

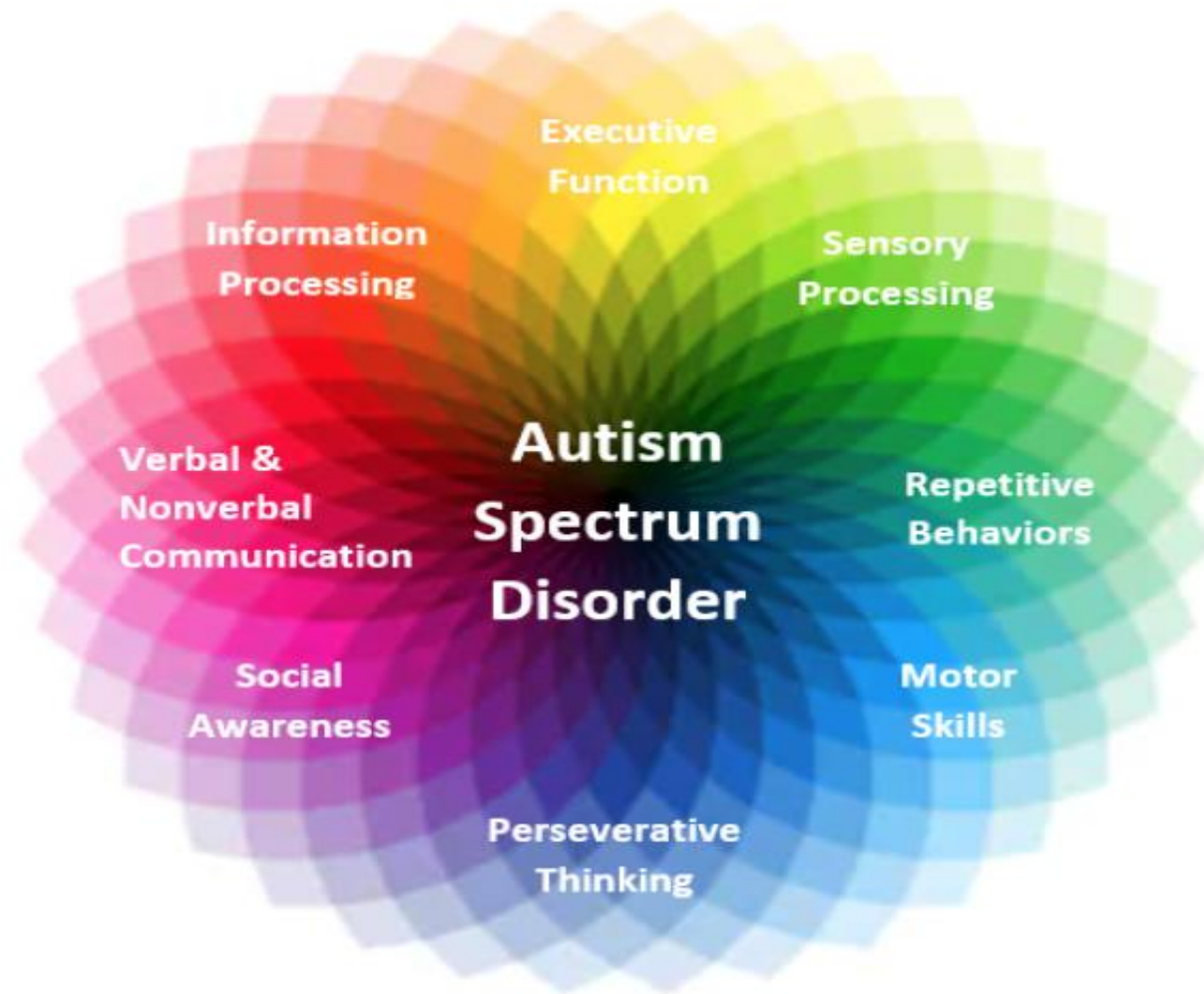
هو المحبوب

AUTISM



DR.MALIHE_ROOZBAKHS

CHILD AND ADOLESCENT
PSYCHIATRIST





What is autism?

Autism spectrum disorder **ASD**: neurodevelopmental conditions.

communication and social interaction.

restricted and repetitive interests or patterns of behavior.

around the world, regardless of race and ethnicity, culture, or economic background.

more often in boys than in girls. the United States found a [4.3 to 1 boy-to-girl](#)

What is Autism Spectrum Disorder (ASD)?

ASD is a severe disruption of normal development process that occurs in the first 3 years of life.



Adaption from
HELPGUIDE.ORG



ASD is manifested in:



Impaired language

Cognitive

Social

Adaptive Functioning.



These essential skills deficits cause children to fall progressively further behind their typical peers as they grow older

When was the modern conception of Autism and Asperger's syndrome specified?

