1	TITLE PAGE						
2	Title: Global MEG Resting State Functional Connectivity in Children with Autism and Sensory						
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5	Runr	Running Title: MEG Functional Connectivity in ASD & SPD					
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37	Ackr	owledgments: CD wa	s funded in part by National Institutes of Health grants (K23DC016637-				
38	01A1	, R01DC019167-01A	1) Autism Speaks CAPD Pilot award 11637, and UCSF Weill Institute				
39	for N	eurosciences Weill A	ward for Clinical Neuroscience Research (2016038). EJM was funded				
4U 11	by N	IH grant K23MH0838	90, the Wallace Research Foundation and crowdfunding support to the				
41 42		r Sensory Neurodeve	comment & Autism Program. SSN was funded in part by National				
42 12		ules of Health grant	S (KUINS100440, KUIDC1/0900, KUIDC01/091, KUIAG062196), nd the US Department of Defense grant ($W_{21}W_{W1}$ 12, 1, 0404)				
43 44		r -1vinr - 1 / -434 / 33, a	In the US Department of Defense grant ($W \delta I \Lambda W \Pi - 13 - 1 - 0494$).				
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46 47 48 49	Abstract
50	Sensory processing dysfunction not only affects most individuals with autism spectrum
51	disorder (ASD), but at least 5% of children without ASD also experience dysfunctional sensory
52	processing. Our understanding of the relationship between sensory dysfunction and resting state
53	brain activity is still emerging. This study compared long-range resting state functional
54	connectivity of neural oscillatory behavior in children aged 8-12 years with autism spectrum
55	disorder (ASD; N=18), those with sensory processing dysfunction (SPD; N=18) who do not meet
56	ASD criteria, and typically developing control participants (TDC; N=24) using
57	magnetoencephalography (MEG). Functional connectivity analyses were performed in the alpha
58	and beta frequency bands, which are known to be implicated in sensory information processing.
59	Group differences in functional connectivity and associations between sensory abilities and
60	functional connectivity were examined. Distinct patterns of functional connectivity differences
61	between ASD and SPD groups were found only in the beta band, but not in the alpha band. In
62	both alpha and beta bands, ASD and SPD cohorts differed from the TDC cohort. Somatosensory
63	cortical beta-band functional connectivity was associated with tactile processing abilities, while
64	higher-order auditory cortical alpha-band functional connectivity was associated with auditory
65	processing abilities. These findings demonstrate distinct long-range neural synchrony alterations
66	in SPD and ASD that are associated with sensory processing abilities. Neural synchrony
67	measures could serve as potential sensitive biomarkers for ASD and SPD.
68	

71 72 Introduction 73 74 Sensory dysfunction is estimated to impact at least 70% of individuals with Autism 75 Spectrum Disorders (ASD; Adamson, Hare, & Graham, 2006; Al-Heizan, AlAbdulwahab, 76 Kachanathu, & Natho, 2015; Greenspan & Wieder, 1997; Mayes & Calhoun, 1999; Tomcheck & 77 Dunn, 2007), and with its recognition as a core symptom in DSM-5 (American Psychiatric 78 Association 2013), there is a rapidly growing body of research focused on understanding the 79 causes and impact of sensory dysfunction in ASD. This line of research can be advanced not 80 only by studying sensory dysfunction in individuals with ASD and other clinical populations, but 81 also through examination of the estimated >5% of non-autistic individuals who experience 82 clinically significant sensory processing dysfunction (SPD) (Ahn et al. 2004). Yet, despite the 83 impairment in adaptive functioning associated with SPD, the absence of a recognized categorical 84 diagnosis limits access to resources for research and treatment in affected individuals. 85 Nevertheless, biological differences, such as white matter abnormalities (Chang et al. 2014; 86 Owen et al. 2013) and cortical response latencies (Demopoulos et al. 2017), have been identified 87 in children with SPD and these measurable structural and physiologic differences have been 88 associated with sensory processing behaviors (Chang et al., 2016). While some features of 89 sensory dysfunction may be shared among children with SPD and those with ASD, such as 90 tactile processing deficits (Demopoulos, Brandes-Aitken, et al. 2015), some domains of sensory 91 dysfunction may identify important distinctions between these populations. For example, 92 auditory processing abnormalities have been identified as distinguishing ASD from SPD groups 93 in both behavioral tasks and neural response latencies (Demopoulos et al. 2017; Demopoulos, 94 Brandes-Aitken, et al. 2015). Understanding these similarities and differences in sensory 95 processing dysfunction among children with and without ASD can not only help delineate the

96 sensory dysfunction that is specific to ASD, but it can also heighten our understanding of sensory
97 information processing more broadly and guide treatment strategies.

