

Community Psychiatric Centers

E-Pamphlet: Autism: Facts and Fallacies

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In this E-Pamphlet, we're going to dispel some of the misconceptions regarding autism. We're going to talk about some of the potential causes, the prevalence of the condition, signs and symptoms, and some of the treatment considerations.

It's important to take note of the misconceptions and correct them, because they tend to cause confusion, distress and even can misguide the treatment process.

First there is the confusing notion of the term "Autism". Is it a condition? Is it a diagnosis? Is it something else? We'll straighten that out.

There's also the rather distressing notion that Autism is always life-long and profoundly debilitating. Some may even suggest that autistic children are always mentally retarded and will need life-long care. We'll have to put that notion into perspective.

The rates of the disorder need clarified; is it an epidemic as some might suggest? In regards to causation, we'll discuss the current research on vaccinations and

whether some other trigger is causing signs and symptoms of Autism.

There's also the notion that children with Autism cannot emotionally connect with others but, rather, they are always aloof and withdrawn. We'll provide some insight into that matter and then we'll address the matter of whether medication can be helpful.

Before we get into these matters any further, we're just going to highlight the signs and symptoms of autism and provide some insight into this condition.

Autism: What is it?

Autism Spectrum disorders and "Autism", per se, is a condition that has primarily three targeted areas of compromise. The first area is communication. Children with Autism typically have problems with speaking; they sometimes don't speak in full sentences or have trouble remaining on-topic. There can be severe articulation problems that leave their speech unintelligible. Children may also have problems with nonverbal communication, including not pointing at objects and not understanding social nuances such as if a peer frowns.

Socialization is another area in which autistic children have difficulties. These are children who sometimes do not seem to pay attention to others in the room, seemingly occupied with internal events. They sometimes appear deaf because they may not respond to their name or provide eye contact. Autistic children may, however, be quite interested in social interactions but may not be accepted by peers because they don't quite 'fit in' and are viewed as somewhat odd or peculiar by age-mates.

A third problem-area of problem can be the presence of odd behaviors, including stereotypic or perseverative behaviors such as twirling, hand-flapping, pacing, toe-walking, lining-up objects, or repeating words or phrases. They may

also have trouble transitioning from one activity to another and tend to prefer 'sameness.'

These signs can be seen as early as a year old. So if a parent sees any of these signs, by all means contact us via our website, cpcwecare.com, or the toll-free number as well 1 (877) 899-6500 and we're available for free consultations. The earlier children are diagnosed, the better. Okay, let's take a deeper look into some of these misconceptions:

Is "autism" a diagnosis?

The terms 'Autism' is not a diagnosis, it's a descriptive term that covers at least three different diagnoses, often referred to as Autism Spectrum Disorders. At one end of the spectrum is the least severe form of Autism Spectrum Disorders, called Asperger's Disorder. At the other extreme is Autistic Disorder. Those children who don't quite fit the diagnostic specificity of these two extremes fall into a broader diagnosis: Pervasive Developmental Disorder NOS.

The importance of these diagnostic distinctions is that they reflect the wide range of functioning. At the upper end of the spectrum you may see a child with signs and symptoms barely noticeable, for example, at the Asperger's end. At the other end of the spectrum, at the Autistic Disorder end, you may find a child who is quite profound in terms of being nonverbal and socially avoidant.

Epidemic?

We're going to move on to the next misconception, concerning prevalence. Just how prevalent is Autism and is it increasing in prevalence over the course of time?

Yes. Very clearly, the rate of diagnosis is growing. The CDC has rated this condition as occurring in 1 in 150 children, which places it as more prevalent than cancer, diabetes or AIDS in a child-age

population. It occurs in maybe 1 and 94 boys and in 1 of 20 families in the country is affected by it, so it makes it a very serious and prevalent condition.

However, we need to differentiate types of autism to obtain the complete picture. In that regard, the rates have increased for the less severe form of autism; Pervasive Developmental Disorder, but the rates for the more severe form, Autistic Disorder, have not increased in severity or in prevalence through the years. It's still present in approximately one to two percent of the child-age population. For some reason, the rates of severe autism have remained fairly stable, while the rate of the two other conditions, Pervasive Developmental Disorder and Asperger's Disorder, has skyrocketed. This raises the question: is the condition actually increasing, or are we more sensitive in picking up on the more subtle signs of Autism that may have been missed in the past. It's likely a combination of both.

Life-Long?

There is the impression that, once diagnosed with "autism" a child will always have autism. This impression is accurate for a child diagnosed with Autistic Disorder, and the more severe degrees of Pervasive Developmental Disorder and Asperger's. However, research supports, as does our own clinical experience, that child diagnosed with mild forms of Pervasive Developmental Disorder and Asperger's can demonstrate significant gains in treatment to where any signs are either gone entirely, or barely noticeable. These children may, at times, present with some quirkiness, but often function quite well, are happy, and lead productive lives.

Causes of Autism

It's an ongoing dilemma and challenge for parents to decide whether or not to have their child vaccinated. However, the research is rather clear that the use of vaccinations does not lead to an increased degree of Autism in children. It's pretty

conclusive in that respect. Consequently, it would seem important for parents to not avoid immunizing their child because of fear of Autism, which then expose them to other illnesses. While the jury is out as to what exactly causes Autism, whether it's an autoimmune response, environmental toxin, it's certainly probably not due to vaccinations. However, some physicians are taking various steps including spacing-out the vaccination to make the process more tolerable for the infant; parents seem to be appreciative in that regard.

Children with Autism are always mentally deficient?

The extent of mental retardation within the spectrum of autism is actually quite consistent with what we see in the spectrum. Of the children on the lower end of the spectrum, near the 'Autistic Disorder' range, approximately 60 percent will be diagnosed with mental retardation, primarily because of the fact that their language skills are so delayed. Now at the other end of the spectrum, at the Asperger's Disorder, these children, by definition, have average IQ. So as you move up the spectrum, the diagnosis of Mental Retardation dramatically reduces. In fact, it's important to note that intellectual functioning is typically rather stable. In that regard, IQ's don't change much over time. However, for child with autism, the IQ does, in fact, tend to improve as verbal skills progress, and IQ scores actually one barometer to assess progress over the course of time.

Medication?

Can medication be helpful or not?

Absolutely. There is no treatment "cure" for Autism in terms of medication, or necessarily even in terms of programming. However, children with autism often present with other conditions which make treatment very difficult, as well as make their lives difficult. These children may be off-task, hyperactive, inattentive, aggressive, or anxious.

Medications can help the child become more amenable to treatment as they can become more attentive and cooperative, which is also appreciated by the family.

Children with autism are socially "cold" and withdrawn?

It is abundantly clear that the majority of children on the spectrum are affectionate and seek-out physical and emotional comfort from their caregiver. However, on the more severe end of the spectrum, some children avoid such contact and can be quite socially withdrawn. However, with treatment, this issue can be improved.

We hope you found this e-pamphlet to be helpful in clarifying, and correcting, some of these common misconceptions. Feel free to offer feedback on our blog (cpcwecare.com); we'd love to hear from you.