Neurobehavioral Development in Infants at High-Risk for ASD

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The Neonate Experience

- Reflexive & Stimulus-bound
- Complex & Organized
- Opportunistic & Non-volitional
 - Subcortically-mediated
- Experience-expectant
- Adaptive



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Reflexive Action Systems as Learning Opportunities





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Key Transition	Dynamic Transition
A Critical T	ransition
Psychological Birth	
	2-Month Revolution

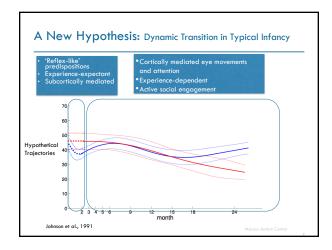
Critical Transitions

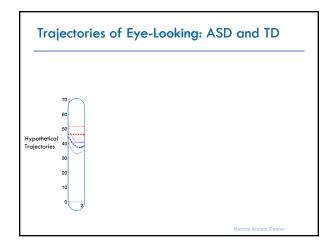
- Intentionality
 - Cortically-mediated
 - Inhibition of reflexive reactions
- Experience-dependent
- Increased alertness
- Social Smile
- Very little direct evidence
 - Later maturation of primary visual cortex
 - Cortical specialization for face processing at 2-3 months

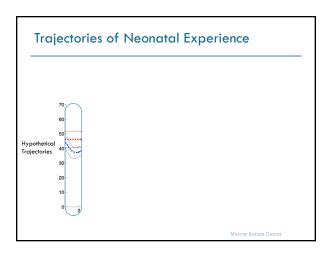


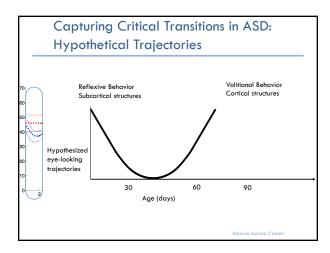
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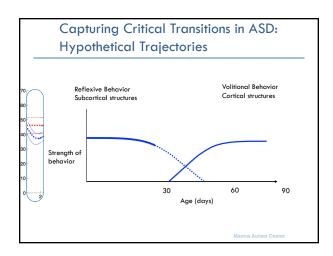
Eyes Fixation To eyes ASD eyes

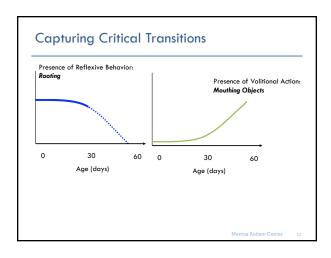


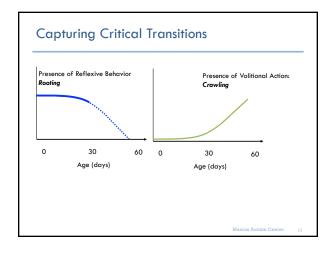


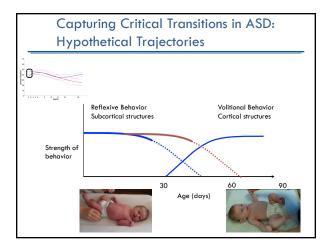














The Developmental Task of a Newborn

Organize autonomic/physiologic system

- Stabilize breathing
- 2. Reduce number of tremors and startle
- 3. Maintain temperature control

Regulate motor behavior

- 1. Making smooth movements
- 2. Reducing jerky movements
- 3. Developing muscle tone

Regulate "state"

- 1. Self-soothe (e.g., hand to
- mouth behavior)

2. Amenable to soothing Regulate social interaction

- 1. Maintain alert periods
- 2. Attend to visual and auditory stimuli
- 3. Engage a caregiver



Neurobehavior

- Neurological integrity and behavioral responses that co-construct an infant's experience from the first days of life.
- Allows us to see how baby's discrete behaviors are integrated into coherent patterns of behavior

Domains of Neurobehavior

Autonomic/Physiological Regulation	Color changes, tremors, startles

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Motor Organization	Quality of movement and tone; activity level			
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Domains of Neurobehavior

Autonomic/Physiological Regulation	Color changes, tremors, startles
Motor Organization	Quality of movement and tone; activity level
State Organization and Regulation	Arousal and state lability; ability to regulate state in the face of stimulation
Attention and Social Interaction	Attend to visual and auditory stimuli; overall quality of alertness

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	Strengths	Areas in need of support
Autonomic System	Breathing is smooth	Substantial color change with slow recovery Many startles and tremors
Motor System	Good tone throughout exam	Jerky movements
State System	Can be consoled easily by the examiner Uses hand-to-mouth behavior	Easily upset Moves rapidly from sleep state to distress state
Social Interactive System	Looks away when interaction is too intense	Constant gaze aversion Difficult to maintain stable alert state

Measuring Neurobehavioral Development

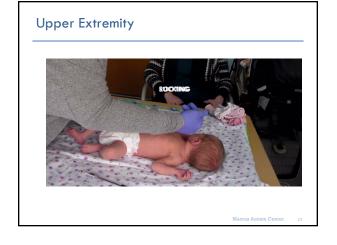
- NICU Network Neurobehavioral Scale (NNNS; Lester & Tronick, 2004)
 - Neurologic integrity
 - Behavioral functioning
- 115 Items
- Primitive Reflexes
- Muscle Tone
- Social and Nonsocial Orientation
- Self-Regulation
- Stress Signs

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Primitive Reflexes Plantar Grasp Babinksi Leg Recoil Stepping Palmar Tonic Grasp Deviation Arm Recoil ATNR Rooting Moro Sucking

Lower Extremity	
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Upper Extremity ARM RECOL



Moro	Reflex	
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Asymmetric Tonic Neck Reflex (ATNR)



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Tonic Deviation

Vestibular reaction prior to onset of voluntary control of eye movements



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Research Using NBAS/NNNS

- Cocaine Exposure (Lester et al., 2002)
 - Lower arousal
 - Poorer quality of movement
 - Poorer self-regulation
 - Higher excitability
 - More hypertonia
 - More nonoptimal reflexes
- Nicotine/tobacco exposure (Mansi et al., 2007)
 - Poorer scores on several items, especially irritability (does-dependent)
- Alcohol

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Research Using NBAS/NNNS

- Very Low Birthweight preterm infants (Wolf et al., 2002)
 - At term-age
 - More signs of stress
 - Poorer self-regulation
 - At 6-months
 - More stress
 - Less approach
 - Poorer self-regulation

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Environmental Health Perspectives Vol. 74, pp. 185-189, 1987

The Neonatal Behavioral Assessment Scale as a Biomarker of the Effects of Environmental Agents on the Newborn by Edward Z. Tronick*

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Measuring Volitional Behavior

- Bayley Scales of Infant Development, 3rd Edition (Bayley, 2006)
 - Cognitive
 - Receptive Communication
 - Expressive Communication
 - Fine Motor
 - Gross Motor

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Volitional Behavior

- Retaining object
- Keeping hands open
- Reaching and Grasping
- Rotate wrist
- Shifting Attention





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Volitional Behavior

- Social Smile
- Recognize Caregiver
- Social Vocalization
- Reacts to disappearance of a face
- Responds to name
- Plays a social game





The Current Study 76 participants recruited in early infancy • 40 infants with a sibling with ASD • 36 infants with no family history of ASD Reflexive Responses: NICU Network Neurobehavioral Scales (NNNS) Volitional Actions: Bayley Scales of Infant Development Social-Communication: CSBS Developmental: Mullen Diagnostic: ADOS 1-wk 1-mo 2-mo 3-mo 4-mo 5-mo 6-mo 12-mo 24-mo