98 Because differences in resting state oscillatory activity can be indicative of functional 99 pathology (Papanicolaou 2009), there has been extensive research examining differences in 100 resting state brain activity in individuals with and without ASD diagnoses. While previous 101 sensory processing research has focused on differences in performance-based measures of, and 102 neural responses to, sensory processing (Chang et al., 2014; Demopoulos et al., 2015, 2017), our 103 understanding of the relationship between sensory dysfunction and resting state brain activity is 104 still emerging. This study will be the first to use using silently acquired recording via 105 magnetoencephalography (MEG) to examine whole brain functional connectivity during rest in 106 participants with ASD, SPD, and typically developing children (TDC). The goal of this study is 107 to identify relevant differences in whole brain functional connectivity that may be associated 108 with sensory dysfunction. Concurrent examination of these three groups offers two key benefits. 109 First, it will add to the emerging literature identifying the shared and distinct patterns of neural 110 activity in children with ASD and SPD. Second, it will allow us to examine differences in 111 functional connectivity and behavioral measures of sensory discrimination in affected children. 112 Prior research has suggested that auditory and tactile processing are particularly impacted in 113 children with ASD (Fernandez-Andres et al. 2015), and that auditory processing has been 114 associated with the communication impairments that are core to ASD (Demopoulos et al. 2017; 115 Demopoulos, Brandes-Aitken, et al. 2015; Demopoulos, Hopkins, et al. 2015; Edgar et al. 2013, 116 2014; Lerner, McPartland, and Morris 2013; Oram-Cardy et al. 2005; Oram Cardy et al. 2008; 117 Roberts et al. 2011, 2012, 2019, 2008, 2010). As such, we also examine associations between

functional connectivity and performance-based measures of auditory and tactile processing and verbal abilities.

120 Our functional connectivity analyses were performed in the alpha and beta frequency 121 bands, which are known to be implicated in sensory information processing. Specifically, these 122 frequency bands have been associated with sensory gating (Buchholz, Jensen, and Medendorp 123 2014) and direction of sensory attention in the auditory and visual cortex for alpha (Foxe and 124 Snyder 2011) and in the somatosensory cortex for beta (Bauer, Kennett, and Driver 2012; van 125 Ede, Jensen, and Maris 2010). Further, the role of alpha activity in states of psychological 126 distress has been widely studied (Adolph and Margraf 2017; Boutcher and Landers 1998; 127 Demerdzieva and Pop-Jordanova 2015; Fingelkurts et al. 2007; Knyazev, Savostyanov, and 128 Levin 2006; Mennella, Patron, and Palomba 2017; Smith, Zambrano-Vazquez, and Allen 2016), 129 and may be relevant to differences in psychological response to sensory input in our clinical 130 groups.

131 Prior research has demonstrated that both children with SPD and ASD were impaired on 132 behavioral and neural measures of tactile processing, but only the ASD group demonstrated 133 auditory dysfunction (Demopoulos et al. 2017; Demopoulos, Brandes-Aitken, et al. 2015). This 134 work is consistent with structural findings that children with ASD and SPD demonstrate 135 decreased connectivity in parieto-occipital tracts, but connectivity in temporal tracts was only 136 reduced in the ASD group (Chang et al., 2014). Thus, given these shared and divergent sensory 137 findings between children with ASD and SPD, and given that alpha and beta connectivity has 138 been associated with sensory gating and sensory attention in these frequency bands (Buchholz et 139 al. 2014; Foxe and Snyder 2011), we hypothesize that similar shared and divergent MEG-derived 140 findings of resting state functional connectivity in the alpha and beta ranges will be identified

141 between children with ASD, SPD, and TDC participants. In addition, based on work implicating 142 alpha oscillations in the direction of auditory attention (Bauer et al. 2012) and evidence of 143 somatosensory cortex beta band modulation in advance of tactile stimuli (van Ede et al. 2010). 144 we also hypothesize that alpha connectivity will be associated with auditory processing and beta 145 connectivity will be associated with tactile processing. To test these hypotheses, these frequency 146 bands were subjected to source space reconstruction for analysis of differences in long-range 147 neural synchrony and associations with sensory processing abilities. 148 Methods 149 Participants 150 Participants were 60 boys aged 8-12 years (ASD N=18; SPD N=18; typically developing 151 controls (TDC) N=24) who were recruited from the UCSF Sensory Neurodevelopmental and 152 Autism Program (SNAP) participant registry and website, UCSF SNAP clinic, and local online 153 parent groups. Experimental protocols were approved by the UCSF IRB and carried out in 154 accordance with those approved procedures. Participants provided their written assent and 155 written informed consent was obtained from parents or legal guardians prior to enrollment. 156 Consent and assent procedures were witnessed by a member of the study team. Participants were 157 recruited between 5/22/2003 and 10/26/2015. All participants who were taking medication were 158 on a stable dose for at least six weeks prior to testing as reported in our previously published 159 studies that recruited from this pool of participants (Demopoulos et al. 2017; Demopoulos, 160 Brandes-Aitken, et al. 2015). Specifically, in the TDC group one participant regularly used an 161 antihistamine and a leukotriene inhibitor for seasonal allergies as well as melatonin for sleep. 162 Another TDC participant regularly used steroid medications paired with a bronchodilator as 163 needed for asthma and allergies and omeprazole for reflux. A third TDC participant regularly

