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Collaborative Initiative on Fetal Alcohol Spectrum Disorders
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Early Predictors of FASD in Ukraine

Aim 2. Develop risk/resilience profiles based on early markers identified in Aim 1 and other factors that will adequately predict preschool and school age performance

<u>Aim 2.a.</u> Perform analysis of existing & newly obtained prospective cohort data to develop
prediction model for FASD outcomes in children using social, environmental, economic, health, &
other available data

• Individual growth curves (prenatal for weight and head circumference; postnatal for weight, length and head circumference) for 441 singleton infants combined with clinical variables screened for contribution to improvement in prediction models of performance on BSID-II.

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Growth measures strongly associated with neurodevelopmental outcomes

confounder	MDI	PDI	Categorical	N.MDI	N.PDI
Weight - 20 wks. GA	0.012*	<.001***	No	441	441
Weight - 30 wks. GA	<.001***	<.001***	No	441	441
Weight - Birth	<.001***	<.001***	No	441	441
Weight - 1 month	<.001***	<.001***	No	441	441
Weight - 2 months	<.001***	<.001***	No	441	441
Weight - 3 months	<.001***	<.001***	No	441	441
Weight - 4 months	<.001***	<.001***	No	441	441
Weight - 5 months	<.001***	<.001***	No	441	441
Weight - 6 months	<.001***	<.001***	No	441	441
HC - 20 wks. GA	0.185	0.033*	No	441	441
HC - 30 wks. GA	0.208	<.001***	No	441	441
HC - Birth	<.001***	<.001***	No	441	441
HC - 1 month	<.001***	<.001***	No	441	441
HC - 2 months	<.001***	<.001***	No	441	441
HC - 3 months	<.001***	<.001***	No	441	441
HC - 4 months	<.001***	<.001***	No	441	441
HC - 5 months	<.001***	<.001***	No	441	441
HC - 6 months	<.001***	<.001***	No	441	441
Height - Birth	<.001***	<.001***	No	441	441
Height - 1 month	<.001***	<.001***	No	441	441
Height - 2 months	<.001***	<.001***	No	441	441
Height - 3 months	<.001***	<.001***	No	441	441
Height - 4 months	<.001***	<.001***	No	441	441
Height - 5 months	<.001***	<.001***	No	441	441
Height - 6 months	<.001***	<.001***	No	441	441

• Maternal covariates associated with neurodevelopmental outcomes

confounder	MDI	PDI	Categorical	N.MDI	N.PDI
Maternal age	0.011*	0.424	No	441	441
Paternal age	< .001***	0.002**	No	439	439
GA at enrollment	0.003**	< .001***	No	441	441
GA at birth	0.112	< .001***	No	441	441
Maternal Education	< .001***	< .001***	Yes	441	441
SES	< .001***	< .001***	Yes	437	437
Maternal marital status	0.097	0.211	Yes	440	440
Gravidity	0.002**	0.080	Yes	441	441
Parity	< .001***	< .001***	Yes	441	441
Maternal height	0.339	0.563	No	441	441
Maternal weight	0.808	0.815	No	441	441
Gender	0.455	0.143	Yes	441	441
AAD0	< .001***	< .001***	No	440	440
AADD0	< .001***	< .001***	No	440	440
AADXP	< .001***	< .001***	No	441	441
AADDXP	< .001***	< .001***	No	441	441
Cigarettes per day	0.001**	0.007**	No	439	439
Vitamin Group	0.751	0.129	Yes	441	441
Vit. use prior to enrollment	0.007**	< .001***	Yes	440	440
Planned pregnancy	0.016*	0.015*	Yes	440	440
Maternal diabetes	0.547	0.970	Yes	440	440
Maternal high BP	0.252	0.986	Yes	440	440
Number of miscarriages	0.024*	0.027*	Yes	441	441
Number of stillbirths	0.016*	0.003**	Yes	441	441
Number terminated preg.	0.070	0.376	Yes	441	441

