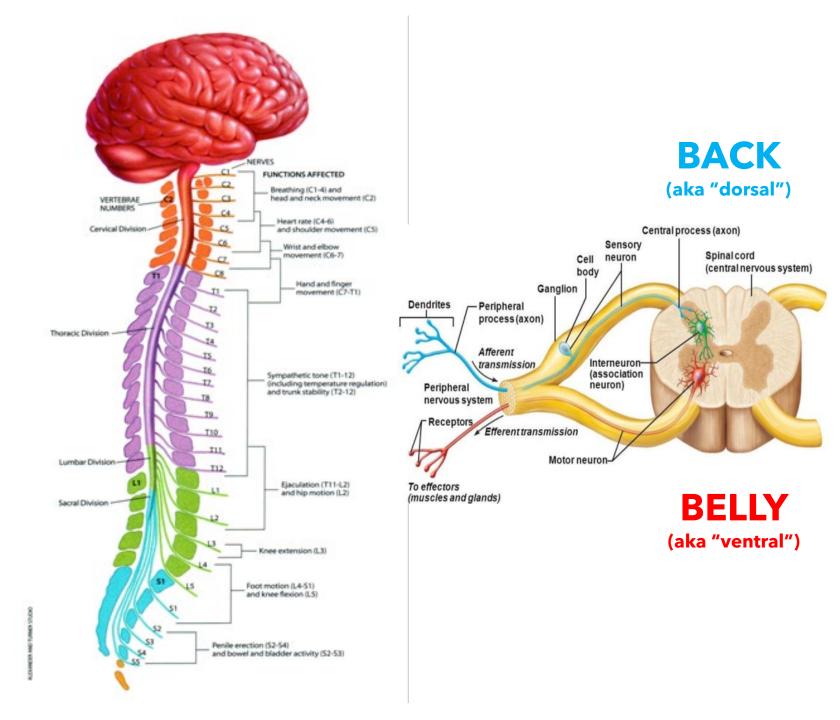
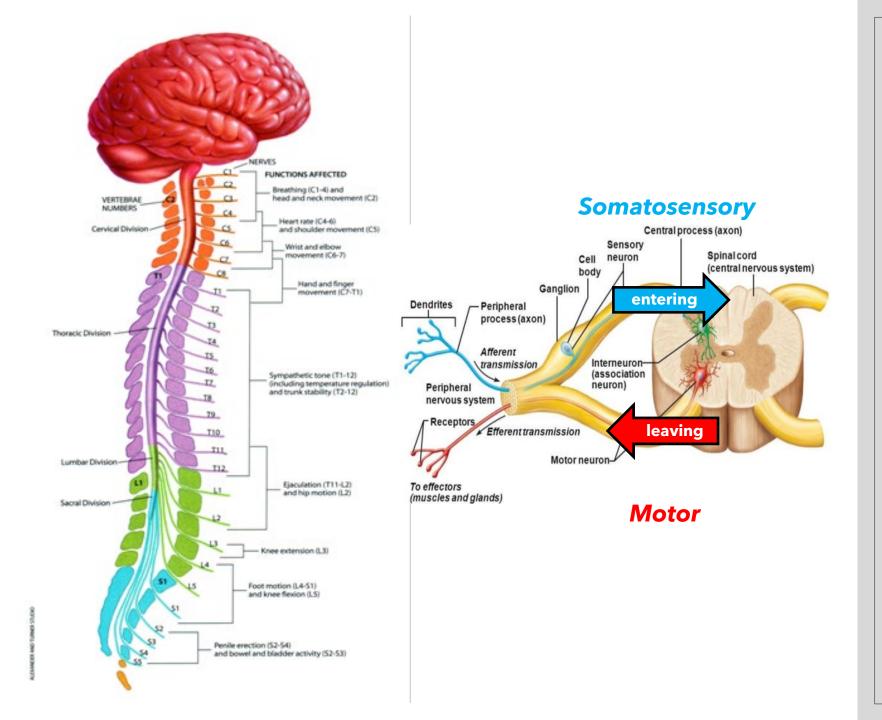
#### HOW THE AUTONOMIC NERVOUS SYSTEM MAY GOVERN ANXIETY IN AUTISM