164	used methylphenidate for attention. In the SPD group, one participant was prescribed
165	lisdexamfetamine, sertraline, and valproic acid for inattention and challenging behavior, and four
166	others were taking stimulants (amphetamine/dextroamphetamine and methylphenidate) for
167	inattention. One additional SPD participant was taking nonstimulant medication (atomoxetine)
168	for inattention and montelukast for allergies, and another was taking steroid medication for
169	asthma. In the ASD group, one participant was taking a chelation agent (DMSA), another
170	participant was taking escitalopram for anxiety, and a third was taking guanfacine and
171	methylphenidate for calming and inattention.
172	Inclusion/exclusion criteria and diagnostic classification followed the criteria utilized in
173	previous studies (Demopoulos et al. 2017; Demopoulos, Brandes-Aitken, et al. 2015).
174	Specifically, exclusion criteria included (1) bipolar disorder, psychotic disorder, or other
175	neurological disorder or injury, and (2) a score of 70 or below on the Wechsler Intelligence Scale
176	for Children-Fourth Edition (WISC-IV; Wechsler, 2003) Perceptual Reasoning Index (PRI). The
177	PRI rather than the Full Scale Intelligence Quotient (FSIQ) was utilized for exclusion criteria
178	because verbal abilities (represented in the Verbal Comprehension Index and incorporated into
179	the FSIQ) were examined as an outcome measure in this study. Specifically, those with prior
180	clinical diagnosis of ASD and those scoring ≥ 15 on the Social Communication Questionnaire
181	(SCQ; Rutter, Bailey, & Lord, 2003), regardless of previous diagnostic status, were evaluated
182	with the Autism Diagnostic Inventory-Revised (ADI-R; Lord, Rutter, & Le Couteur, 1994) and
183	the Autism Diagnostic Observation Schedule (ADOS; Lord et al., 1989). Diagnostic cutoffs on
184	both of these measures were met for participants in the ASD group, who also met DSM-IV-TR
185	criteria for Autistic Disorder, confirmed by a pediatric neurologist (EJM). SPD participants were
186	previously diagnosed with SPD by a community occupational therapist. Inclusion criteria for this

187 group were included (1) SCQ score <15 and (2) a score in the "Definite Difference" range in one

188 or more of the auditory, visual, oral/olfactory, tactile, vestibular, or multisensory processing

domains of the Sensory Profile (Dunn 1999). All SCQ and Sensory Profile scores for the TDC

190 group were not in clinical ranges. Demographic characteristics of the study sample are presented

in Table 1.

192 [Table 1]

193 Table 1 194

195

196

Group Characteristics ($M \pm SD [range]$)

	ASD	SPD	TDC	Statistics
Age	9.88 ± 1.32 [8.13-12.00]	9.94 ± 1.29 [8.28-12.08]	$\frac{10.18 \pm .1.13}{[8.18-11.94]}$	F(2,57) = .36
FSIQ	96.94 ± 13.54 ^{ac} [71-121]	109.39 ± 11.35 [89-131]	114.92 ± 9.31 [97-135]	F(2,57)=13.20***
PRI	103.17 ± 8.56^{d} [94-123]	113.11 ± 11.63 [92-131]	111.00 ± 12.29 [89-129]	F(2,57)=4.09*
VCI	98.56 ± 21.81 ^{bd} [59-140]	113.11 ± 14.63 [83-136]	118.46 ± 13.08 [93-144]	F(2,57)=7.65**
Sensory Profile Total Score	135.78 ± 16.92 ac [102-160]	119.11 ± 17.38 ª [74-145]	172.04 ± 10.38 [145-187]	F(2,57)=71.12***
Ethnicity (N) Caucasian	10	12	17	
Asian	4	1	1	
Multiracial	4	3	4	
Hispanic	0	1	0	
Unknown	0	1	2	
Right	15	17	20	
Left	1	1	2	
Ambidextrous	2	0	1	

234 235	Unknown	0	0	1	
236	*p < .05				
237	**p < .01				
238	***p < .001				
239	^a Significantly	different fr	om TDC at p<.001	following Bonferro	oni correction for multiple comparisons
240	^b Significantly	different fr	om TDC at p<.01 fo	ollowing Bonferror	ni correction for multiple comparisons
241	° Significantly	different fr	om SPD at p<.01 fo	llowing Bonferror	i correction for multiple comparisons

^d Significantly different from SPD at p<.05 following Bonferroni correction for multiple comparisons

- 243
- 244 Measures

245 *Tactile Processing.* Tactile processing measures were assessed according to previously 246 published procedures (Demopoulos et al. 2017; Demopoulos, Brandes-Aitken, et al. 2015). 247 Tactile form discrimination was assessed using the Van Boven Domes task (Van Boven & 248 Johnson, 1994) and quantified by the lowest grating size of passed trials. Tactile proprioception 249 was measured according to the total score of the right and left hand scores of the graphesthesia 250 subtest of the Sensory Integration Praxis Tests (Avres 1989). 251 Auditory Processing. Auditory processing also was assessed according to previously 252 published procedures (Demopoulos, Brandes-Aitken, et al. 2015; Demopoulos et al., 2017) via 253 the Acoustic (AI) and Acoustic-Linguistic Index (ALI) of the Differential Screening Test for 254 Processing (DSTP; Richard & Ferre, 2006). The AI is derived from performance on measures of 255 dichotic listening, temporal sequencing, and auditory filtering skills. The ALI assesses auditory 256 processing skills associated with language via tasks focused on phonic and phonemic 257 manipulation. 258 Verbal Abilities. Because auditory processing dysfunction has been repeatedly associated 259 with weaker verbal abilities in children with ASD (Demopoulos et al. 2017; Edgar et al. 2013; 260 Oram-Cardy et al. 2005; Roberts et al. 2011; Russo et al. 2009; Schmidt et al. 2009), we also 261 assessed for associations between functional connectivity and verbal abilities in the ASD group

using established protocols for our assessment of verbal abilities (Demopoulos et al. 2017;

