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Symposium Elena

Montpellier 14-15 septembre 2017

**Back to prototypes: strategies
for a longitudinal cohort**

what exactly are we studying when we combine heterogeneous individuals into one “ASD” group, and what might we be *failing* to study by not going deeper into the most frank cases?

RESEARCH ARTICLE

“Frank” Presentations as a Novel Research Construct and Element of Diagnostic Decision-Making in Autism Spectrum Disorder

Ashley de Marchena and Judith Miller

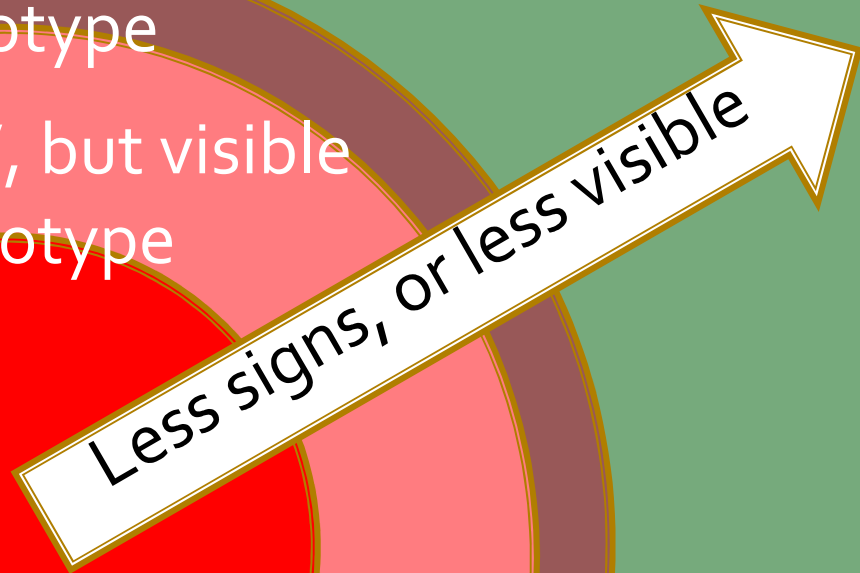
Consensual, but possibly wrong

- Heterogeneity / spectrum is superior to “old” categorical approach
- Spectrum is a good model for autism (eg. rainbow colors/ continuous wavelength)
- Prevalence increases constantly, because autism is “better diagnosed”
- Animal models are informative and prototypical autism
- Prevalence of intellectual disability and epilepsy is increased in autism and reaches 25% of identified cases

"degraded", invisible
phenotype

"degraded", but visible
phenotype

Prototypical phenotype



Predictive identification error in presence of a degraded phenotype

- The Mooney figure effect



Figure 1: Mooney or two-tone image (left) and its grayscale source image or "template" (right).

- The more degraded a phenotype is, the more the predictive error due to the prototype distorts what is actually seen, or conflict with others prototypes
- In case ascertainent for a cohort, it is a problem, because standardised instruments and criteria are larger than the prototype

noise / signal ratio:
spectrum autism,
Heterogenous phenotypes



Overinclusive
zone

Missed degraded
phenotypes

Estimated prevalence

"Descending" threshold
for detecting a category

"true" threshold

"Ascending" threshold
for detecting a category

Low noise / signal ratio:
prototypical autism
Highly **similar** phenotypes



Spectrum vs. Prototypical approaches

Spectrum

- Epidemiologically oriented
- Psychiatry
- Dimensional
- Large Ns
- Diagnostic Cut-offs would be arbitrary or consensual
- Following blindly current, explicit criteria in diagnosis
- Phenotypically heterogeneous
- High sensitivity, low specificity

- **And trendy!**

Prototypical

- Etiologically oriented
- Neuroscience
- Categorical
- Small Ns
- Diagnostic Cut-offs would reflect a "natural" category
- Adding expertise to current criteria ("franck" autism)
- Phenotypically homogeneous
- High specificity, low sensitivity

- **Old fashioned?**

two types of heterogeneity within DSM-5 autism:

Non-syndromic autism

- High IQ
 - No recognizable syndrome
 - No epilepsy, macrocephaly
 - High sex ratio
 - No LDDNM
 - Highly similar, but they may be several prototypes
-
- Plausibly informative on prototypical autism

Syndromic autism

- Low IQ
 - Recognizable Syndrome^S with identified mutations
 - Epilepsy, no macrocephaly
 - Low sex ratio
 - LDDNM
 - Highly dissimilar but may reflect a superficial similarity across phenotypes
-
- Unplausibly informative on prototypical autism

What is the optimal variability to recommend in a cohort?

- If you study a beetle from exactly similar individuals, you may get just males: you will learn how they feed, but not how they breed.
- If you tolerate a certain variation and get male and female individuals, you will learn how they feed and how they breed: **optimal variability**
- If you tolerate a large variation and get one of each type of beetles, you are at risk to miss both their feeding and breeding habits

What can be learnt from prototypicality?

- Narrows theoretical constraints on etiological models for autism (eg: does epilepsy, fr. X, and intellectual deficiency should be included in etiological models?)
- Increases constraints on animal models
- Inform on prototypical developmental history of autism

What can be lost in a prototypicality approach?

- One or several prototypes? The “similarity detection” approach should be iterative and not limited to Kanner’s autism
- The women issue: presentation of our cohort

Cohorte de Femmes adultes francophones se reconnaissant sur le spectre de l'autisme au 09/09/2017

- N = 285, Age moyen: 39,6 ans
- Français(e)s : 193 – Canadien(ne)s : 64
 - 107 avec un diagnostic « spectre de l'autisme »; 109 non diagnostiquées; 64 indiquant des démarches en cours
- Age moyen du diagnostic: 35,7 ans

My suggestion for a cohort

- Instead of increasing “spectrum Ns”, select 3 prototypical cohorts:
- Prototypical autism
- Prototypical Male Asperger people
- Prototypical self diagnosed autistic Females

**research questions addressed
using a stratified, prototypical
approach: revisiting DSM 5
clinical specifiers**

Autism-epilepsy relations

Autism-epilepsy relations

- Context: epilepsy is still a constraint on neurobiological models of autism
- Hypothesis: Epilepsy is associated to syndromic autism only
- Research target: is epilepsy a factor dissociating syndromic from primary autism?
- Impact: inform on delineation between prototypical and syndromic autism

1994 to 2004 papers obtained through Medline database using 'autism' + 'epilepsy' entry (n=230)

- ***Exclusion criteria:*** 'reviews' (n=74), irrelevant (e.g.: therapeutic; n=84)
- ***Inclusion criteria:*** (N= 71) New studies including participants with autism + epilepsy, with or without another clinical entity

Autism and epilepsy comorbid with:	Number of articles
Cerebral lesions	8
Biochemical anomaly	21
Rare genetic syndrome	29
Chromosomal anomaly	8
Autism and epilepsy without other anomaly	8
TOTAL	71

Our incidence data

Epilepsy in a population of 220 PDD with an IQ above 50 (AD: 92; AS: 75; PDDNOS: 58): $12 / 220 = 5.4\%$

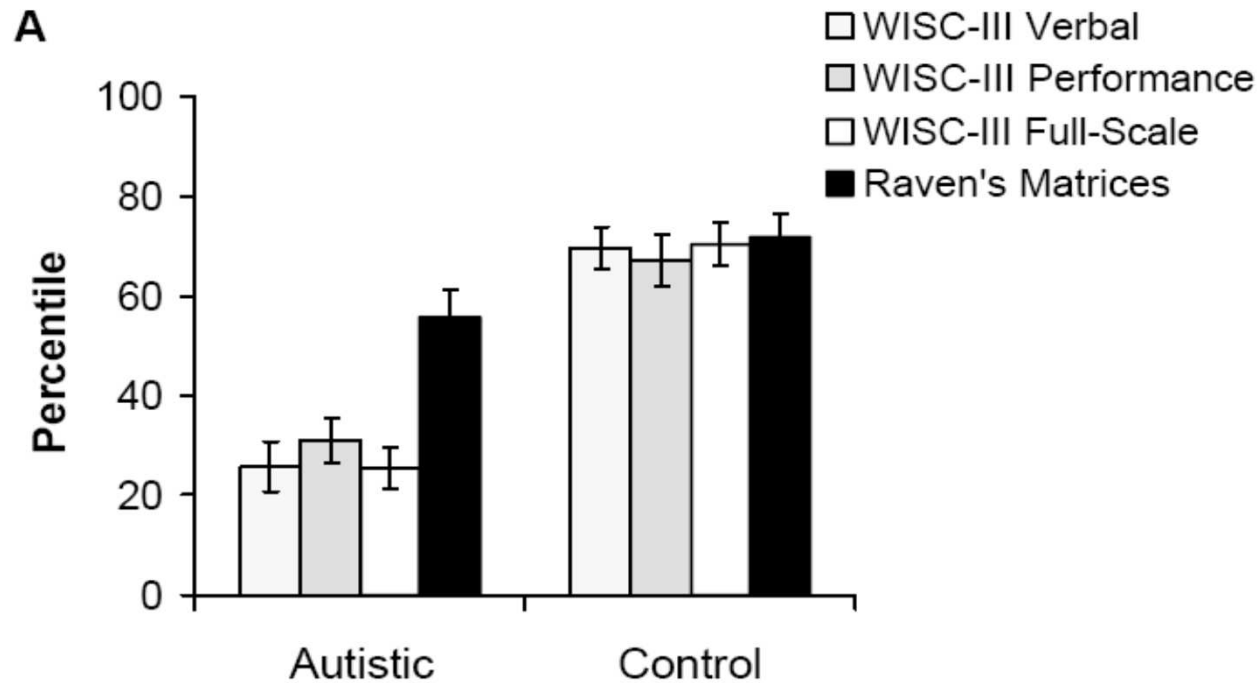
- in PDD, IQ above 70: $10 / 188 = 5.31\%$
- in PDD, IQ above 85: $5 / 149 = 3.33\%$

Etiology of epilepsy in a sample of 220 persons with PDD

- Cerebral lesion: 8/12
- Rare genetic disease: 1/12
- Essential 3/12 (1.3 %) (PDD-NOS: 2, Asperger. 1)

Autism-intelligence relations

Niveau Raven vs Niveau Wechsler



38 enfants autistes,
24 enfants typiques

PSYCHOLOGICAL SCIENCE

Research Report

The Level and Nature of Autistic Intelligence

Michelle Dawson,¹ Isabelle Soulières,^{1,2} Morton Ann Gernsbacher,³ and Laurent Mottron^{1,2}

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OPEN ACCESS Freely available online

PLOS one

The Level and Nature of Autistic Intelligence II: What about Asperger Syndrome?

