SYSTEMATIC REVIEW

OF EXECUTIVE FUNCTION ASSESSMENT TOOLS

IN CHILDREN AND ADOLESCENTS WITH AUTISM SPECTRUM DISORDER

AUTISM SPECTRUM DISORDER

 Autism Spectrum Disorder is common, lifelong neurodevelopmental condition that involve substantial heterogeneity at numerous levels, including etiology, neurobiology, cognition, and especially behavior.

 Long-term follow-up studies show that the developmental outcomes of autistic individuals are highly variable, even for individuals at the more intellectually able end of the autism spectrum. • While some individuals go on to live independently and obtain qualifications, the majority fail to achieve independence, to attain full-time employment, or to enjoy friendships.

• Explaining this variability is of critical import: to discover why developments take place in some areas and not in others, and especially in some individuals and not in others

EXECUTIVE FUNCTION & ASD

• EF has received extensive attention in the autism literature for many years largely due to the influential proposal that the inherent rigidity and invariance of autistic behaviors could be explained by a primary impairment in executive control.

• EF problems have been demonstrated consistently in school-age children, adolescents, and adults with autism, as well as relatives of individuals with autism albeit to a lesser degree

EXECUTIVE FUNCTION & ASD

Why Focus on Autistic Children's Developing EF

- While there is general consensus that EF problems are unlikely play a primary causal role in autism, it remains possible that the degree of difficulties in EF could play a substantial role in autistic children's developmental outcomes— including their social competence
- their adaptive behavior (those skills necessary for individuals to live independently and to function well in real-life settings), and their success in school.
- Indeed, clinicians and those who care for individuals with autism often associate some individuals' inability to achieve independence with persistent difficulties in regulating behavior and adapting flexibly to change

EXECUTIVE FUNCTION & ASD

• Whether poor EF plays a fundamental role in the emergence of core autistic features or, instead, is a consequence of early atypical input from another cognitive system

 It is nevertheless likely to place the child with autism at risk for a poor developmental outcome either directly or indirectly

DEFINITION OF EF

 High level cognitive abilities that require for conduction of environment that constantly changing

• Frontal Lob, especially prefrontal cortex

• Neuroimaging studies: subcortical and thalamic pathways

- Literature: impairment of EF in Autism
- Four main domains
 - Planning
 - Working Memory
 - Cognitive Flexibility
 - **Response Inhibition**

PLANNING

• A cognitive skill that include: decision making, judgment,

and assessment of own and others behavior

• fMRI & PET studies: a consistent pattern of activation of brain in relevant tasks

COGNITIVE FLEXIBILITY

• Ability of thought or behavior shifting in response to environmental changes

• Neuroimaging studies: prefrontal, parietal and subcortical regions

RESPONSE INHIBITION

• Ability of suppression of impulses or information that are irrelevant or intrusive

• A system for temporarily storing and managing the information required to carry out complex cognitive tasks such as:

learning

reasoning

comprehension

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• Baddeley: three pathways:

orbito-spatial, phonological, central

PERVIOUS REVIEWS

 In 2018 a systematic review of correlation between dysfunction of EF and behavioral symptoms in children with high function autism:

findings suggest that EF has an important role in development of ToM skills, relationship, social interaction and goal directed behaviors

 Another meta-analysis assess EF autism and clinical application of scales and effect of different variables (such as age, gender, diagnosis and scale characters) in neuropsychological scales of EF in in children with high function autism

Report of Studies of Executive Function tools in Neuropsychologic Assessment of Children and Adolescents with ASD

SEARCH STRATEGY

- A comprehensive search of a scoping review of the topic area and consultation with an information specialist as well as experts in the fields of child mental health and education
- The search strategy will include both free-text searching and controlled vocabulary searching (e.g. MEDLINE Medical Subject Headings (MeSH) terms).
 Terms will be grouped according to these concepts:
- autism, "pervasive developmental disorder", PDD, ASD, autistic, Asperger
- assessment, evaluation, test, measure, scale, inventory, checklist, instrument, reliability, validity
- intervention, treatment, therapy, training, education, rehabilitation
- Cognition (in general), emotion recognition/perception, face recognition/perception, theory of mind, executive function, attention, intelligence, memory, planning.