263 Demopoulos, Brandes-Aitken, et al. 2015). The Linguistic Index (LI) of the DSTP was used to 264 evaluate semantic and pragmatic aspects of language. The VCI of the WISC-IV (Wechsler, 265 2003) was used to index verbal intellectual abilities. 266 Magnetic Resonance Image (MRI) Acquisition and Processing. Structural MRIs were 267 acquired for co-registration with MEG functional data on a 3T Siemens MRI scanner at the 268 UCSF Neuroscience Imaging Center. T1-weighted images were spatially normalized to the 269 standard Montreal Neurological Institute template brain using 5mm voxels in SPM8 270 (http://www.fil.ion.ucl.ac.uk/spm/software/spm8/). Normalization results were manually verified 271 in all participants. 272 Magnetoencephalographic Image Acquisition and Processing. Methods for acquisition 273 and processing of MEG data follow protocols similar to those used in prior research employing 274 these imaginary coherence metrics (Demopoulos et al. 2020; Ranasinghe et al. 2017). 275 Specifically, MEG data were acquired at a 1200 Hz sampling rate using a 275-channel CTF 276 System whole-head biomagnetometer (MEG International Services Ltd., Cogiotlam, BC, 277 Canada). Fiducial coils were placed at the nasion and bilateral peri-auricular points to localize 278 the head to the sensor array. These localizations were utilized for coregistration to the T1-279 weighted MRI and generation of a head shape. Four minutes of continuous recording was 280 collected from each subject while awake with eyes closed in a supine position. While keeping 281 eyes closed can increase alpha in resting state activity, it also serves to control visual stimulation 282 and because this procedure was implemented for all participants, this would not confound group 283 contrasts. As such, we elected to use an eyes closed approach, as has been used in many previous 284 studies of resting state activity in children with ASD (Berman et al. 2015; Brodski-Guerniero et 285 al. 2018; Cornew et al. 2012; Edgar et al. 2019; Edgar, Heiken, et al. 2015; Green et al. 2020,

286 2022; Port et al. 2019). Based on previous studies demonstrating reliable results from 60 second 287 segments of MEG resting state data (Guggisberg et al. 2008; Hinkley 2010; Hinkley et al. 2011), 288 we selected a 60-second artifact-free epoch. Artifact rejection criteria were signal amplitude 289 >10pT or visual evidence of movement or muscle contractions. 290 A whole brain lead field was computed according to a spatially normalized MRI with a 291 10mm voxel size. The Neurodynamic Utility Tool for MEG (NUTMEG; 292 http://nutmeg.berkeley.edu; Dalal et al., 2011) was used for source-space reconstruction and 293 functional connectivity analyses. Source-space was reconstructed from filtered sensor (fourth-294 order Butterworth filter of 1-20 Hz). A linear combination of spatial weighting and sensor data 295 matrices were used to estimate each voxel's amplitudes (Hinkley et al., 2011). 296 Following source space reconstruction, functional connectivity analysis was performed 297 by computing imaginary coherence. The imaginary coherence approach excludes zero- or π -298 phase-lag-connectivity to eliminate neural synchrony attributable to volume spread (Nolte et al. 299 2004). This approach has been documented as a reliable method for estimating long-range neural 300 synchrony (Engel et al. 2013; Guggisberg et al. 2008; Martino et al. 2011; Nolte et al. 2004), and 301 has been shown to reduce overestimation (Guggisberg et al. 2008; Martino et al. 2011; Nolte et 302 al. 2004). Imaginary coherence values were transformed to Fisher's Z prior to calculating 303 associations between each voxel and all other voxels. These associations were averaged within 304 each voxel to derive voxel wise global connectivity values for group contrasts in the alpha and 305 beta frequency bands. Correlations also were performed between behavioral measures and global 306 connectivity values at each voxel for the combined group study sample. All voxel-wise results 307 with uncorrected p < 0.05 were further subjected to a 5% False Discovery Rate multiple 308 comparisons correction (Benjamini and Hochberg 1995) and a 5-voxel cluster correction.

309	Missing Data. Data from the sensory battery tasks are missing for some participants
310	because these tasks were added to the protocol after these participants were enrolled. Thus, these
311	data can be considered missing at random. DSTP data was available for 17 ASD participants, 17
312	TDC participants, and 11 SPD participants. Van Boven Domes were administered to 16
313	participants in the ASD group, 16 in the TDC group, and 11 in the SPD group. Graphesthesia
314	was administered to 17 ASD participants, 15 TDC participants, and 11 SPD participants.
315	Results
316	Group Contrasts in Alpha Connectivity. Group contrasts in alpha coherence indicated
317	that, relative to TDC participants, the ASD group showed reduced connectivity in the left
318	fusiform and inferior occipital gyri and cerebellum and increased connectivity in the right pre-
319	and postcentral gyri. No significant differences were identified between the ASD and SPD
320	groups; however, the SPD group showed increased connectivity compared to TDC participants
321	in the left middle and superior frontal gyri and in the right inferior frontal gyrus, precuneus, and
322	inferior and superior parietal lobules. Alpha contrast results are presented in Figure 1 and
323	summarized in Table 2.

