

- Listening to our Daughters: Girls & Women with Autism will Inform Novel Treatments

Kevin Pelphrey

*Carbonell Family Professor and Director
Autism and Neurodevelopmental Disorders Institute*

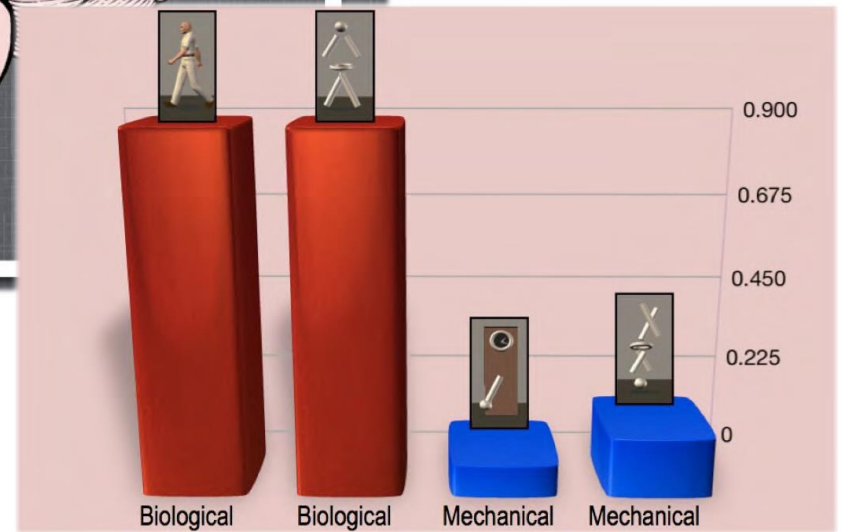
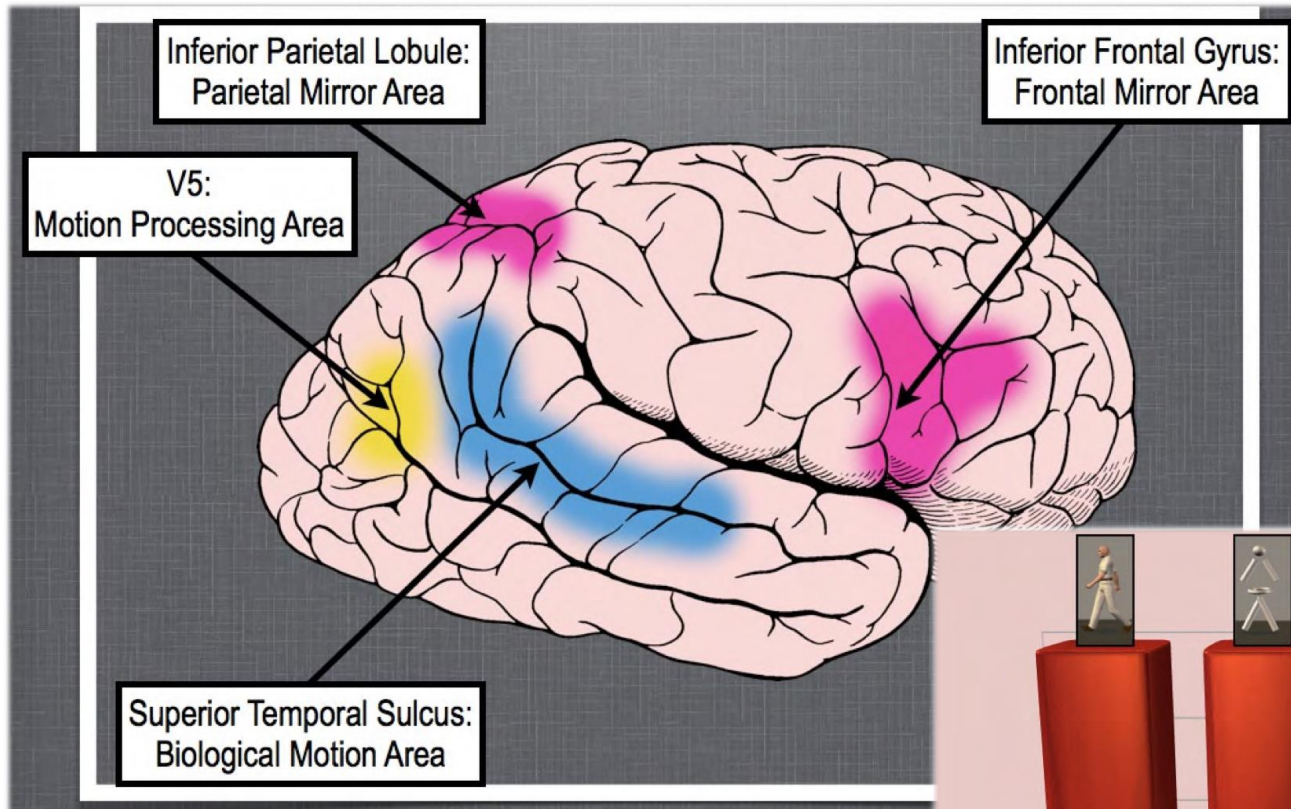
October 26, 2016

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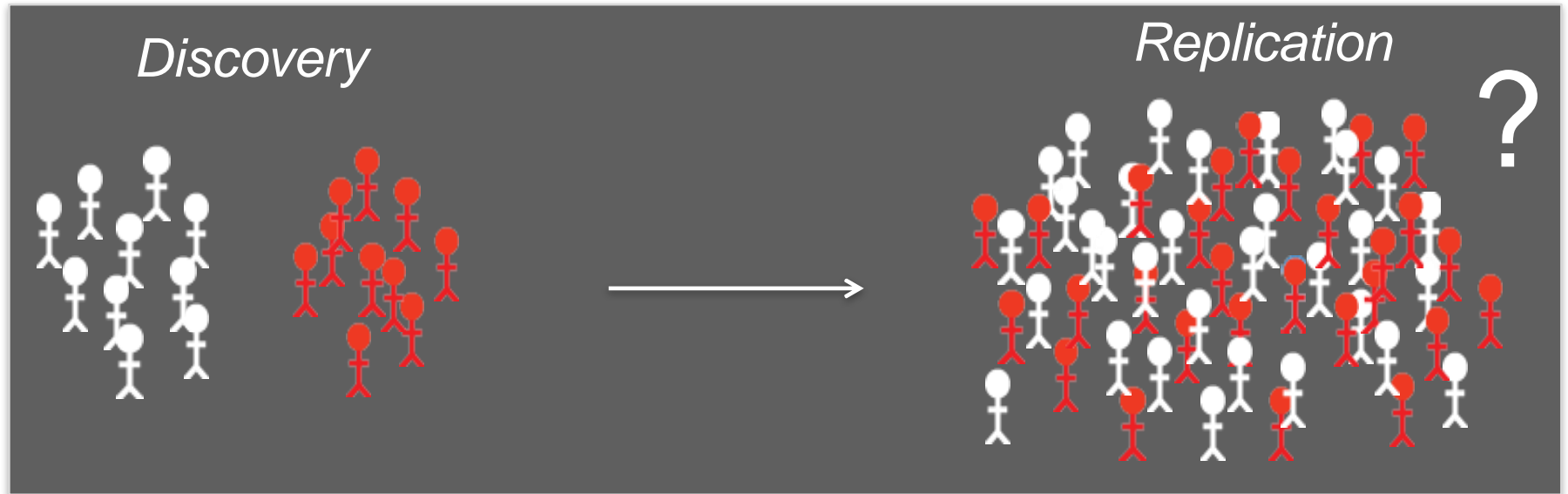
Brain Systems for Social Cognition



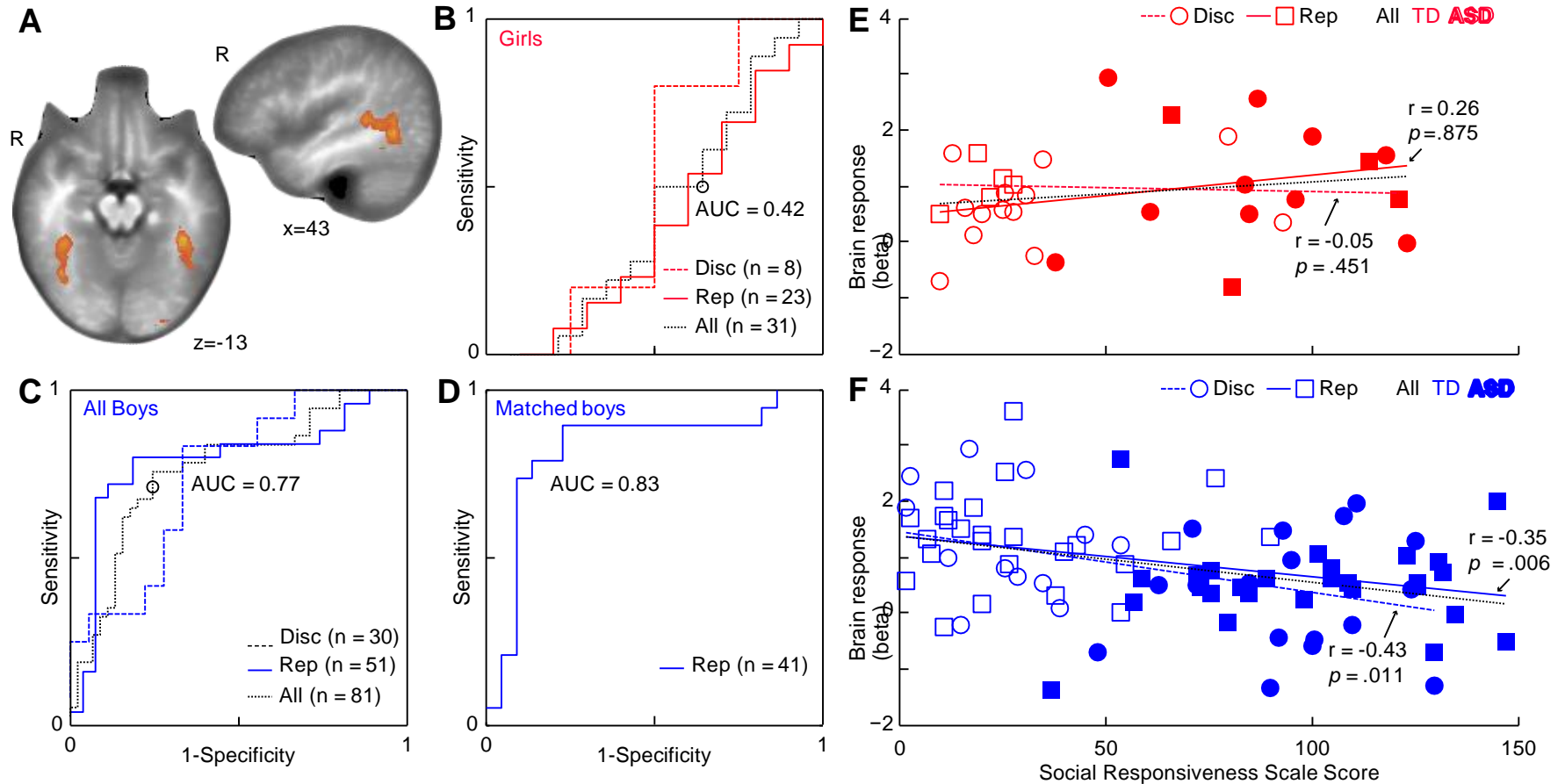
Pelphrey et al. (2003) *Journal of Neuroscience*

Can we see autism's signature in the individual brain?

Classification Analysis

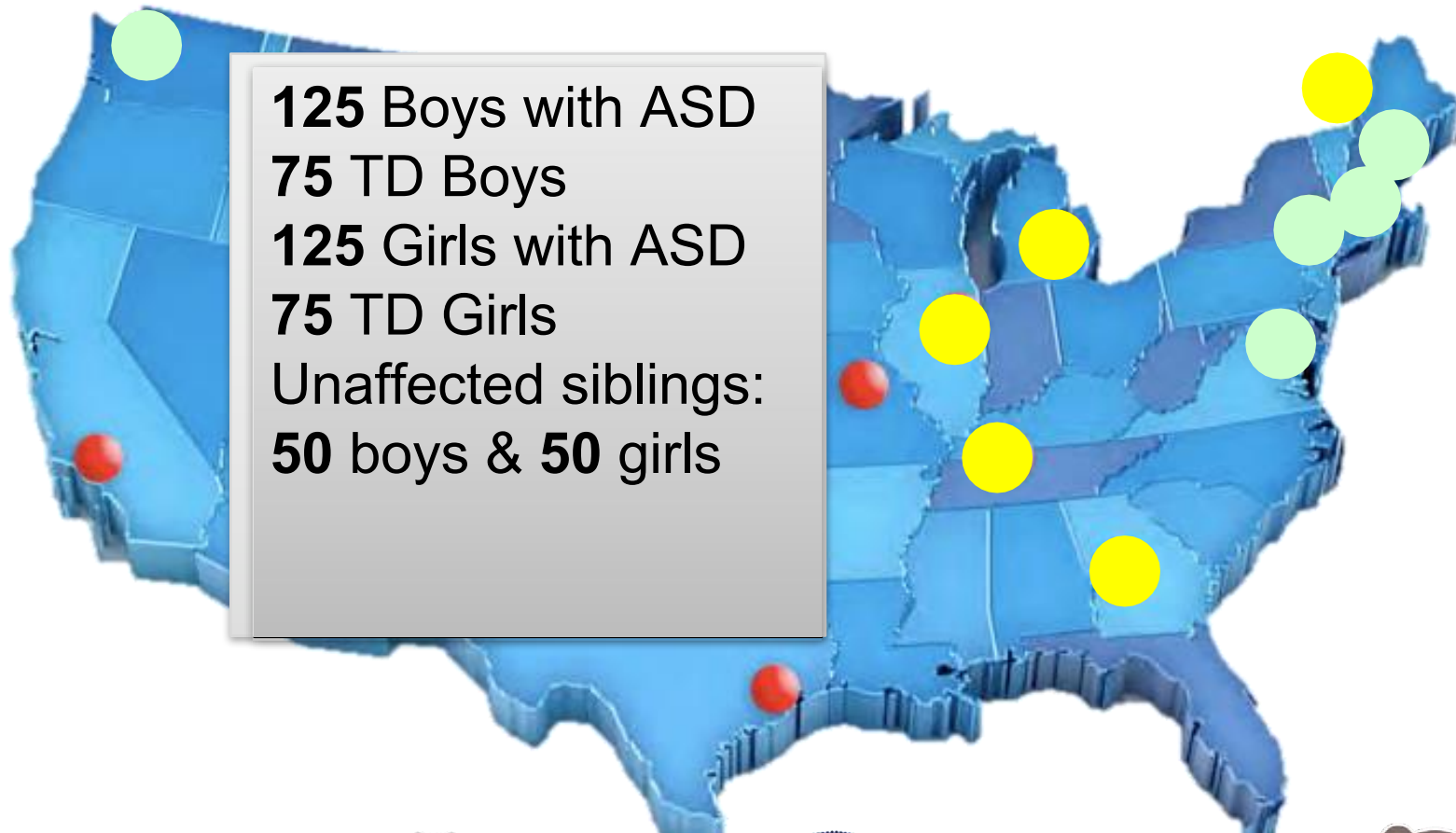


A weak response to biological motion is a marker of autism in boys (but not girls!)



Björnsdotter et al., *JAMA: Psychiatry*, 2016

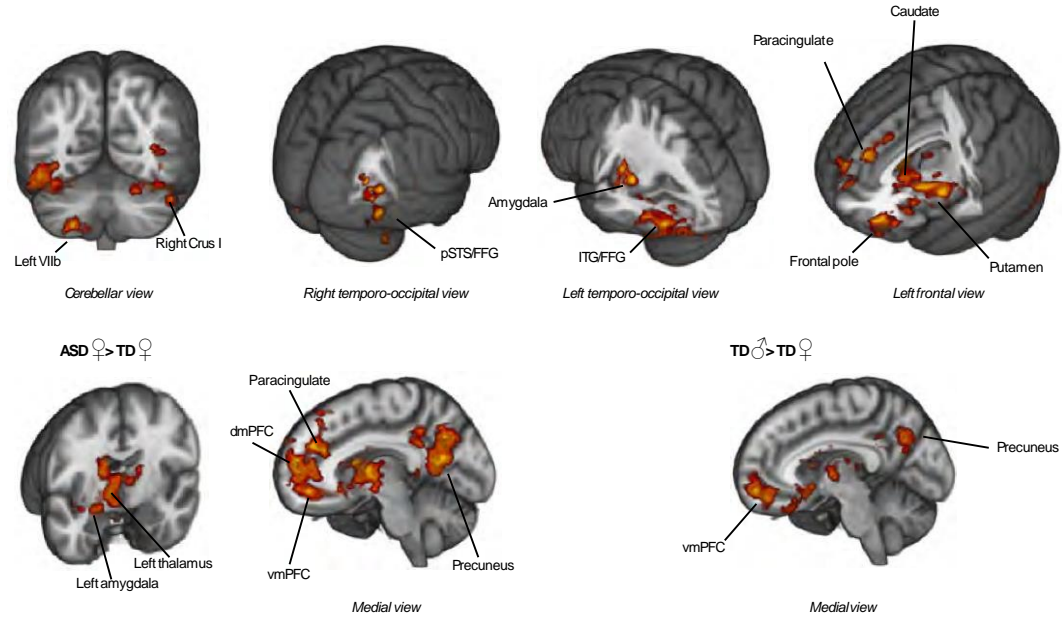
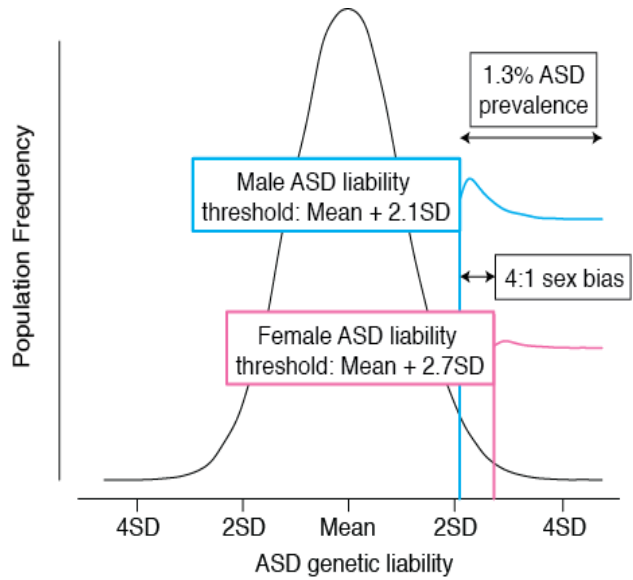
Autism Center of Excellence: Girls Network



Milestones	April 1 2016
Target: Total Recruitment	374
Actual: Total Recruitment	454
Actual/Target Ratio: Total Recruitment	121%
Target: Racial Minority Recruitment	65
Actual: Racial Minority Recruitment	110
Actual/Target Ratio: Racial Minority Recruitment	169%
Target: Hispanic Ethnicity Recruitment	33
Actual: Hispanic Ethnicity Recruitment	60
Actual/Target Ratio: Hispanic Ethnicity Recruitment	182%

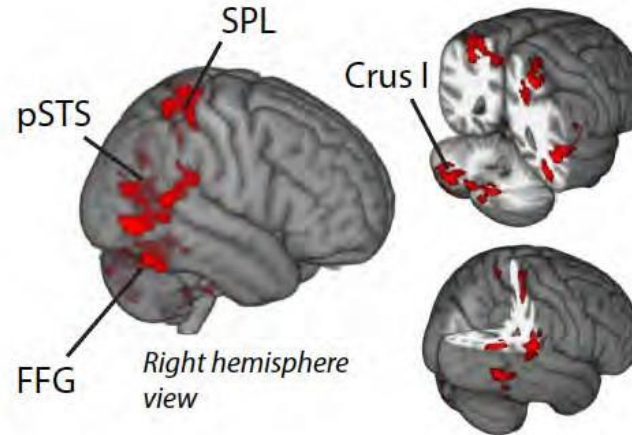
Sex differences in brain response to coherent versus scrambled biological motion $ASD \text{♀} > ASD \text{♂}$

