^{2ND} MEETING-"THERAPEUTIC APPROACH"

lECTURE 1: <u>Early manifestations and</u> <u>diagnosis I</u>

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Early manifestations and diagnosis of autism Early Manifestations Mean age at Diagnosis People Involved (family members and extended family implicated)

Outline



DESIRED LEARNING OUTCOMES

• Develop knowledge about early manifestations of ASD s and the mean age of diagnosis.

• Gain Knowledge about the implication and the overall effect of the disorder on the family functionality and emotion.







EARLY INTERVENTION IS CRUCIAL

The earliest detection and diagnosis (*before the age of 4 years*) and the early specialized intervention, ensure significantly better development of the

child



Concerns-Suspicion raised based on behavioural signs, by

- Pediatrician
- Nursery school staff
- Other mental health professionals
 - Parents

The detection of ASD is difficult before the age of 12 months

More accurate diagnosis possible at the age of 2 - 2.6 years

At 12 to 18 months

Differences in attention and interaction

They pay more attention to objects than people Poor social attention, however, pays attention to environment sounds Difficulty releasing visual attention (find it difficult to shift their gaze to something other than what they have focused on)

Differences in the game skills

Lack of imitation with games Plays less and handles games differently • Difficulty in motor skills

Repetitive behaviors

• Developmental retrogression: skills that had already been acquired are noticed to disappear or are limited or altered

At 18 to 24 months

SOCIAL ISSUES

The child

- may not show interest in other children playing or he may be badly teased can sit alone in the crib shouting loudly instead
- of calling his parent
- may not matter when the parent leaves or returns from work
- may show no interest in interaction games may not raise his hands to be picked up by the parent from the cot or stroller

COMMUNICATION ISSUES

- When they want something, the often resorts to "Driving by Hand"
- Ignores his environment
- Avoids eye contact May not respond to their name

UNUSUAL / REPEATABLE BEHAVIORS

- Flipping with hands
- Attachment to the fan on the ceiling
- Twists, rockings
- Alignment of toys (cars)
- He may not be interested in toys, but he may cling to other objects, such as a heating element
- He can be concentrated on a piece of toys
- Blinking eyes obsessively
- **Chews unusual objects**
- He plays with his fingers in front of hie avae

MOTOR SKILLS ISSUES

Children with autism show motor disorders:

• some may exhibit excellent motor skills in one

area

- while in another they may have a problem
 - Poor motor coordination
 - Fine motor skills deficits
 - Walking on toes
 - Lack of depth perception
- Even children with normal motor skills may have difficulty with activities such as tricycles, pedal

cars, etc.

• Clumsy

SENSORY ISSUES

- Extreme difficulty in hair cutting or trimming nails
 - Can not tolerate car seat belt
- May not like new experiences, such as birthday candles or balloons
 - Difficult to take a bath
 - Rotates objects close to his face
 - May not seem to hear, (e.g. not be surprised by loud noises), while at other times he seems to hear normally
- Difficult to wear the right clothes for the season to go out

SELF-HARM BEHAVIOR

- hits their head bites without obvious pain scratches their skin pulls tufts from their hair

SECURITY ISSUES

- No sense of danger No recognition of situations where it can get hurt
- No fear of heights





Gastrointestinal disorders

Sleep Disorders

Seizures

The effect of ASD on Functionality and Emotion of Family

- Raising a child with Autism is a stressful event for parents and families.
- ³/₄ of parents reported no direct access to support services.
- 90% of parents were unable to cope with their children's behavioral problems and subsequently, felt angry and frustrated, inadequate, having feelings of depression and loneliness.
- Families report lower family functionality as well as less joy in their marriage.
- More internalized symptoms (depression, adjustment difficulties) in siblings of children with Autism
- On the other hand, a number of families with children with ASD show mental resilience, and describe how this experience "made them stronger"

The Role of Parents in the Course and Treatment of a child with ASD

- The contribution of parents in addressing the underlying difficulties of ASD is crucial.
- Relationship between child and family is characterized by <u>cyclical causality</u>: "parents influence the child, which in turn influences the parents"



Psychoeducation of parents

.. begins with the announcement of the diagnosis

"If you do not take care of the parents, the child is in danger..."



Visits for Evaluation and treatment at home

Physical Health Examination is required

Interruption / Resistance / Other Problems during treatment

- Interruption of counseling
 - "Doctor shopping"
 - Mourning
- Patience by professionals about the right timing for acceptance of diagnosis,
- Bombing families from treatments that have not been proven to help based on scientific evidence (leading to disorientation, suffering, financial exhaustion)

• When parents refuse diagnosis When parents prioritize goals that are not in line with those of the therapists (e.g. parents pay excessive attention only to how the child perform at school and not to his socialization) Controlling parents • "Almighty" therapists ("the more you mature the more humble you become')

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