Emily L. Casanova, PhD Manuel F. Casanova, MD

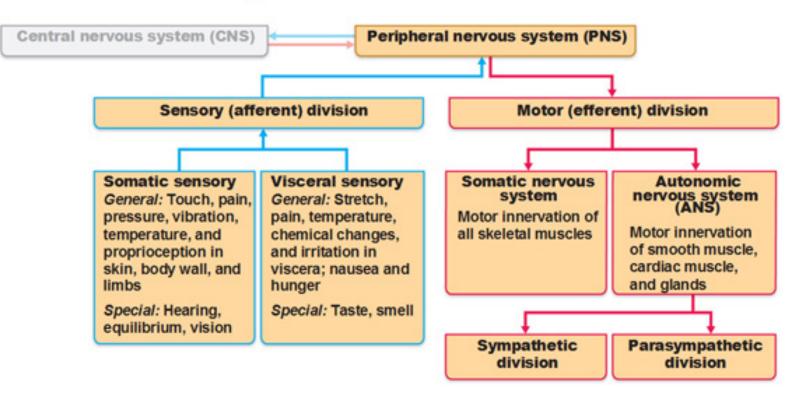


THE CENTRAL NERVOUS SYSTEM



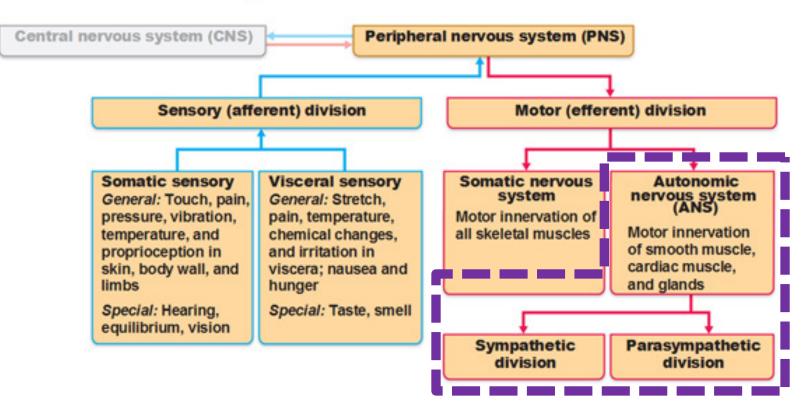
THE CENTRAL NERVOUS SYSTEM

#### **Functional Organization of the PNS**

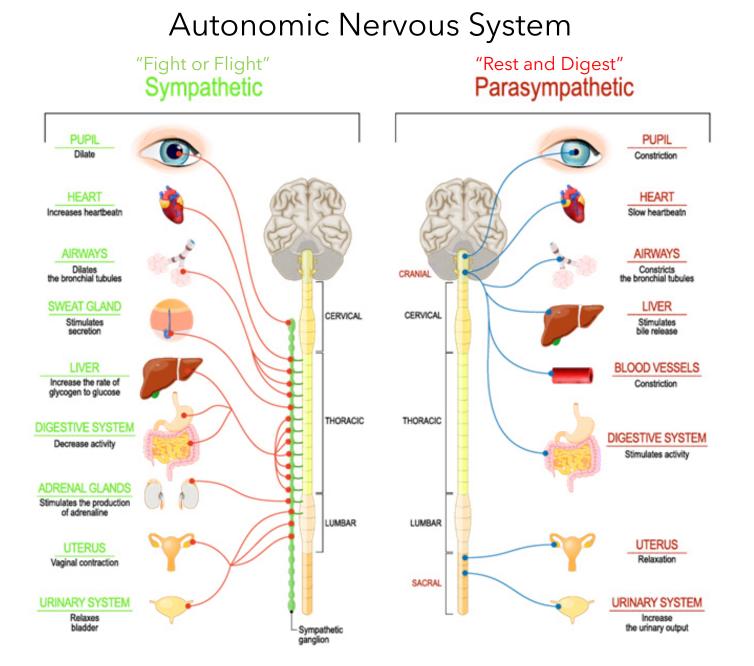


THE PERIPHERAL NERVOUS SYSTEM

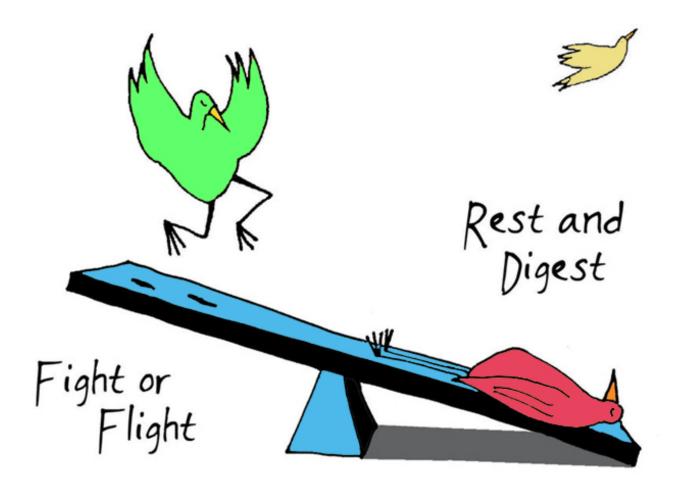
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THE PERIPHERAL NERVOUS SYSTEM