INCLUDED ARTICLES

108 studies included:

- Case-control studies: 97
- Longitudinal studies: 6
- Cross sectional studies: 4
- Case serries studies: I

QUALITY ASSESSMENT

Based on The Newcastle-Ottawa Scale (NOS) is an ongoing collaboration between the Universities of Newcastle, Australia and Ottawa, Canada

- Selection Bias
- Comparability bias
- Outcome bias

Results: 93 studies with acceptable quality 15 studies with low quality

COGNITIVE FLEXIBILITY

- 63 studies, 17 tools
- I. Wisconsin Card Sorting Test (WCST): 28 studies
- 2. Intra-Dimentional/Extra-Dimentional (ID/ED): 8 studies
- 3. Trail Making Test: 5 studies
- 4. Dimentional Change Card Sort (DCCS): 4 studies
- 5. Change task
- 6. Switch Task
- 7. Spatial Reversal Task

COGNITIVE FLEXIBILITY

8. Teddy-Bear Shifting Task

9. Woodcock-johnson Cognitive Battery II

10. Sorting Test

II. Battersea Multitask Paradigm

12. Multi-Step Multilocation Task

13.A Novel Task of Switching Paradigm

14. Flexible Item Selection Task

15. Brixton Spatial Anticipation Test

16. Zoo Map Test

17. Colour-Shape Task

RESPONSE INHIBITION

• 78 studies, 23 tools

I. Stroop Test: 16 studies

2. Go/No Go Test: 13 studies

3. Hayling Completion Test: 6 studies

4. Opposite Word Test: 5 studies

5. Luria Hand Game

6. Continuous Performance Test

7. Change Task

8. Walk, don't walk

9. Knock Tape

10.A-not-B

RESPONSE INHIBITION

11. Circle Drawing Task	
12. Flanker Task	
13. Pop Task	
14. Cognitive Estimates Task	
15. Mittenecker Pointing Task	
16. Antisaccade Task	
17. Less is More	
18. Prepotent Response Inhibition Task	
19. Card Task	
20. Pseudo-Random Number Generating Task	
21. Stop Signal Task	
22. Color Word Interference Test	
23. Proactive Interference Task	

PLANNING

• 33 studies, 10 tools

- I. Tower of London: I I studies
- 2. Tower of Hanoi: 4 studies
- 3. Stockings of Cambridge: 5 studies
- 4. Mazes test
- 5. Tower Test
- 6. Monkey Tower
- 7. Water Task
- 8. Six Parts Test
- 9. Key Search Test
- 10. Virtual Errands Task

- 65 studies, 26 tools
- I. Spatial Working Memory Test: II studies
- 2. Digit Span Test: 9 studies
- 3. Self-ordered Pointing Task: 5 studies
- 4. Corsi Block Taping Test: 4 studies

• Other tests:		
5. Spatial Span		
6.A-not-B		
7. Spatial Reversal		
8.Word Span		
9. Counting Span		
10. N-Back		
II. Boxes Task		
12. Block Span test		
13. Letter-Number Sequencing Task		
14. Same Different Computerized Task		
15. Block Recall Task		

16.Visual Pattern test	23. Mr. X task
17. Odd-Man-Out	24.Word Recall
18. Odd-One-Out	25. Oculomotor Delayed Response Task
19. Sums test	26. SB5 Battery (WM subtests)
20. Spatial Recall Task	

- 21. Computer Assist Seriation Training
- 22. Running Memory Task

GLOBAL ASSESSMENT OF EF

• BRIEF

✓ NEPSY-II

✓ Battersea Multitask Paradigm

✓ Delis-Kaplan Executive Functioning System (D-KEFS)

✓ Detail and Flexibility Questionnaire (DFLEX)

Behavioral Assessment of the Dysexecutive Syndrome (BADS)

PSYCHOMETRIC STUDIES

- Only two studies:
 - I. Stroop test for assessment of response inhibition
 - 2.WCST for assessment of cognitive flexibility

CONCLUSION

- 108 descriptive studies in assessment of EF in children and adolescents with ASD
- 93 studies had acceptable quality
- 78 studies in response inhibition, 65 studies in working memory, 63 studies in cognitive flexibility, 33 studies in planning
- 76 tools
- The most in working memory: 26 tools, 23 tools in response inhibition, 17 tools in cognitive flexibility, 10 tools in planning
- The most common tests were WCST & Stroop Test