## Asperger's common in boysreason unknowncommonly associated with



Asperger's SyndromeBauer, Stephen.

"Asperger Syndrome." Aspen, 1996, www. aspennj. org/pdf/information/articles/aspergers-syndrome-through-the-lifespan. pdf. HistoryRelatively new category of developmental disorder" Asperger syndrome" term general use past 15 yearsTerm "officially" recognized in the Diagnostic and Statistical Manual of Mental Disorders in 1994Characteristicsa neurologically-based disorder of development3 broad aspects of development: social relatedness and skills, Language for communicationBehavioral and stylistic characteristicsrepetitive/perseverative featureslimited but intense range of interestsnormal basic language skills = one of criteria for AS diagnosisUta Frith (research) says "a dash of autism" for kids with ASMaybe subtypesAS, HFA, PDDSimilar children, different diagnosisDiagnosis based of evaluator similar less impaired children receive no diagnosisViewed as "unusual" or " just different" Misdiagnosed (ex. Attention Deficit Disorder Disorder)No clear boundaryAS more common than "classic autism" Autism in 4/10000 childrenAsperger in 20-25/10000More common in boysReason unknownCommonly associated with other disordersTic disorders (ex. Tourette disorder)Attentional problemsMood problems (ex.

Depression and anxiety)Sometimes genetic connectionNew DSM-IV criteria for a diagnosis of ASareas of "special interest" often specific academic areasChildren show obsessive interestIn math, science, reading, history, or geographyWant to learn everythingFocus on maps, weather, astronomy, etc. 3 years old – aware of thingsEx. car routeCommon to children in our cultureNinja turtles, power rangers, etc.

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Special interest change over timeMay persist to adulthoodSocialization deficit" In their own world" Desire to fit socially Have friends Frustrated and disappointed Lack of effectiveness in interactionsMisread social situationsviewed as "odd" Preschool child: Avoid spontaneous social interactionsWeak interaction skillsProblems with simple conversationsDifficulty with transitionsTendency to overfocusElementary School: Often enter kindergarten w/o diagnosisRelative strength in academic progressGood readingStrong calculation skillsWeaker pencil skillsWeak friend-making and friend-keepingVary considerable from child to childUpper Grades: Difficult in socialization and behavior adjustmentsBehavior or work/study habits misunderstoodConflicts with others that are unfamiliar with ASDepression not uncommonStrong academic performanceMay bring respect from peersAttentional and organization difficultiesMay form friendships with peers of shared interestGrown Up: Limited informationDoesn't preclude potential for "normal" adult lifeProfession related to area of special interestSubtle differences in social interactionsRisk of depression and/or anxietyGillberg: 30-50% AS adults never evaluated or correctly diagnosedCausesUnknown causeSometimes clear genetic componentTreatmentsManagement in schoolInform staff of AS childBehaviors misinterpretedGeneral principles for managing kids with PDD or ASConsistent classroom routinesRules applied carefully Staff take full advantage of kid's special interestVisualsSchedules, charts, pictures, etcConcrete teachingNo sarcasm, idioms, etcInsure all staff is familiarAvoid power strugglesMedication does not "cure" May help with mood problemsCompulsive symptoms helped with medicationClonidine proven helpfulFor severe behavior problemsToth, K and B H. King. " Asperger's https://assignbuster.com/aspergers-common-in-boysreasonunknowncommonly-associated-with/

syndrome: Diagnosis and treatment." American Journal of Psychiatry 165.

(2008): 958-963. HistoryFirst described cases in

1944CharacteristicsConsidered variant of autism2. 5/10000 peopleUpward trendCausesTreatmentsComprehensive evaluationScreening for medical and psychiatricSeizures, sleep difficulties, sensory issuesAnxiety, depressionReview of school recordAssessmentsIntellectual, language, adaptive, neuropsychologicalOccupational therapy evaluationAverage age of diagnosis: 11 years oldLimited studies for treatment approachesCommon approaches: Adult-directed behavioral programsChild-centered approachesSocial skills taughtFriendship groupsclassroom activitiesprivately taughtBreaking skills down into smaller subskillsEx.

conservation skills into greeting, initiating topic, staying on topic, nonverbal communication, endingPfeiffer, B., et al. "Sensory Modulation and Affective Disorders in Children and Adolescents With Asperger's Disorder." American Journal of Occupational Therapy, vol. 59, no.

3, Jan. 2005, pp. 335-345., doi: 10. 5014/ajot. 59. 3. 335.

HistoryCharacteristicsNeurodevelopmental disabilitySocial deficitsRestricted interests36/10000 ratioMotor awkwardnessClumsinessLearning difficultiesAnxietyDysfunction in sensory modulationHyposensitivity and hypersensitivity to environmental sensory stimuliPositive relationship between anxiety and sensory defensivenessCausesTreatmentCommunity use and social skillsDecrease dysfunction