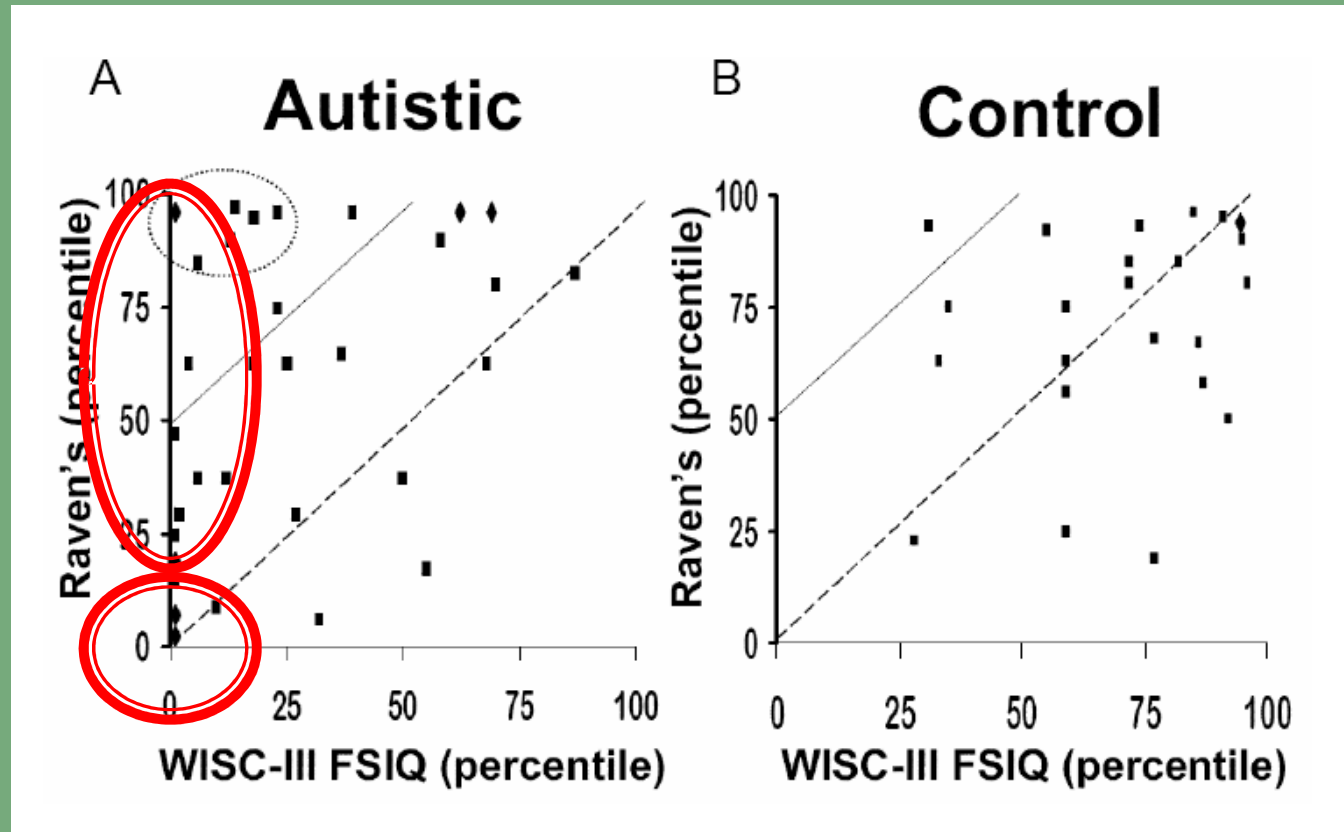
Isabelle Soulières^{1,2}, Michelle Dawson¹, Morton Ann Gernsbacher³, Laurent Mottron¹

¹ Centre d'Excellence en Troubles Envahissants du Développement de l'Université de Montréal (CETEDUM), Montréal, Québec, Canada, ² Department of Psychiatry, Massachusetts General Hospital, Harvard Medical School, Boston, Massachusetts, United States of America, ³ Department of Psychology, University of Wisconsin-Madison, Madison, Wisconsin, United States of America

