

# AUTISM SPECTRUM DISORDER (ASD)

## INFORMATION FOR CWU MEMBERS



Autism Spectrum Disorder (ASD) also known as the Autistic Spectrum describes a number of conditions that are classified as neurodevelopmental disorders.

All of these disorders share characteristics, these being social deficits and communication difficulties, repetitive behaviours and interests, and in some cases cognitive delays.

Although Autistic Spectrum Disorders are covered under the same umbrella, they are classified in order of severity, ie severity of social communication symptoms, severity of fixated or restricted behaviours or interests and associated features.

It is usual to be able to spot signs of neurodevelopmental disorders before the age of two, however sometimes symptoms may become more apparent and may manifest later on in childhood when demands exceed capabilities.

### CHARACTERISTICS OF AUTISM

Autistic Spectrum Disorder (ASD) does not necessarily mean a person has autism, rather it means they have autistic like traits, such as avoiding eye contact.

General characteristics of autism are normally apparent by the age of three years. These normally take on the format of delays in one or more of the following: (1) Social interaction with family, peers etc (2) Communication skills ie speech, pointing and expression (3) Restricted or repetitive patterns of behaviour, ie obsessive interests and activities.

There is also a unique form of autism known as Autistic Savantism. This is where a child or individual displays outstanding skills in music, art or numbers with no formal training or practice. This was made famous by Dustin Hoffman in the film 'Rain Man'.

Asperger Syndrome, another condition under the umbrella of ASDs, is distinguishable by the lack of delay in early language skills development, and most Asperger Syndrome individuals do not have significant cognitive delays.

### SOME INDICATIONS OF ASD

- Failure to maintain eye contact
- Uncomfortable when being held or picked up (may cry incessantly, become limp or tense)
- No recognisable bond with parent, guardian or carer
- Cannot pick up social cues (this can cause uncontrollable emotional outbursts) and can affect their relationships with peers
- May not express themselves appropriately, verbally and non-verbally
- May not have a sense of empathy, therefore they cannot have a full understanding of others emotions such as pain or sorrow
- Does not make facial expressions or respond to facial expressions
- In children, it may become apparent by their play behaviour, i.e; lining toys or objects up in a repetitive manner
- A change in routine and constant familiarity can cause severe upset and behavioural problems.
- Continuous body movements/patterns i.e.; tics, rocking, hand flapping or spinning especially when stressed
- Obsessive interest in an activity, idea or person
- Sensory issues such as certain types of loud noises or how certain textures feel to the touch
- Certain food textures and how they feel in the mouth can become a eating issue

### PROGNOSIS

Although there is no "cure" for ASD, there are some medications that can be used in extreme cases, these being Ritalin, mild antidepressants and Lithium. These can only help with certain unmanageable symptoms like anxiety,

depression, hyperactivity, anger and aggression. However, therapy and understanding of the condition, with some extra input in the education system, along with a consistent family and support network is the key. There is no single treatment that fits all, as it is dependent on each individual's needs. However, it is known that early intervention in childhood can help to make the individual able to acquire the skills to attain self-care as well as social and employment skills. This will hopefully enable a person with ASD to achieve their full potential.

**SOURCES:**

*Bupa – available at <https://www.bupa.co.uk/health-information/brain-nervous-system/autism>*

*National Autistic Society – available at <https://www.autism.org.uk/advice-and-guidance/what-is-autism>*

*University of Sussex research – available at <http://sro.sussex.ac.uk/id/eprint/79621/>*