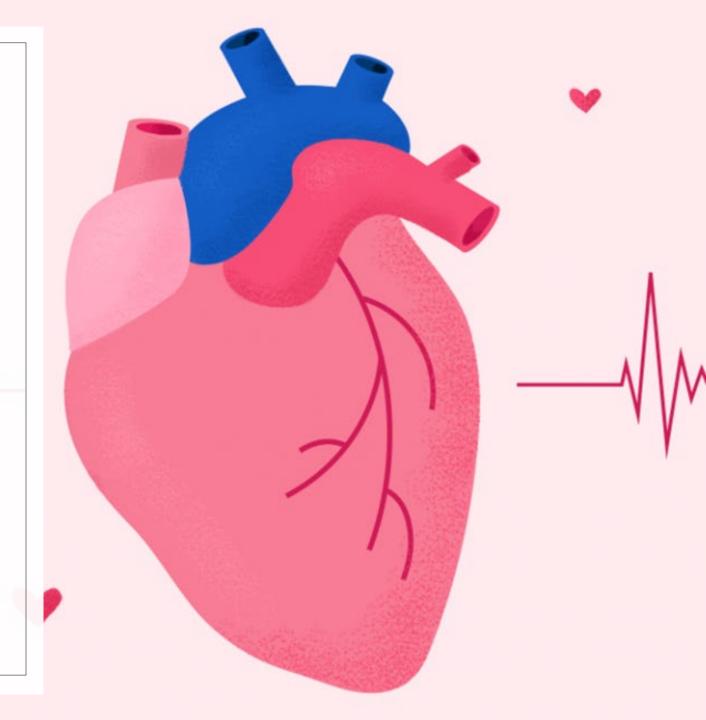


# THE PERIPHERAL NERVOUS SYSTEM



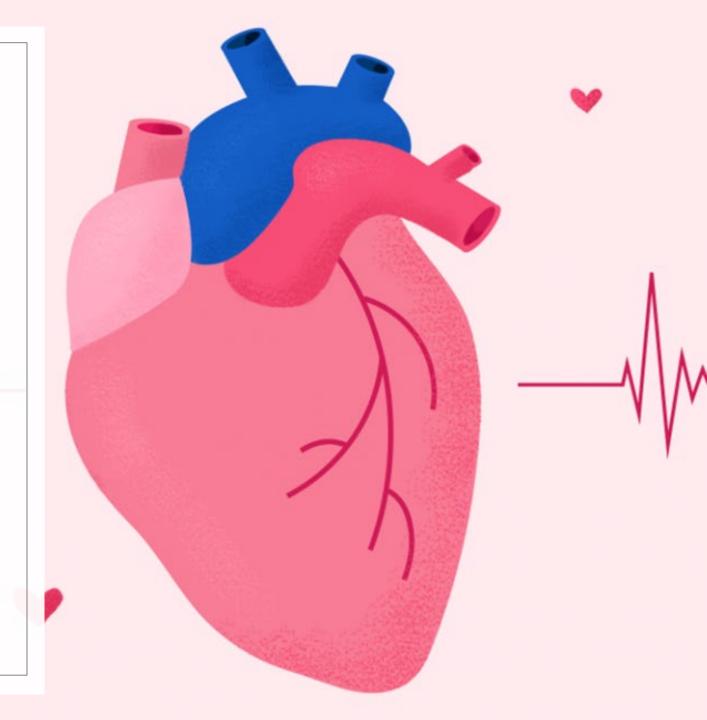


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  - Higher at-rest sympathetic (fight or flight) activation, as evidenced by:



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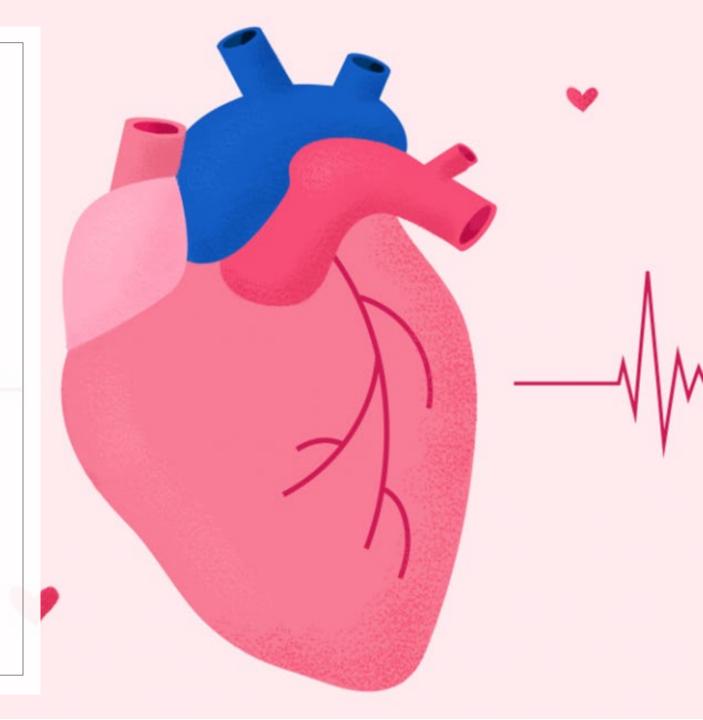
• Higher resting heart rate<sup>1,2</sup>



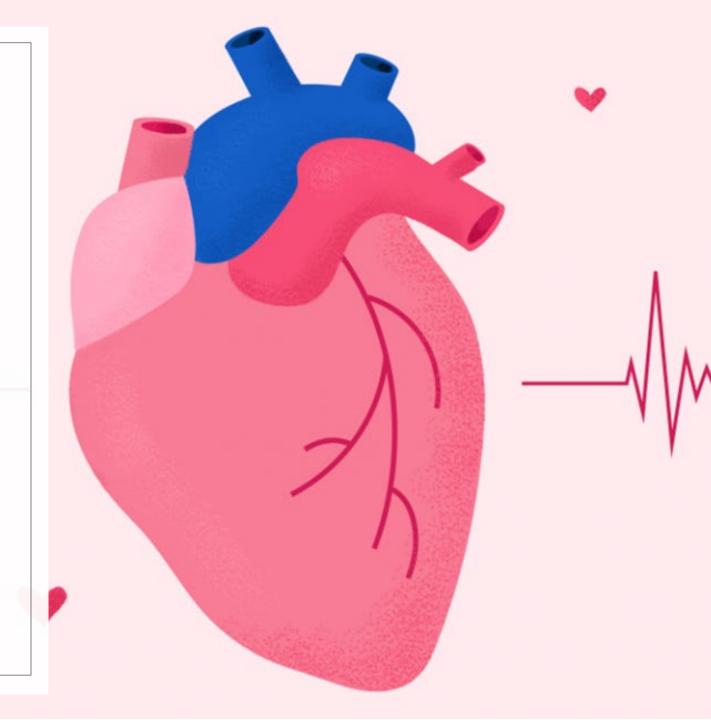
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• Increased pupil size<sup>3</sup>



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    - $\circ\,$  Increased pupil size^3
    - Higher respiration rate<sup>4</sup>



#### The 4 Stages of Sleep



 transition period between wakefulness and sleep

• lasts around 5 to 10 minutes



#### NREM Stage 3

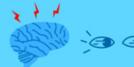
- muscles relax
- · blood pressure and breathing rate drop
- deepest sleep occurs



#### NREM Stage 2

body temperature drops and heart rate begins to slow
brain begins to produce sleep spindles

lasts approximately 20 minutes



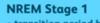
#### **REM Sleep**

- brain becomes more active
- body becomes relaxed and
- immobilized
- dreams occur
- eyes move rapidly

### Autonomic Dysregulation in Autism

- Higher sympathetic (fight or flight) activation during:
  - Certain stages of sleep (N2, N3, REM)<sup>5</sup>

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**33**-

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# Animals lower arousal in ASD during peer interactions!