324 [Figure 1]

Alpha Contrasts



326 Figure 1. Alpha Contrasts. Areas of significantly increased (warm) and reduced (cool) alpha 327 connectivity are presented on figures for each pairwise contrast. Accompanying boxplots are 328 presented for each cluster showing imaginary coherence values for all groups at the voxel within 329 that cluster that demonstrated the greatest pairwise difference. 330 Correlations Between Alpha Connectivity and Sensory Processing/Verbal Abilities. 331 Correlation analyses were performed on all study participants combined across groups to 332 examine the relations between functional connectivity and the range of sensory processing and 333 verbal abilities in our sample. No significant associations were identified between tactile 334 processing performance and measures of alpha coherence; however, significant associations 335 were identified between measures of alpha coherence and auditory processing performance. 336 Specifically, scores on the DSTP Acoustic scale were positively associated with alpha coherence 337 in the left cerebellar tonsil and negatively associated with alpha coherence in the left inferior and

middle temporal gyri. A significant positive association also was identified between VIQ and

alpha coherence in the left uncus, cerebellar tonsil, and anterior superior, middle, and inferior

temporal gyri (Figure 2). A summary of correlation results is presented in Table 3.

341 [Figure 2]



Alpha Connectivity Correlations: Combined Sample

Figure 2. Alpha Correlations in the Combined Participant Sample. Positive associations between
auditory processing/verbal abilities and alpha connectivity values are identified in magenta
clusters for the sample of all participants in the study. Negative associations between auditory
processing and imaginary coherence values are identified in cyan clusters. Corresponding
scatterplots are presented for the voxel with the greatest correlation value within each cluster,

with groups identified by color and shape (ASD group = yellow circle, SPD group = green
triangle, and TDC group = grey square).

350

351 Group Contrasts in Beta Connectivity. Group contrasts in beta coherence indicated that, 352 relative to TDC participants, the ASD group showed reduced connectivity in the left middle and 353 inferior temporal gyri. Relative to SPD participants, however, the ASD group showed a pattern 354 of increased beta connectivity in the right cingulate, middle frontal, and precentral gyri, and 355 bilaterally in the superior and medial frontal gyri, the postcentral gyrus, the inferior parietal 356 lobule, and in the supramarginal gyrus. Finally, when compared to TDC participants, the SPD 357 group demonstrated a pattern of reduced beta connectivity bilaterally in the superior and middle 358 frontal gyri, insula and putamen, as well as in the left inferior frontal gyrus, cingulate gyrus, 359 caudate body, pre- and postcentral gyri, and inferior parietal lobule, and in the right superior 360 temporal gyrus, lentiform nucleus, globus pallidus, and caudate. Beta contrasts are presented in 361 Figure 3 and summarized in Table 2.

362 [Figure 3]



364 Figure 3. Beta Contrasts. Areas of significantly increased (warm) and reduced (cool) beta

365 connectivity are presented on figures for each pairwise contrast. Accompanying boxplots are

- 366 presented for each cluster showing imaginary coherence values for all groups at the voxel within
- that cluster that demonstrated the greatest pairwise difference.
- 368

369 *Correlations Between Beta Connectivity and Sensory Processing*. A significant negative 370 association was identified between beta coherence in the right precentral gyrus and performance 371 on the graphesthesia task (Figure 4). No significant associations were identified between beta 372 coherence and measures of auditory processing or verbal abilities in the combined groups 373 sample. A summary of correlation results is presented in Table 3.

374 [Figure 4]



Beta Connectivity Correlations: Combined Sample

375

Figure 4. Beta Correlations in the Combined Participant Sample. Negative associations between tactile processing abilities and beta connectivity values are identified in the cyan cluster for the sample of all participants in the study. The corresponding scatterplot is presented for the voxel with the greatest correlation value within each cluster, with groups identified by color and shape (ASD group = yellow circle, SPD group = green triangle, and TDC group = grey square).

382 [Table 2]

383 Table 2. Summary of Group Contrast Results

Group	Band	Regions	Direction of Difference
ASD vs. TDC	α	left fusiform and inferior occipital gyri and cerebellum	Decreased
		right pre- and postcentral gyri	Increased
	β	left middle and inferior temporal gyri	Decreased
SPD vs. TDC	α	left middle and superior frontal gyri and in the right inferior frontal gyrus, precuneus, and inferior and superior parietal lobules	Increased
	β	bilaterally in the superior and middle frontal gyri, insula and putamen, as well as in the left inferior frontal gyrus, cingulate gyrus, caudate body, pre- and postcentral gyri, and inferior parietal lobule, and the right superior temporal gyrus, lentiform nucleus, globus pallidus, and caudate	Decreased
ASD vs. SPD	α	no significant differences	N/A
	β	right cingulate, middle frontal, and precentral gyri, and bilaterally in the superior and medial frontal gyri, the postcentral gyrus, the inferior parietal lobule, and in the supramarginal gyrus	Increased

384

385 [Table 3]

386Table 3. Summary of Correlation Results for the Combine Groups Sample

Band	Domain	Task	Regions	Direction of
				Correlation
α	tactile		no significant	N/A
			associations	
	auditory	DSTP Acoustic	left cerebellar	+
		Scale	tonsil	
			left inferior and	-
			middle temporal	
			gyri	
	verbal	VIQ	left uncus,	+
			cerebellar tonsil,	
			and anterior	
			superior, middle,	
			and inferior	
			temporal gyri	
β	tactile	Graphesthesia	right precentral	-
			gyrus	
	auditory		no significant	N/A
			associations	
	verbal		no significant	N/A
			associations	