- 1797 – The Wild Boy of Aveyron emerged from forests, could not speak, was clearly feral
- 1917 – Bolsheviks win revolution in Russia creating Soviet Union
- 1918 – West invades Soviet Union – War & hostilities persist until 1989
- 1926 – Soviet Union: Ewa Ssucharewa describes Schizoid Psychopathy
- 1920s – Leo Kanner & Hans Asperger study in Vienna
- 1939 – WWII commences in Europe
- 1941 – USA enters WWII against Germany
- 1943 – In USA Leo Kanner describes Autistic Psychopathology (Autism)
- 1944 – In Germany Hans Asperger describes Asperger's Syndrome
- 1981 – Lorna Wing publishes seminal paper revealing similarity of Asperger's work to Kanner's
- 1994 – DSM-IV published creating Asperger's disorder as a separate category from Autism



© Dr Mark Stokes

ASD: Historical Context



Autism conceptualised as Childhood Schizophrenia until 1979.
First edition of ICD did not include Autism.

- 1967 DSM-I: Autism as a form of schizophrenia
- 1977 DSM-II: Autism as “Childhood Psychosis”
- 1980 DSM-III: Infantile Autism
- 1987 DSM-III-R: Autistic Disorder
- 1994 DSM-IV: Asperger’s Disorder
- 2000 DSM-IV-TR: Mild changes in criteria
- 2013 (May) **DSM-5: ASD** www.dsm5.org

DSM-5 Autism Spectrum Disorder

A. Clinically significant, persistent deficits in social communication and interactions.

1. Deficits in social-emotional reciprocity (i.e.: failure to initiate or respond to social interactions)
2. Deficits in nonverbal and verbal communication used for social interaction;
3. Deficits in developing, maintaining and understanding relationships

Two of:

B. Restricted, repetitive patterns of behavior, interests, and activities

1. Stereotyped or repetitive motor movements, use of objects, or speech
2. Insistence of sameness, inflexible adherence to routines and ritualized patterns of verbal or non-verbal behavior
3. Highly restricted, fixated interests of abnormal intensity or focus
4. Hypo- or hyper-reactivity to sensory stimuli, or unusual sensory behaviors

DSM-5 Autism Spectrum Disorder

- C. **Symptoms must be present in early childhood** (may manifest only when social demands exceed capacities)
- D. **Symptoms must have a marked effect on ability to function**
- E. **Severity must be specified: Level 1, 2, or 3**
 - Removal of separate Autism & Asperger's categories to create Autism Spectrum Disorder
 - Criteria removed include:
 - Lack of varied or imaginative play
 - Language & cognitive delay
 - Pre-existing diagnoses remain as diagnosed
 - Recognition that many girls may go unrecognized

Severity



- Level 3
 - Requires very substantial support
 - Severe deficits in verbal and non-verbal social communication, very limited initiation, minimal response to others (e.g. few words of intelligible speech)
- Level 2
 - Requires substantial support
 - Marked deficits in verbal and non-verbal social communication, limited initiation, reduced or abnormal response to others (e.g. speaks a few sentences)
- Level 1
 - Requiring support
 - Without support, has deficits in verbal and non-verbal social communication, deficits in initiation and clear examples of unsuccessful overtures and responses to others

© Dr Mark Stokes

New Diagnosis: Social Communication Disorder (SCD)

- Impairment of **pragmatics**
- Diagnosed based on difficulty in the *social uses of verbal & nonverbal communication* in naturalistic contexts
- Must affect the development of **social relationships & discourse comprehension** and
- **Cannot be explained by low abilities** in the domains of word structure & grammar or general cognitive ability
- Must first rule out ASD. By definition ASD encompasses pragmatic communication problems
- The low social communication abilities result in *functional limitations* in effective communication, social participation, academic achievement or occupational performance, alone or in any combination.

© Dr Janine Manjiviona

© Dr Mark Stokes

Advantages of DSM-5



1. One spectrum of autistic disorders – **ASD**, defined purely by behaviours.
2. No Differentiation among Autism, PDD-NOS, Asperger syndrome, Childhood Disintegrative Disorder
3. Blind to aetiology
No Differentiation within ASD among disorders by aetiology
4. Simplified diagnostic approach
Many fewer ways a person may meet criteria in the two domains
5. Social Communication domain recognises social function of communication

© Dr Mark Stokes

AUTISM

MINDJOURNAL

WHAT IS AUTISM?

It is a complex neurodevelopmental disorder which impairs our communication, behaviors and social interaction.

It is typically diagnosed in children between 3-6 years of age.

Boys are four times more likely to be affected than girls.