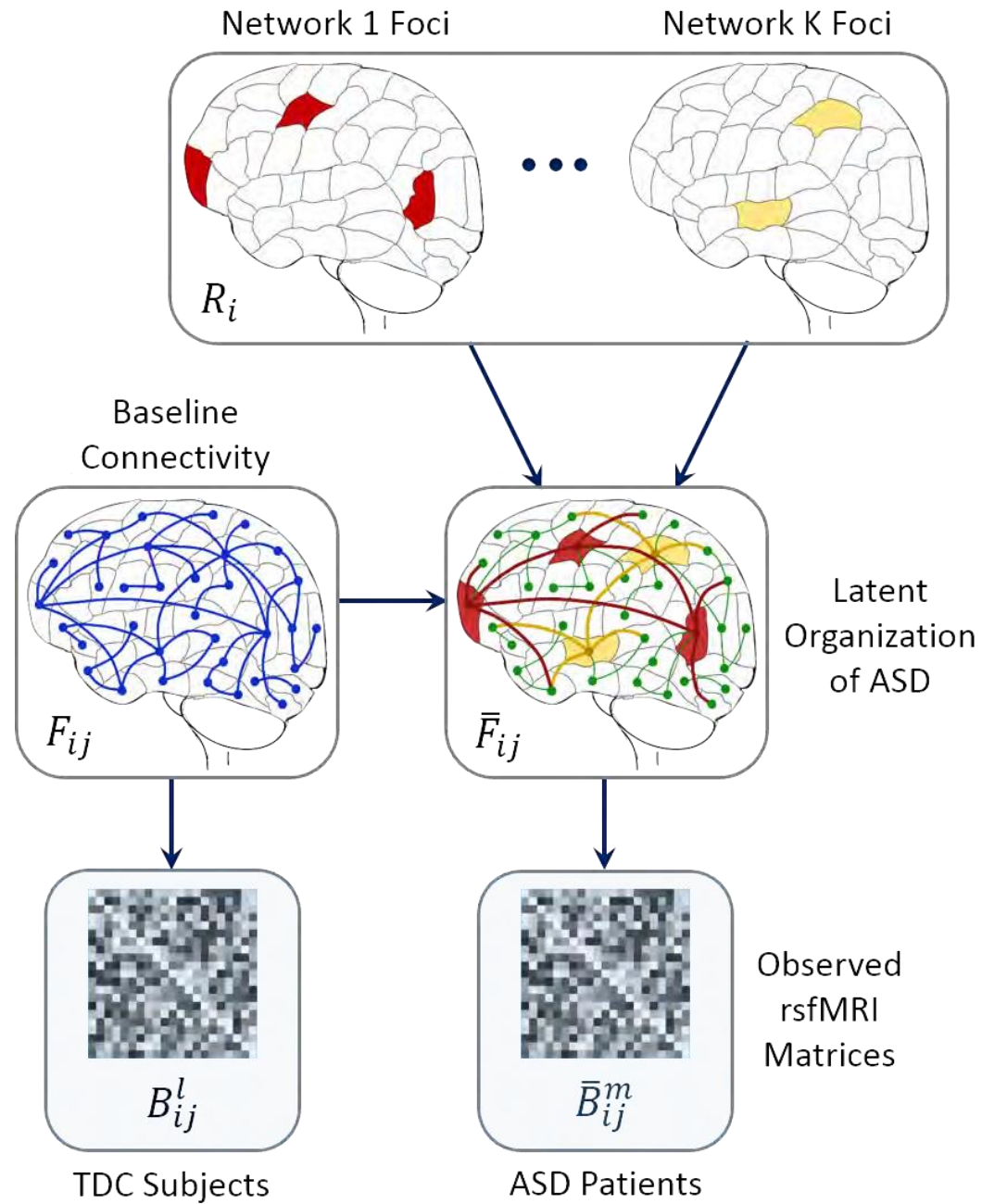
ASD $\text{♀} > ASD \text{♂}$



♀:female; ♂:male; dmPFC:dorsomedial prefrontal cortex; FFG:fusiform gyrus; ITG:inferior temporal gyrus; pSTS:posterior superior temporal sulcus vmPFC:ventromedial prefrontal cortex

ASD $\text{♀} > ASD \text{♂}$





How do we translate basic
science into practicable
treatments aimed at *target
engagement?*



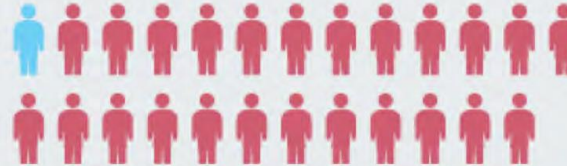
IMPRECISION MEDICINE

For every person they do help (blue), the ten highest-grossing drugs in the United States fail to improve the conditions of between 3 and 24 people (red).

1. ABILIFY (aripiprazole)
Schizophrenia



2. NEXIUM (esomeprazole)
Heartburn



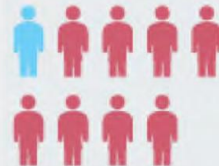
3. HUMIRA (adalimumab)
Arthritis



4. CRESTOR (rosuvastatin)
High cholesterol



5. CYMBALTA (duloxetine)
Depression



6. ADVAIR DISKUS (fluticasone propionate)
Asthma



7. ENBREL (etanercept)
Psoriasis



8. REMICADE (infliximab)
Crohn's disease



9. COPAXONE (glatiramer acetate)
Multiple sclerosis



10. NEULASTA (pegfilgrastim)
Neutropenia



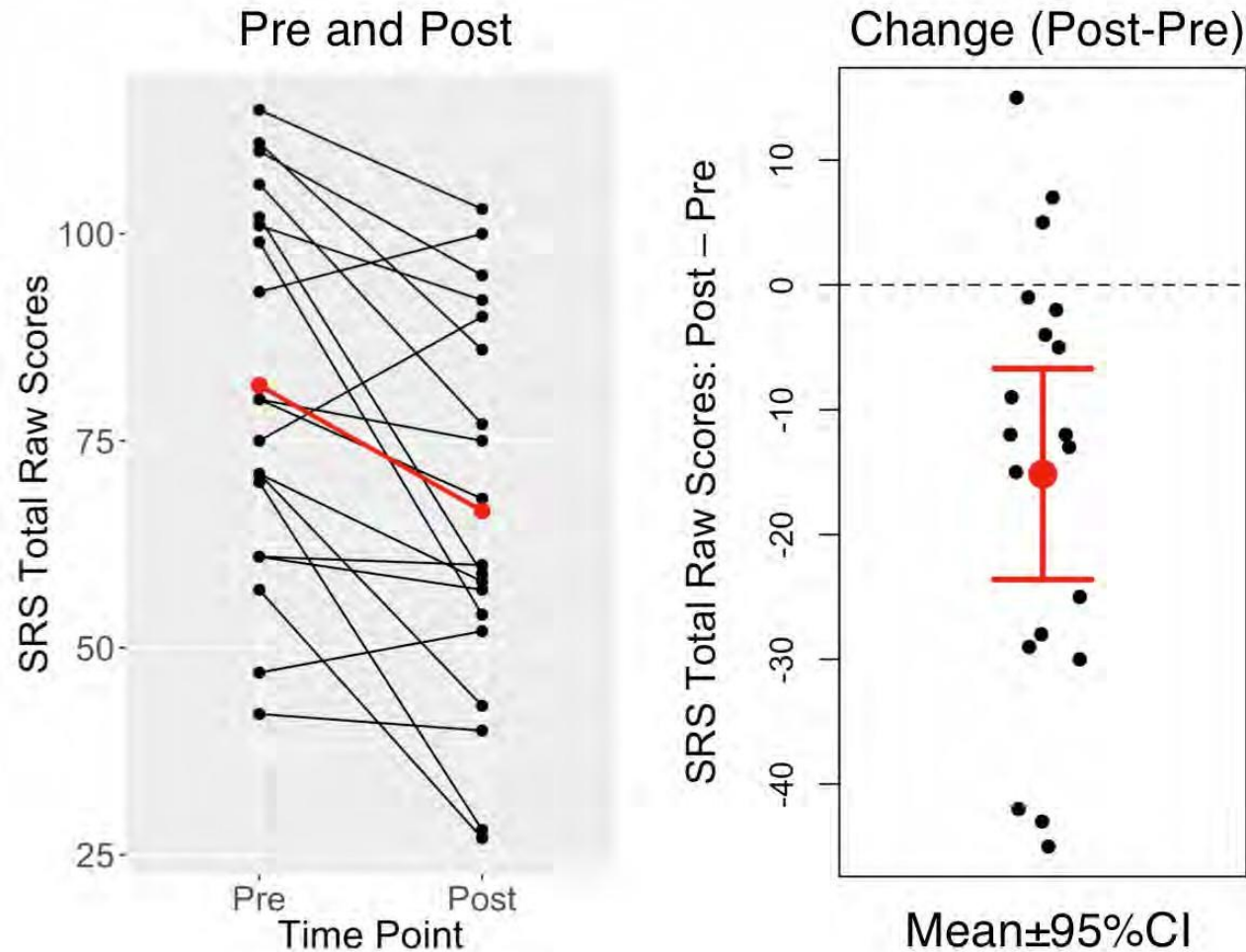
Based on published number needed to treat (NNT) figures. For a full list of references, see Supplementary Information at go.nature.com/4dr78E.

Schork (2015) *Nature*

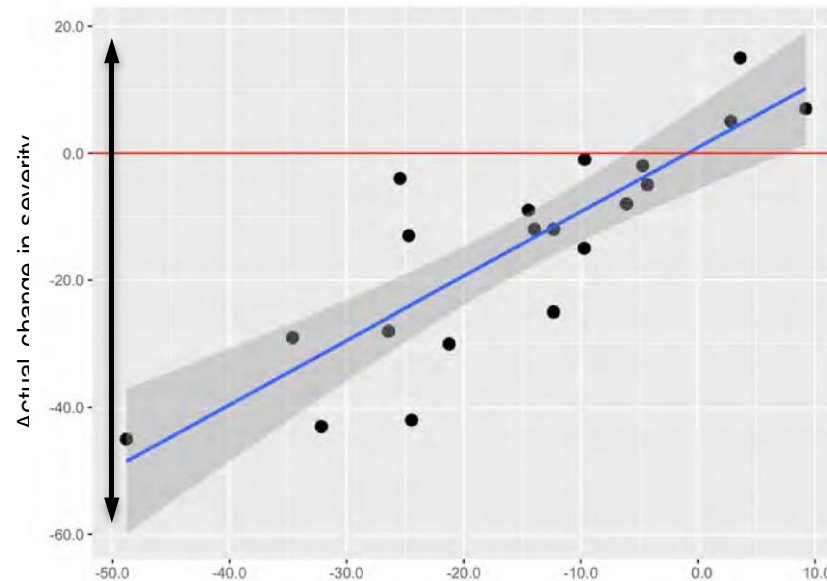
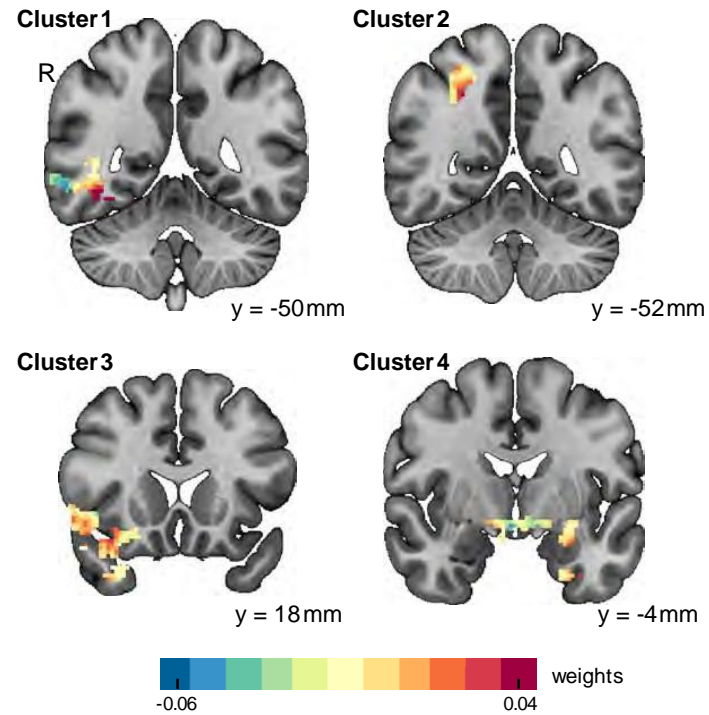
Pivotal Response Training (PRT)



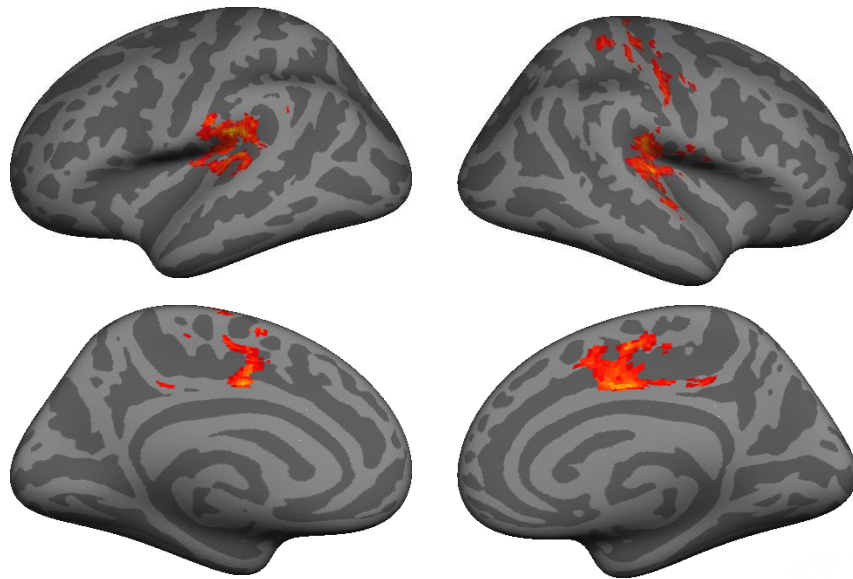
Change in Behavior: Social Responsiveness Scale (SRS)



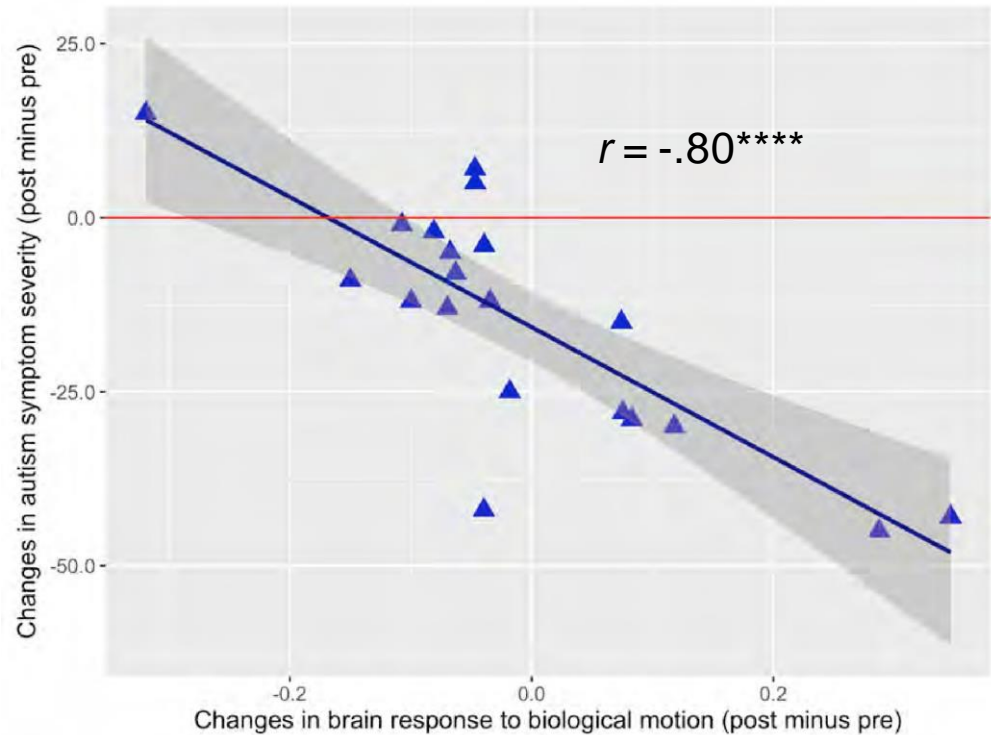
Neuro-prediction of treatment response



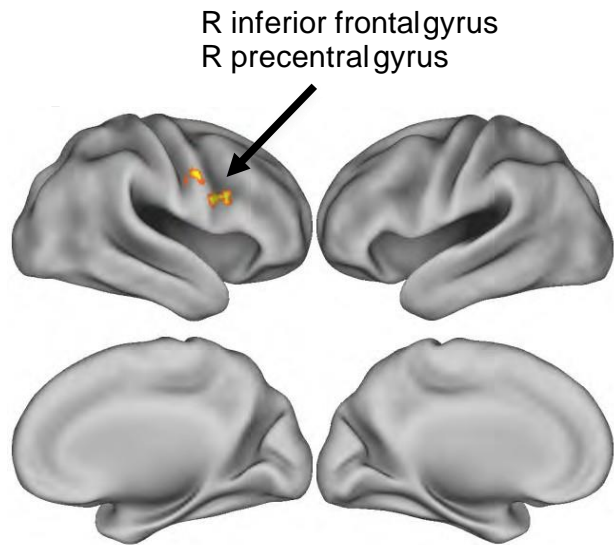
Yang et al. (in press)
Nature: Translational Psychiatry



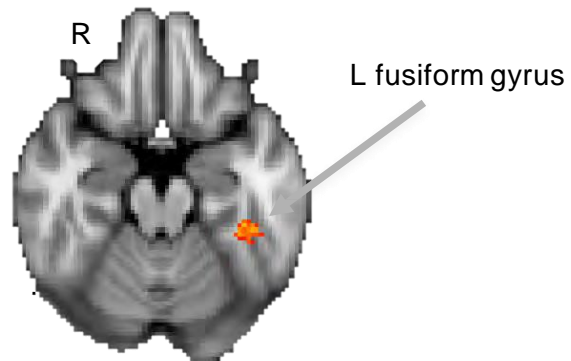
Change in brain,
driving change in
behavior



