosis vs amino acids acting as neurotransmitters. *Acta Neurol Scand* 106(1), 34-38. doi: 10.1034/j.1600-0404.2002.00149.x.
- Mogyoros, I., Kiernan, M.C., Burke, D., and Bostock, H. (1998). Strength-duration properties of sensory and motor axons in amyotrophic lateral sclerosis. *Brain* 121 (Pt 5), 851-859. doi: 10.1093/brain/121.5.851.
- Nakata, M., Kuwabara, S., Kanai, K., Misawa, S., Tamura, N., Sawai, S., et al. (2006). Distal excitability changes in motor axons in amyotrophic lateral sclerosis. *Clinical Neurophysiology* 117(7), 1444-1448. doi: <https://doi.org/10.1016/j.clinph.2006.04.005>.
- Piotrkiewicz, M., Kudina, L., Mierzejewska, J., and Hausmanowa-Petrusewicz, I. (2008). Analysis of double discharges in amyotrophic lateral sclerosis. *Muscle Nerve* 38(1), 845-854. doi: 10.1002/mus.20997.
- Raynor, E.M., and Shefner, J.M. (1994). Recurrent inhibition is decreased in patients with amyotrophic lateral sclerosis. *Neurology* 44(11), 2148-2153. doi: 10.1212/wnl.44.11.2148.
- Tamura, N., Kuwabara, S., Misawa, S., Kanai, K., Nakata, M., Sawai, S., et al. (2006). Increased nodal persistent Na⁺ currents in human neuropathy and motor neuron disease estimated by latent addition. *Clinical Neurophysiology* 117(11), 2451-2458. doi: <https://doi.org/10.1016/j.clinph.2006.07.309>.
- Vucic, S., and Kiernan, M.C. (2006). Axonal excitability properties in amyotrophic lateral sclerosis. *Clinical Neurophysiology* 117(7), 1458-1466. doi: <https://doi.org/10.1016/j.clinph.2006.04.016>.
- Vucic, S., and Kiernan, M.C. (2009). Upregulation of persistent sodium conductances in familial ALS. *Journal of Neurology, Neurosurgery & Psychiatry* 81(2), 222-227. doi: 10.1136/jnnp.2009.183079.