MIND  HELP

What are the different types of autism?



recognizes five different ASD subtypes, or specifiers.

with or without accompanying intellectual impairment

- with or without accompanying language impairment
- associated with a known medical or genetic condition or environmental factor
- associated with another neurodevelopmental, mental, or behavioral disorder
- with [catatonia](#)

Before the DSM-5, autistic people may have received a diagnosis of:

- autistic disorder
- [Asperger's syndrome](#)
- [pervasive development disorder-not otherwise specified \(PDD-NOS\)](#)
- childhood disintegrative disorder

It's important to note that a person who received one of these earlier diagnoses hasn't lost their diagnosis and won't need to be reevaluated.

SIGNS OF AUTISM



**Unique or
abnormal speech**



**Abnormal behaviors
in social situations**



**Repetitive,
limited behavior
patterns**



**Narrow
interests**



**Lack of empathy
or insensitive**



**Sensory
sensitivities**



**Repetitive,
abnormal
movements**



**Preference
for predictable
routines**

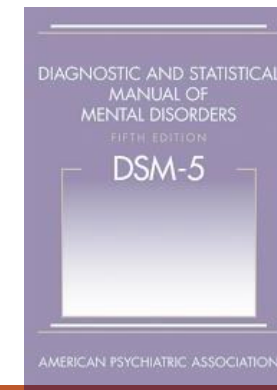
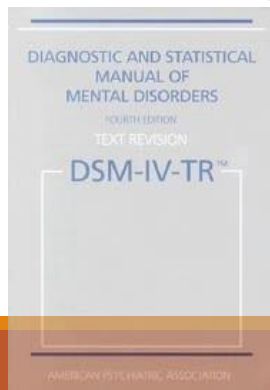
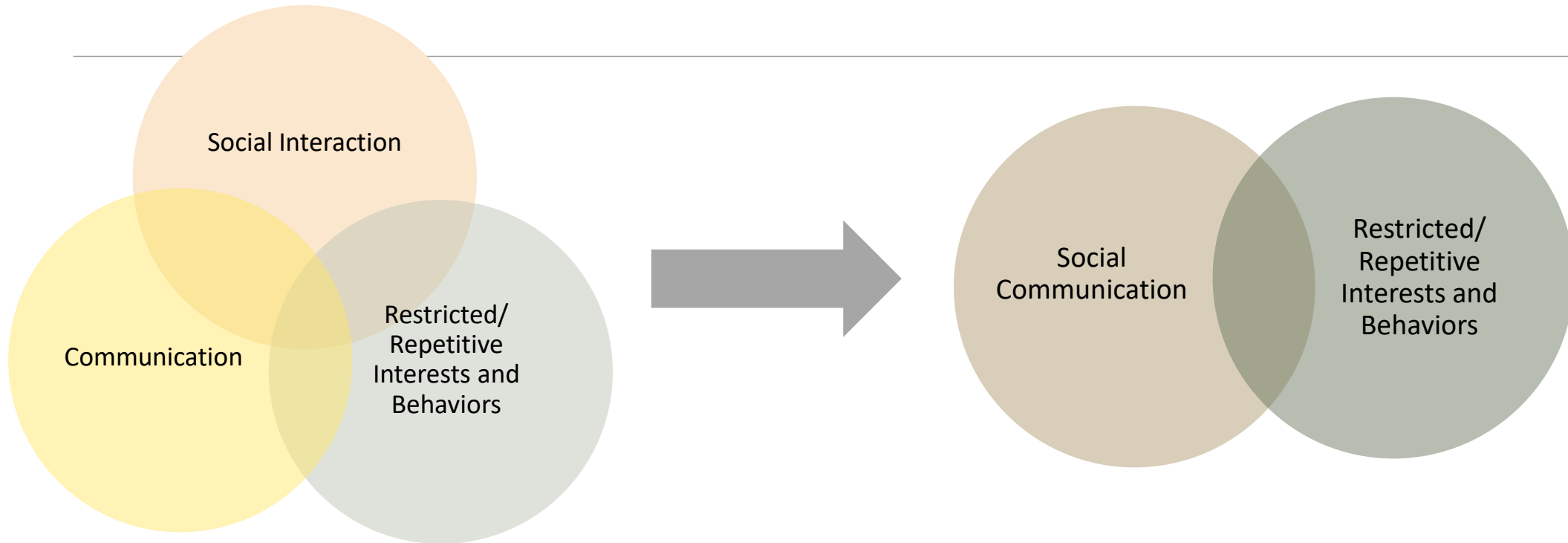


**Sleep
problems**



**Anxiety &
depression**

Diagnosis: DSM-IV to DSM-5



What are the symptoms of autism?



Symptoms of ASD typically become clearly evident during early childhood,

between 12 and 24 months of age. However, symptoms may also appear [earlier](#) or [later](#).

Early symptoms may include a marked delay in [language](#) or **social development**.

The DSM-5 divides symptoms of ASD into two categories: problems with communication and social interaction, and restricted or repetitive patterns of behavior or activities.

