



MDwise

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Autism Spectrum Disorder (ASD)

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Overview

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What is autism spectrum disorder (ASD)?

Autism spectrum disorder (ASD) is a developmental disorder. It affects a person's behavior and makes communication and social interactions difficult.

ASD can range from mild to severe. The type of symptoms a person has and how severe they are varies. Some children may not be able to function without a lot of help from parents and other caregivers. Others may develop social and verbal skills and lead independent lives as adults.

Most people with ASD will always have some trouble communicating or interacting with others. But early diagnosis and treatment have helped more and more people who have ASD lead full lives and do things such as going to college and having a job.

ASD now includes conditions that used to be diagnosed separately. These include autism, Asperger's syndrome, pervasive developmental disorder, and childhood disintegrative disorder. Any of these terms might still be used by you or your doctor to describe your condition.

What causes ASD?

The exact cause of ASD is not known.

False claims in the news have made some parents concerned about a link between ASD and vaccines. But studies have found no link between vaccines and ASD. It's important to make sure that your child gets all childhood vaccines. They help keep your child from getting serious diseases that can cause harm or even death.¹

What increases the risk of ASD?

ASD tends to run in families, so experts think it may be something that you inherit. Scientists are trying to find out exactly which genes may be responsible for passing down ASD in families. ASD tends to occur more often in people who have certain genetic conditions. These may include fragile X syndrome and tuberous sclerosis.

Some things increase the chance that you'll have a baby with ASD. These things are called risk factors.

The risk of having a baby with ASD is higher if either birth parent:

- Is at an older age.
- Has another child who has ASD.
- Has a family history of learning problems.

What are the symptoms?

Symptoms usually are noticed by the time a child is 2 years old. But if symptoms are severe, a parent may notice them as early as when a child is 12 months old.

In most cases, parents first notice that their toddler has not started talking yet and is not acting like other children the same age. Sometimes a child with ASD may start to talk at the same time as others the same age. But then they may stop gaining new skills or lose their social and language skills.

Symptoms of ASD include:

- A delay in learning to talk, or not talking at all. Or a child may not use or respond to gestures or pointing. A child may seem to be deaf, even though hearing tests are normal.
- Repeated and overused types of behavior, interests, and play. Examples include repeated body rocking, unusual attachments to objects, and getting very upset when routines change.

Behavior and symptoms can range from mild to severe. Parents often say that their child with ASD prefers to play alone and doesn't make eye contact with other people.

People with ASD may also have other problems, such as speech and language issues, sleep problems, and seizures. They may also have attention deficit hyperactivity disorder (ADHD), depression, or anxiety.

How is ASD diagnosed?

There is no single test to diagnose ASD. Diagnosing ASD involves a combination of screening questions, assessments, and evaluation of the way a child behaves and interacts with others.

As a parent, you know your child best and are their best advocate. If you are concerned, share your observations with your doctor. Your input could help your child get the help they need.

Screening questions are usually asked at the 18-month and 24-month well-child visits. But they may be asked sooner if you are concerned that your child may have signs of ASD. The questions cover how your child talks, moves, and interacts with others. The answers help your doctor understand how your child is developing and if there are signs of a problem that might be related to ASD.

If your doctor thinks your child may have ASD, he or she may refer you to a specialist, such as a developmental pediatrician, child psychiatrist or psychologist, or neuropsychologist.

A specialist will ask about your child's health history and do a physical exam. A specialist will also:

- Ask about your child's behavior and interaction with others.
- Observe how your child interacts with others and behaves during play or while doing specific tasks.

This can help you know if your child has ASD or if he or she has a different problem, such as a language delay or ASD and another condition. Testing also helps identify how severe the symptoms are and what your child's strengths and weaknesses are. All of this can help your doctor decide on the best way to treat your child.

How is it treated?

The goals of treatment for ASD are to:

- Reduce ASD symptoms.
- Support learning and development at home and in school.

Treating ASD early gives you the tools and support to help your child lead the best life possible.

What type of treatment your child may need depends on the symptoms. These are different for each child. And treatment may change over time. Because people with ASD are so different, something that helps one person may not help another. Work with everyone involved in your child's education and care to find the best way to help manage symptoms and help your child thrive to the best of his or her ability.

Treatment may include:

- Behavioral training and management. This approach rewards appropriate behavior (positive reinforcement) to teach children social skills and to teach them how to communicate and how to help themselves as they grow older. And this approach teaches you how to work with your child at home and to help your child practice new skills.
- Specialized therapies, depending on your child's needs. These may include speech and occupational therapy.
- Medicine. It might be used to treat symptoms of ASD, such as irritability and hyperactivity. Sometimes medicine is also used to treat other problems such as anxiety, depression, or obsessive-compulsive behaviors.

How can your family cope with having a child who has ASD?

An important part of your child's treatment plan is to make sure that other family members get training about ASD and how to help manage symptoms. Training can reduce family stress and help your child function better. Some families need more help than others.

Take advantage of every kind of help you can find. Talk to your doctor about what help is available where you live. Family, friends, public agencies, and ASD organizations are all possible resources.

Remember these tips:

- Educate yourself about ASD. Learning all you can about ASD can help you know how to help your child develop independence.
- Plan breaks. The daily demands of caring for a child with ASD can take their toll. Planned breaks will help you connect with others in your family or have time for yourself.
- Make time for an activity you enjoy, even if you can only do it for a few minutes each day.
- Get extra help when your child gets older. The teen years can be a very hard time for children with ASD. Community services and public programs can help.
- Get in touch with other families who have children with ASD. You can talk about your problems and share advice with people who will understand.
- Plan for your child's future. As your child gets older, think about where your adult child will live and what training and employment resources he or she may need. Also, take steps to ensure that your adult child will have proper care and resources throughout life. Find out if your child is eligible for assistance.

- Focus on your child's strengths. Like any other child, your child has strengths and weaknesses. Help build those strengths by encouraging your child to explore interests at home and in school.

Credits

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