387

Discussion

389 This study used two methods to investigate associations between direct assessment of 390 auditory and tactile sensory processing and resting state functional connectivity in the brain. 391 First, we examined differences between groups that would allow us to isolate the sensory 392 processing dysfunction that presents as part of an ASD from that which manifests in the absence 393 of the other defining features of ASD. Second, we directly examined associations between 394 functional connectivity and auditory and tactile processing and verbal abilities in a combined 395 participant sample including all three groups, allowing us to examine the distribution of these 396 variables across children with a range of sensory functioning.

397 Group Contrasts in Functional Connectivity

398 ASD vs TDC Contrasts. Relative to the TDC group, participants with ASD showed 399 increased alpha connectivity in the right sensorimotor cortex and decreased connectivity in left 400 posterior fusiform, occipital, and cerebellar regions. Notably, increased alpha power (Edgar, 401 Heiken, et al. 2015) in a similar region in the right medial sensorimotor cortex, and increased 402 alpha to low-gamma phase amplitude coupling in this central midline region (Port et al. 2019) 403 has been reported in prior ASD samples. The present results also recapitulate our previous 404 structural findings in children with ASD, in which we reported decreased structural connectivity 405 in the inferior fronto-occipital fasciculus and the fusiform-hippocampus and fusiform-amygdala 406 tracts (Chang et al., 2014). Our findings of increased cerebellar connectivity are also consistent 407 with considerable prior research implicating the cerebellum in the pathology of ASD. 408 Specifically, cerebellar anomalies, including abnormal anatomy, neurotransmission, oxidative 409 stress. neuroinflammation, and cerebellar motor and cognitive deficits are among the most 410 replicated findings in individuals with ASD (Fatemi et al. 2012).

411 In the beta range, the ASD group demonstrated decreased beta connectivity in left 412 temporal regions relative to TDC participants. Stronger beta connectivity in TDC relative to 413 ASD participants in temporal regions has been demonstrated in prior work (Kitzbichler et al. 414 2015). Beta power in the auditory cortex has been hypothesized to be involved in auditory-motor 415 communication (Fujioka et al. 2009) and recent work has demonstrated increases in sensorimotor 416 low beta power in response to perceived self-produced vocal errors on an altered auditory 417 feedback speech paradigm (Franken et al. 2018). The decreased beta connectivity in the left auditory cortex demonstrated in the present study may reflect under-recruitment of this area 418 419 needed for auditory processing and auditory motor communication in participants with ASD. 420 SPD vs TDC Contrasts. The SPD group differed from the TDC group via increased alpha 421 connectivity in bilateral frontal and right posterior parietal regions and reduced beta connectivity 422 in left parietal and medial and right frontal regions. These differences in functional connectivity 423 identified in these regions may be associated with the impairments in visuomotor skills and 424 attention previously reported in the SPD population (Brandes-Aitken et al., 2018). In fact, prior 425 work examining diffusion imaging in children with SPD identified associations between 426 visuomotor and cognitive control abilities and structural connectivity in regions of the superior 427 longitudinal fasciculus that run adjacent to the parietal regions identified in this study (Brandes-428 Aitken et al., 2019).

ASD vs SPD Alpha and Beta Contrasts. Notably, the ASD and SPD groups did not show
significant differences in alpha connectivity. In fact, it was beta connectivity that distinguished
these two groups. Specifically, the SPD group showed a pattern of reduced beta connectivity
relative to both the TDC and ASD groups in bilateral and medial frontal and left parietal regions.
Taken together, these findings suggest that decreased beta connectivity in medial frontal and

434	parietal regions may be involved in, or a response to, the sensory disturbance experienced by
435	children with SPD. Beta activity has been previously reported to be associated with
436	somatosensory gating and attention (Bauer et al. 2012; Buchholz et al. 2014; van Ede et al.
437	2010). Our previous work has demonstrated common tactile processing deficits in both ASD and
438	SPD groups (Demopoulos, Brandes-Aitken, et al. 2015), although when MEG-acquired
439	somatosensory latencies were compared between these groups, the SPD group demonstrated an
440	intermediate latency and did not significantly differ from TDC or ASD participants (Demopoulos
441	et al. 2017). These previous results, in conjunction with the present finding that beta activity
442	distinguished the ASD and SPD groups in the bilateral somatosensory cortex, may suggest that
443	the pathology underlying tactile dysfunction in these two groups is divergent.
444	Combined Groups Correlation Results. When correlation analyses were performed on all

445 participants combined into one group, alpha connectivity was positively associated with auditory 446 and verbal abilities, whereas beta connectivity was negatively associated with tactile processing. 447 Specifically, there was a common area of positive correlation between left cerebellar alpha 448 connectivity and both auditory processing and verbal abilities; however, an additional positive 449 association was identified between left anterior temporal alpha connectivity and verbal abilities. 450 Previous work has identified an association between increased anterior temporal alpha power and 451 autism symptomatology measured via the SRS total score (Cornew et al. 2012). whereas an 452 additional negative association was identified between posterior temporal alpha connectivity and 453 auditory processing. Taken together, these findings may suggest that increased cerebellar alpha 454 recruitment may be utilized to address auditory processing weakness that affects not only basic 455 auditory processing abilities, a deficit that is common in individuals with ASD (Abdeltawwab 456 and Baz 2015; Alcántara et al. 2004; Demopoulos et al. 2017; Demopoulos, Hopkins, et al. 2015;