Vraie et fausse DI

Fausse DI

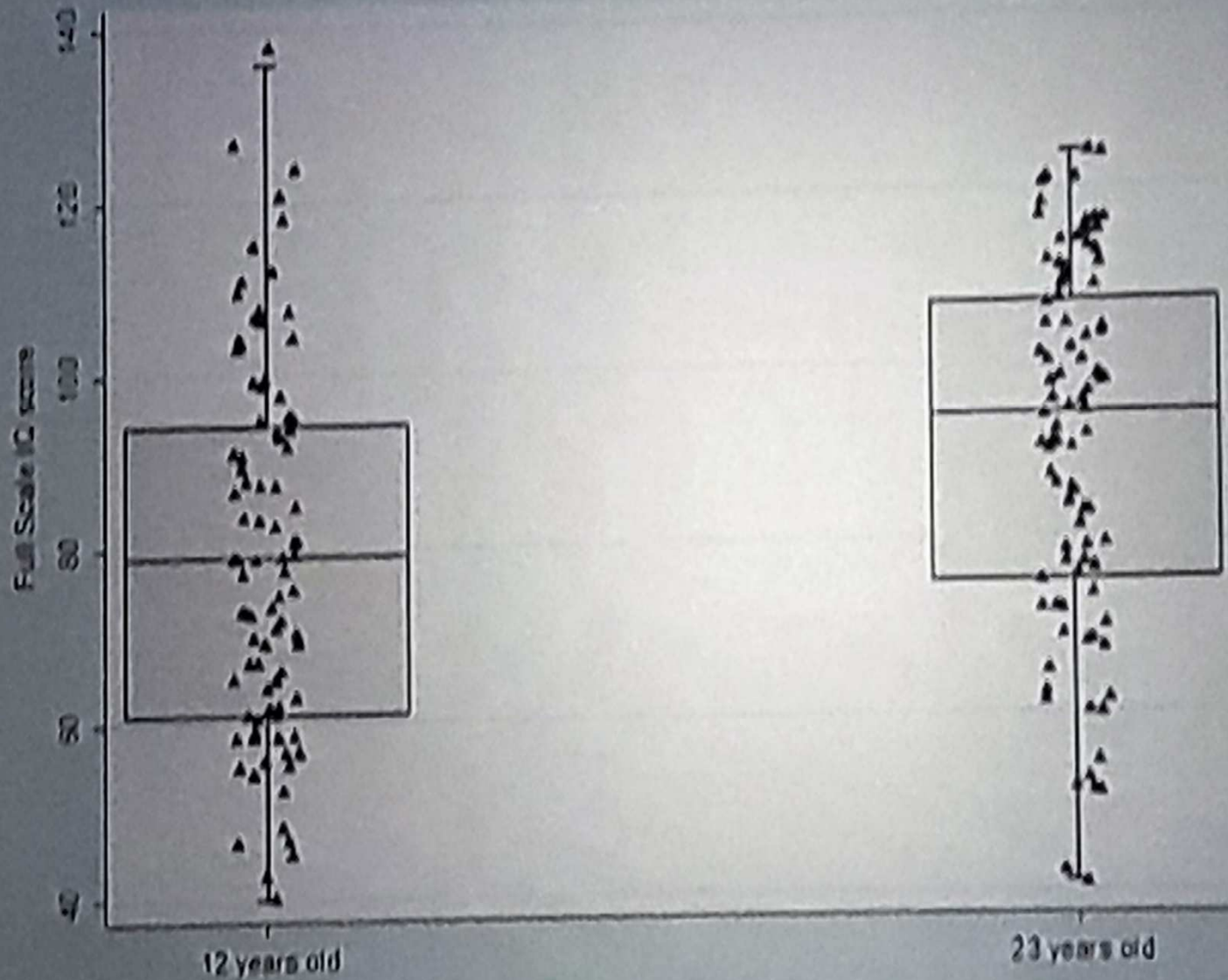
Vraie DI



Is there a trend for increasing IQ w. age, or only verbal one?