Yang et al. (in press)
Nature: Translational Psychiatry

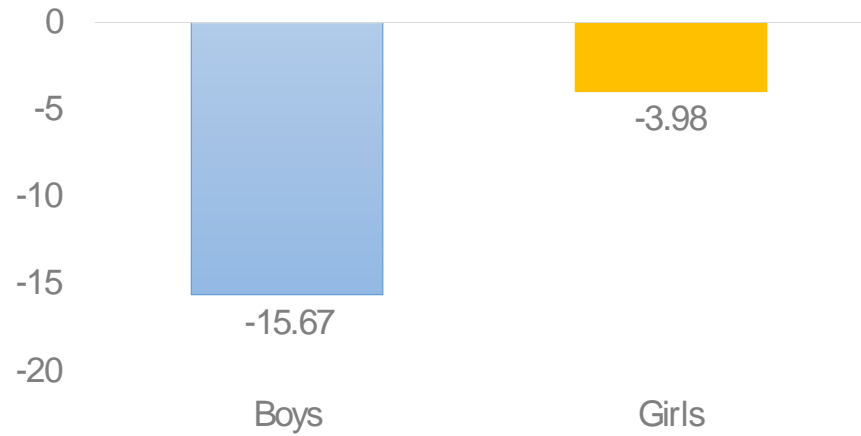


MASD > F ASD

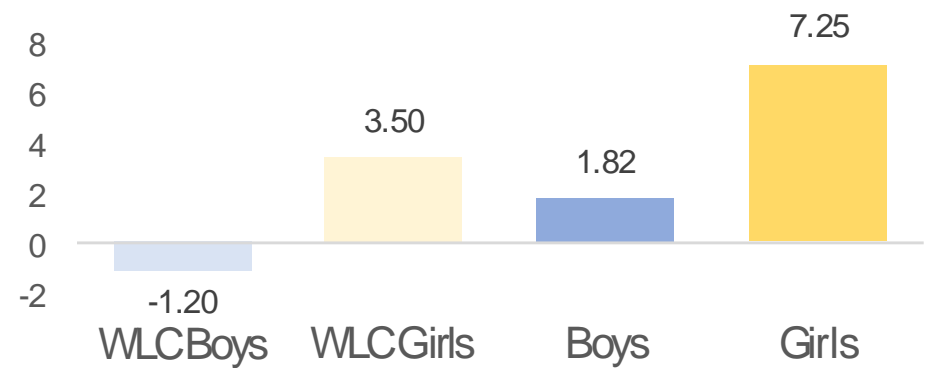


FASD > MASD

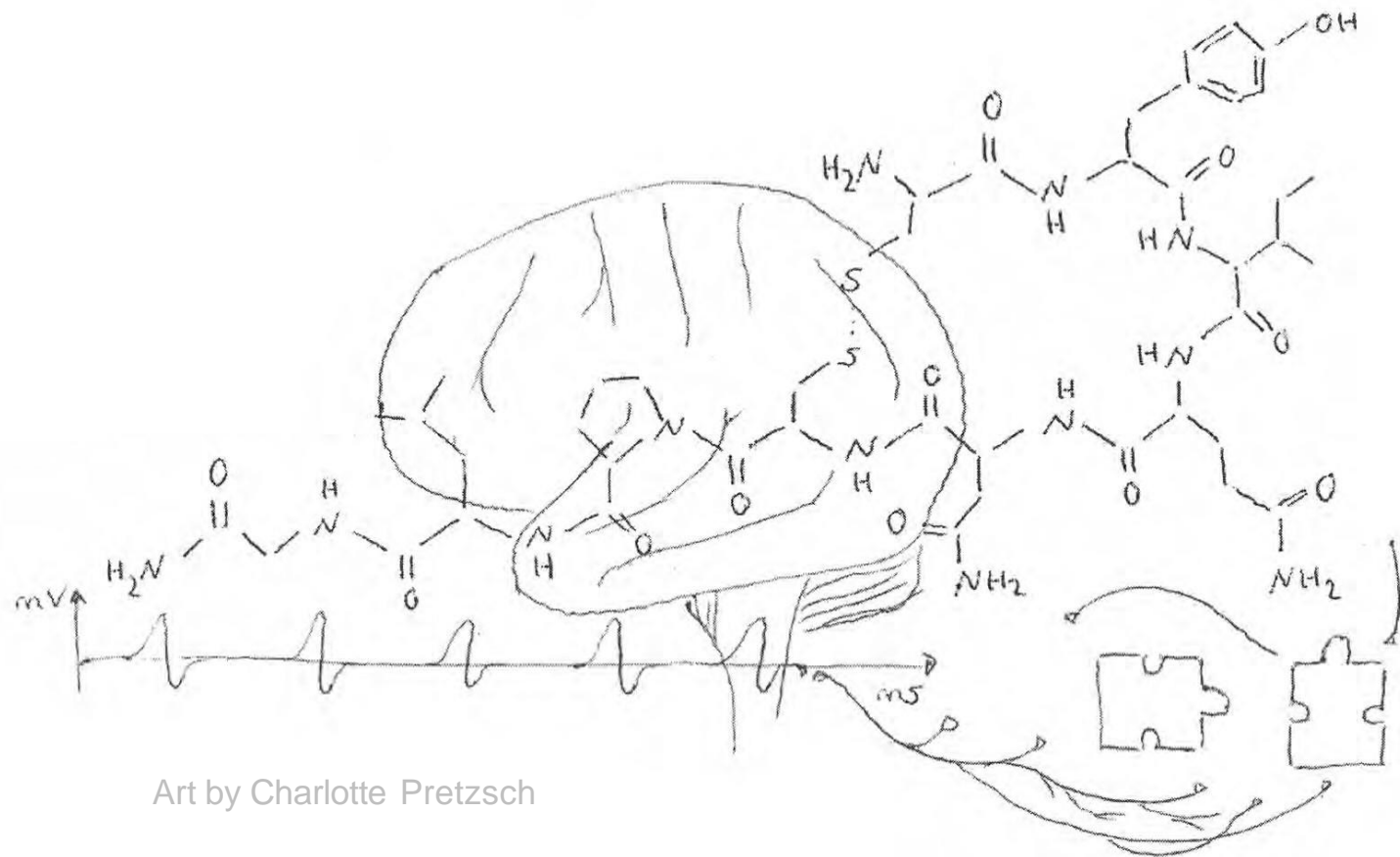
Total SRS Change - PRT vs. Waitlist
Comparison



Vineland - Socialization Change: PRT vs. Waitlist

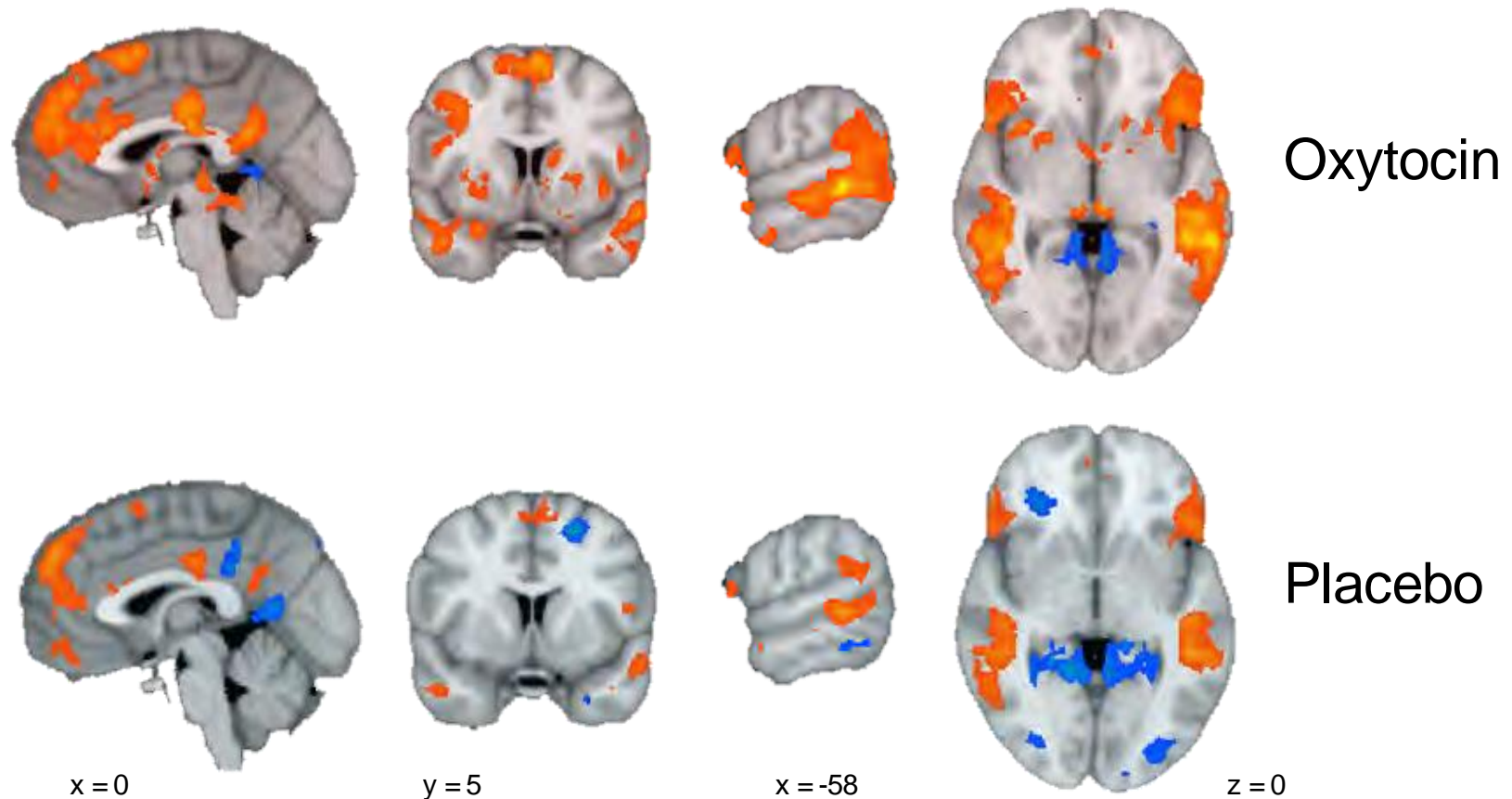


Can we boost brain responses before treatment, to make treatment work



Art by Charlotte Pretzsch

Intranasal Oxytocin – Social Judgments



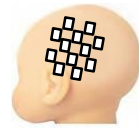
Gordon et al. (2013) *Proceedings of the National Academy of Sciences*

Linking neural signatures, genes, and behavior in to shape developmental trajectories

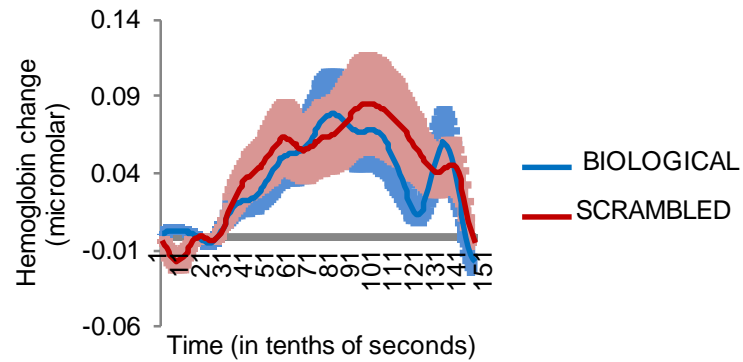


Results: fNIRS (LR and HR 3-Month-Old Infants)

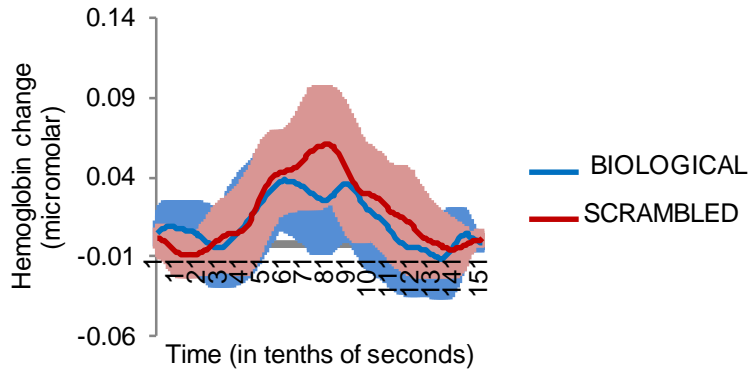
LEFT



Low Risk



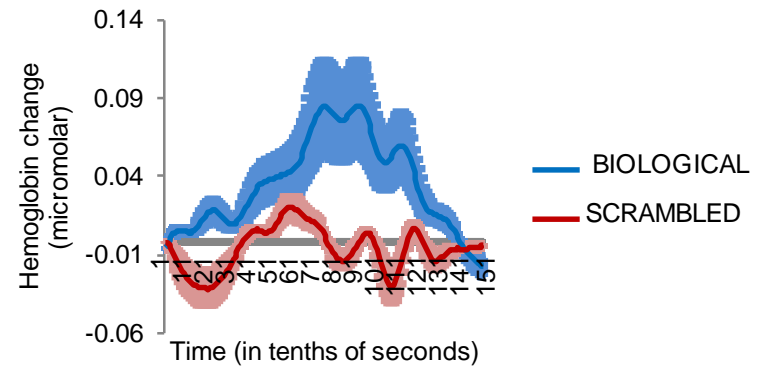
High Risk



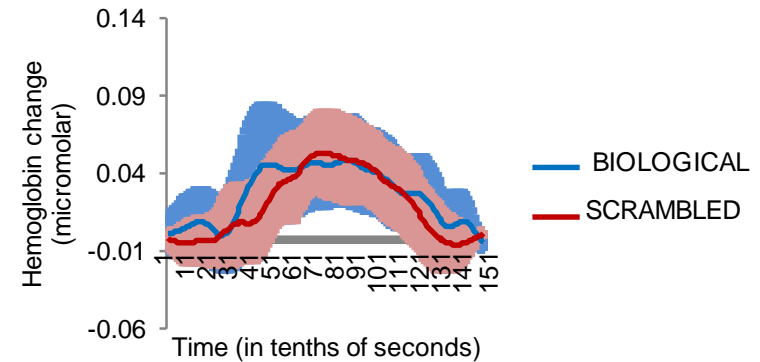
RIGHT



Low Risk



High Risk



Acknowledgments

The Carbonell Family

NIMH

NICHD

NINDS

Simons Foundation

Autism Speaks

Hilibrand Foundation

John Merck Scholars Fund

Autism Science Foundation

I thank the participants and their families for participating in our research.

I thank my colleagues who make this work so much fun.

kevinpelphey@gwu.edu

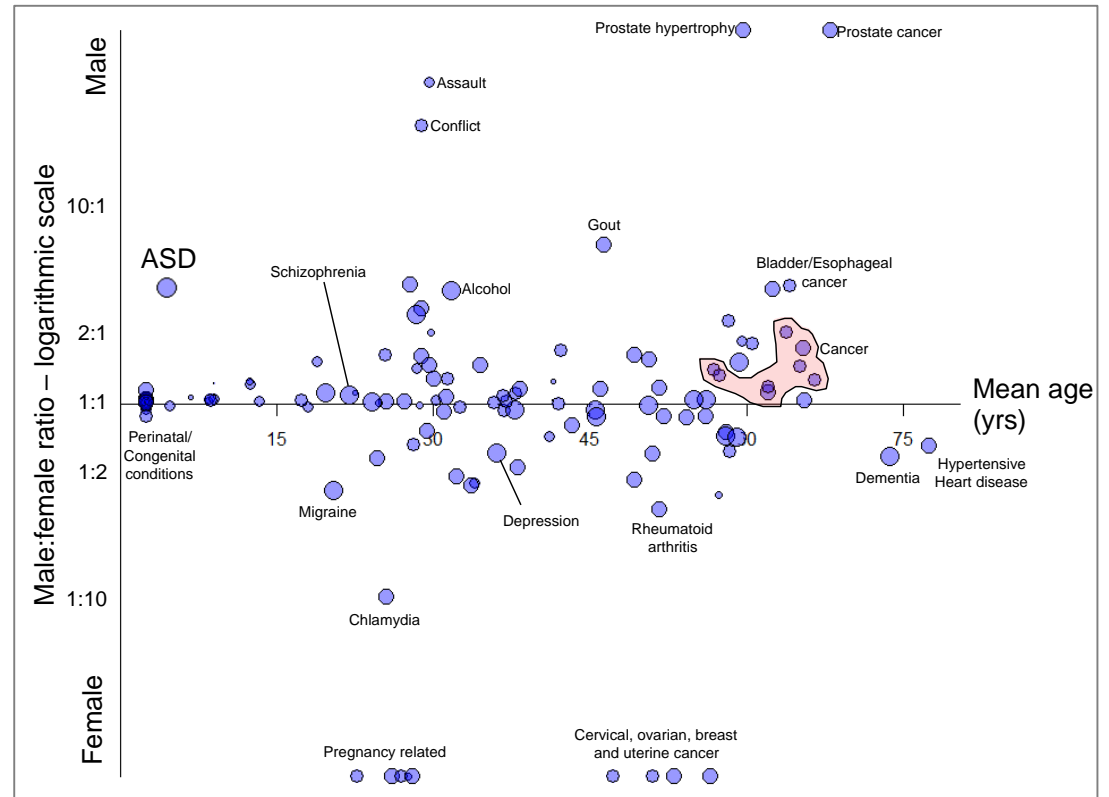
The role of genetics and sex-differential biology in risk for autism

Donna Werling, PhD
Sanders & State Labs, UCSF
October 26, 2016



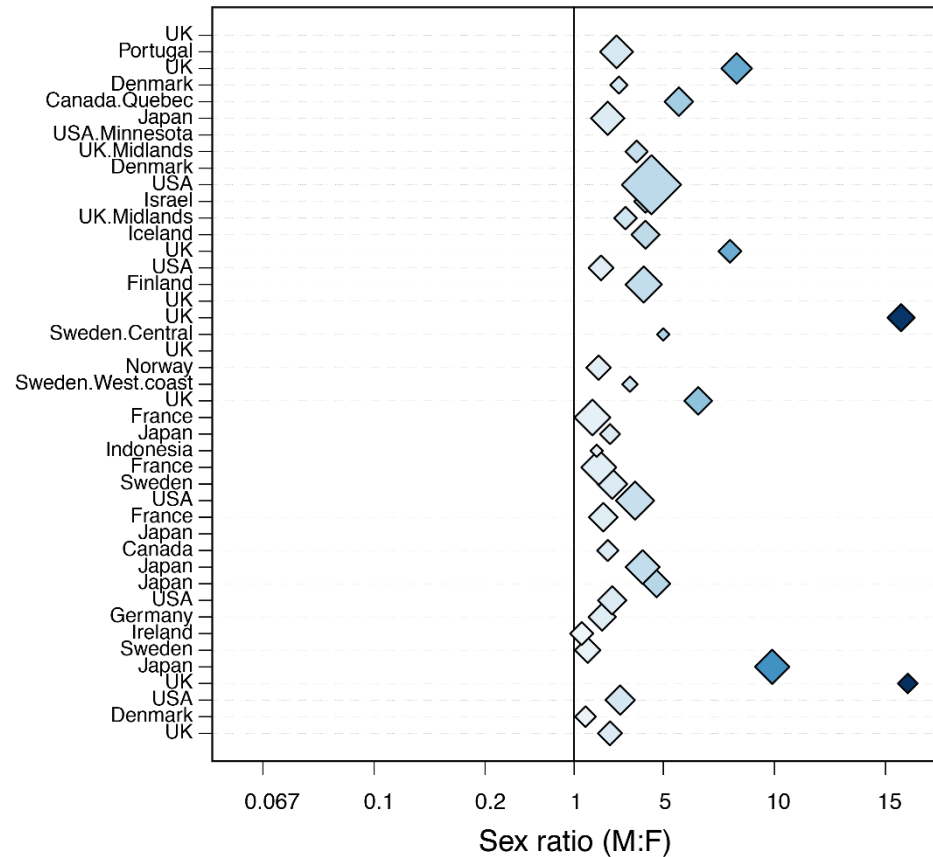
Autism prevalence is sex-biased

- ~4:1 males:females have a diagnosis of autism spectrum disorder (ASD)



Autism prevalence is sex-biased

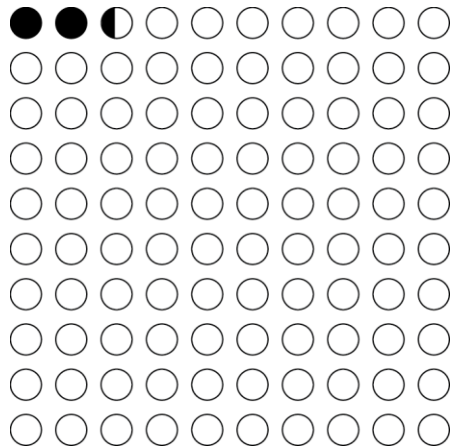
- ~4:1 males:females have a diagnosis of autism spectrum disorder (ASD)¹
- 8 males and 3 females in the 11 cases originally reported by Leo Kanner, 1943²
- Male bias consistent over time and across countries¹



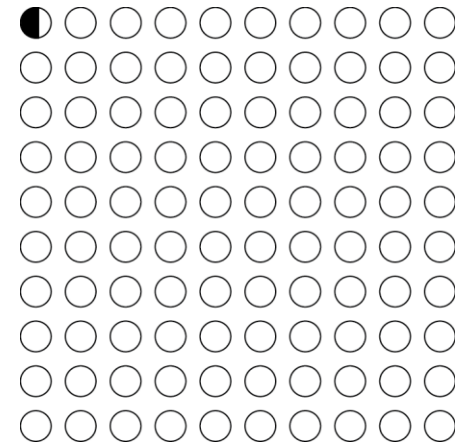
¹Fombonne, 2009, *Pediatr Res.* ²Kanner, 1943, *Nervous Child.*

Why study sex bias in ASD from a biological perspective?