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Results

			Continuous Bayley					
			R ² (in-sample)	MSE (out-of-sample)	R ² (out-of-sample)	AUC (in-sample)	AUC (out-of -sample)	Generalized R ² (in-sample)
infants	Birth	MDI	0.237	114.1	0.129	0.743	0.710	0.174
		PDI	0.250	146.9	0.134	0.820	0.778	0.140
	6 months	MDI	0.243	113.1	0.136	0.747	0.720	0.183
		PDI	0.261	144.5	0.147	0.816	0.766	0.147
Alcohol	Birth	MDI	0.351	129.0	0.123	0.793	0.737	0.248
exposed		PDI	0.297	158.8	0.105	0.848	0.795	0.205
	6 months	MDI	0.374	121.7	0.165	0.809	0.756	0.272
		PDI	0.332	149.0	0.154	0.853	0.809	0.216
Alcohol unexposed	Birth	MDI	0.094	106.3	01	0.707	0.673	0.128
		PDI	0.151	141.3	01	0.803	0.784	0.114
	6 months	MDI	0.094	106.3	01	0.709	0.668	0.134
		PDI	0.144	141.2	01	0.803	0.784	0.114

· Results

Alcohol exposed group by sex

	R ²	R ²
Infant Sex	Continuous MDI	Continuous PDI
Female (n = 89)	0.319	0.325
Male (n = 98)	0.447	0.410

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- Explained variation for continuous MDI (37%) and PDI (33%);
 AUC for dichotomous MDI (81%) and PDI (85%) at 6 months of age
- Prediction less robust among the alcohol unexposed infants
- Explained variance accounted for by growth measures alone in alcohol exposed group: continuous MDI (22%) and PDI (25%);
 AUC dichotomous MDI (71%) and PDI (78%)
- Sex differences noted in the alcohol exposed group with more robust prediction among boys

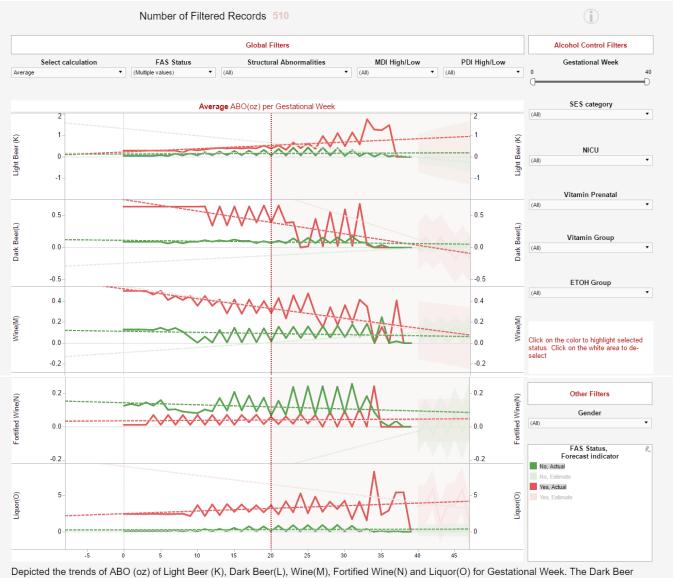
- Findings suggest individual prediction models may be feasible to use in clinical practice to assign risk scores for children prenatally exposed to alcohol who are at high risk of delay vs. less likely to be impaired as they develop
- Now adding preschool measures as outcomes and recasting the models
- Most of the relevant variables identified in this analysis are available in the CIFASD Phase II-III dataset of children with and without FASD (Aim 2.c)

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- Extending this work to examine trajectories of alcohol exposure across gestation and explore relationships with growth and neurobehavioral outcomes
- Tableau data visualization platform supported by IU useful for this purpose



- · Prenatal interviews that capture information on daily alcohol use covering 3 different time points were used to construct an alcohol exposure trajectory across gestation for 510 individual women
- · Data visualization platform used to visualize relationships between cross-gestation alcohol trajectories vs. FASD, growth, neurobehavioral outcomes by
 - Type of alcohol
 - · Hours spent consuming alcohol
 - Change in consumption and cumulative consumption over gestation + a b | e a u·
 - SES



Depicted the trends of ABO (oz) of Light Beer (K), Dark Beer(L), Wine(M), Fortified Wine(N) and Liquor(O) for Gestational Week. The Dark Beer and Wine consumption was significantly reduced among the group with FAS Status in the 3rd trimester. At the same time the amount of Light Beer and Liquor was steadily increasing until the last five to two weeks of pregnancy when the consumption was halted