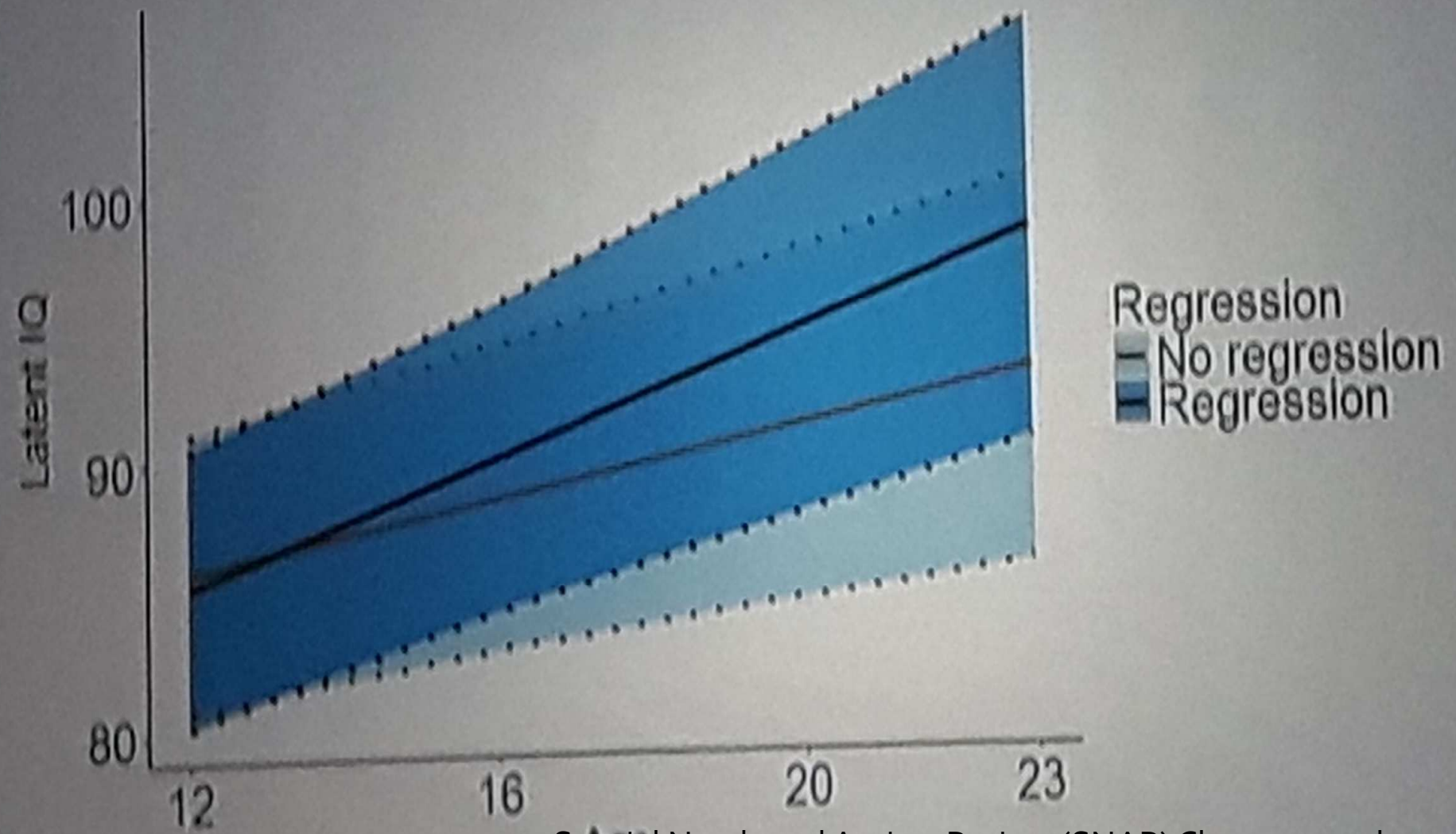
- Context: Discrepancy between RPM and Wechsler
- Hypothesis : increased compliance to testing and increased exposition to complex materials w. age will result in increased measured intelligence, even non verbal
- Research target: specify the level and nature of autistic intelligence in prototypical and syndromic autism
- Impact: inform on delineation between prototypical and syndromic autism, and influence intervention programs.

Full scale IQ – 2 timepoints ($n = 93$)



Regression predicts the slope of IQ

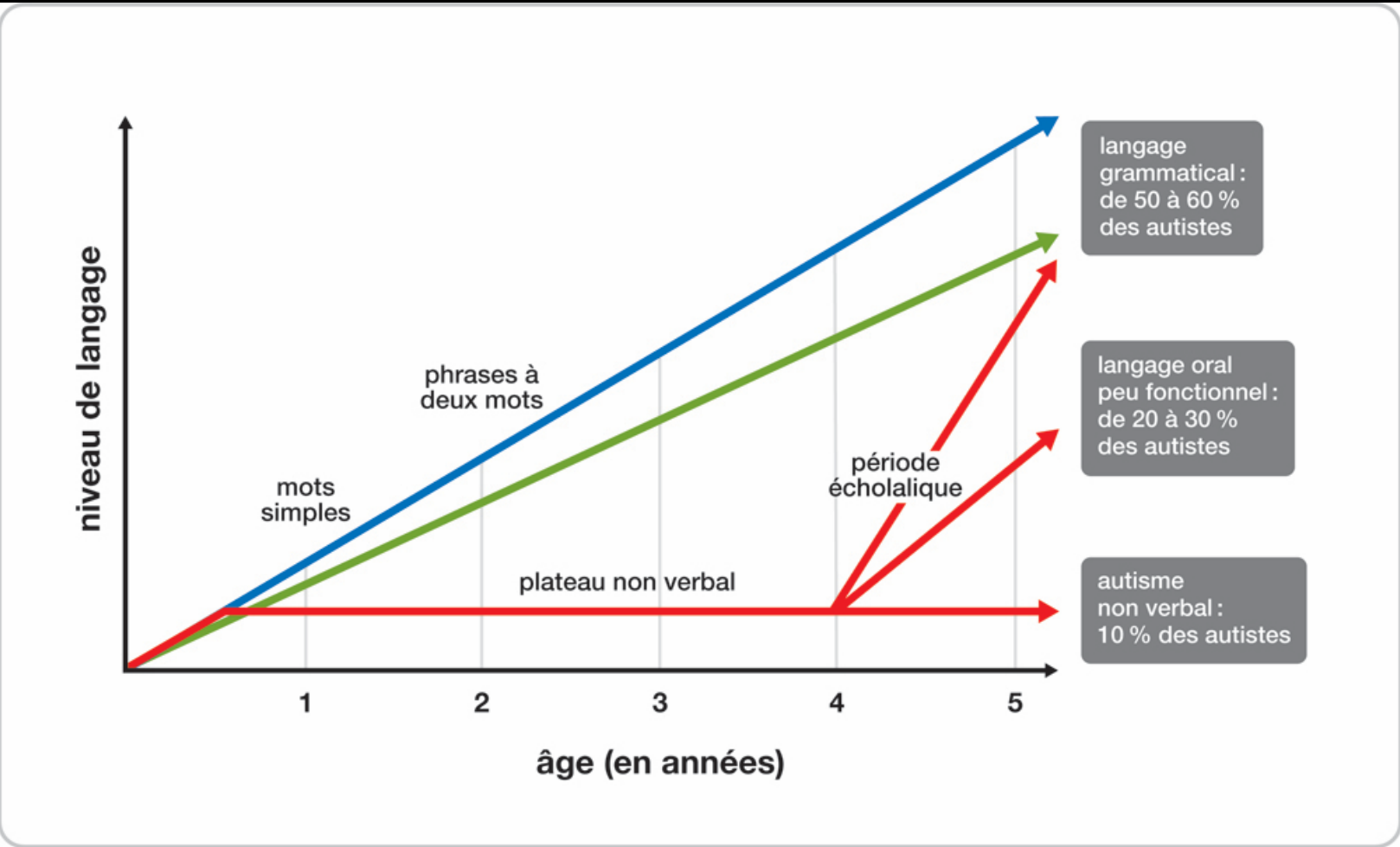
Latent IQ trajectories from final model - Regression