Problems with communication and social interaction

These can include:

- [issues with communication](#), including difficulties [sharing emotions](#), sharing interests, or maintaining a back-and-forth conversation
- issues with nonspeaking communication, such as trouble maintaining eye contact or reading [body language](#)
- difficulties developing and maintaining relationships

Restricted or repetitive patterns of behavior or activities



These can include:

- repetitive [movements](#), motions, or [speech patterns](#)
- rigid adherence to specific routines or behaviors
- [an increase or decrease in sensitivity to specific sensory information](#) from their surroundings, such as a negative reaction to a specific sound
- fixated interests or preoccupations

Signs of Autism Spectrum Disorder

Communication

- Cannot start or maintain conversation
- Communicates with gestures instead of words
- Repeats words or memorized passages

Social

- Does not play interactive games
- Avoids eye contact
- Displays lack of empathy

Sensory

- May find normal noises painful, hold hands over ears
- Withdraws from physical contact
- Rubs surfaces or licks objects

Play

- Doesn't imitate actions of others
- Prefers solitary or ritualistic play

Behaviors

- Intense tantrums
- Short attention span
- Narrow interests

Source: U.S. National Library of Medicine/National Institutes of Health

What causes autism?



The exact cause of ASD is unknown. The most current research demonstrates there's no single

- having an immediate family member who's autistic / genetic mutations
- [fragile X syndrome](#) and other genetic disorders / metabolic imbalances
- being born to [older parents](#) / low birth weight
- exposure to heavy metals and environmental toxins / a history of [viral infections](#)

However, multiple sources, [old](#) and [newTrusted Source](#), have concluded that vaccines do not cause ASD.

The ABCs of ASD Testing Tools

M-CHAT	This Checklist for Autism in toddlers evaluates infants who are 16 to 30 months old. It identifies mild symptoms.
CARS	The Childhood Autism Rating Scale (CARS) helps differentiate autism from other developmental delays.
ADOS	The Autism Diagnostic Observation Schedule (ADOS) evaluates all ages and is considered the "gold standard" of assessments.
MRI	Magnetic Resonance Imaging (MRI) to evaluate brain structure.
EEG	Electroencephalogram to check for seizure activity.

Developmental screenings : These children may benefit from early diagnosis and support.



[Modified Checklist for Autism in Toddlers \(M-CHAT\)](#) is a common screening tool many pediatricians use to rule out the 23-question survey. DNA testing for genetic diseases

- behavioral evaluation
- [visual](#) and [audio](#) tests to rule out any issues with vision and hearing that aren't related to ASD
- occupational therapy screening
- developmental questionnaires, such as the Autism Diagnostic Observation Schedule, Second Edition (ADOS-2)

Determining the diagnosis

A team of specialists typically makes the diagnosis. This team may include:

- child psychiatrists
- occupational therapists
- speech and language pathologists

نشانه هاي اوتيسم قبل از يك سالگي

به ندرت از حرکات
و گفتار ديگران
تقليد مي کند

به ندرت به
ديگران توجه
مي کند

ضعف در

واکنش به اسم

خيلي کم

و با تاخير

قان و قون مي کند

تماس چشمي

ضعيف



به ندرت لبخند
مي زند

احتمال تاخير در

بعضي مراحل حرکتی

مثل غلتیدن و

چهار دست و پا رفتن

*بر اساس مقاله اي از Dr.Rebecca Landa

AUTISM

علائم زود هنگام اوتيسم در نوزادی



1 تمرکز بصری
غير طبيعي

معمولا با بررسی مداوم یک شی



2 رفتارهای تکراری
غير طبيعي

به شکل غير طبيعي
کلی زمان می گذارد و کار تکراری
می کند مثل نگاه کردن
به دستاش یا غلتاندن یک شی

3 کمبود توانایی
تولید صدا
در سنین

حروف صدا دار مثل
ماما، بابا، تا تا،
را با تاخير به زبان می آورد



4 تاخير عمدی در ارتباطات

تغییرات چهره ای خشنی در مواجهه
با ديگران و عدم تلاش برای کسب
توجه والدینش



5 علاقه ای به
ارتباطات متقابل ندارد

به ارتباط با اشیا بیشتر از ارتباط
با انسانها علاقه دارد
و ارتباطات رو در رو پرايش مشکل است