Sex appears to be a potent modulator of ASD risk



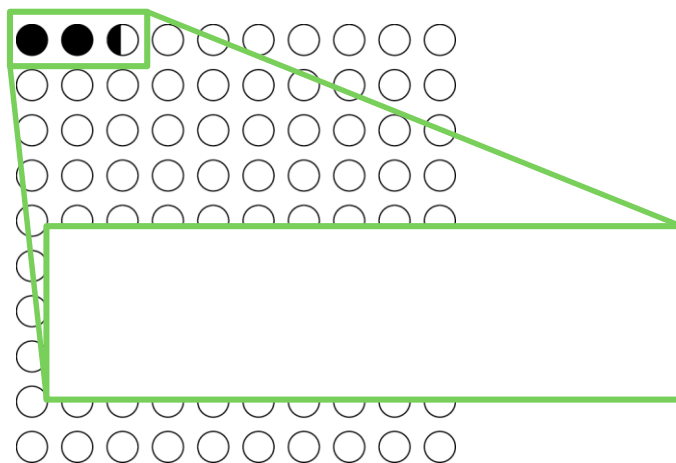
Males: 1 in 42 diagnosed



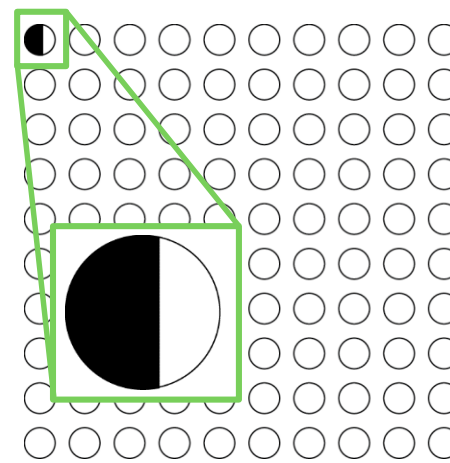
Females: 1 in 189 diagnosed

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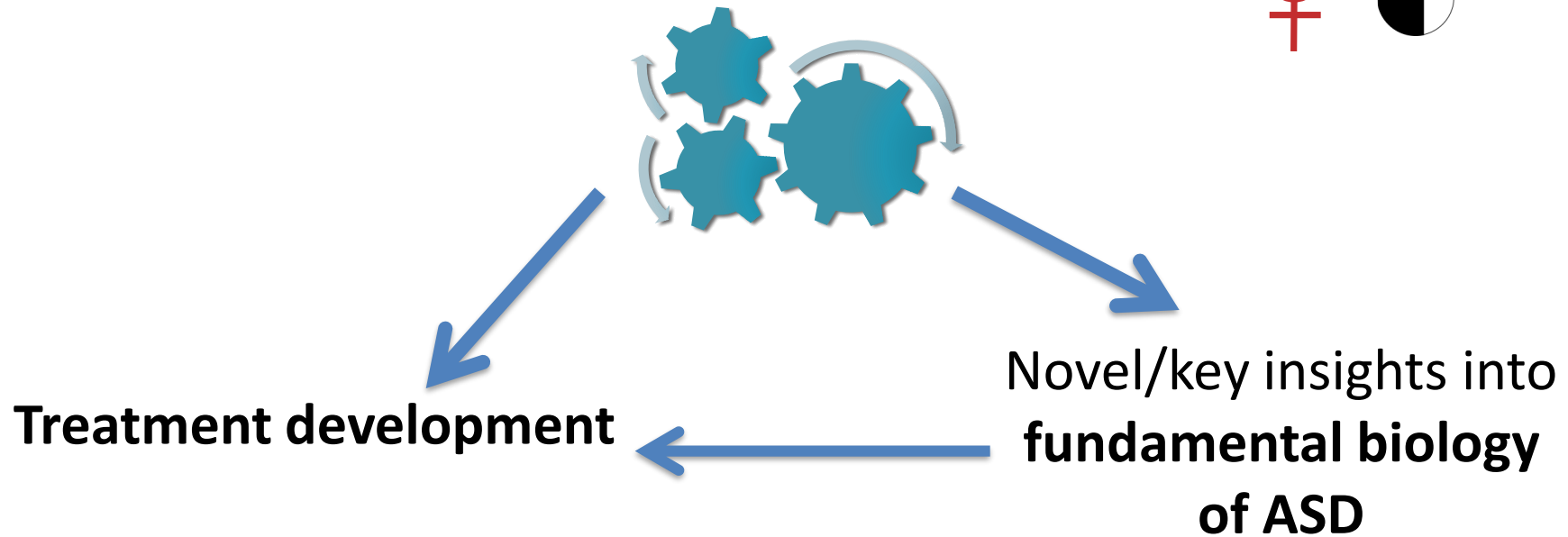
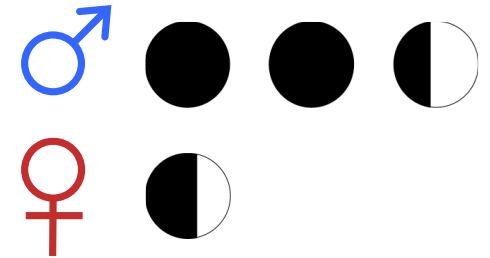
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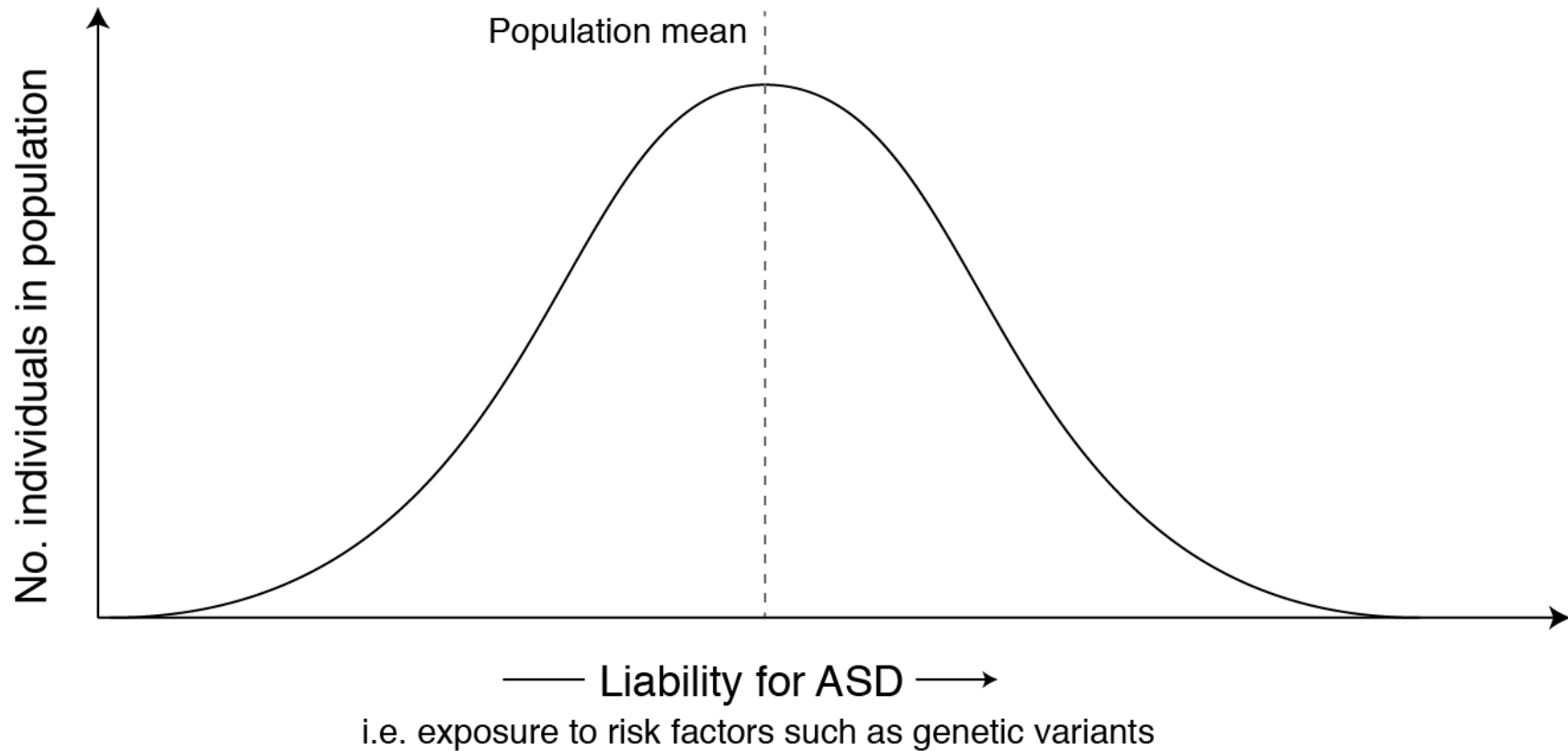
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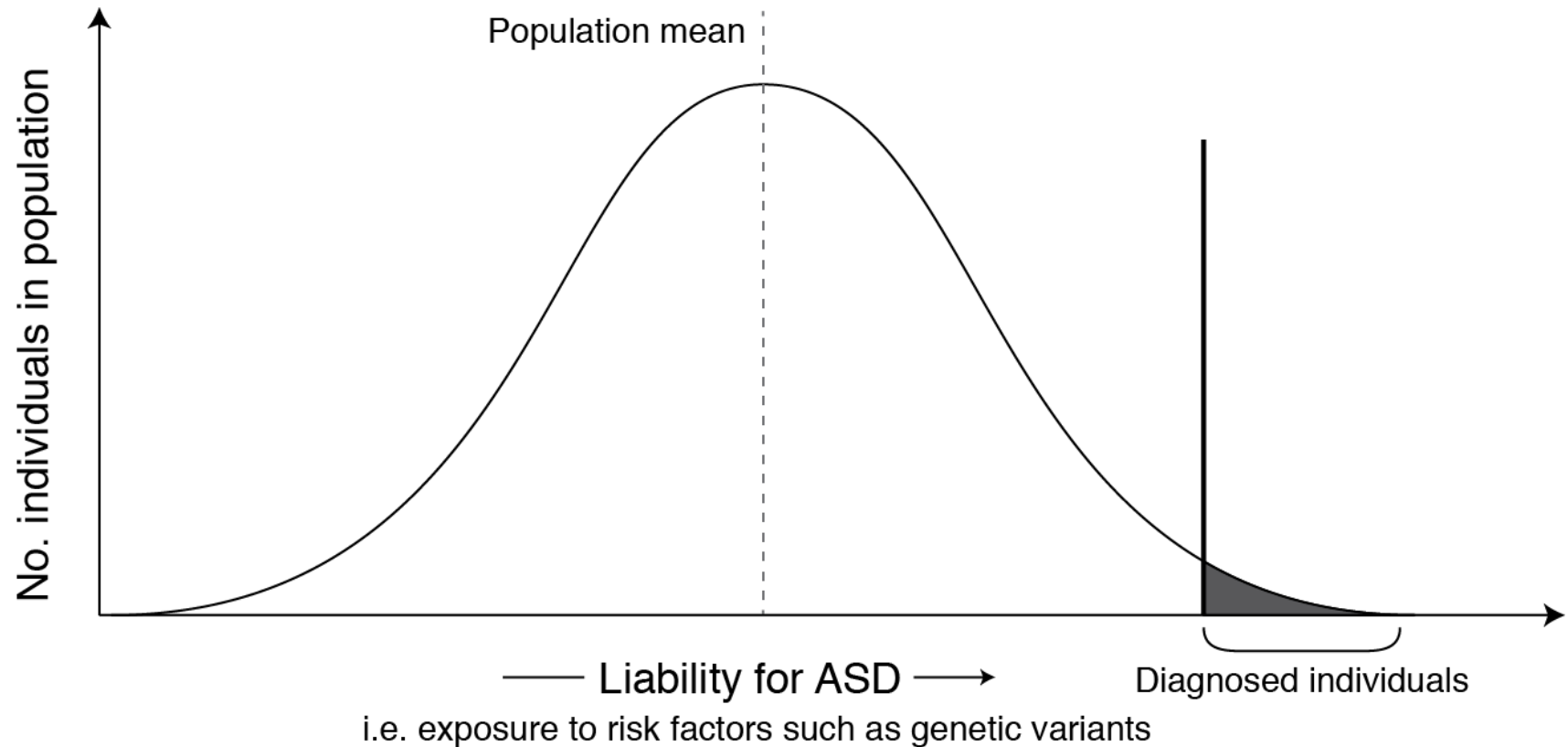
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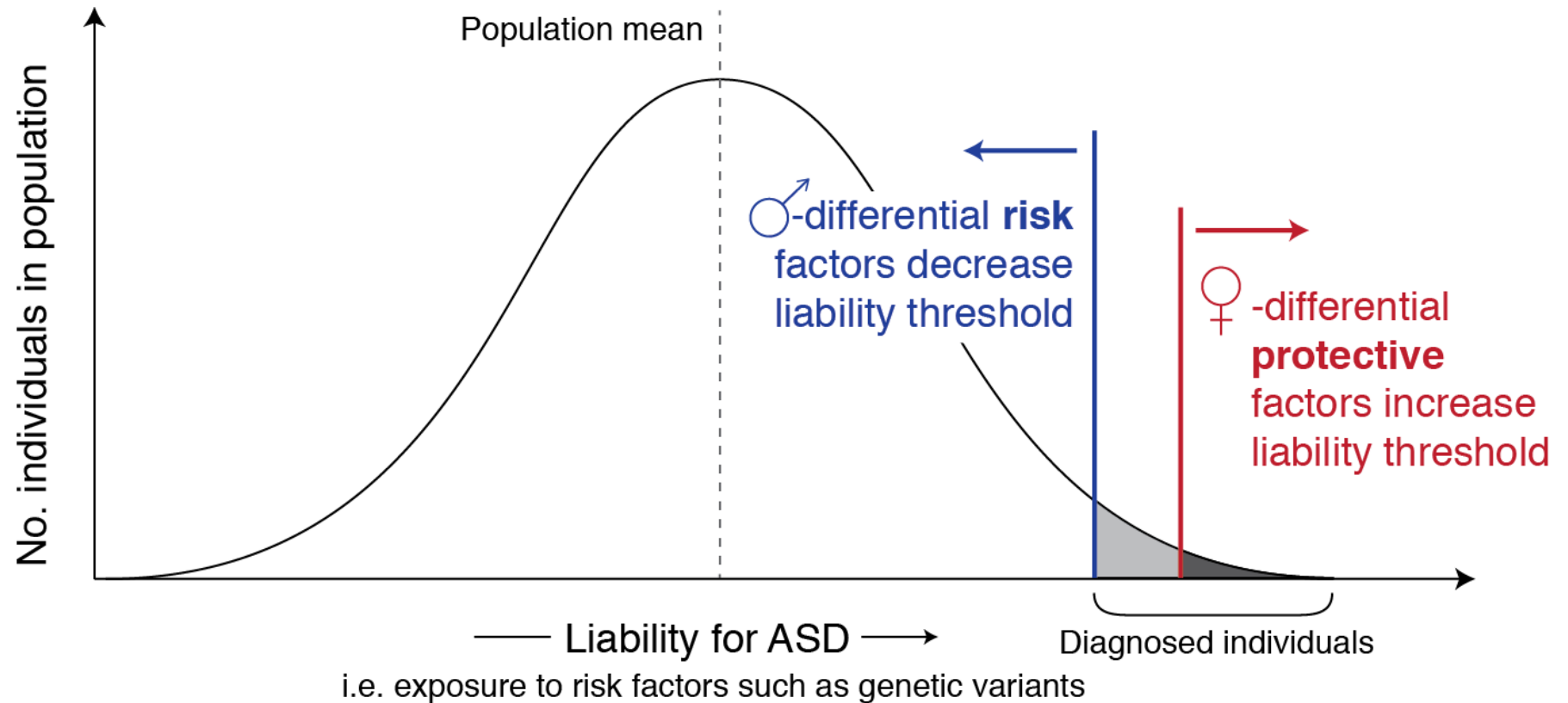
Female Protective Effect (FPE) Model for ASD = Liability model



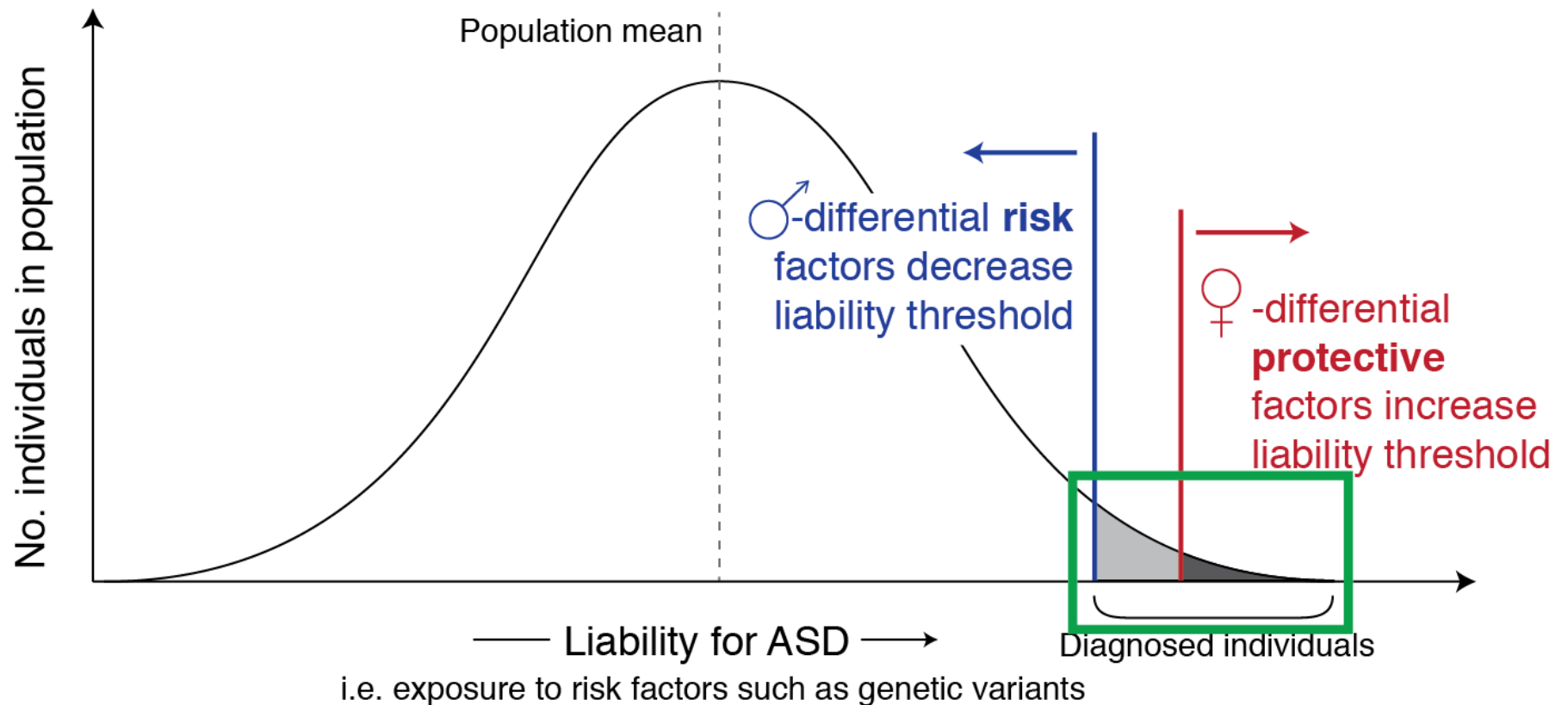
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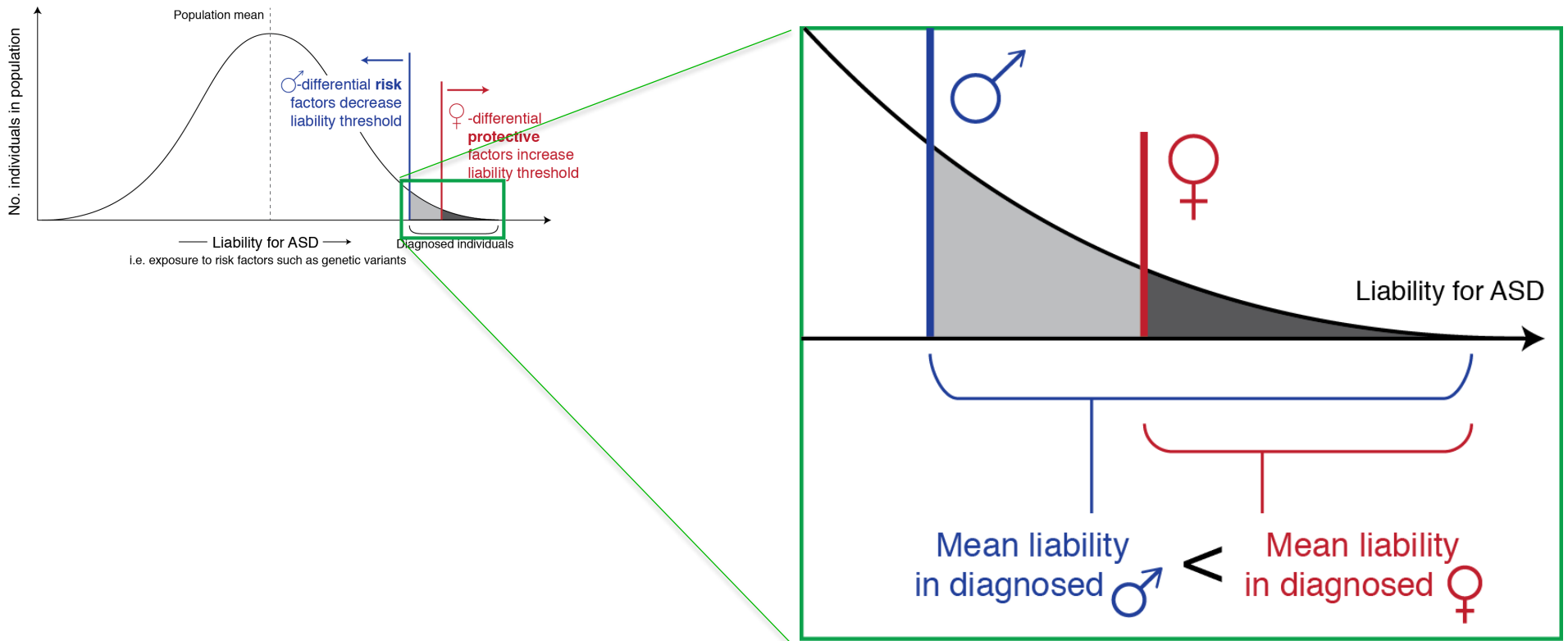
Female Protective Effect (FPE) Model for ASD = *Multiple threshold* liability model