Autism-language relations

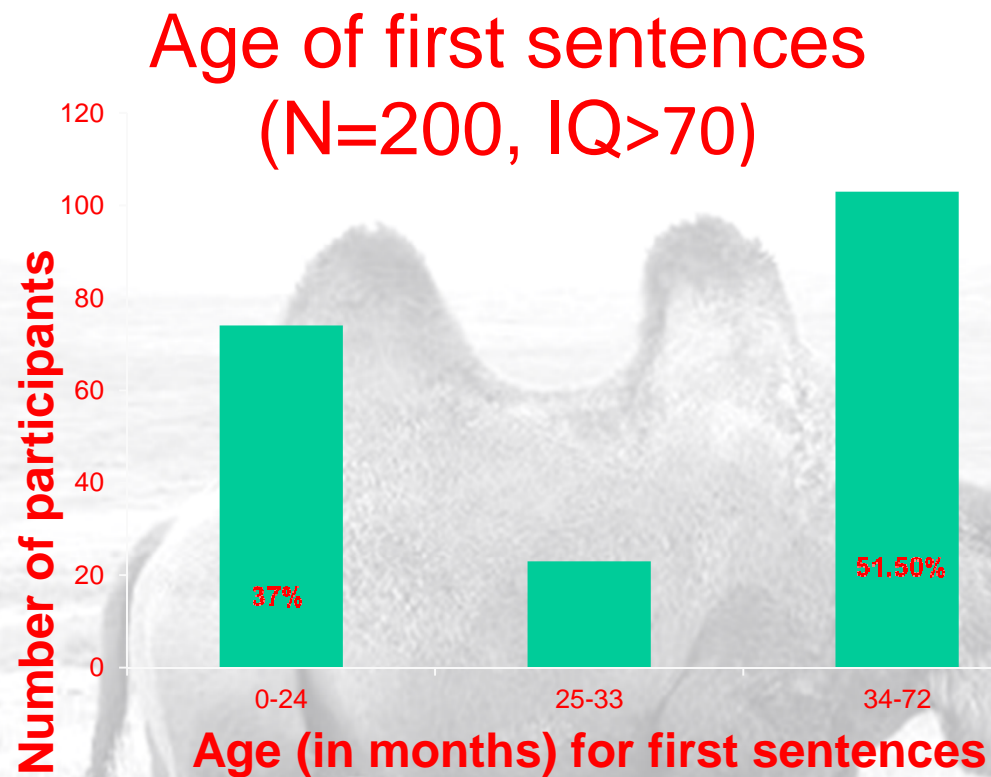
The bayonette-shaped speech development in prototypical autism

- Context: uncertainties on the specificity of speech learning curve in SLI vs. Autism
- Hypothesis : absence of speech, followed by Prizant sequence, characterizes prototypical autism
- Research target: add a specified speech developmental profile to known signs of prototypical autism
- Impact: Characterize speech prognoses in prototypical situations, and influence interventions



Autism- Asperger relations

Bimodal distribution of speech onset (two-words sentences)