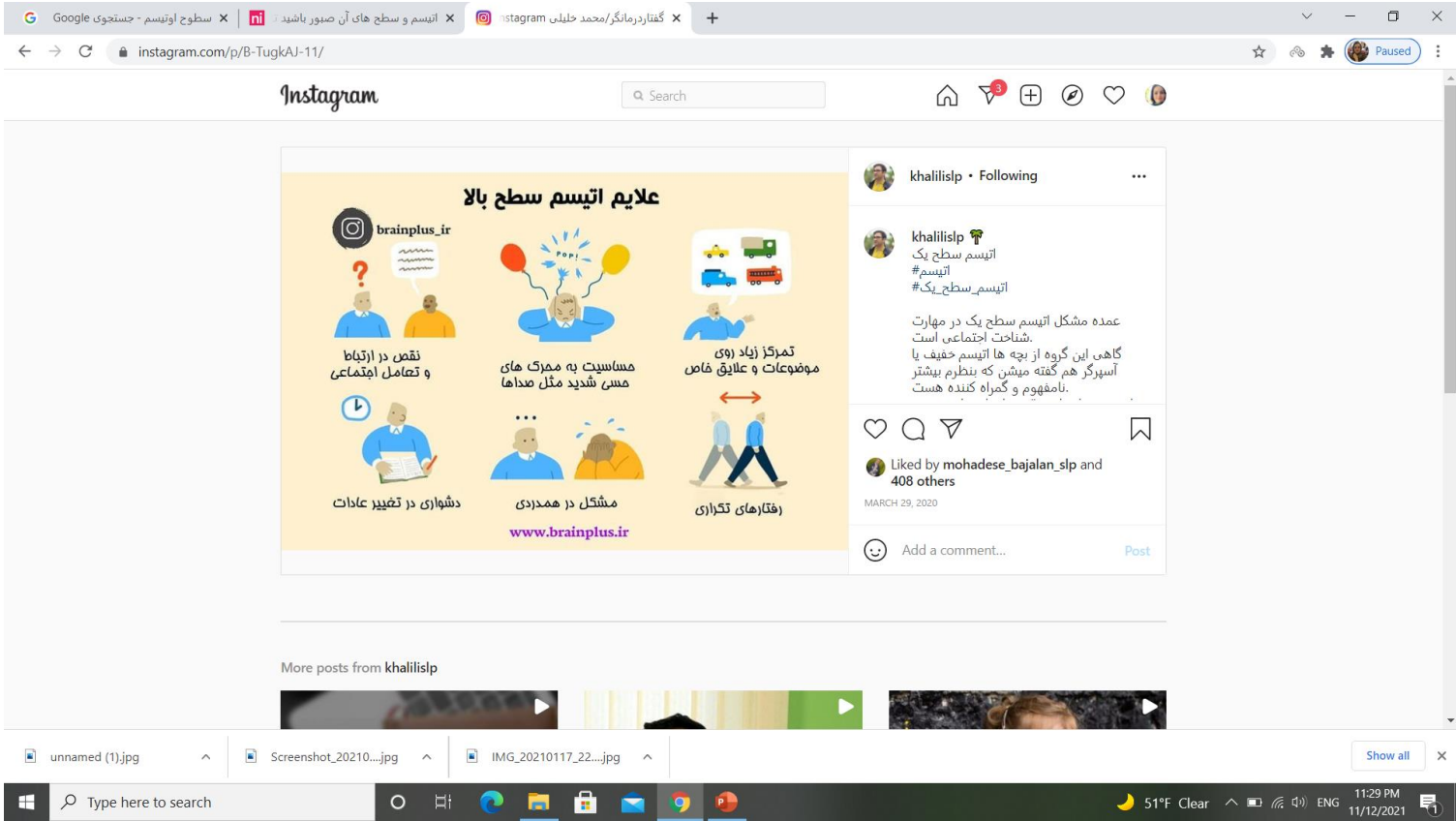
<p>ناتوانی در ارتباط با کودکان و بزرگسالان</p> 	<p>سخنرانی ضعیف یا عدم سخنرانی</p> 
<p>بیش از حد یا کم حساس بودن به سرو صدا</p> 	<p>بازی با اسباب بازی نامناسب</p> 
<p>برخورد مشکل با تغییرات روال</p> 	<p>بیش فعالی و یا انفعالی</p> 
<p>خنده یا گریه نامناسب</p> 	<p>عدم آگاهی از خطر</p> 
<p>بیش از حد یا کم حساس بودن به لمس کردن</p> 	<p>دلچسپی عجیب به اشیاء</p> 
<p>عدم تماس با چشم</p> 	

خفیف‌ترین یا بهترین نوع از اتیسم است. معمولاً در هنگام ارتباط با دیگران اوقات سختی را سپری می‌کنند. برای مثال ممکن است کودک نتواند دقیقاً منظورش را برساند یا در زمان درست صحبت کند یا اینکه از زبان بدن خود به درستی استفاده کند و متوجه الگوهای رفتاری اجتماعی شود.

معمولاً می‌تواند با جمله‌های کامل صحبت کند و ارتباط کلامی موثرتری برقرار کند، اما در مکالمات پی در پی و پرسش و پاسخی مشکل دارد. آنها ممکن است تلاش کنند دوست پیدا کنند اما همیشه موفق نمی‌شوند.