### Autonomic Dysregulation in Autism

#### • Autistic people tend to exhibit:

- Higher sympathetic (fight or flight) activation during:
  - Certain stages of sleep (N2, N3, REM)<sup>5</sup>
  - Social interaction with peers<sup>6</sup>

**BUT...** 

# Spinning and hand flapping

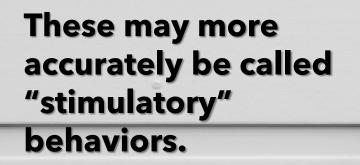


And... autistic people often use stimulatory behaviors to reduce sympathetic hyperarousal.<sup>7</sup>

# Spinning and hand flapping



In fact, these probably shouldn't be called "stimulatory" behaviors but "calming" behaviors. But a small percentage of autistic people have low sympathetic activation, except during self-injurious behavior.<sup>7</sup>





- Lower sympathetic (fight or flight) activation during:
  - Fear-eliciting responses (toddlers)<sup>8</sup>



#### • Autistic people tend to exhibit:

 Lower parasympathetic (rest and digest) activity during the morning<sup>9</sup>



 Autistic people with lower parasympathetic tone tend to:

 Have greater symptoms of anxiety<sup>10, 11</sup>



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 Have greater symptoms of anxiety<sup>10, 11</sup>

• Poorer social skills<sup>12</sup>



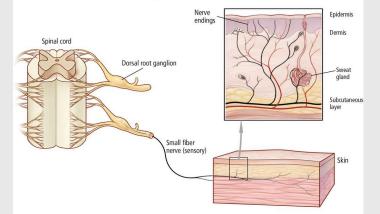
#### Autistic people with lower parasympathetic tone tend to:

- Have greater symptoms of anxiety<sup>10, 11</sup>
- $^\circ$  Poorer social skills^{12}
- Lower GI tract problems (e.g., constipation), common with regression<sup>13</sup>

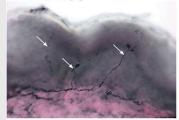
# Nerve Fiber Loss in Some Kids with Autism

#### Small fiber neuropathy affects sensory nerves

Small fiber neuropathy is a major cause of pain in the hands and feet, especially in the elderly. Diabetes mellitus is the most common identifiable cause, but there are many others. The nerve fibers affected are small-diameter myelinated A-delta fibers and unmyelinated C fibers, which mediate pain, thermal sensation, and autonomic function. Large fibers that innervate muscles are not affected. Skin biopsy may show a pacuity of nerve fibers. Quantitative sudomotor axon reflex testing may show a lack of sweating in response to acetylcholine.

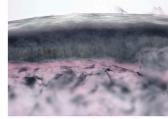


Normal skin biopsy



Normal innervation with small nerve fibers seen in the epidermis (arrows). Skin biopsy specimens with protein gene product 9.5 immunostaining.

Small fiber neuropathy biopsy



A specimen from a patient with small fiber neuropathy shows denervation, with no small nerve fibers seen in the epidermis.

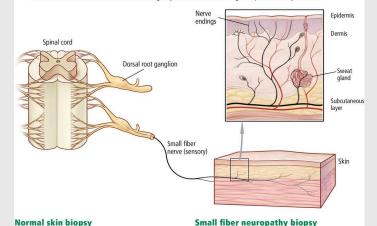
Tavee J, Zhou L. Small fiber neuropathy: a burning problem. Cleve Clin J Med 2009; 76(5):297–305. doi:10.3949/ccjm.76a.08070  Loss of small unmyelinated C-fibers in the skin in autistic children with reduced sensation (including pain)<sup>14</sup>

This type of small fiber is also involved in the autonomic nervous system

# Nerve Fiber Loss in Some Kids with Autism

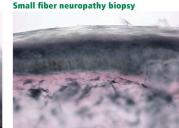
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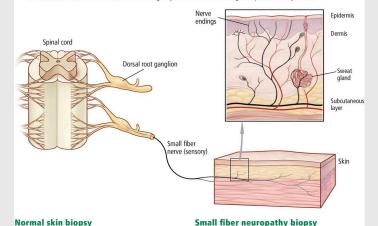
#### Small Fiber Neuropathy has been implicated in:

- GI motility disorders
- Sleep disorders
- Pain disorders
- Altered temperature perception

# Nerve Fiber Loss in Some Kids with Autism

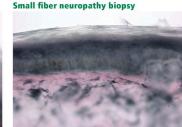
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 Loss of small unmyelinated C-fibers in the skin in autistic children with reduced sensation (including pain)<sup>14</sup>

 This type of small fiber is also involved in the autonomic nervous system

#### We see this same kind of small fiber loss in Ehlers-Danlos syndrome/hypermobility spectrum disorders.

 Previous ARI webinar on autism and hypermobilityrelated disorders:

https://www.autism.org/hypermobility-asd/

# Other Materials on EDS & Autism:

"What Ehlers-Danlos Syndrome Can Teach Us About Autism" - Spectrum News

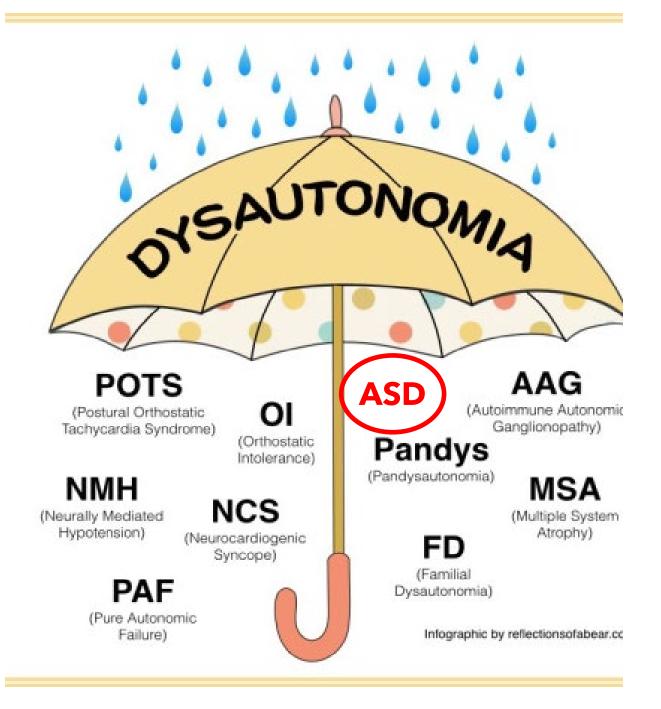
https://www.spectrumnews.org/opinion/viewpoint/whatehlers-danlos-syndrome-can-teach-us-about-autism/

