# Autism and Intellectual Disability Comprehensive Panel

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Autism spectrum disorder (ASD) and intellectual disability (ID) represent a neurodevelopmental continuum with significant comorbidity and overlapping etiologies. ASD is classified by varying degrees of social impairment, communication limitations, repetitive behaviors, and/or restricted interests. Symptoms typically present by age 3. ID is classified by broad impairment in cognitive and adaptive functioning, typically with an IQ below 70, and presents before age 18. A global developmental delay (DD) diagnosis often precedes a diagnosis of ID, as cognitive skill or IQ cannot be reliably assessed prior to age 6. Those with severe DD diagnosed before age 6 are most likely to develop ID.

ASD and IDs are often comorbid and may be a feature in various genetic syndromes associated with chromosomal copy number variants (CNVs), fragile X syndrome, and inborn errors of metabolism (IEMs). Literature suggests ~10-15% of individuals with ASD and/or ID have detectable chromosomal abnormalities, CNVs, and fragile X syndrome.

## Disease Overview

### Indications for Ordering (Testing)

- Comprehensive evaluation of an individual with ASD and/or ID (with or without comorbidities)
- Assist with decisions about treatment and management of an individual with ASD and/or ID
- Confirmation of a clinical diagnosis of ASD and/or ID

### Heritability

- ASD: ~90%
- ID: ~50%

### Prevalence

- ASD: ~1/68 (1/42 males, 1/189 females)
- ID: ~1/100
- ASD and ID combined incidence: ~1/250

## Test Limitations

Autism and intellectual disability panel testing limitations:

- Other etiologies of ASD and ID, such as single gene disorders, may not be identified
- Uninformative results may occur due to variants of uncertain clinical significance
- Results may not predict disorder severity

Cytogenomic SNP microarray limitations:

- The genome-wide resolution is approximately 25-50 kb for copy number changes and approximately 3 Mb for regions of homozygosity
- Testing does not detect
  - CNVs below the limit of resolution of this platform
  - Sequence-level variants (mutations) including point mutations and indels
  - Low-level mosaicism (generally, less than 20-30%)
  - Balanced chromosomal rearrangements (translocations, inversions, and insertions)
  - Genomic imbalance in repetitive DNA regions (centromeres, telomeres, segmental duplications, and acrocentric chromosome short arms)
  - Mitochondrial DNA alterations

## Featured ARUP Testing

### Autism and Intellectual Disability Comprehensive Panel 2014314

**Method:** Tandem Mass Spectrometry/Electrophoresis/Spectrophotometry/ Gas Chromatography-Mass Spectrometry/Liquid Chromatography-Tandem Mass Spectrometry/Quantitative Liquid Chromatography-Tandem Mass Spectrometry, Genomic Microarray (Oligo-SNP Array), Polymerase Chain Reaction/Capillary Electrophoresis

- Comprehensive genetic evaluation of individuals with ASD and/or ID
- Includes cytogenomic microarray, fragile X methylation analysis, and comprehensive metabolic disorders analysis

**Test Components**

May be ordered separately

### Cytogenomic SNP Microarray 2003414

**Method:** Genomic Microarray (Oligo-SNP Array)

- Preferred first-tier test for DD, ID, ASD, and multiple anomalies
- Testing is performed on peripheral blood
- CytoScan HD platform (Thermo Fisher Scientific) to detect copy number changes, including deletions and duplications as well as copy-neutral regions of homozygosity

### Cytogenomic SNP Microarray Buccal Swab 2006267

**Method:** Genomic Microarray (Oligo-SNP Array)

- Preferred first-tier test for DD, ID, ASD, and multiple anomalies
- Testing is performed on buccal sample

### Fragile X (FMR1) with Reflex to Methylation Analysis 2009033

**Method:** Polymerase Chain Reaction (PCR)/Capillary Electrophoresis

- Preferred test to diagnose fragile X syndrome and carrier screening in individuals with a positive family history
- If fragile X testing detects a CGG repeat of 100 or greater by polymerase chain reaction and capillary electrophoresis, methylation analysis will be added

### Autism and Intellectual Disability Metabolic Panel 2014312

**Method:** Tandem Mass Spectrometry/Electrophoresis/Spectrophotometry/ Gas Chromatography-Mass

Spectrometry/Liquid Chromatography-Tandem Mass Spectrometry
Evaluate for ASD, DD, and/or ID in individuals who have had negative *FMR1* (fragile X) and cytogenomic SNP microarray testing

Fragile X testing limitations:

- Estimated size is not provided for full mutations with >200 repeats
- Rare mutations in *FMR*1 unrelated to trinucleotide expansion will not be detected
- Diagnostic errors can occur due to rare sequence variations

## Additional Resources


American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Publishing; 2013.

U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. Autism and Developmental Disabilities Monitoring (ADDM) Network. [Last reviewed: Aug 2019; Accessed: Feb 2020]

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Rauch A, Hoyer J, Guth S, et al. Diagnostic yield of various genetic approaches in patients with unexplained developmental delay or mental retardation. *Am J Med Genet A*. 2006;140(19):2063-2074.

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South ST, Lee C, Lamb AN, et al. ACMG standards and guidelines for constitutional cytogenomic microarray analysis, including postnatal and prenatal applications: revision 2013. *Genet Med*. 2013;15(11):901-909.

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## Related Information

Alpha-Iduronidase Enzyme Activity in Leukocytes
Creatine Disorders Panel Testing
Laboratory Testing for Developmental Delay, Intellectual Disability, and Autism Spectrum Disorder
Testing for Genetic Syndromes Related to Developmental Delay (DD), Intellectual Disability (ID), and Autism Spectrum Disorder (ASD)


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