Title: Comorbid Problems in Children with ASD With and Without Reported Regression

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Introduction: Children with autism spectrum disorder (ASD) exhibit high rates of comorbid problems, with 70% of children exhibiting at least one comorbid condition (Jang & Matson, 2015; Simonoff et al., 2008). Regression of previously acquired skills is also commonly reported in children with ASD (Baird et al., 2008). Among individuals with ASD (i.e., with and without reported history of regression), researchers have identified differences across skills, such as language (i.e., receptive and expressive), social skills, and play (Barnabei, Cerquiglini, Cortesi, & D’Ardia, 2007). This loss of skills combined with comorbid problems has implications for the developmental trajectory of children with ASD. Although regression and comorbid problems are more common in children with ASD than other developmental disorders (Baird et al., 2008), there is a lack of research directly examining if history of regression is associated with comorbid problems. The purpose of this study was to evaluate if regression may be associated with various comorbid problems in children with ASD.

Method: Several independent samples t-tests were conducted to compare children with ASD with reported regression (i.e., regressed group) and without reported regression (i.e., non-regressed group) on comorbid problems on the Autism Spectrum Disorders-Comorbidity for Children (ASD-CC; Matson & Gonzalez, 2007). The ASD-CC is a validated, 49-item assessment scale used to assess for comorbid problems in children with ASD on the following subscales: Tantrum Behavior, Repetitive Behavior, Worry/Depressed, Avoidant Behavior, Under-Eating, Over-Eating, and Conduct. Participants included 160 children between the ages of 2 and 16 years (\(M = 8.00, SD = 3.88\)).

Results: There were significant differences between the regressed and non-regressed groups in the Repetitive Behavior subscale, \(t(145) = -2.83, p = .001\). Children in the regressed group were found to have higher Repetitive Behavior subscale scores (\(M = 6.04, SD = 4.33\)) than the children in the non-regressed group (\(M = 4.32, SD = 3.04\)). There were no significant differences in Tantrum Behavior, Worry/Depressed, Avoidant Behavior, Under-Eating, Over-Eating, and Conduct subscales.

Discussion: The current findings indicate that children with ASD and history of regression may exhibit higher severity of Repetitive behaviors than children who do not regress. Further evaluation of regression and comorbid problems in children with ASD is needed to understand the heterogeneity of the disorder and the developmental trajectories of children with ASD.

References/Citations: