Prior reproductive experience modulates neural responses to infant faces



Where discovery inspires care

INTRODUCTION

- The transition to motherhood is marked by social, neurophysiological, and cognitive change [1, 2]
- One change is in **infant cue processing**, which is necessary for sensitive and appropriate maternal care of the baby [3, 4]



- This processing can be impacted by many factors, including prior experience with infants as characterized by **parity** (the number of children that a mother has) [5, 6]
- Preliminary review has suggested that multiparous mothers (mothers with more than one child) process infant cues more efficiently than primiparous mothers (first-time mothers) [7]
- Maternal sensitivity and orienting to infant cues is a key part in the development of attachment, which has lasting consequences across the child's lifespan [3]
- Electroencephalography (EEG) has high temporal specificity; useful in investigating the quick, intuitive, and adaptive process of caregiving and infant cue processing [8]
 - Using event-related potential (ERP) data, the P300 (a unique component occurring approx. 200 to 600ms after stimulus onset) is implicated in attention allocation, and has been linked to attachment formation and parenting [9, 10]
 - In primiparous (compared to multiparous) expectant and recent mothers at 2 months postpartum, the P300 has been shown to have a higher mean amplitude when viewing infant faces [11, 12]; this may be due to primary preoccupation in first-time mothers, a period in which first-time mothers become especially focused on the health and well-being of the baby, and show heightened responsiveness to infant cues [13, 14]
- Thus, the current study seeks to replicate and extend prior work [11] by examining how parity affects the P300 response to infant faces later in the postpartum period

PARTICIPANTS & PARADIGM

- 59 women (29 primiparous, 30 multiparous) returned to repeat the current paradigm at 7 months, having completed it prior at 2 months postpartum
- Education and infant age at the return visit differed between mothers, such that primiparous mothers had higher levels of education (t(56) = 3.15, p = .02) and multiparous mothers had older infants at the return visit (t(57) = 4.18, p < .05)
- ERP assessment consisted of 7 blocks of 42 trials (294 trials total), viewing infant face and cry stimuli amidst one-back catch trials (only infant faces used in analysis)



Infant faces were color photographs of unfamiliar infants ranging in age five to ten months; balanced for gender and race (Caucasian and African American) with three emotional categories (happy, neutral, and sad)

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DATA COLLECTION & ANALYSIS

- Continuous EEG data was recorded in Net Station 4.2.1 using an EGI 128 Geodesic Sensor Net, with a 250 Hz sampling rate and high impedance amplifiers (filters: 0.1 Hz high-pass, 100 Hz low-pass)
- Data was pre-processed in Net Station 4.5; EEG was 30 Hz filtered and then segmented into 1-second epochs (-100ms to 900ms after stimulus onset); artifact detection of $200\mu V$ for bad channels, $150\mu V$ for eye blinks, and $150\mu V$ for eye movements; channels with artifacts replaced with spline interpolation if >40% trials had artifacts
- EEG data averaged within each condition; P300 ERPs in response to faces averaged around Pz site at electrodes 54, 61, 62, 68, 79, 80 with mean amplitude within 200 to 600ms after stimulus onset
- ANOVA conducted with time (visit 1, visit 2) and condition (happy, neutral, sad) as within-subject variables, parity (primiparous vs. multiparous) as a between-subject factor, and education and infant age at visit 2 as covariates

RESULTS

• Mean P300 amplitude per condition was not significantly different [F=(2, 53) = 1.05, p = .36], so ERPs across conditions were collapsed



- Primiparous mothers had a larger P300 amplitude in response to infant faces compared to multiparous mothers [F=(2, 53) = 6.92,p = .01]
- No effect of education or infant age on P300 response; no covariate interactions with condition, time, or parity



Pz site

electrodes



DISCUSSION

- Current study replicates previous findings at 2 months postpartum [11] and extends them to 7 months postpartum
 - This suggests that heightened infant cue processing in mothers may be more of a trait-like construct that is prolonged after the birth of the first child, rather than a temporary response to the birth
- Findings are novel as a majority of neurophysiological studies regarding the role of prior reproductive experience utilize animal models, rather than human models [e.g. 15]
- Difference in P300 amplitude can be interpreted in multiple ways:
 - a. Enhancement of primiparous mothers' response due to increased levels of effort or attention as infant facial cues are less familiar, yet more salient and engaging
 - This enhancement interpretation is supported by broader psychological ideas concerning primary preoccupation in first-time mothers, as first-time mothers are more intensely preoccupied with the infant's wellbeing [13, 14]
 - However, current research also suggests that the first-time mothers preoccupation period extends for a longer time than previously thought (to at least 7 months, rather than 3-4 months) [14]

b. Attenuation of multiparous mothers' response due to greater infant experience, thus leading to less cognitive effort and more efficient cue processing [7]

FUTURE DIRECTIONS & LIMITATIONS

- Additional research may also investigate how far into the postpartum period this differentiated response extends, and when (if ever) responses become similar
- Further research should link neurophysiological responses to caregiving behavior, providing insight into how differences in cue processing may impact mother-infant interaction

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ACKNOWLEDGEMENTS

This work was supported by NIDA P01 DA022446. We thank all the families who participated

