

UCDAVIS

HEALTH

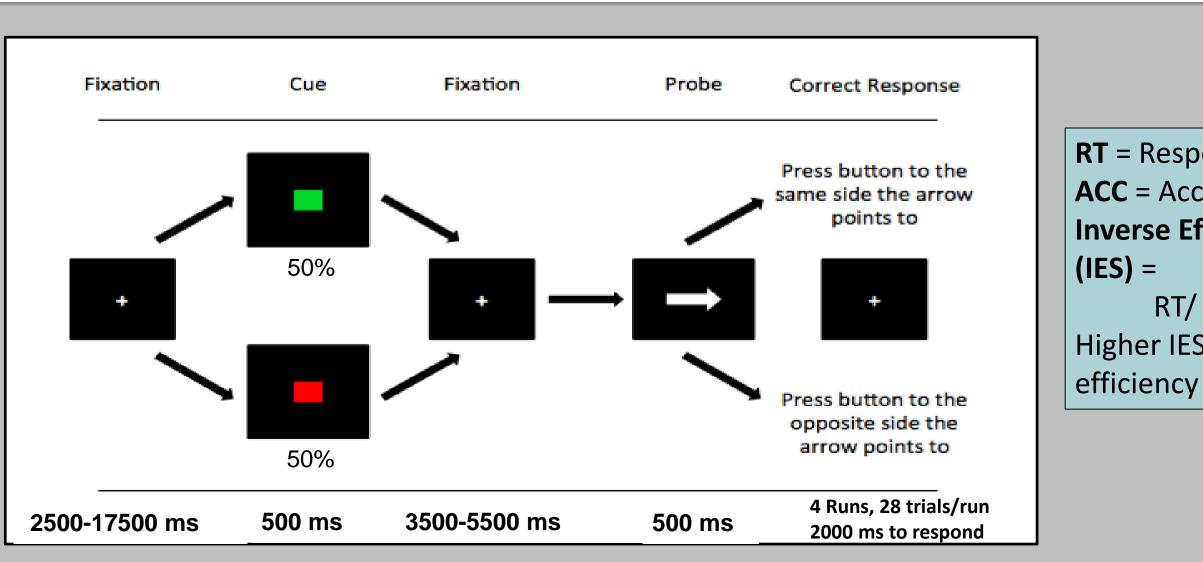
## Frontoparietal Connectivity During Cognitive Control in Autism Spectrum Disorder Rachel A. Wulff<sup>1</sup>, Andrew Gordon<sup>1</sup>, Marie K. Krug<sup>1</sup>, Cory C. Coleman<sup>1</sup>, Tara A. Niendam<sup>1</sup>, Tyler A. Lesh<sup>1</sup>, Cameron S. Carter<sup>1</sup>, Marjorie Solomon<sup>1</sup>

## Introduction

Many individuals with Autism Spectrum Disorder (ASD) exhibit executive control (EC) deficits that persist into adolescence and young adulthood. However, it is unclear if this is due to deficits in proactive control (engaged *before* a demanding task) or reactive control (engaged during the task). In other studies from our lab, proactive control has been found to be both intact and impaired. Since poorer EC functioning in ASD is linked to worse life outcomes, determining the exact nature of deficits is crucial for treatment strategies.

The current study uses fMRI data from the first wave of a five year cohort-sequential study of adolescents and young adults with ASD to examine the neural correlates of EC. Sustained activity of the frontoparietal task control network (FPTC) and salience network (SN) is important for proactive control, whereas transient activity in these networks in addition to the cingulo-opercular task control network (COTC) and the ACC node of the SN appears critical for reactive control. Thus, comparing the functional connectivity in those with ASD compared to typically developing controls (TYP) should help elucidate differences and impairments in control strategies.

### Preparing to Overcome Prepotency (rPOP) Task



MRI Data Acquisition: 3 Tesla Siemens Trio, 32 channel head coil; BOLD & MPRAGE

fMRI Data Preprocessing: 'Performed in FSL (v5.0.9). Included, BBR coregistration, normalization using FLIRT and FNIRT, motion correction using MCFLIRT, slice-timing correction, brain extraction, spatial smoothing (FWHM = 6mm), grand mean intensity normailzation, and highpass temporal filtering (sigma = 45.0ms)

Data QA: Runs removed if: \*< 70% task accuracy \*> .9 mm displacement or 3 degrees rotation \*> 20% outlier volumes (volumes with framwise displacement > 0.9mm)

fMRI Data Analysis: General linear model approach implemented in FSL. Cue and probe phase of red and green trials modeled separately. Error trials modeled separately as nuisance variable and included. Standard motion parameters and displacement regressors included **Functional Connectivity:** gPPI ROI -ROI connectivity analyses performed in CONN functional connectivity toolbox (http://www.nitrc.org /projects/conn) to look at differences in connectivity between groups (ASD, TYP) for Red Trials > Green Trials at the cue and at the probe. ROIs from four networks (FPTC, SN, COTC, DMN) were selected from the Power et al. (2011) atlas . Results displayed survived FDR correction, q < .01.

#### Participants

		TVD (n - 77)	Elig
	ASD (n = 64)	TYP (n = 77)	
Males (%)	53 <i>(82.8%)</i>	61 <i>(79.2%)</i>	•
Females (%)	11 (17.2%)	16 <i>(20.8%)</i>	AS
Age (SD)	18.1 <i>(2.8)</i>	17.7 <i>(3.1)</i>	•
Full Scale IQ (SD) *	103.7 <i>(12.9)</i>	110.1 <i>(11.2)</i>	•
Verbal IQ (SD) *	98.1 <i>(14.0)</i>	105.9 <i>(12.4)</i>	<u>TY</u>
Non-Verbal IQ (SD)	109.1 <i>(15.0)</i>	111.7 <i>(12.5)</i>	•
ADOS-2 CSS (SD)	7.7 (1.7)	_	
			•

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# **RT** = Response Time **ACC** = Accuracy **Inverse Efficiency Score RT/** Accuracy Higher IES = lower ility /ASI-2 FSIQ ≥ 70 DOS-2

SM 5 Criteria Checklist r ASD

DSM 5 Diagnoses

o psychotropic edication

\*FSIQ and VIQ greater for TYP group compared to ASD group