 "Researchers Have Identified a Relationship between Ehlers-Danlos Syndrome and Autism" - Autism Research Institute

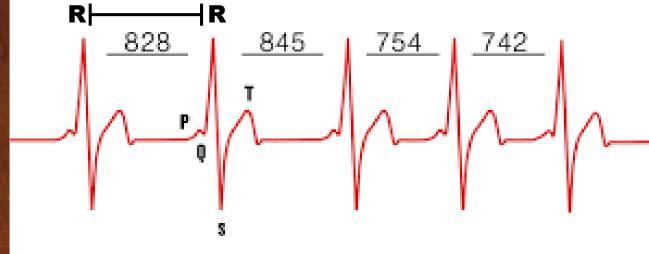
https://www.autism.org/researchers-have-identified-arelationship-between-ehlers-danlos-syndrome-and-autism/

- "Sensory Issues in Ehlers-Danlos Syndromes and Hypermobility Spectrum Disorders" - TheMighty https://themighty.com/2020/10/overlap-ehlers-danlossyndrome-autism/
- Emily's Blog: "Science Over a Cuppa" https://scienceoveracuppa.com/



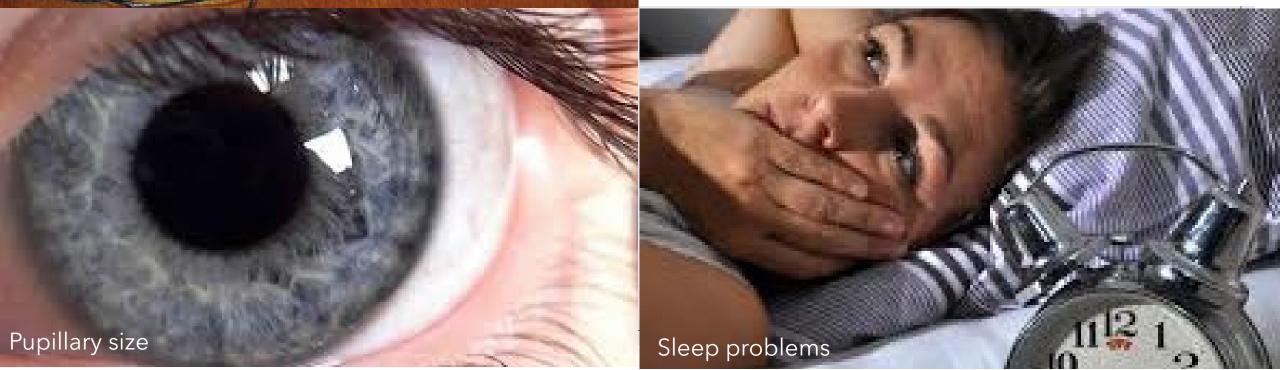


#### DYSAUTONOMIA IN AUTISM: PART 2



Skin conductance: Electrodermal response

Heart rate regulation





112

Heart rate regulation



Pupillary size

Sleep problems



Skin conductance: Electrodermal response

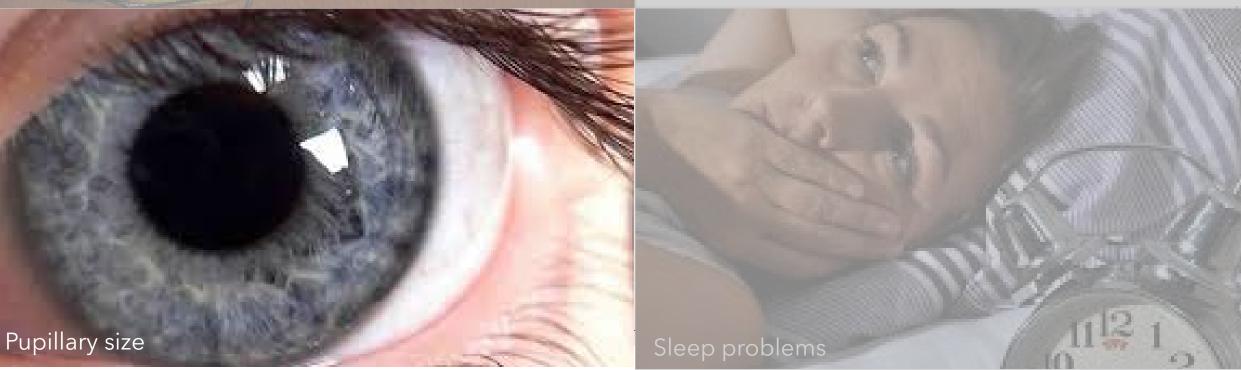
#### Heart rate regulation





Skin conductance: Electrodermal response

Heart rate regulation





Skin conductance: Electrodermal response

Heart rate regulation



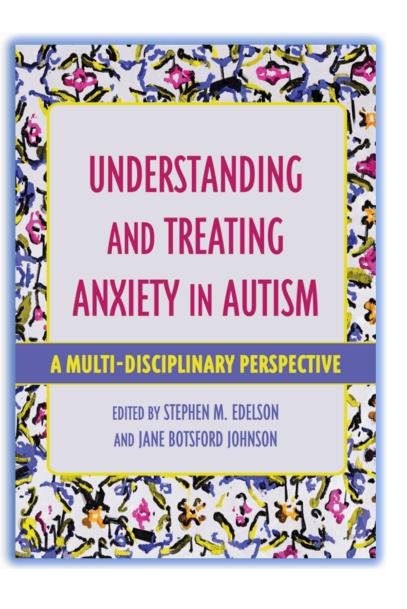
Pupillary size

### Anxiety

Subjective experience of fear and its physical manifestations.