همچنین ممکن است این افراد در برخی زمینه‌ها انعطاف پذیر باشند اما با جابجایی از یک فعالیت به فعالیت دیگر مشکل داشته باشند. اختلال آنها به گونه‌ای است که با سازمان‌یابی و برنامه‌ریزی مشکل دارند و این موضوع مانع از استقلال کاملشان شود.

The word "AUTISM" is spelled out in large, colorful, clay-like letters on a light-colored wooden surface. The letters are: A (red), U (teal), T (orange), I (light blue), S (yellow), and M (pink). The letters are thick and have a slightly irregular, handcrafted appearance.



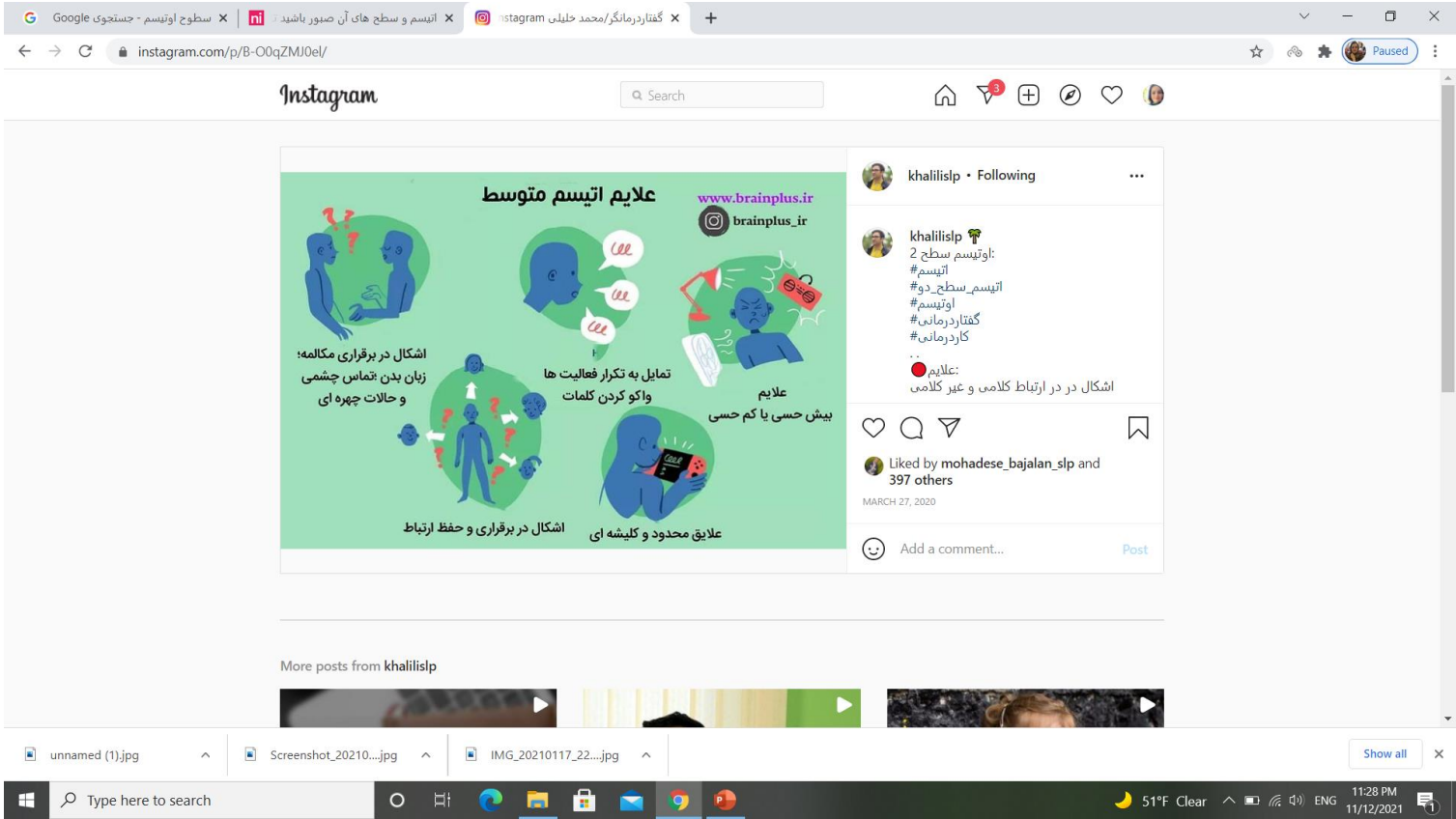
۲: نیاز به حمایت‌های اساسی

نسبت به کسانی که با عنوان اختلال سطح ۱ شناخته شده‌اند، مشکلات واضح‌تری در ارتباطات کلامی و اجتماعی خود دارند. این افراد در تغییر تمرکز خود مشکلات بیشتری دارند. در هنگام جابجایی از یک فعالیت به فعالیت دیگر یا ترک مدرسه در انتهای روز بسیار ناراحت شوند.