Within non-syndromic autism: Two distinct (?) profiles

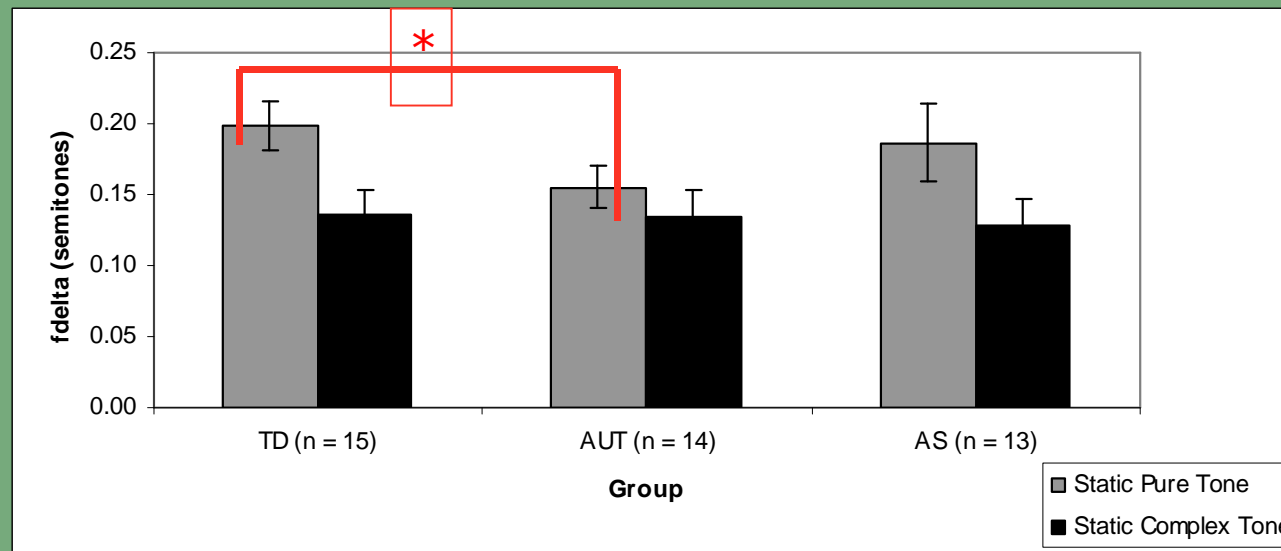
Autism = AS-SOD

- Speech Onset Delay (SOD)
- Strength in non verbal reasoning (Raven)
- Perceptively defined interests
- Hyperlexia

Asperger = AS-NoSOD

- Early speech
- Strength in verbal reasoning (similitude)
- Thematically defined interests
- Early reading

Superior pitch perception in AS-SOD only



Contents lists available at ScienceDirect

Neuropsychologia

journal homepage: www.elsevier.com/locate/neuropsychologia



Enhanced pure-tone pitch discrimination among persons with autism but not Asperger syndrome

Anna Bonnel^{a,b,c}, Stephen McAdams^d, Bennett Smith^d, Claude Berthiaume^c, Armando Bertone^{a,b,c}, Valter Ciocca^e, Jacob A. Burack^{a,b,c}, Laurent Mottron^{b,c,*}



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Auditory discrimination and auditory sensory behaviours in autism spectrum disorders

Catherine R.G. Jones^a, Francesca Happé^b, Gillian Baird^c, Emily Simonoff^d, Anita J.S. Marsden^e, Jenifer Tregay^e, Rebecca J. Phillips^e, Usha Goswami^f, Jennifer M. Thomson^f, Tony Charman^{a,*}

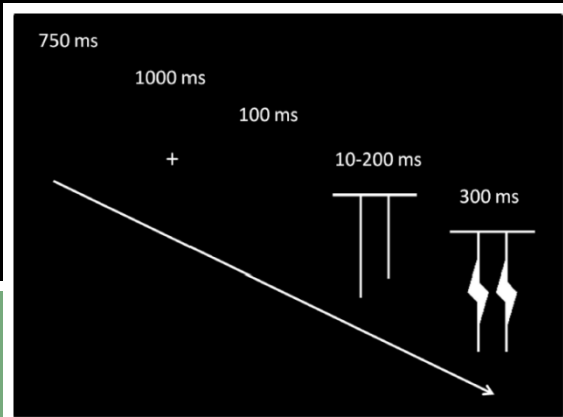
The Level and Nature of Autistic Intelligence III: Inspection Time

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Superior
visual
inspection
in AS-SOD
only