457 Demopoulos and Lewine 2016; DePape et al. 2012; Edgar et al. 2013, 2014; Edgar, Fisk IV, et 458 al. 2015; Gage, Siegel, Callen, et al. 2003; Gage, Siegel, and Roberts 2003; Hitoglou et al. 2010; 459 Järvinen-Pasley and Heaton 2007; Kargas et al. 2015; Oram-Cardy et al. 2005; Oram Cardy et al. 460 2005; Tecchio et al. 2003; Tomcheck and Dunn 2007), but also verbal abilities. Indeed, prior 461 work has demonstrated links between cortical auditory processing abnormalities and verbal 462 abilities (Berman et al. 2016; Demopoulos et al. 2017; Edgar et al. 2013; Oram-Cardy et al. 463 2005; Oram Cardy et al. 2008; Roberts et al. 2011, 2012; Schmidt et al. 2009). With regard to beta connectivity, increases in the right somatosensory cortex were associated with poorer 464 465 performance on the graphesthesia task. Examination of the scatterplot distribution suggests that 466 somatosensory processing limitations may drive the graphesthesia impairments demonstrated in 467 the two clinical groups. Correlation results were consistent with our hypothesis that beta 468 connectivity would be associated with tactile processing and alpha connectivity would be 469 associated with auditory processing. This is consistent with prior work in which alpha 470 oscillations were associated with direction of auditory attention (Bauer et al. 2012) and 471 somatosensory cortex beta band modulation was reported in advance of tactile stimuli (van Ede 472 et al. 2010).

473

474 Limitations and Future Directions

Several limitations of the present study must be acknowledged. First, the participant
sample was restricted to males between the ages of 8-12 years. Prior studies examining resting
state neural oscillatory behavior have also restricted analyses to males given the high prevalence
of ASD in males and sex differences in peak alpha frequency (Edgar et al. 2019; Green et al.
2022; Manyukhina et al. 2022). While these restrictions result in more homogenous groups and

480 minimize confounds of sex and age differences in neurobiology, they also create limitations for 481 the generalizability of these results to females and children and adolescents outside the age range 482 studies. Future research is necessary to understand the applicability of these findings across ages 483 and sexes. This study also included only children with a nonverbal IQ>70, which limits the 484 generalizability of these results to lower functioning individuals. Further, this study focused on 485 only two frequency bands (alpha and beta) and only two sensory domains, auditory and tactile 486 processing. While prior research suggests that these domains may be the most severely impacted 487 in individuals with ASD (Fernandez-Andres et al. 2015), sensory dysfunction is heterogeneous in 488 its presentation among individuals with and without ASD, and understanding neurobiological 489 factors associated with dysfunction in other sensory domains also will be important to inform 490 treatment development. Finally, this study focused on specific aspects of sensory processing 491 (e.g., discrimination, temporal processing, etc.), but did not incorporate measures of sensory 492 responsivity or sensory seeking behavior. Further, this work only focused on two frequency 493 bands, alpha and beta. Future studies could expand upon this work to examine relations between 494 sensory processing dysfunction and functional connectivity in other frequency bands, as gamma 495 oscillatory behavior has been associated with multisensory communication (Misselhorn et al. 496 2019) and sensory sensitivity (Manyukhina et al. 2021). Future studies are needed to characterize 497 differences in functional connectivity that may account for these heterogeneous sensory 498 responses or behaviors in children with ASD and SPD. 499 Conclusions

500 This study was the first to use MEG to examine participants with ASD and SPD in 501 relation to neurotypical children to identify relevant differences in resting state whole brain 502 functional connectivity that may be associated with sensory dysfunction. This study design allowed us to identify both shared and distinct patterns of neural activity in two groups affected