این کودکان ترجیح می‌دهند به طیف محدودی از فعالیت‌ها علاقه داشته باشند و معمولاً رفتارهای تکراری از خود نشان می‌دهند. این باعث می‌شود در موقعیت‌های خاص به راحتی نتوانند تمرکز کنند. اتیسم سطح ۲ در یک کودک به معنای این است که او سعی می‌کند از جملات ساده استفاده کند و در برقراری ارتباط غیر کلامی مشکل دارد.



A close-up photograph of the word "AUTISM" spelled out in large, colorful, hand-drawn letters on a light-colored wooden surface. The letters are made of a thick, clay-like material. The colors are: A (red), U (teal), T (orange), I (light blue), S (yellow), and M (pink). The letters are arranged in a slightly irregular, hand-drawn fashion.



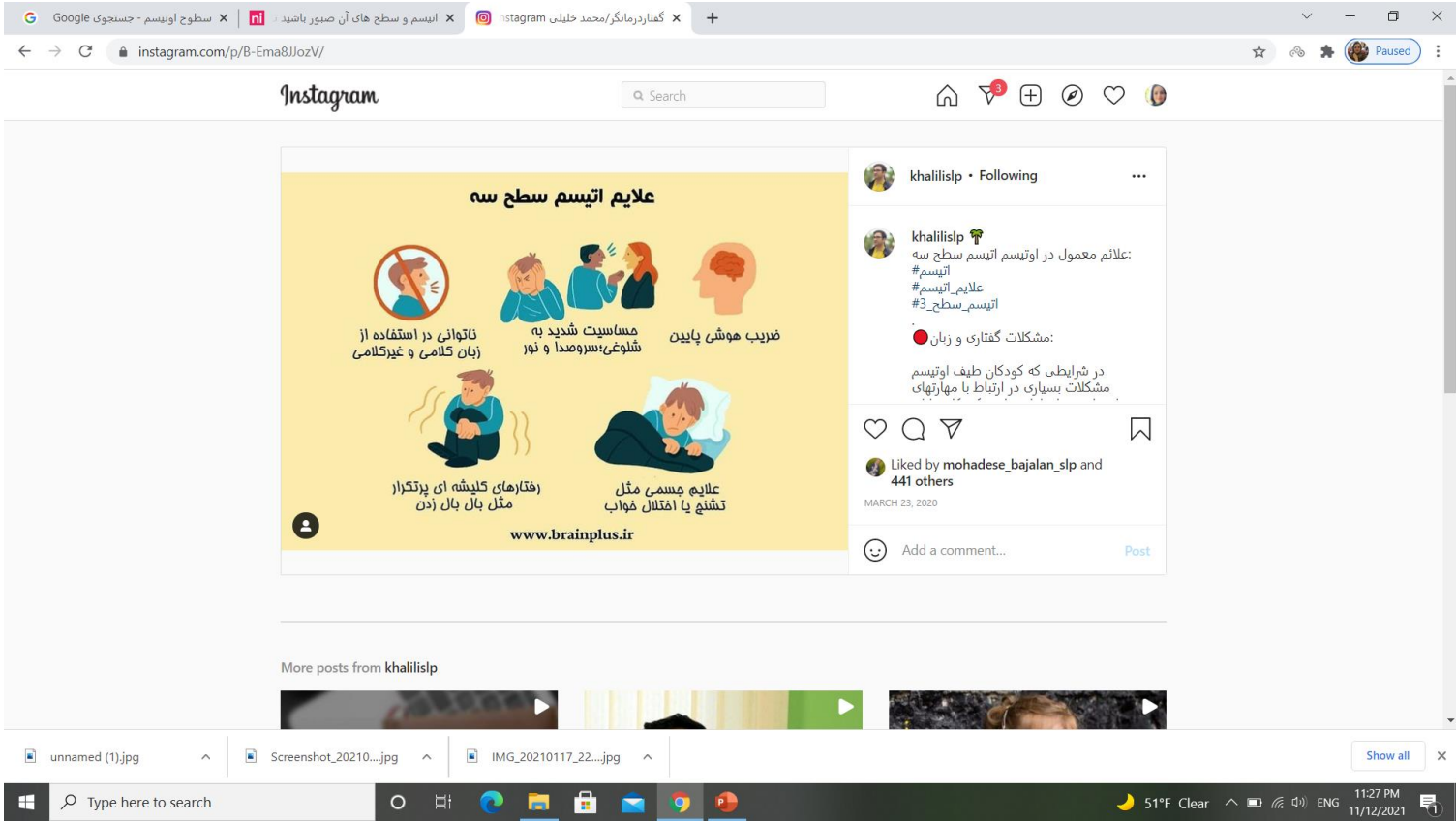
اتیسم سطح ۳: نیاز به حمایت‌های اساسی و شدید