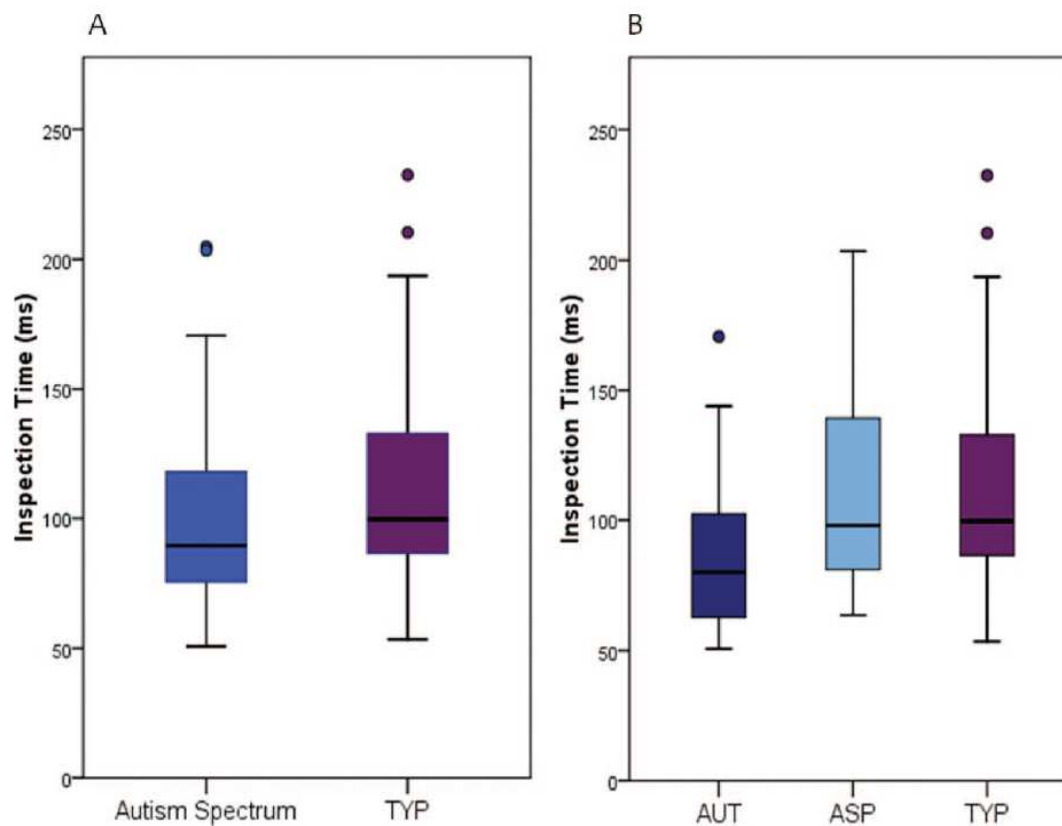
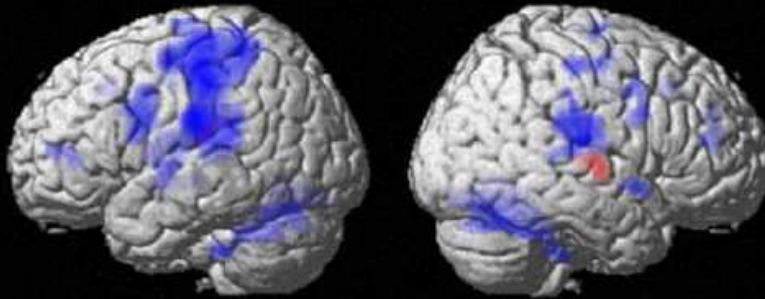
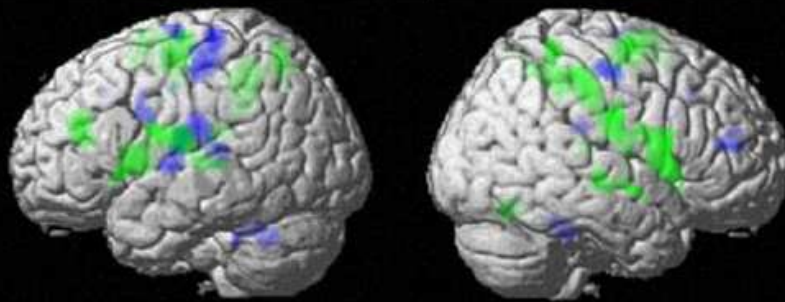


Figure 2. Inspection time distribution for (A) autism spectrum ($n = 42$) and typical ($n = 30$) groups; (B) autistic ($n = 18$), Asperger ($n = 17$) and typical ($n = 30$) groups. Error bars represent 1.5 standard deviation.

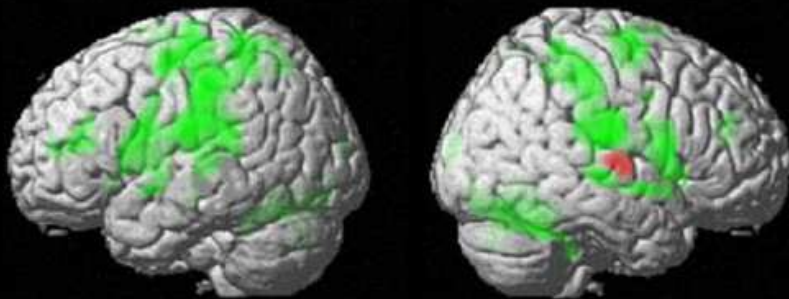
(A) TYP > SOD & SOD > TYP



(B) TYP > No SOD & No SOD > TYP



(C) SOD > No SOD & No SOD > SOD



Cortical reallocations may account for autistic heterogeneity

Journal of Psychiatric Research 68 (2015) 285–292

Contents lists available at ScienceDirect



Journal of Psychiatric Research

journal homepage: www.elsevier.com/locate/psychires



Speech acquisition predicts regions of enhanced cortical response to auditory stimulation in autism spectrum individuals

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If we target new findings, our research questions and methodology should differ from what is done elsewhere