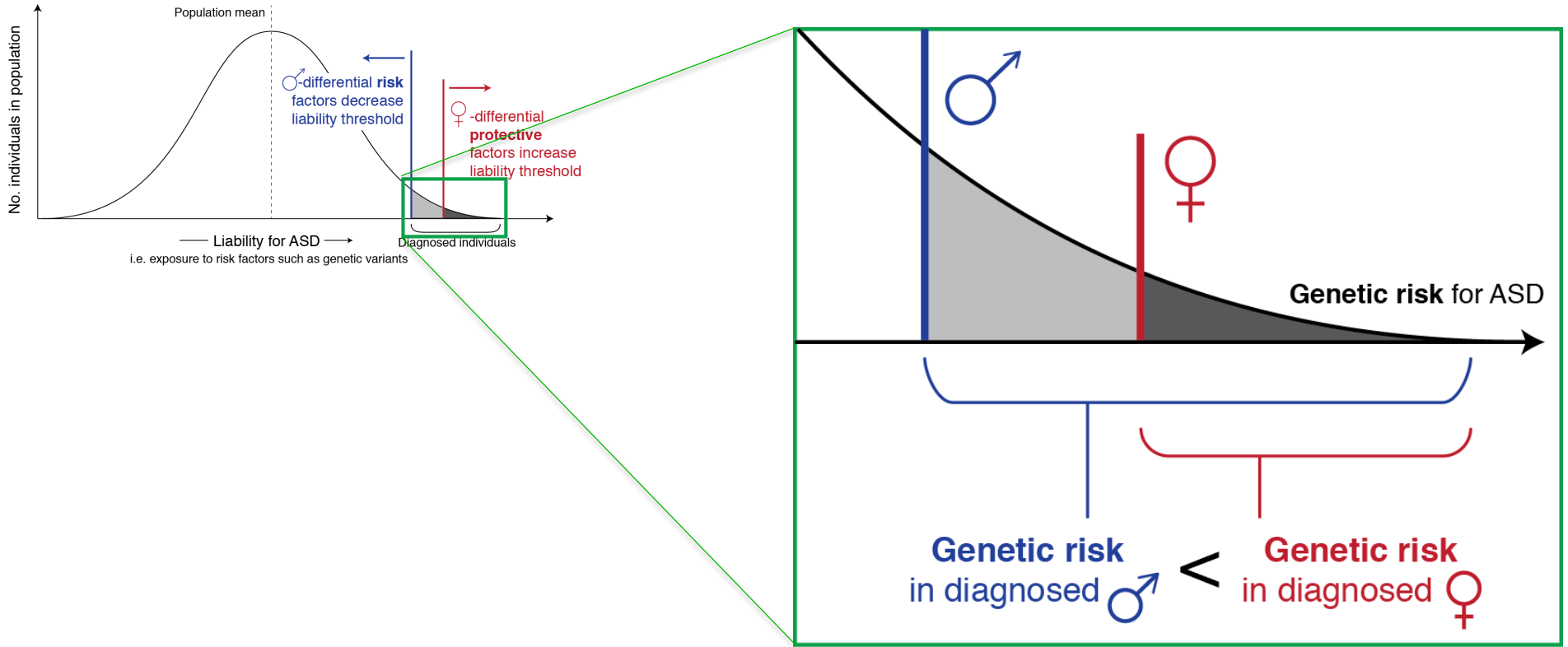
Female Protective Effect (FPE) Model for ASD = *Multiple threshold* liability model



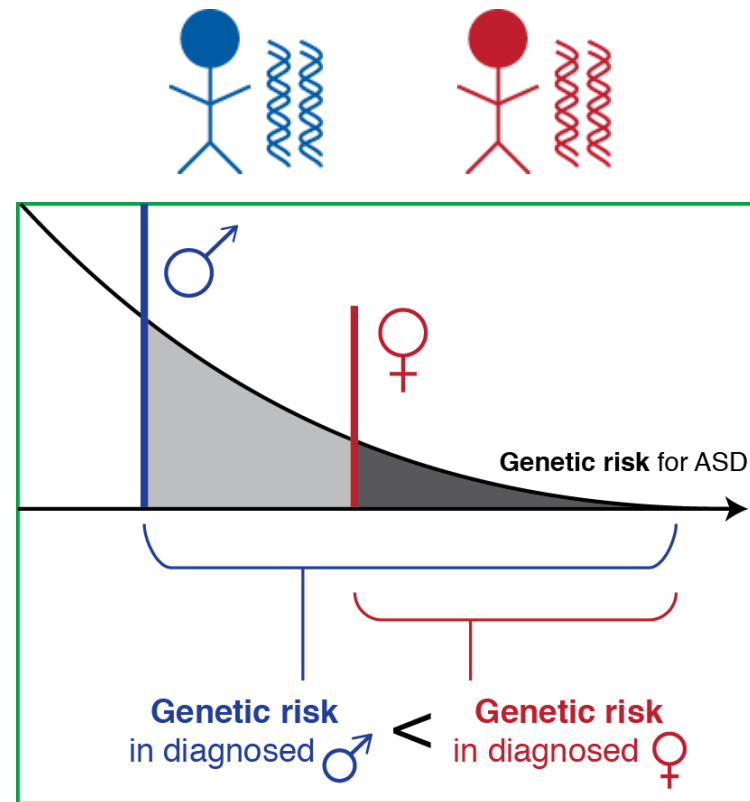
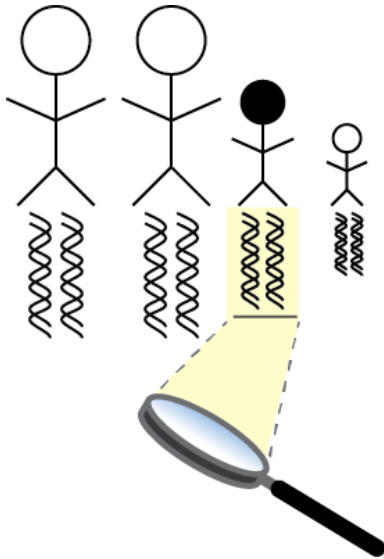
FPE model predicts that diagnosed females carry greater risk than males



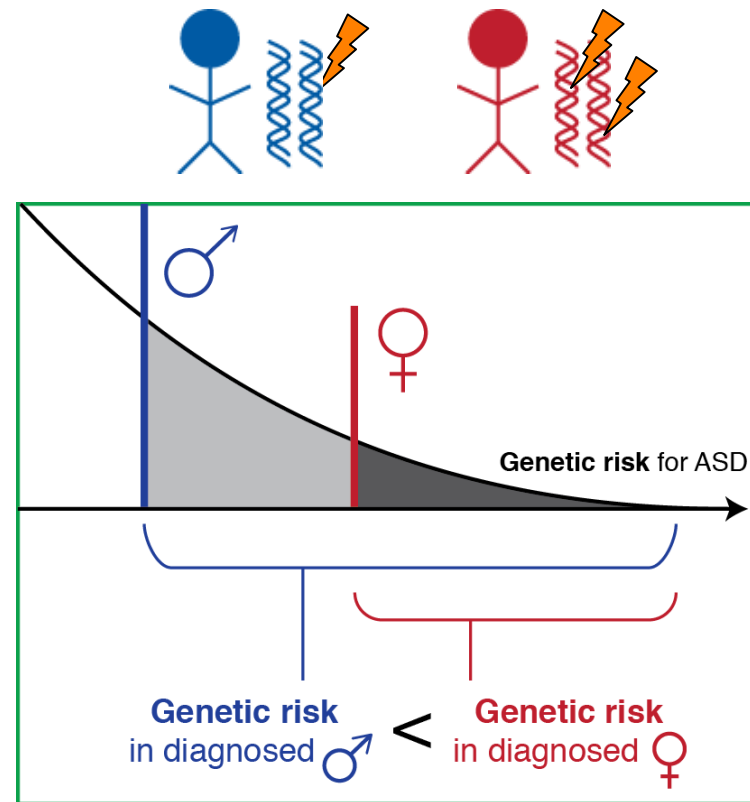
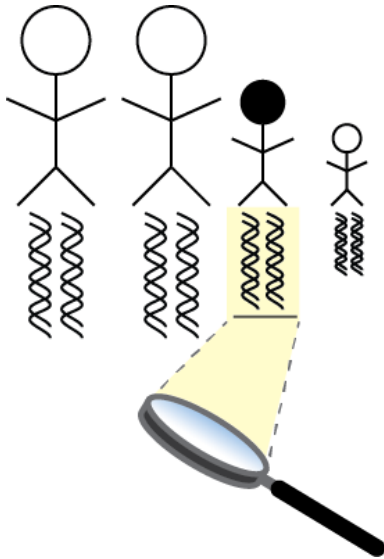
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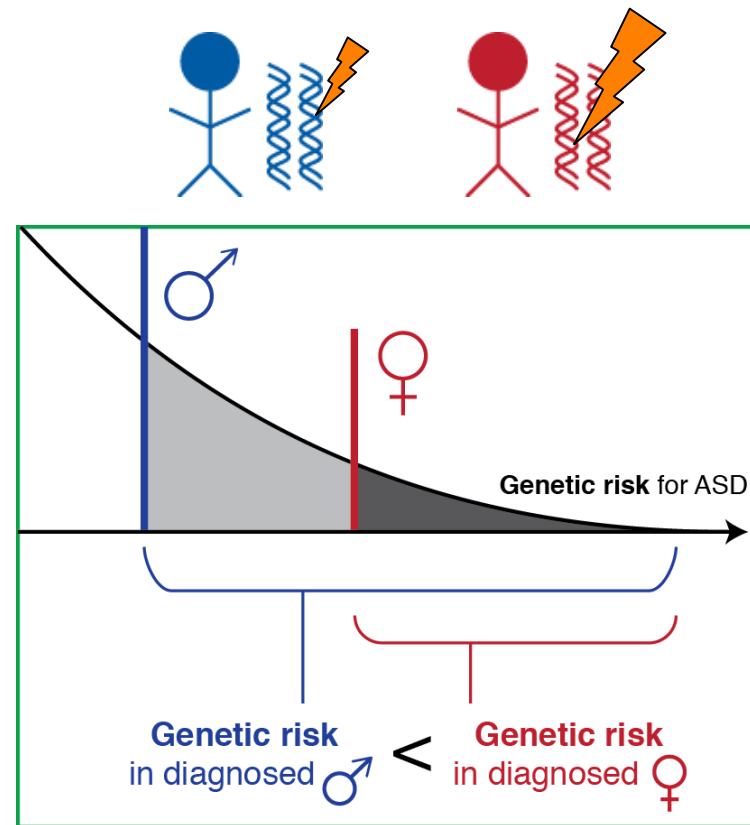
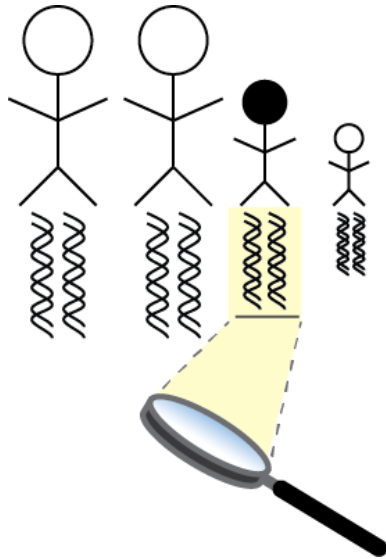
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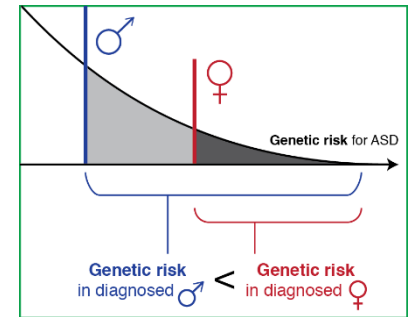
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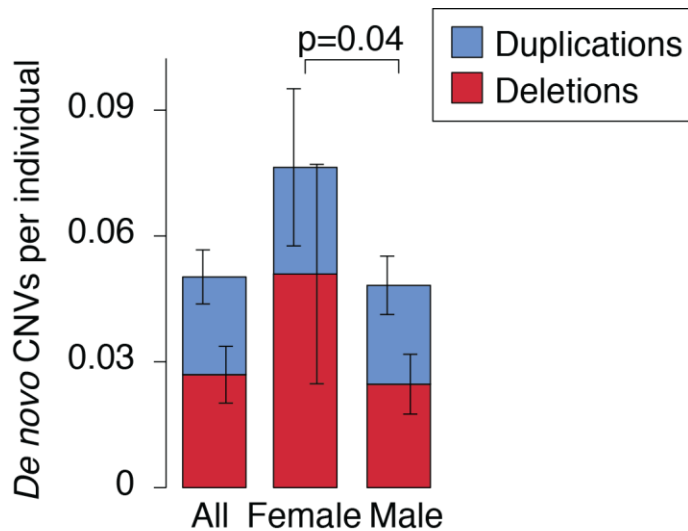
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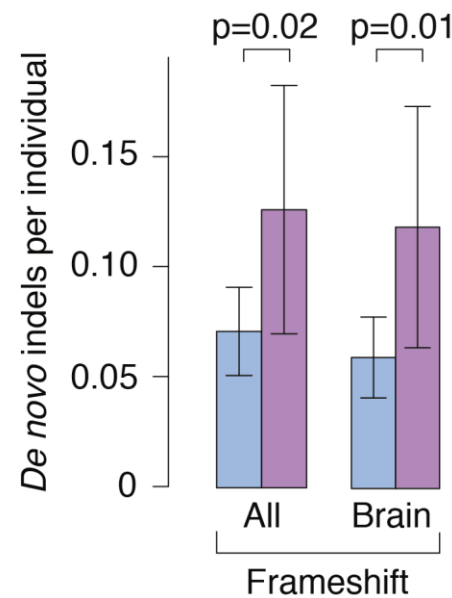
Higher incidence of disruptive, *de novo* variants in ASD females



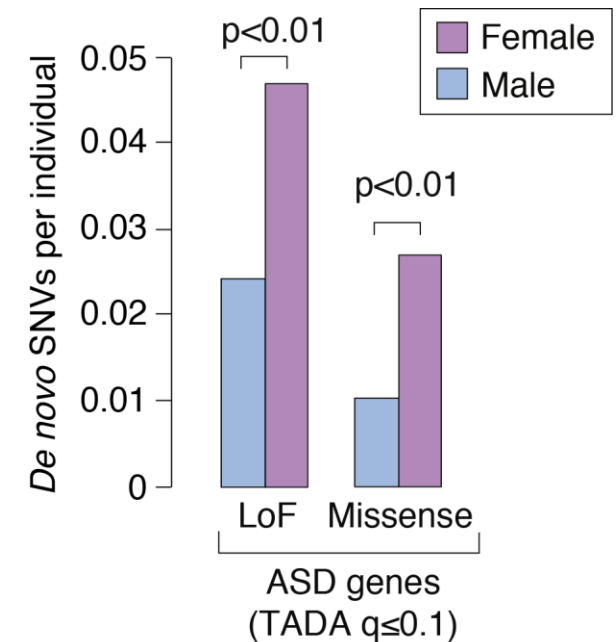
Copy number variants (CNVs)¹



Insertion/Deletions (Indels)²

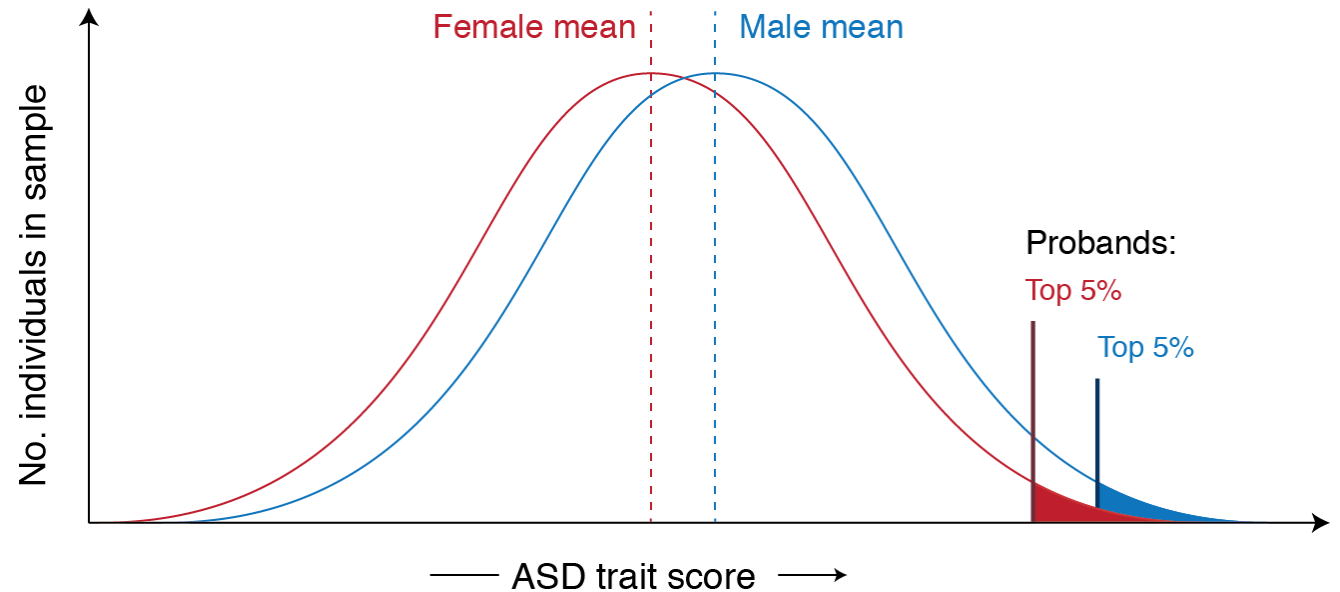
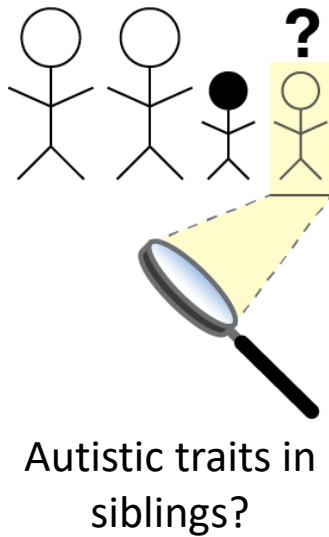


Single nucleotide variants (SNVs)³

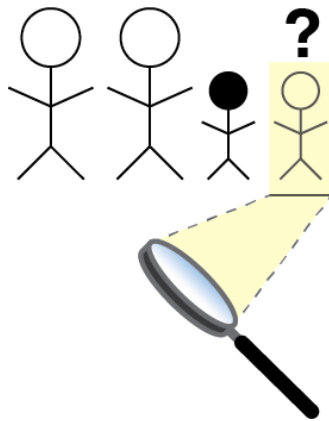


¹Sanders et al, 2015, *Neuron*. ²Dong et al, 2014, *Cell Rep*. ³De Rubeis et al, 2014, *Nature*.

