

## Pervasive Developmental Disorders

The term pervasive developmental disorders (PDDs) refers to a group of developmental conditions that involve delayed or impaired communication and social skills, behaviors, and cognitive skills (learning).

Because autism is the best-known of the PDDs, the disorders also are known as autism spectrum disorders (ASDs).

PDDs include Asperger syndrome and two less common conditions, childhood disintegrative disorder and Rett syndrome. PDDs usually are diagnosed during infancy, toddlerhood, or early childhood.

### Signs and Symptoms

Signs of ASDs are usually recognizable before a child is 3 years old. However, symptoms can range from severe to so subtle that they seem to be normal aspects of childhood development. For that reason, it can take a few years for an ASD to be fully identified. That's why the American Academy of Pediatrics (AAP) recommends pediatricians look for early signs that suggest the possibility of autism at every visit and formally screen for autism at 18 months and 24 months, and any other time there is a concern.

Early signs can include:

- trouble interacting, playing with, or relating to others
- avoiding eye contact; not looking at people
- not pointing to objects to call attention to them
- unusual movements, such as hand flapping, spinning, or tapping
- delays in developmental milestones or loss of milestones already achieved
- playing with the same toy in a way that seems odd or repetitive
- not using or understanding language
- not exploring surroundings with curiosity or interest

### An Autism Spectrum Disorder

Asperger syndrome (AS) is a neurobiological disorder that is part of a group of conditions called **autism spectrum disorders**. The term "autism spectrum" refers to a range of developmental disabilities that includes autism as well as other disorders with similar characteristics.

They are known as spectrum disorders because the symptoms of each can appear in different combinations and in varying degrees of severity: two children with the same diagnosis, though they may share certain patterns of behavior, can exhibit a wide range of skills and abilities.

As a result, general terms such as "low-functioning," "high-functioning," "autistic tendencies," "pervasive developmental disorder," and others are often used to describe children whose behaviors fall within the spectrum. Kids with AS share many of the same symptoms as those with "high-functioning autism."

It's estimated that more than 400,000 families are affected by AS. Because milder cases are being identified more frequently, the incidence appears to be increasing. However, like other autism spectrum disorders, AS is often difficult to diagnose and treat.

### About Asperger Syndrome

The disorder is named after Hans Asperger, a Viennese pediatrician who, in 1940, first described a set of behavior patterns apparent in some of his patients, mostly males. Asperger noticed that although these boys had normal intelligence and language development, they had severely impaired social skills, were unable to communicate effectively with others, and had poor coordination.

According to the Asperger Syndrome Coalition of the United States, the onset of AS is later than what is typical in autism — or at least it is recognized later. Many kids are diagnosed after age 3, with most diagnosed between the ages of 5 and 9.

AS is characterized by poor social interactions, obsessions, odd speech patterns, and other peculiar mannerisms. Kids with AS often have few facial expressions and have difficulty reading the body language of others; they might engage in obsessive routines and display an unusual sensitivity to sensory stimuli (for example, they may be bothered by a light that no one else notices; they may cover their ears to block out sounds in the environment; or they might prefer to wear clothing made only of a certain material).

Overall, people with AS are capable of functioning in everyday life, but tend to be somewhat socially immature and may be seen by others as odd or eccentric.

Other characteristics of AS include motor delays, clumsiness, limited interests, and peculiar preoccupations. Adults with AS have trouble demonstrating empathy for others, and social interactions continue to be difficult. Experts say that AS follows a continuous course and usually lasts a lifetime. However, symptoms can wax and wane over time, and early intervention services can be helpful.

## **Signs and Symptoms**

Because the symptoms of AS are often hard to differentiate from other behavioral problems, it's best to let a doctor or other health professional evaluate your child's symptoms. It's not uncommon for a child to be diagnosed with attention deficit hyperactivity disorder (ADHD) before a diagnosis of AS is made later.