- 504 by sensory dysfunction. Specifically, both clinical groups were distinguished from the TDC
- 505 group by patterns of functional connectivity differences in the alpha and beta bands, whereas the
- 506 clinical groups were only distinguished from each other on measures of beta connectivity.
- 507 Associations between functional connectivity and behavior identified that sensorimotor regions
- 508 were associated with tactile processing performance and temporal and cerebellar regions were
- sociated with auditory processing and language abilities. These results suggest that resting
- 510 state differences in oscillatory brain activity in the alpha and beta frequencies is associated with
- 511 the sensory dysfunction that characterizes children with ASD and SPD.
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842	Author Contribution Statement
843 844	C.D., E.J.M., and S.S.N. conceived the project and methodological approach. S.D., S.H., A.F.,
845	and D.M. participated in data acquisition. C.D. and X.D. performed data analysis with
846	consultation from A.F., L.B.H. and K.G.R. C.D., X.D., and B.G.J. created the figures. C.D. and
847	M.R.G. created the tables. C.D. wrote the manuscript in consultation with E.J.M. and S.S.N.
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850	Data Availability Statement
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852	The data that support the findings of this study are available on request from the corresponding
853	author. The data are not publicly available due to privacy or ethical restrictions.
854	
855	
856	Additional Information
857	
858	The authors have no competing interests to declare.
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861 862 863	Figure Legends					
864	Figure 1. Alpha Contrasts. Areas of significantly increased (warm) and reduced (cool) alpha					
865	connectivity are presented on figures for each pairwise contrast. Accompanying boxplots are					
866	presented for each cluster showing imaginary coherence values for all groups at the voxel within					
867	that cluster that demonstrated the greatest pairwise difference.					
868						
869	Figure 2. Alpha Correlations in the Combined Participant Sample. Positive associations between					
870	auditory processing/verbal abilities and alpha connectivity values are identified in magenta					
871	clusters for the sample of all participants in the study. Negative associations between auditory					
872	processing and imaginary coherence values are identified in cyan clusters. Corresponding					
873	scatterplots are presented for the voxel with the greatest correlation value within each cluster,					
874	with groups identified by color and shape (ASD group = yellow circle, SPD group = green					
875	triangle, and TDC group = grey square).					
876						
877	Figure 3. Beta Contrasts. Areas of significantly increased (warm) and reduced (cool) beta					
878	connectivity are presented on figures for each pairwise contrast. Accompanying boxplots are					
879	presented for each cluster showing imaginary coherence values for all groups at the voxel within					
880	that cluster that demonstrated the greatest pairwise difference.					
881						
882	Figure 4. Beta Correlations in the Combined Participant Sample. Negative associations between					
883	tactile processing abilities and beta connectivity values are identified in the cyan cluster for the					
884	sample of all participants in the study. The corresponding scatterplot is presented for the voxel					

- 885 with the greatest correlation value within each cluster, with groups identified by color and shape
- 886 (ASD group = yellow circle, SPD group = green triangle, and TDC group = grey square).

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Group Characteristics ($M \pm SD$ [range])				
	ASD	SPD	TDC	Statistics
Age	9.88 ± 1.32 [8.13-12.00]	9.94 ± 1.29 [8.28-12.08]	10.18 ± .1.13 [8.18-11.94]	F(2,57) = .36
FSIQ	96.94 ± 13.54 ac [71-121]	109.39 ± 11.35 [89-131]	114.92 ± 9.31 [97-135]	F(2,57)=13.20***
PRI	103.17 ± 8.56 d [94-123]	113.11 ± 11.63 [92-131]	111.00 ± 12.29 [89-129]	F(2,57)=4.09*
VCI	98.56 ± 21.81 ^{bd} [59-140]	113.11 ± 14.63 [83-136]	118.46 ± 13.08 [93-144]	F(2,57)=7.65**
Ethnicity (N) Caucasian	10	12	17	
Asian	4	1	1	
Multiracial	4	3	4	
Hispanic	0	1	0	
Unknown	0	1	2	
Handedness				
Right	15	17	20	
Left	1	1	2	
Ambidextrous	2	0	1	
Unknown	0	0	1	

936 ^a Significantly different from TDC at p<.001 following Bonferroni correction for multiple comparisons

937 ^b Significantly different from TDC at p<.01 following Bonferroni correction for multiple comparisons

 ^c Significantly different from SPD at p<.01 following Bonferroni correction for multiple comparisons
 ^d Significantly different from SPD at p<.05 following Bonferroni correction for multiple comparisons 938

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942 Table 2. Summary of Group Contrast Results

Group Bar		d Regions			
			Difference		
ASD vs. TDC	α	left fusiform and inferior occipital gyri and cerebellum	Decreased		
		right pre- and postcentral gyri	Increased		
	β	left middle and inferior temporal gyri	Decreased		
SPD vs. TDC	α	left middle and superior frontal gyri and in the right inferior frontal gyrus, precuneus, and inferior and superior parietal lobules	Increased		
	β	bilaterally in the superior and middle frontal gyri, insula and putamen, as well as in the left inferior frontal gyrus, cingulate gyrus, caudate body, pre- and postcentral gyri, and inferior parietal lobule, and the right superior temporal gyrus, lentiform nucleus, globus pallidus, and caudate	Decreased		
ASD vs. SPD	α	no significant differences	N/A		
	β	right cingulate, middle frontal, and precentral gyri, and bilaterally in the superior and medial frontal gyri, the postcentral gyrus, the inferior parietal lobule, and in the supramarginal gyrus	Increased		

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946 [Table 3]

947 Table 3. Summary of Correlation Results for the Combine Groups Sample

Band	Domain	Task	Regions	Direction of Correlation
α	tactile		no significant associations	N/A
	auditory	DSTP Acoustic Scale	left cerebellar tonsil	+
			left inferior and middle temporal gyri	-
	verbal	VIQ	left uncus, cerebellar tonsil, and anterior superior, middle, and inferior temporal gyri	+
β	tactile	Graphesthesia	right precentral gyrus	-
	auditory		no significant associations	N/A
	verbal		no significant associations	N/A

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Alpha Contrasts



Figure 1

Alpha Connectivity Correlations: Combined Sample





Tactile Processing

No Significant Associations



Figure 2



SPD vs TDC



ASD vs SPD



Figure 3

Beta Connectivity Correlations: Combined Sample



U		0.1	0.2	0.5	0.4
	0.1	0.2	0.3	0.4	0.5