Siblings of female cases have higher ASD traits than siblings of male cases



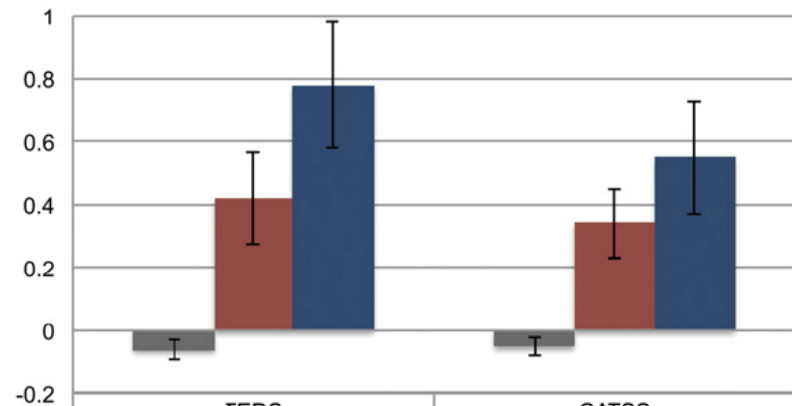
Siblings of female cases have higher ASD traits than siblings of male cases



Autistic traits in siblings?

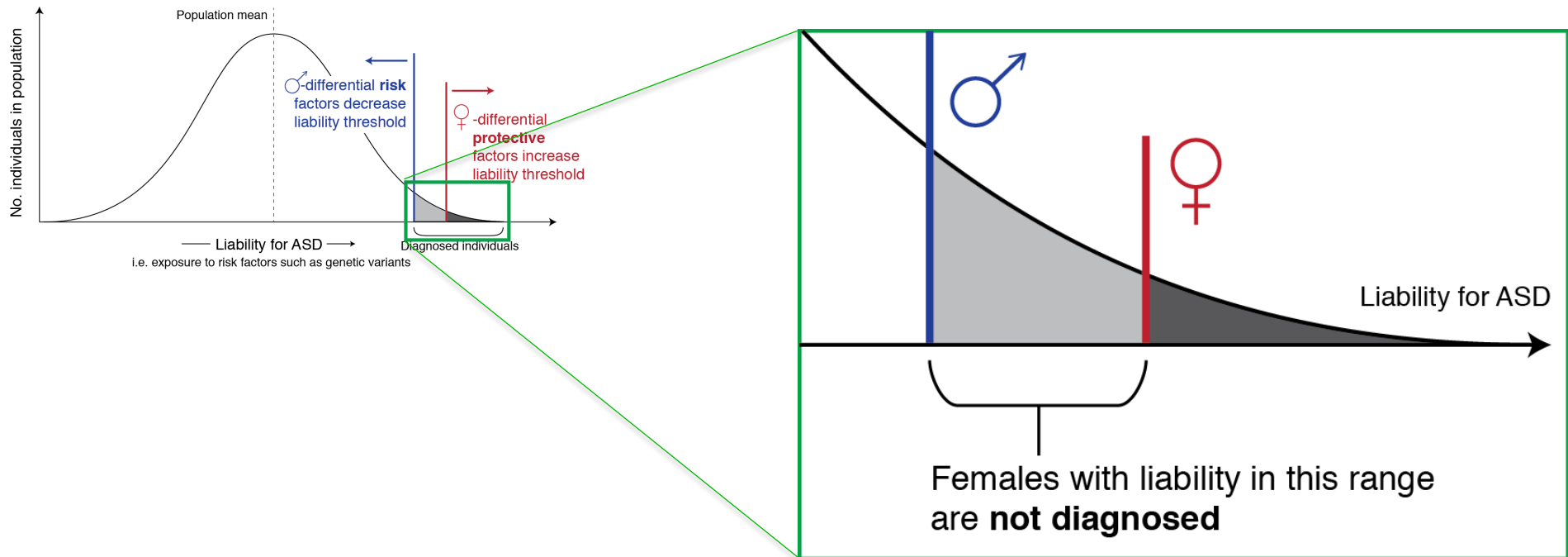
Mean sex-and-zygosity-normed Z scores

Increase in risk to siblings of female probands

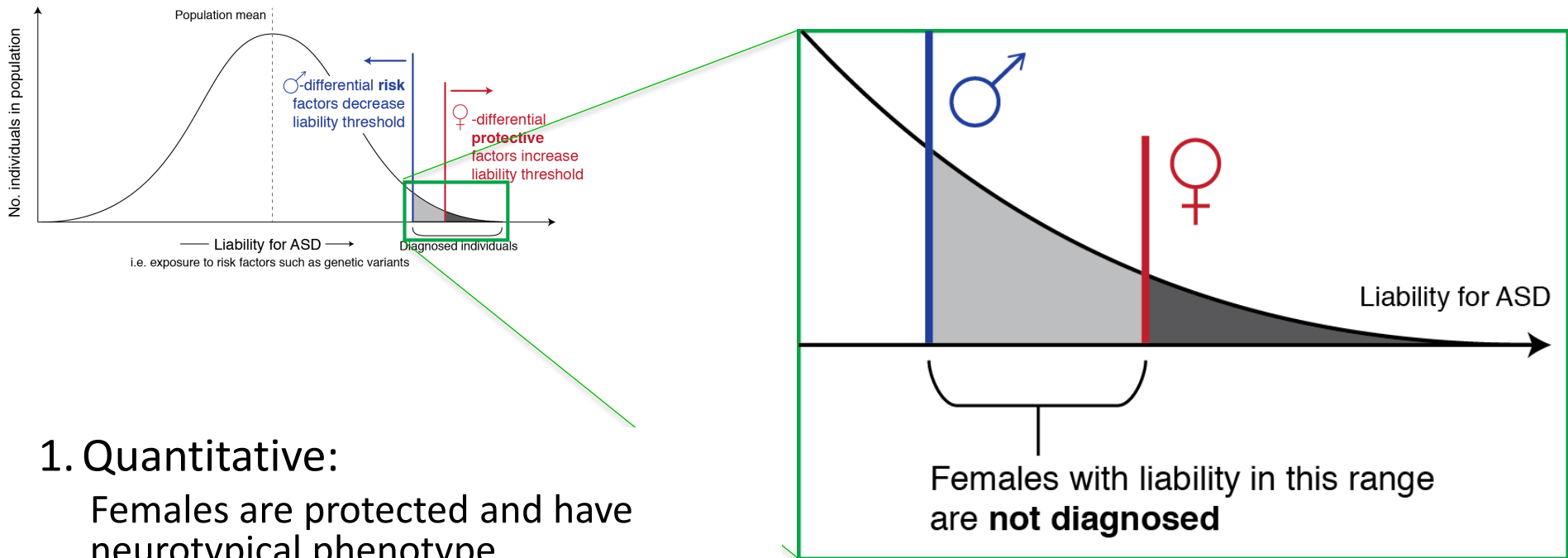


	TEDS	CATSS
■ Siblings of All Non-Probands N(TEDS) = 3,444 N(CATSS) = 5,340	-0.06 (p<0.0001 *§)	-0.05 (p<0.0001 *§)
■ Siblings of Male Probands N(TEDS) = 262 N(CATSS) = 470	0.42 (p=0.002 §)	0.34 (p=0.02 §)
■ Siblings of Female Probands N(TEDS) = 136 N(CATSS) = 230	0.78	0.55

FPE model predicts that females respond differently to liability that is sufficient for diagnosis in males



FPE model predicts that females respond differently to liability that is sufficient for diagnosis in males



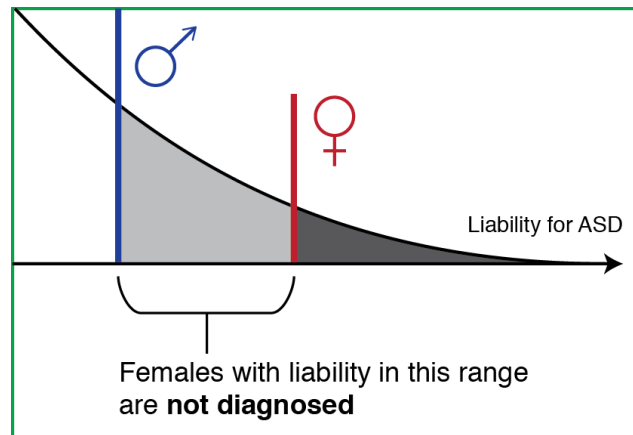
1. Quantitative:

Females are protected and have neurotypical phenotype.

2. Qualitative:

Females present symptoms differently than males, and are not diagnosed.

FPE model predicts that females respond differently to liability that is sufficient for diagnosis in males



Hypothesis:

Sex-differential biology contributes to male and female differences in ASD risk and/or symptom presentation

1. Quantitative:

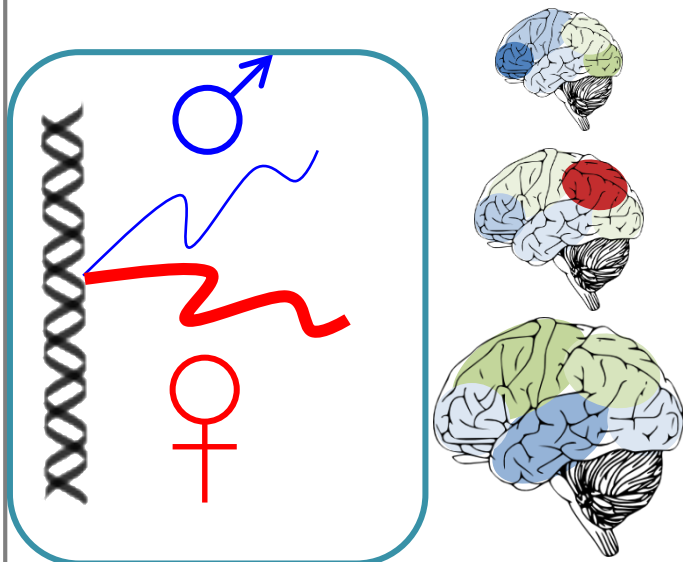
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2. Qualitative:

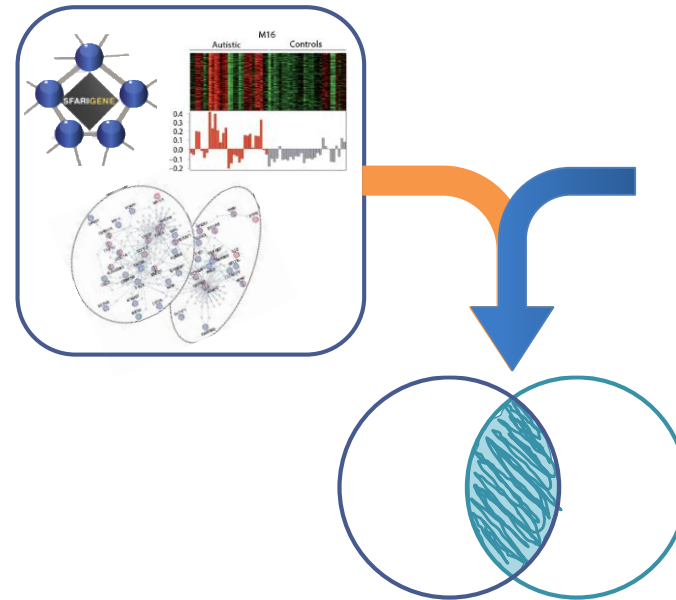
Females present symptoms differently than males, and are not diagnosed.

We can use gene expression analysis to identify sex differences that contribute to the FPE

1. Identify genes with sex-differential expression levels in the human brain



2. Characterize the relationship between sex-DEX genes and ASD biology

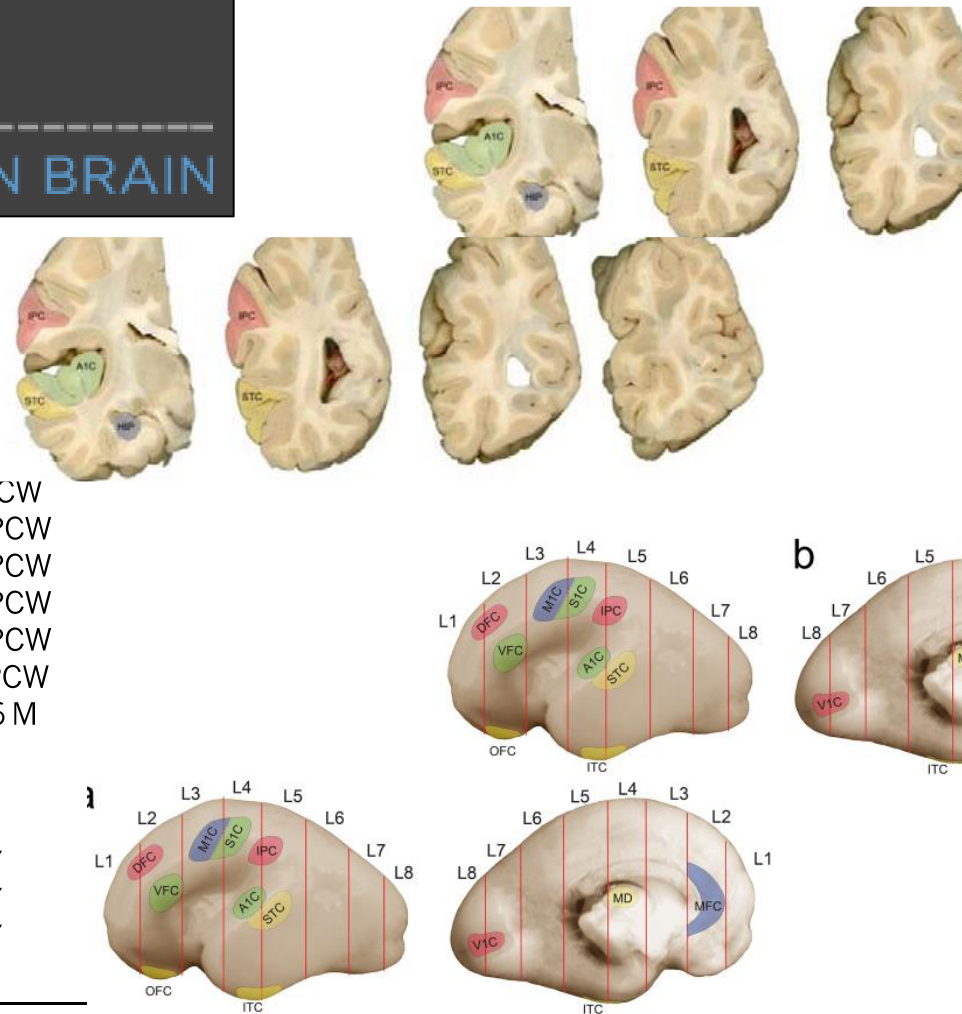


BRAINSPAN

ATLAS OF THE DEVELOPING HUMAN BRAIN

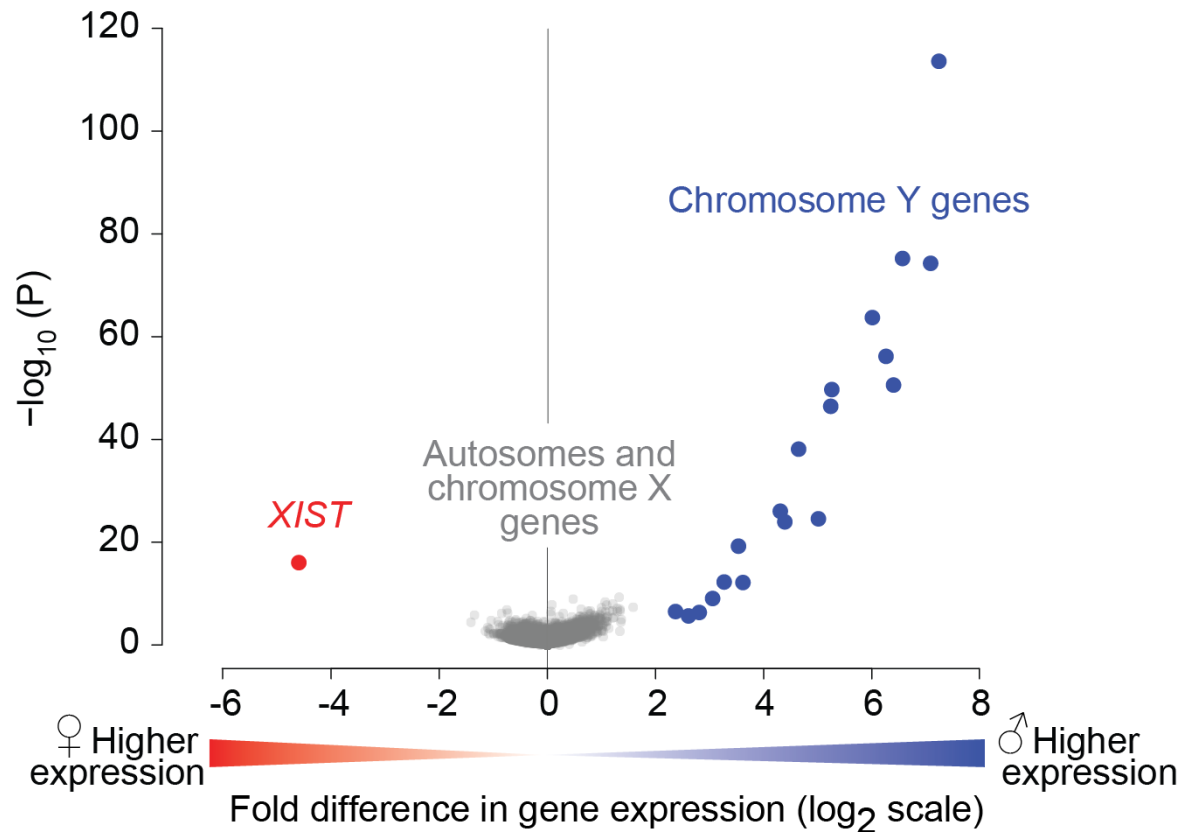
Table 1 | Periods of human development and adulthood as defined in this study