Palpitations Perspiration Dizziness Mydriasis GI disturbances Urinary urgency and frequency Trembling "Buterflies" in the abdomen Tingling in the peripheral extremities Shortness of breath Choking sensation **Autonomic symptoms** 





**Catatonia:** a disturbance that may involve muscle rigidity, stupor or mutism, purposeless movements, negativism, echolalia and inappropriate or unusual movements.

#### Catatonia and Autism

- Increased recognition of catatonia as a comorbid syndrome of autism
- A limited number of studies suggest catatonia occurs in 12-17% of adolescents and young adults with autism
- An increasing number of cases of catatonia in autism have been reported throughout the world over the last 15 years

(Kakooza-Mwesige, A., Wachtel. L.E., Dhossche, D.M. 2008)

"My son had suffered a terrible breakdown, he was constantly pacing the house with his arms bent at the elbows and his hands pointing downwards with his head flexed back. He was hitting his whole body with great force and extremely distressed. Eating a meal could take a very long time from two to 5 hours. This went on for 3 months, it was soul destroying."

# Straw Breathing for Anxiety



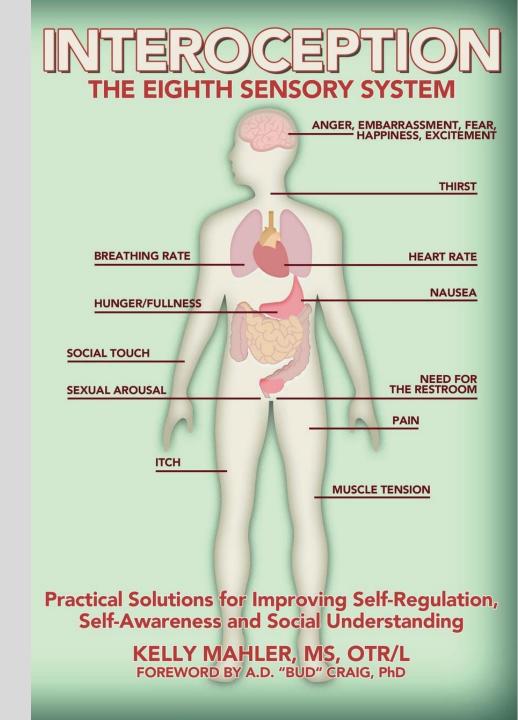
#### Signs and Symptoms of Stress and Anxiety in Youth

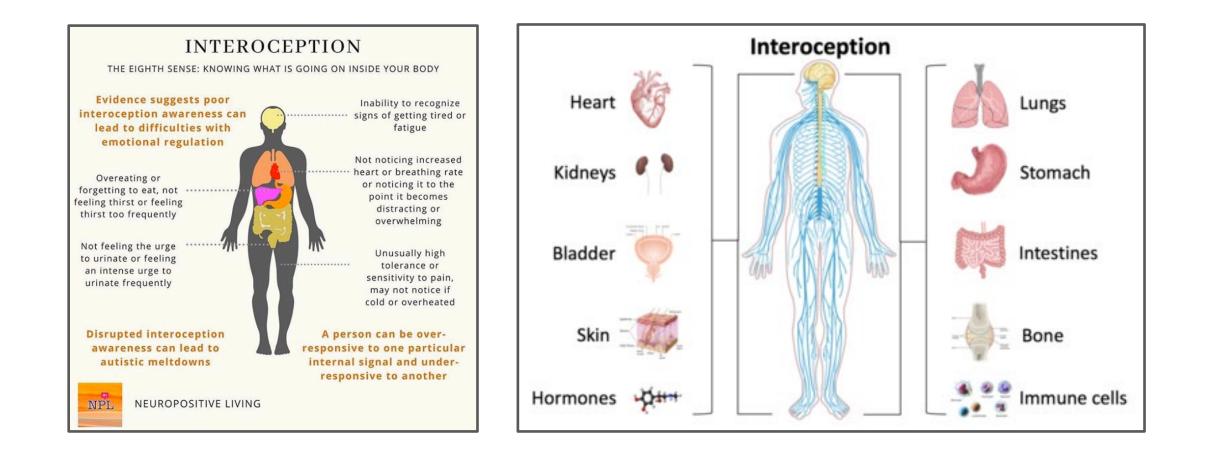
- Recurrent fears and worries
- Difficulty falling asleep or nightmares
- Hard to relax
- Difficulty separating from parents
- Scared about going to school
- Irritability, crying, tantrums
- Uncomfortable in social situations at sch restaurants, parties

## CLINICAL PEARLS

"I do not realize that I am getting angry until I am exploding with anger. By then it is too late. I can't control it." – Jason, 9-yearold boy with autism.