These signs and symptoms might be present in a child with AS:

- inappropriate or minimal social interactions
- conversations almost always revolving around self rather than others
- "scripted," "robotic," or repetitive speech
- lack of "common sense"
- problems with reading, math, or writing skills
- obsession with complex topics such as patterns or music
- average to below-average nonverbal cognitive abilities, though verbal cognitive abilities are usually average to above-average
- awkward movements
- odd behaviors or mannerisms

It's important to note that, unlike kids with autism, those with AS might show no delays in language development; they usually have good grammatical skills and an advanced vocabulary at an early age. However, they typically do exhibit a language disorder — they might be very literal and have trouble using language in a social context.

Often there are no obvious delays in cognitive development or in age-appropriate self-help skills such as feeding and dressing themselves. Although kids with AS can have problems with attention span and organization, and have skills that seem well developed in some areas and lacking in others, they usually have average and sometimes above-average intelligence.

## **Diagnosing Asperger Syndrome**

Asperger syndrome can be very difficult to diagnose. Children with AS function well in most aspects of life, and so it can be easy to attribute their strange behaviors to just being "different."

According to mental health experts, if your child has AS, early intervention is very important. Intervention involving educational and social training, performed while a child's brain is still developing, is highly recommended.

If your child exhibits some of the symptoms and behaviors that are typical of AS, it's critical to seek help from your doctor. He or she can refer you to a mental health professional or other specialist for further evaluation.

When a specialist assesses your child, a thorough "psychosocial" evaluation will be performed. This includes a careful history of when symptoms were first recognized, the child's development of motor skills and language patterns, and other aspects of personality and behavior (including favorite activities, unusual habits, preoccupations, etc.).

Particular emphasis is placed on social development, including past and present problems in social interaction and development of friendships. A psychological evaluation and assessment of communication skills are usually conducted to determine your child's strengths and skills that may be deficient.

## **Treating Asperger Syndrome**

Because AS can present patterns of behaviors and problems that differ widely from child to child, there isn't a "typical" or prescribed treatment regimen. However, your child may benefit from the following forms of treatment:

- parent education and training
- specialized educational interventions for the child
- social skills training
- language therapy
- sensory integration training for younger kids, usually performed by an occupational therapist, in which they are desensitized to stimuli to which they're overly sensitive
- psychotherapy or behavioral/cognitive therapy for older children
- medications

It will help if you involve all of your child's caregivers in the treatment. The health professionals who are caring for your child should know what the others are doing, and you will often find yourself acting as the "case manager" in this scenario. Teachers, babysitters, other family members, and anyone else who cares for your child also should be involved. It's important to know that many people can provide assistance. Finding the right program for your child is key and getting help early is important. Kids with AS can and do experience great gains with the appropriate treatment and education.

## **Helping Your Child**

Although AS presents challenges for kids and their parents, you can help your child adjust and offer support in many ways:

- Look into educational or training programs for parents. You're your child's first teacher and you'll continue to be the cornerstone in supporting his or her development.
- Teach your child self-help skills. Learning these skills helps kids achieve maximum independence.
- Because it's not always obvious that a child has AS, alert others to the fact that your child has special needs. As a parent, you may have to take on the role of educator when dealing with teachers, medical personnel, and other caregivers.
- Find a program that addresses your child's specific needs or areas of "deficiency." The Autism Society of America (ASA) encourages family members to talk to the program director to determine if the curriculum or program addresses their child's particular issues.
- Choose special programs or treatments that focus on long-term outcomes and that take the developmental level of your child into consideration.
- Remember that your child is part of a family unit and that his or her needs should be balanced with the those of other family members.
- Get support for yourself and other family members. You can't help your child if you are not meeting your own emotional and physical needs. Your community may offer support groups at a local hospital or mental health center. There is considerable state-to-state variation in the types of government-sponsored services and other programs available to children with autism spectrum disorders and their families.

## **Your Child's Future**

Currently, few facilities are specifically dedicated to providing for the needs of kids with AS. Some children are in mainstream schools where their progress depends on the support and encouragement of parents, caregivers, teachers, and classmates. However, some go to special schools for kids with autism or learning disabilities. Many people with AS can function well in most aspects of life, so the condition does not have to prevent your child from succeeding academically and socially.