Period	Description	Age
1	Embryonic	4 PCW \leq Age < 8 PCW
2	Early fetal	8 PCW \leq Age < 10 PCW
3	Early fetal	10 PCW \leq Age < 13 PCW
4	Early mid-fetal	13 PCW \leq Age < 16 PCW
5	Early mid-fetal	16 PCW \leq Age < 19 PCW
6	Late mid-fetal	19 PCW \leq Age < 24 PCW
7	Late fetal	24 PCW \leq Age < 38 PCW
8	Neonatal and early infancy	0 M (birth) \leq Age < 6 M
9	Late infancy	6 M \leq Age < 12 M
10	Early childhood	1 Y \leq Age < 6 Y
11	Middle and late childhood	6 Y \leq Age < 12 Y
12	Adolescence	12 Y \leq Age < 20 Y
13	Young adulthood	20 Y \leq Age < 40 Y
14	Middle adulthood	40 Y \leq Age < 60 Y
15	Late adulthood	60 Y \leq Age

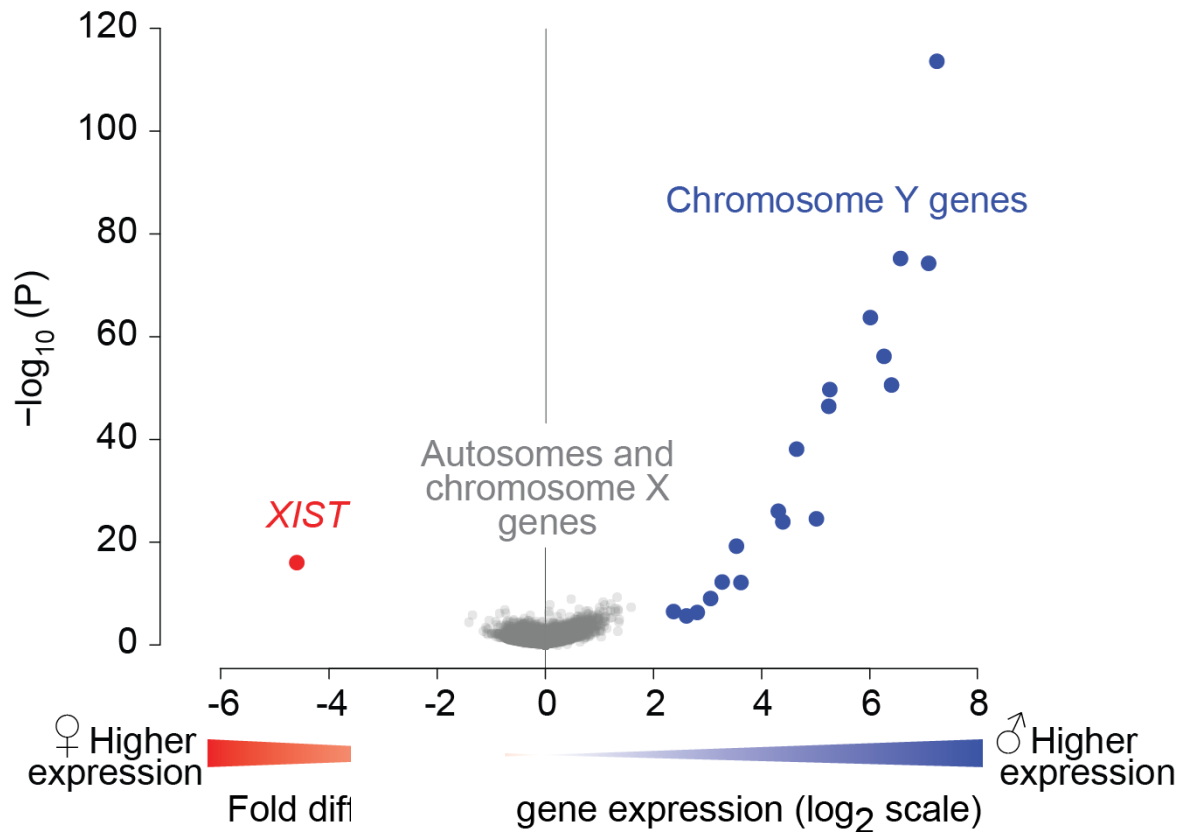


M, postnatal months; PCW, post-conceptual weeks; Y, postnatal years.

There is no evidence of an autosomal gene with XY levels of sexual dimorphism in the brain

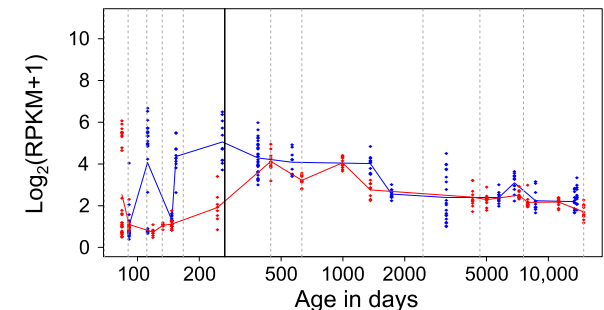


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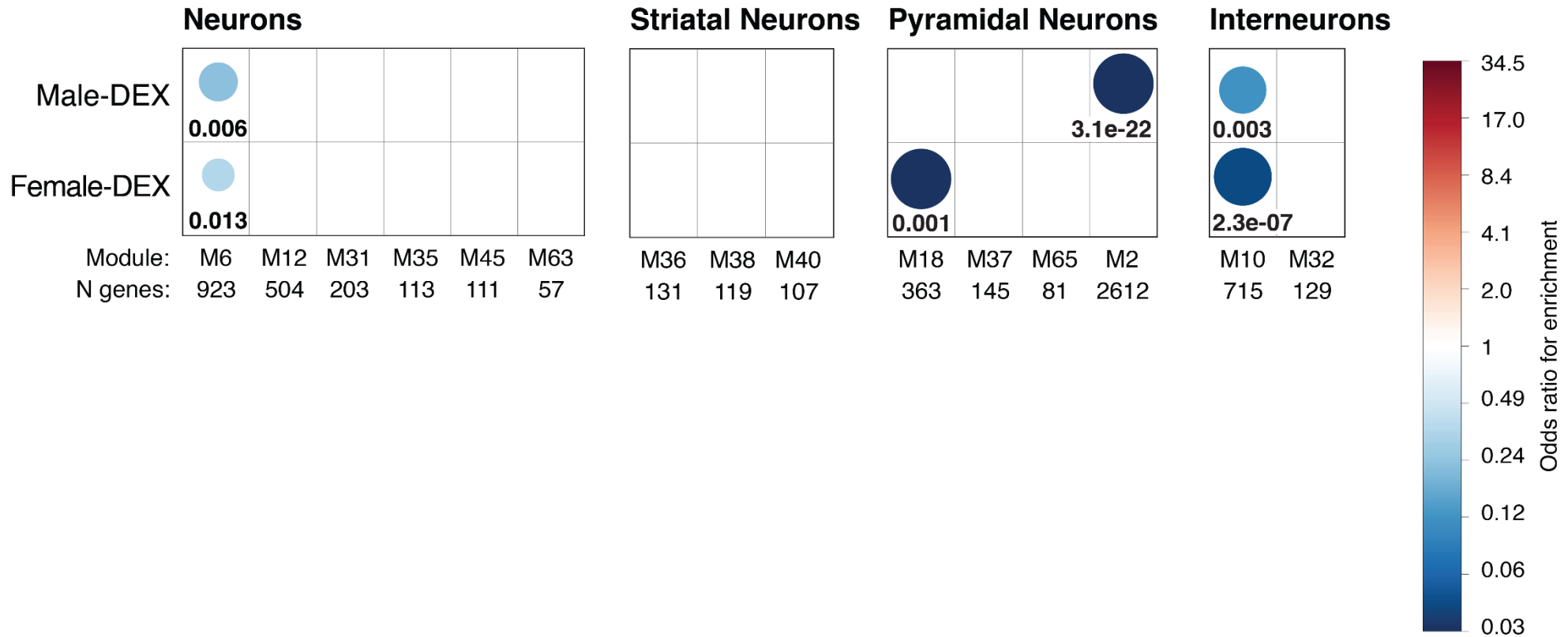


Sex-DEX genes identified by permutation approach ($Q \leq 0.05$; top-ranking sex-DEX in ≥ 2 consecutive developmental periods from same brain region):

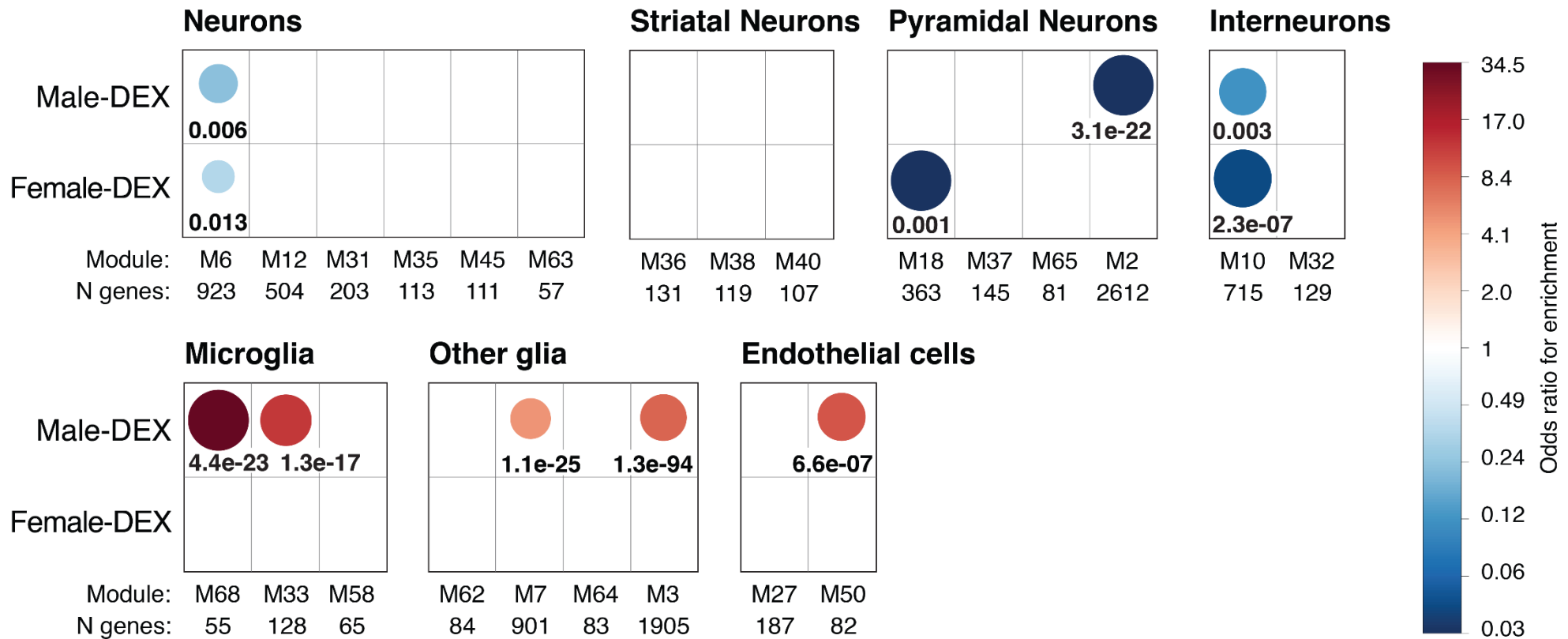
- Higher expression in males:
 - 505 protein-coding genes, 129 noncoding transcripts
- Higher expression in females:
 - 442 protein-coding genes, 466 noncoding transcripts



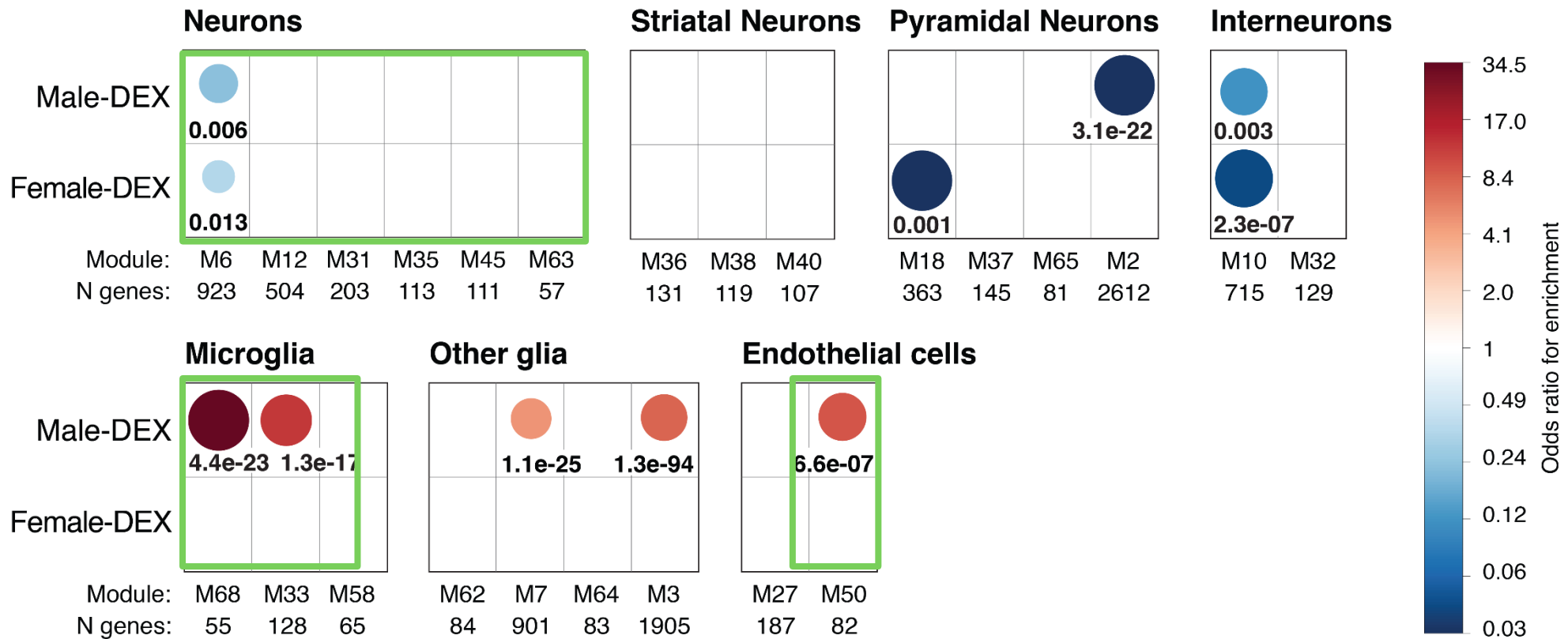
Sex-DEX genes are not enriched for neuronal markers



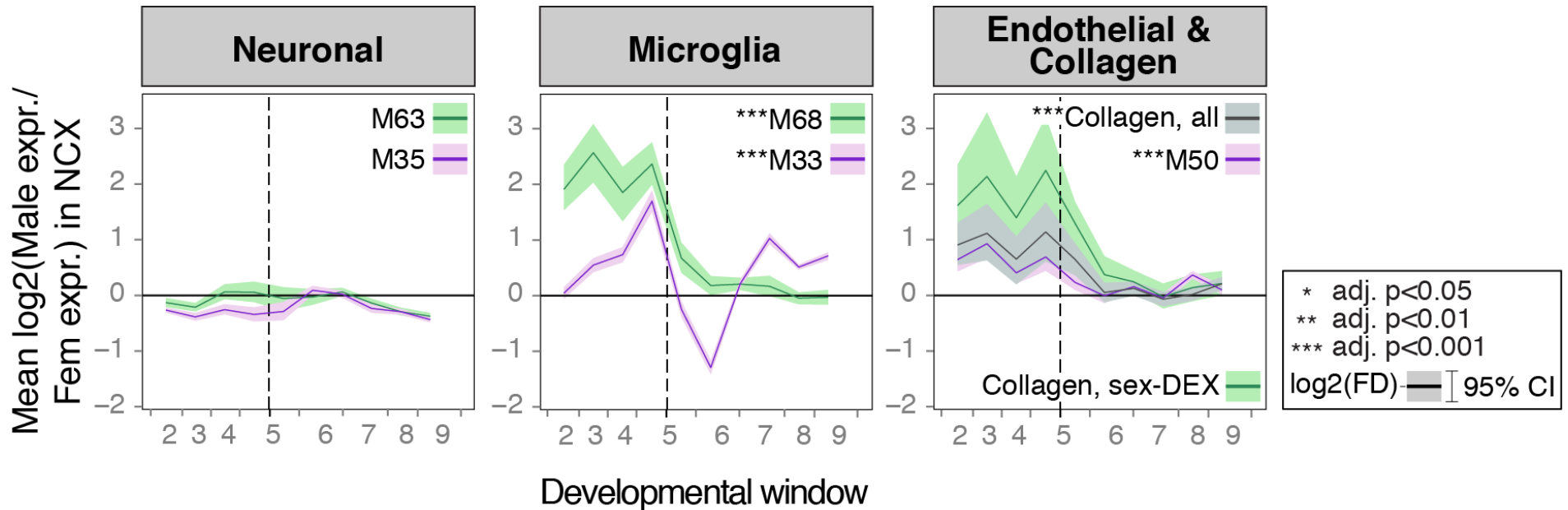
Male-DEX genes show enrichment for microglial and endothelial cell markers