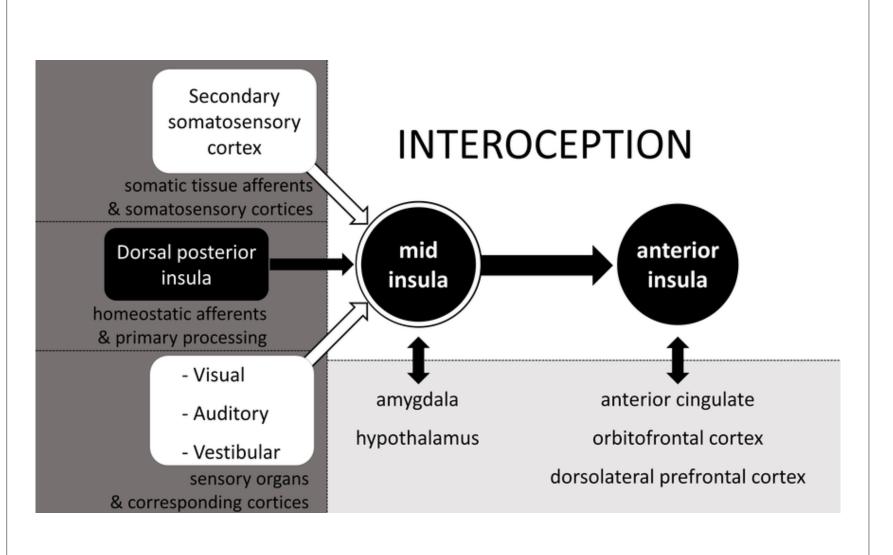
"A lot of times the inside of my body feels like one of those glitter timers- the ones that you can shake and the glitter goes every which way. I feel so many different things at once and I'm not sure what is important. It is very overwhelming." -Gracies, 13-year-old girl with autism.



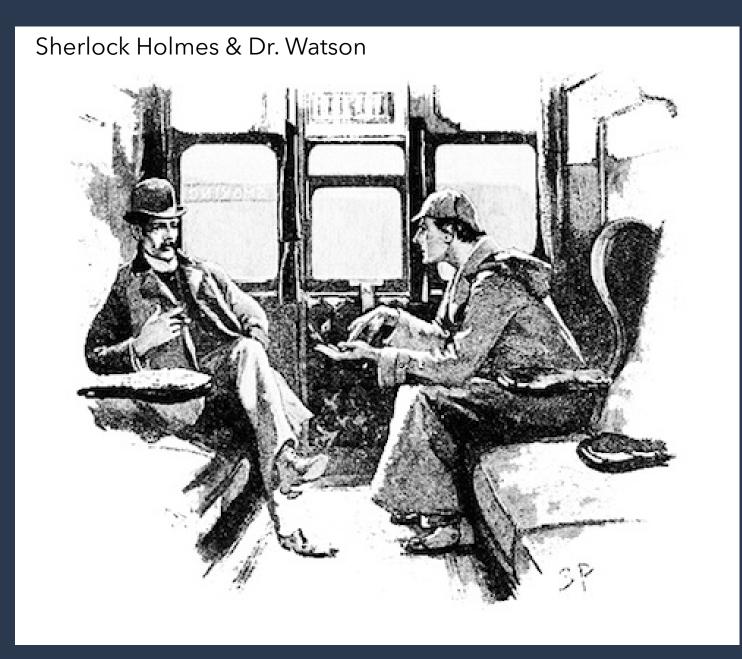


## HOW DO I FEEL?

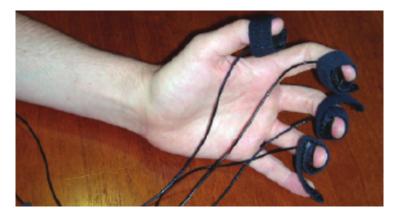
#### Interoception and the Central Nervous System

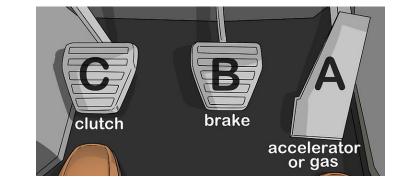


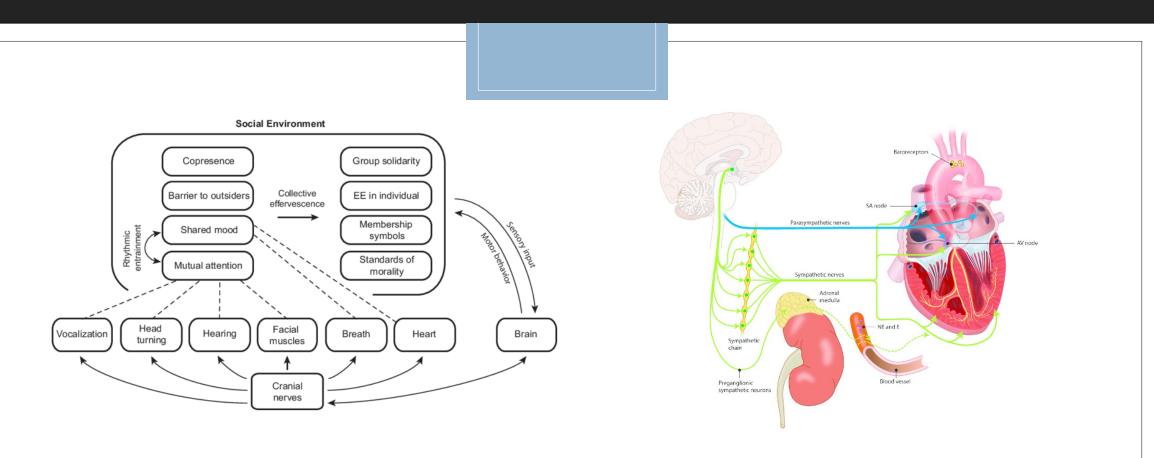
... I would emphasize something that may be somewhat speculative as of present: That many of the behaviors, emotions, and physiological manifestations that we observe in autism are the result of a dysregulated top down process stemming from cortical influences on the limbic system and brainstem centers.



