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AUTISTIC SPECTRUM DISORDERS.

DEFINITION

- 1)The Inability to form social relationships.
- 2)The abnormal development of language.
- 3)The presence of restrictive, stereotyped & repetitive behaviours.

ONSET: before 3 years(ICD10)

AUTISTIC SPECTRUM DISORDERS.

- **POORLY SUPPORTED THEORIES**
- **“Refrigerator” Parents.**
- **Chelation for Heavy Metal Overload.(Dangerous)**
- **Holding Therapy.**
- **Secretin Injections**
- **MMR VACCINES.**
- **Most Dietary Exclusion Diets.**
- **Antipsychotic Medications.**

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AUTISTIC SPECTRUM DISORDERS.

PREVALENCE.

SEVERE CLASSICAL AUTISM.

5 per 10000 of child population.

WHOLE SPECTRUM.

20 per 10000 of child population

Figures still in dispute.

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AUTISTIC SPECTRUM DISORDERS.

- ASSOCIATED FEATURES.
- 55-70% Learning Disabilities.
- 30% Epilepsy.
- ADHD.30%
- Absence of Speech.25-50%
- Coordination Disorders.15%

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AUTISTIC SPECTRUM DISORDERS.

- SINGLE GENE VARIANTS.
- IL1RAPL4, SHANK2 ,SHANK3,CNTN4.
- NLGN3, NLGN 3,GRIN2B,TCF4,
- AUTS2,CNTNAP2.

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AUTISTIC SPECTRUM DISORDERS

- Copy Number Variants.
- 1p, 1q, 2q37, 4q21-31, 5q, 6q, 7q21-31.31, 7q32.3-36.3, 8q, 11p11.2-13, 13q12.3, 15q11-13, 13q12.3, 15q11-13, 15q24, 16p11.2, 17q11, 19p, 22q11.2.

AUTISTIC SPECTRUM DISORDERS.

I think it is more useful to think of Autistic Spectrum Disorders(for the present) as a series of weakly connected symptoms & to regard each area for therapy purposes as a dimension of disorder.

The questions then to ask are ,

“How abnormal is the pattern of deviant communication?”

“How abnormal is the pattern of language development?”

“How restrictive & repetitive is the pattern of stereotyped behaviours?”

How learning disabled is this child?”

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AUTISTIC SPECTRUM DISORDERS.

- ASSESSMENT.
- AS a ground for intervention this must be as thorough as possible.
- Instruments that may help.
- The Autism Diagnostic Interview(Revised)
- (Le Couteur, Lord, Rutter 2003)
- Takes two hours;Needs training.
- The Autism Diagnostic Observation Schedule(ADOS)
- (Lord & Rutter2001)
- Related to ADI.
- Takes 40 minutes.
- Social Communication Questionnaire(Rutter ,Lord, Pckles)
- Diagnostic Interview for Social & Communicative Disorders(Wing & Gould 2002)
- Like ADI.

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AUTISTIC SPECTRUM DISORDERS.

Additional Issues.

These may be more prominent than the primary dimensions.

MEDICAL COMPLICATIONS

Epilepsy.(20-30%)

ADHD. 30%

Pathological Anxiety. 30+%.

BEHAVIOURAL ISSUES.

Sensory Defensiveness.

Sleep Problems.

Self-Injury.

Savant Features.

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AUTISTIC SPECTRUM DISORDERS.

- **TEACCH.**
- **(Treatment & Education of Autistic Children)**
- **Individual Assessment.**
- **Improved Adaptation.**
- **Structured Education. Environmental Design.**
- **Parent Collaboration.**
- **Skills Enhancement.**
- **Behavioural Therapy.**
- **Whole Child Focus.**

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Investment. 20+ hours a week.

AUTISTIC SPECTRUM DISORDERS.

- **EARLY START DENVER MODEL.(12-18 months)**
- **Focus On pre-existing Comunnication/relationship skills.** IMET2000-PAL
- **Use structured play to build on these skills.**
- **Use therapists & parents.**
- **Investment: 20+hours a week.**

AUTISTIC SPECTRUM DISORDERS.

APPLIED BEHAVIOUR ANALYSIS.

Assess Childs current skills level.

Set specific goals

Measure frequency of current behaviours.

Design program for teaching target skills.

Measure skill achievement.

Adjust program to promote further learning.

Therapist but mainly parents.

Investment.20+hours a week.

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AUTISTIC SPECTRUM DISORDERS.

- **Treatment Summary.**
 - **Autistic disorders are lifelong & across a wide spectrum of defects and abilities.**
 - **Accurate Assessment.**
 - **Skills.**
 - **Deficits.**
 - **Structured Program.**
 - **Behavioural .**
 - **Education.**
 - **Parental Involvement.**
 - **Major Parental Support.**
- Match program to developmental level.**

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AUTISTIC SPECTRUM DISORDERS.

- **EXAMPLES.**
- **Medical Conditions.**
- **Epilepsy.**
- **Use standard anticonvulsants.**
- **ADHD.**
- **Stimulant Medication.**
Eg Atomoxetine.

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AUTISTIC SPECTRUM DISORDERS.

Example.

Behavioural Issues.

Sensory Defensiveness.

Behaviour Therapy.

Environmental Management.

Sleep Problems.

Sleep Hygiene.

Melatonin.

Self Injury.

Behaviour Therapy.

Naloxone.

Savant Features.

Build on Skills.

Use for reward..

Time table. .

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