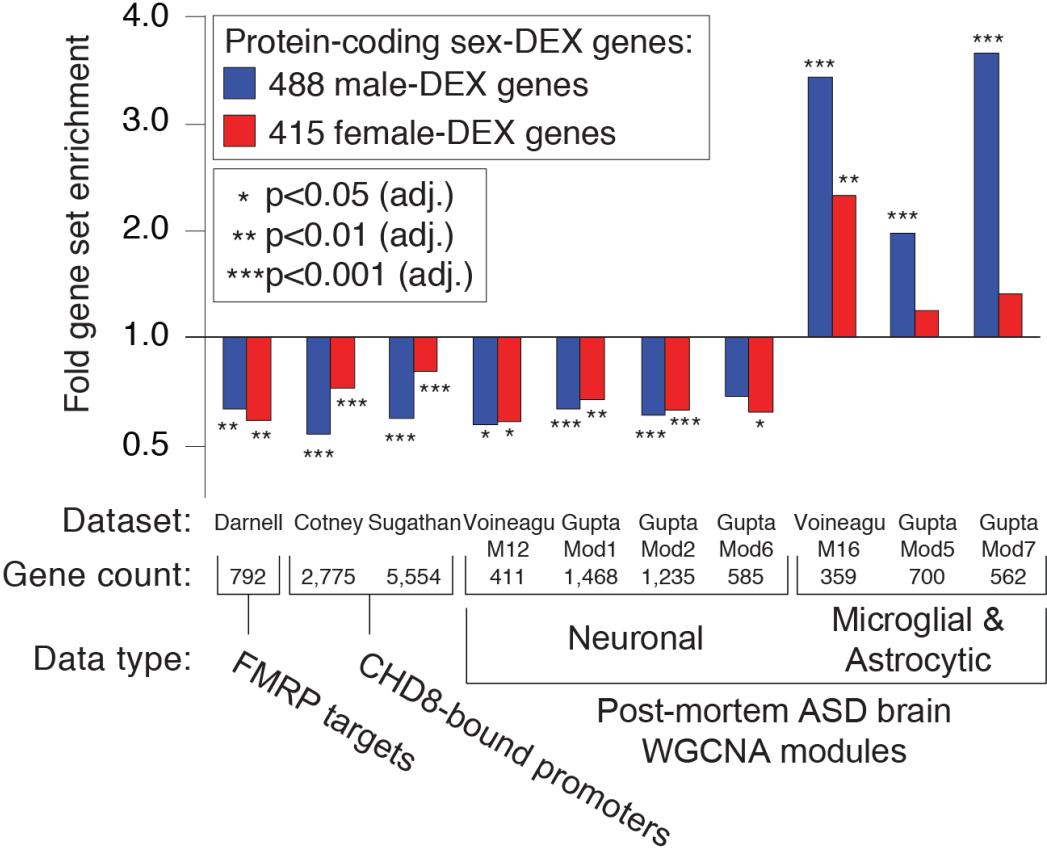
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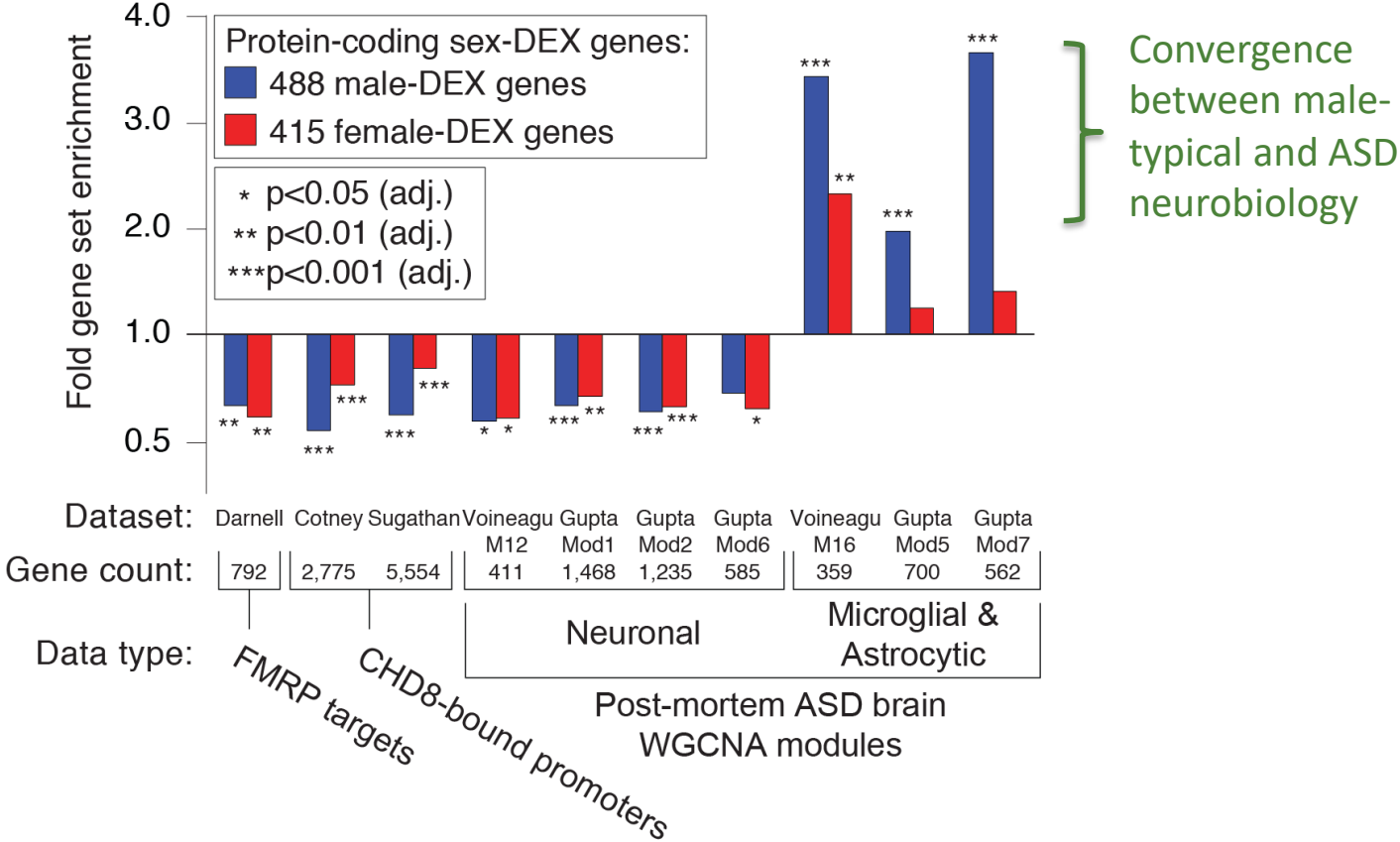
Male-DEX genes show enrichment for microglial and endothelial cell markers



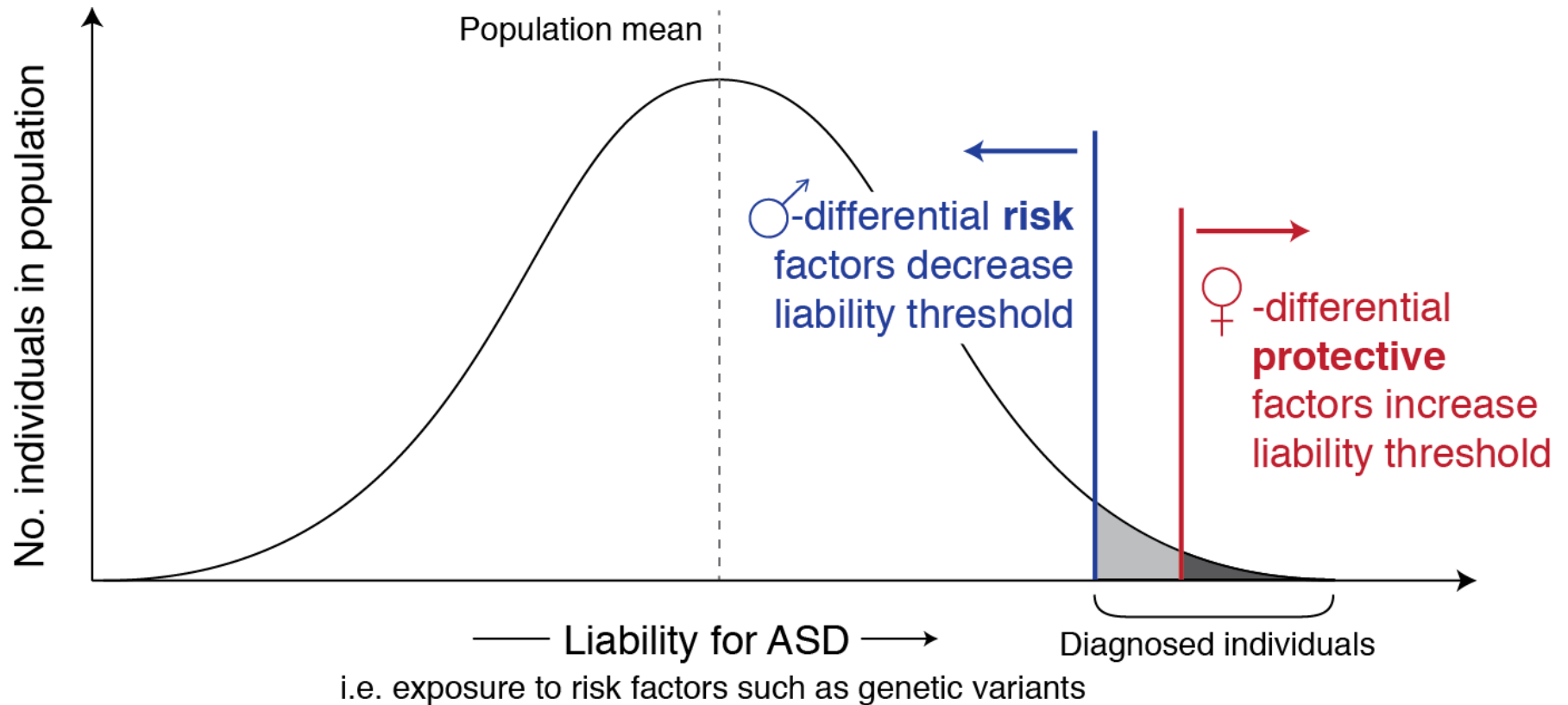
We observe a relationship between sex-DEX genes and ASD biology



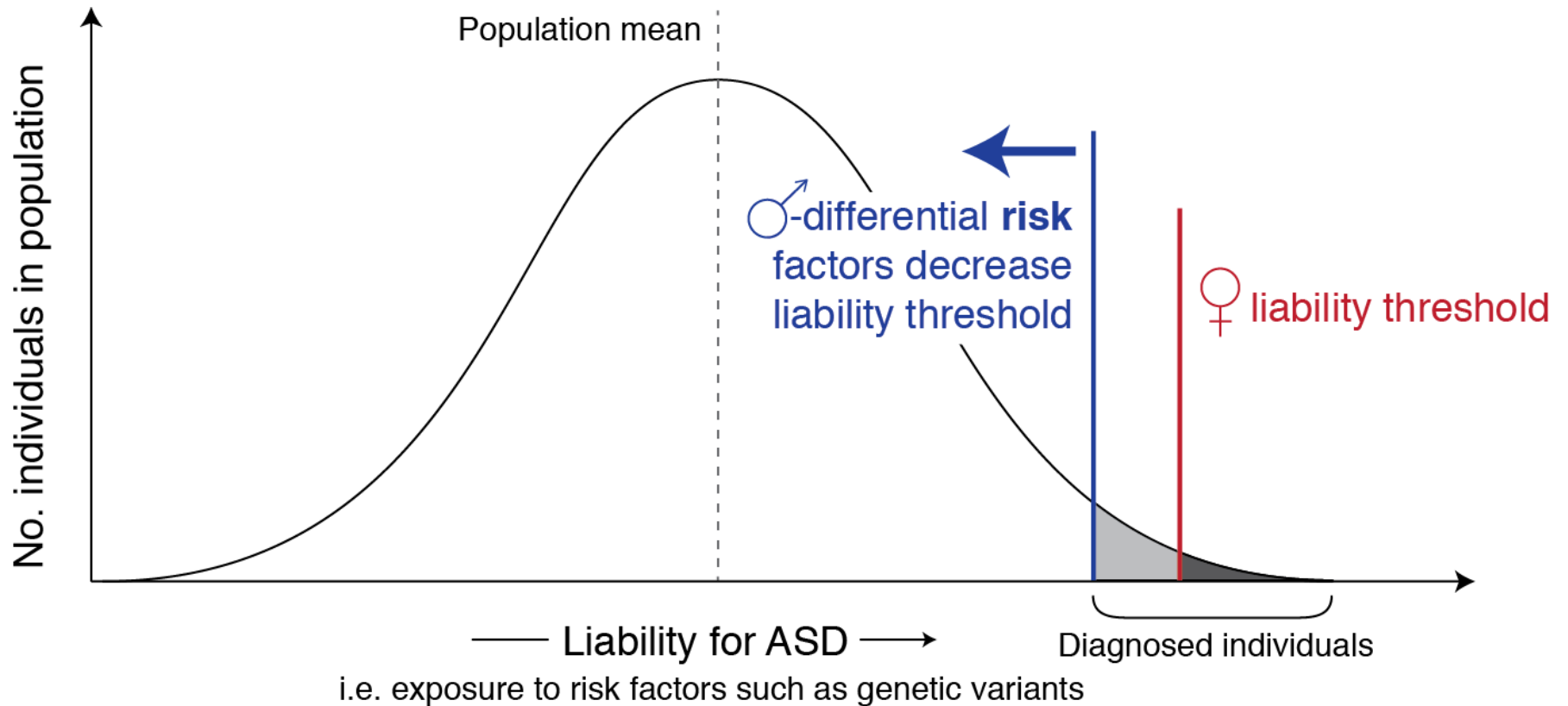
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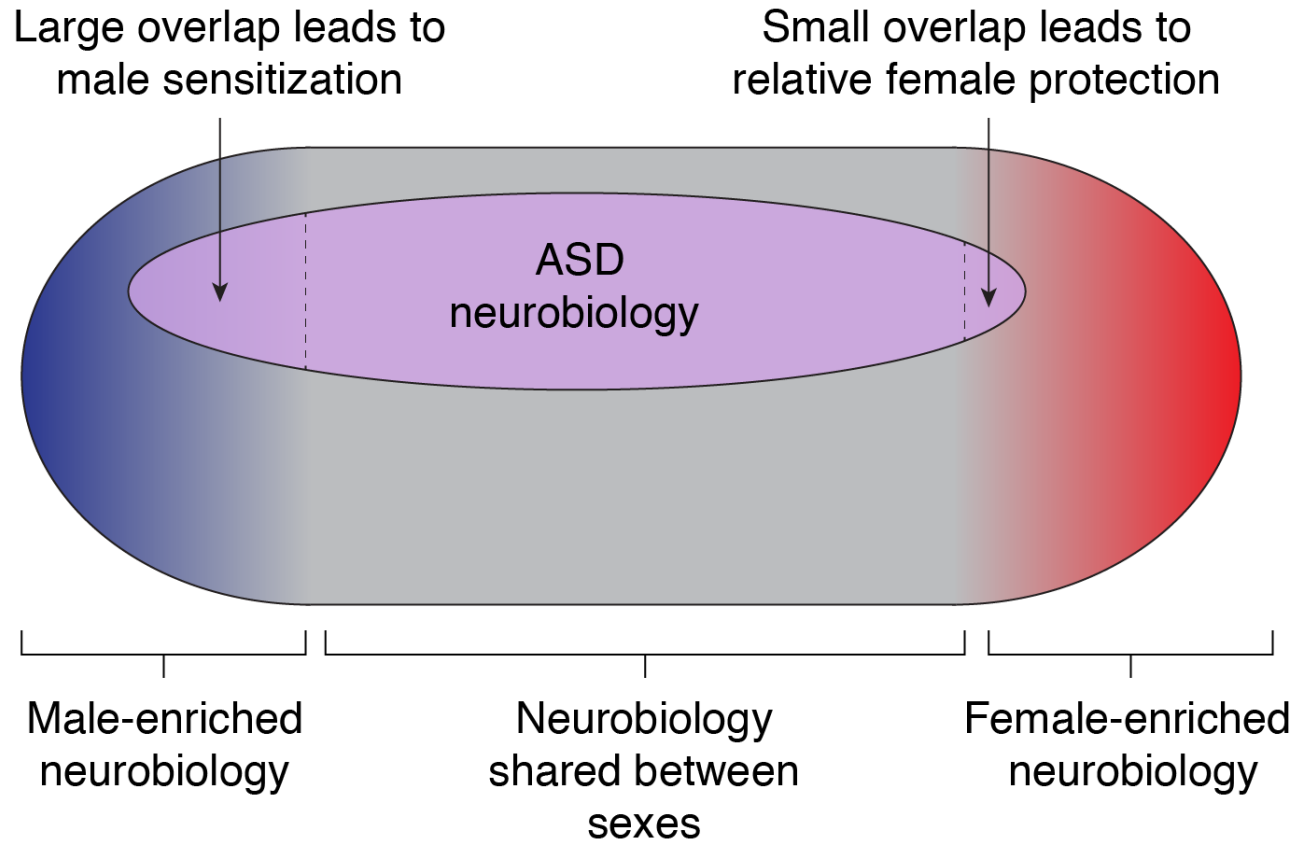
Enrichment evidence suggests a male sensitization model of ASD risk



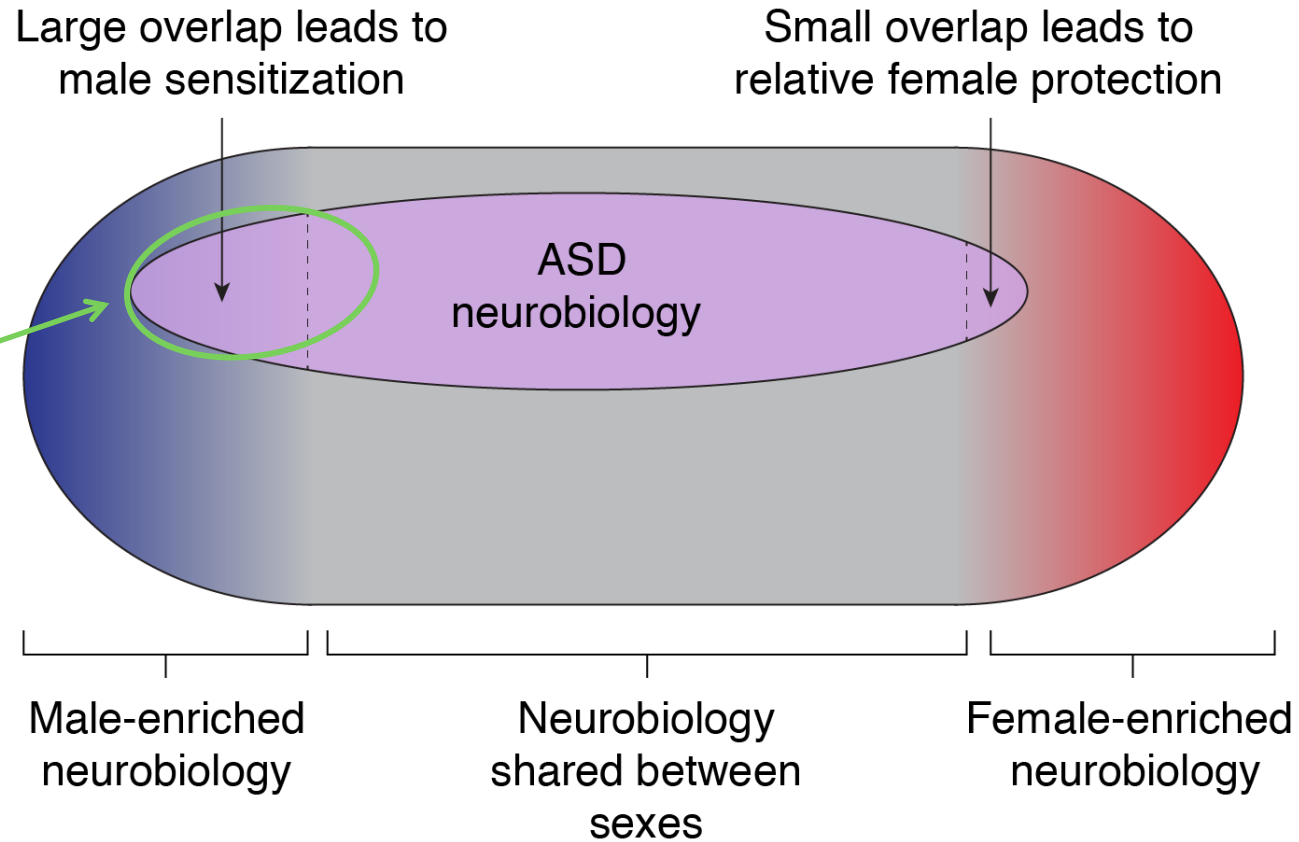
Enrichment evidence suggests a male sensitization model of ASD risk



Enrichment evidence suggests a male sensitization model of ASD risk



Enrichment evidence suggests a male sensitization model of ASD risk



To understand ASD sex bias, we must characterize the intersection of typical male neurobiology and ASD neurobiology

Summary

- Intersection of ASD neurobiology and sex-differential neurobiology provides an approach to understand sex bias
- Male-biased expression:
 - Microglial genes
 - Collagen genes and endothelial cell markers
 - Glial genes dysregulated in ASD brain, suggesting a male-sensitization effect
- Validation in independent samples is needed
 - Results are preliminary and based on analysis of a single data set

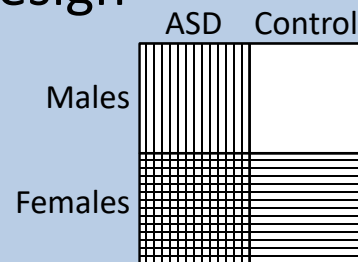
Looking forward

- Well powered, foundational data sets comparing males and females will be required for:
 - Rigorous validation of sex-differential patterns
 - Thorough investigation of relationships between sex-differential and ASD biology

Data types

- RNA sequencing for gene expression
- ChIP-seq for identifying gene targets of the estrogen and androgen receptors

2x2 design



Developmental stages

- Fetal
- Perinatal
- Early postnatal/childhood
- Puberty
- Adulthood

Cell types

- Neurons
- Microglia
- Astrocytes

Brain regions

- Neocortex
- Thalamus
- Striatum
- Cerebellum

Organisms

- Human
- Primate
- Mouse