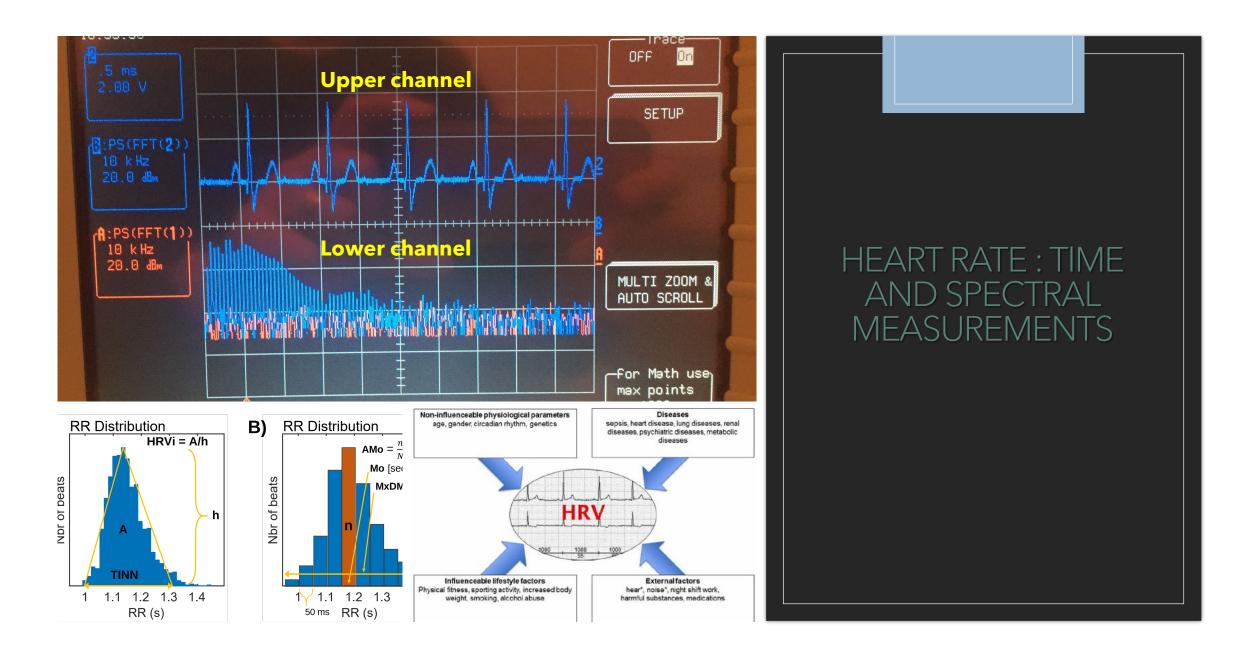
#### Skin conductance







## ANS : CNS : SOCIAL ENGAGEMENT

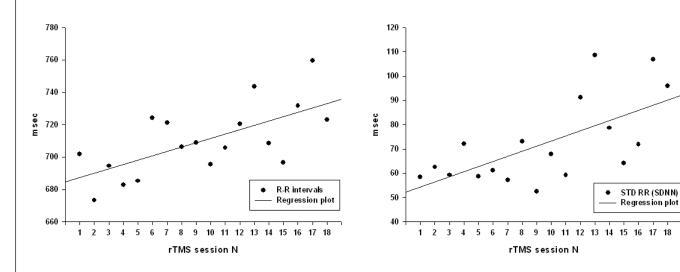


Measure	Units	t	p-value	R	R <sup>2</sup>	<b>Regression equation</b>	Power at $\alpha = 0.09$
RR	ms	3.52	0.003	0.661	0.437	y = 2.696x + 684.57	0.868
SDNN	ms	3.38	0.004	0.645	0.417	y = 2.098x + 52.28	0.844
RMSSD	ms <sup>2</sup>	2.15	0.047	0.473	0.224	y = 1.480x + 52.80	0.512
LF power	ms <sup>2</sup>	-1.02	0.323	0.247	0.061	y = -15.23x + 1775.4	0.163
HF power	ms <sup>2</sup>	5.12	< 0.001	0.788	0.621	y = 68.65x + 671.9	0.985
LF/HF ratio	N/A	-3.83	0.001	0.691	0.478	y = -0.028x + 1.619	0.913
SCL	μS	-3.71	0.002	0.681	0.464	y = -0.17x + 8.65	0.948

#### EFFECTS OF 18 SESSIONS OF RTMS ON AUTONOMIC FUNCTIONS IN AUTISM

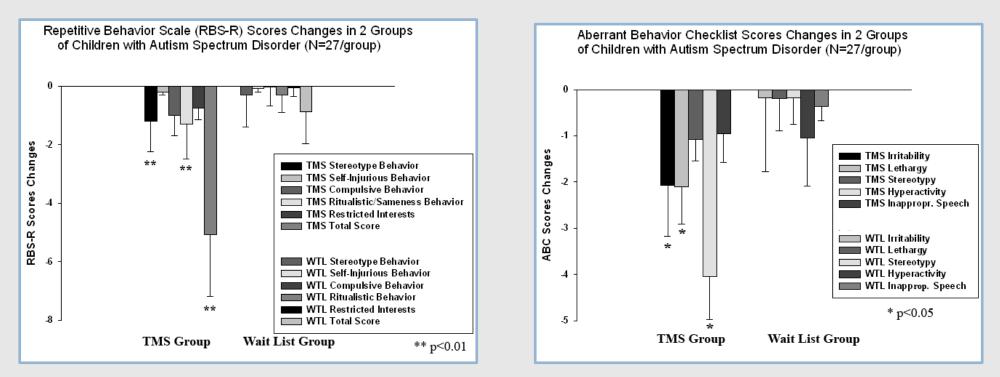
(a) R-R intervals of ECG in 18 sessions of rTMS course

(b) Standard Deviations of R-R intervals in 18 sessions of rTMS





### Effects of 18 Sessions of rTMS on Autism



Our results showed a positive correlation of LF of HRV with Stereotyped ratings on ABC and a positive correlation of LF/HF index with Total Repetitive and Stereotyped Behaviors scores on RBS-R.





### References

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