شدیدترین و طاقت‌فرساترین نوع اختلال در میان سطوح اتیسم است. بسیاری از مشکلات و رفتارهای سطوح قبلی را از خود نشان می‌دهند اما با اختلالات شدیدتری هم مواجه‌اند. مشکل در اظهار نظر کلامی و غیر کلامی، سختی در تمرکز، هماهنگی اجتماعی و تغییر در موضوع مورد تمرکز و شرایط

درگیر شدن با رفتارهای تکراری گیج‌کننده

به وضوح در توانایی صحبت کردن محدود است و نمی‌تواند یک برهم کنش و ارتباط دو سویه را آغاز کند. این شخص تنها می‌تواند رفتارهای صریح اجتماعی را بفهمد و از کنش‌ها و واکنش‌های جزئی‌تر برداشت خاصی ندارد. نسبت به سایر سطوح اتیسم به محبت بیشتری نیز نیاز دارد؛ به طوری که مراقبت و محبت از وی پیچیده‌تر است و حساسیت او را هم درگیر می‌کند.

The word "AUTISM" is spelled out in large, colorful, thick, clay-like letters on a light-colored wooden surface. The letters are: A (red), U (teal), T (orange), I (light blue), S (yellow), and M (pink).



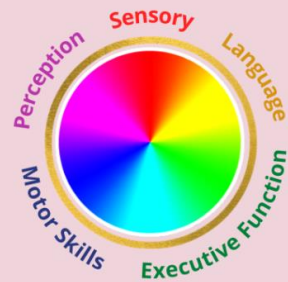


AUTISM IS A NON-LINEAR SPECTRUM

It does **not** look like this:



Autism is much more **complex** and **dynamic**. Every autistic individual is **unique**, and so are our traits and support needs. We all have varying degrees of autistic traits. Some may have serious sensory issues, while others have none, and so on. There is **endless variation**, and they change and evolve throughout our lives, even from day to day.



It looks more like this



@__instagram__

Treatment:



AUTISM TREATMENT

- 1. Behavioral training and management :
 - Sensory Integration
 - Applied Behavior analysis (ABA)
 - Education of Autis and Related Communication Handicapped Children (TEACCH)
- 2. Specialized therapies :
 - Speech therapy
 - Occupational therapy
 - Physical therapy
- 3. Community support and parent training
- 4. Medicines : anxiety, hyperactive, depression and obsesive compulsive behavior



Autism Treatment, Intervention & Therapy



AUTISM

**Behavior
Programs**



**Education
and Learning
Programs**



Medications



**Other
Treatments
and Therapies**





Autism Spectrum Disorder (ASD) is often perceived through the lens of childhood, with many associating it primarily with early developmental milestones.

However, autism persists into adulthood, manifesting in various ways that can significantly impact daily life, relationships, and overall well-being.

the key signs of autism in adults, focusing on social interaction, communication, emotional and cognitive processing, executive functioning, sensory sensitivities, and unique behaviors

Social Interaction



Difficulty Understanding or Responding to Social Cues

challenges in understanding body language, facial expressions, and tone of voice

joking or being sarcastic,

leading to misunderstandings in social contexts. This difficulty can create barriers in forming and maintaining relationships

Challenges with Initiating and Maintaining Conversations

Adults with autism may find it hard to start conversations or keep them flowing.



Avoids or Finds Eye Contact Uncomfortable

This behavior can be misinterpreted by others as disinterest or lack of engagement, further complicating social interactions.

Struggles with Social Reciprocity and Appropriate Responses

such as failing to ask follow-up questions or not reacting to others' emotions in expected ways. This can lead to misunderstandings and may cause others to perceive them as aloof or uninterested.

Difficulty Managing and Expressing Emotions

Managing and expressing emotions can be particularly challenging for adults with autism. They may have difficulty identifying their own feelings or understanding the emotions of others. This can result in inappropriate emotional responses, such as laughing in serious situations or appearing indifferent when someone is upset. Such challenges can strain relationships and lead to social isolation.



Challenges with Understanding and Relating to Others' Emotional Experiences

Empathy, or the ability to understand and share the feelings of others,

Preference for Concrete Information and Difficulty with Abstract Thinking

Communication

Tendency to Interpret Language Literally



Cognitive Processing Differences

Executive Functioning

Difficulty with Planning and Organizing

Challenges with Multi-Tasking

Problems with Task Completion

Sensory Sensitivities

