

What Every Parent Should Know About Diagnosing Autism Spectrum Disorders

Judith Aronson-Ramos, M.D., FAAP

To date we do not have one test to diagnose Autism, nor do we have one specific type of professional who can make this diagnosis. Autism Spectrum Disorders, or ASDs, are highly variable, and so are the ways a diagnosis may be obtained. There are different problems which may bring a parent to seek help, or concern a teacher or caregiver about a child's development. Some examples of the behaviors and characteristics we see are variable and diverse. Here is a list of some examples: global delays in language and development, or advanced milestones with reading words at a young age; echolalic speech repeating everything heard on TV or in conversation, or no speech at all; unresponsive to sounds, or highly sensitive to all noises; lack of socialization, or inappropriately social, and so on. Autism can vary and look different in each child.

It is the combination of impairments in language, socialization, and restricted interests or repetitive behaviors which make the diagnosis. These specific behaviors are what is referred to as the DSM IV criteria and include 6 symptoms from a list of behaviors and characteristics (referenced at the end of this article). The present way we define Autism is changing and currently the diagnostic terms include: Autism, PDD-NOS, and Aspergers Syndrome, not ASD. Together these three separate disorders are what we call the Autism Spectrum Disorders; however this terminology has not yet become "official". School systems, and most physicians, and many of the therapists who work with these children have already adopted ASD as a way to refer to these disorders, even though the precise medical terminology has not yet been officially changed.

Autism Spectrum Disorders are characterized by specific difficulties in language, behavior, social interaction, and development. An ASD diagnosis can be made by a physician, psychologist, or an experienced educator. When ASD concerns are raised a parent may be referred to a variety of different professionals. Some professionals may complete part of the assessment; others can provide a comprehensive diagnostic assessment in a single visit. The following is an outline for parents of the elements involved in a comprehensive ASD evaluation.

1. Medical and Developmental History – This is an in-depth and comprehensive history which is frequently obtained by a medical professional such as a developmental and behavioral pediatrician, neurologist, child psychiatrist, or other medical specialist. This history includes the following: active medical problems, past medical and surgical history, developmental milestones, birth history, family history (particularly in regard to developmental delays and behavioral problems), review of systems (active ongoing problems or symptoms), immunizations, allergies, sleep, and appetite /feeding.
2. Physical and Medical Examination of the Child by a physician – This assessment will include a normal physical exam, neurological exam, and attention to dysmorphic features which can be a red flag for Autism. This exam can be accomplished by your pediatrician or a medical specialist.
3. Social and Behavioral History –Descriptions of interactions with family, peers, teachers, and other caregivers. Descriptions of unusual or concerning behaviors such as: spinning, rocking, flapping, lining up toys, repetitive play, and other self stimulatory behaviors.
4. School History – Functioning in daycare, preschool, or other school environments. Observations of teachers and other school personnel are helpful which include the child's ability to follow directions or routine, interact with peers, transition, and other typical skills.

5. Direct Observation of the child – This can be through semi-structured play activities, observing the child interact with parents or caregivers, or through direct assessment using a specific diagnostic tool such as the Autism Diagnostic Observation Schedule or ADOS, the Childhood Autism Rating Scale or CARS and other assessment check lists and rating scales. These assessments can be administered by individuals with a variety of training backgrounds from educators to physicians and contribute to making the diagnosis.
6. Medical Tests – Hearing Test, MRI, EEG, and chromosomal testing serve as baseline assessments to rule out complicating disorders. There are few true confirmatory tests but we do know children with Autism have large brains often confirmed by MRI, they are prone to seizures and may have EEG abnormalities, and certain genetic syndromes are associated with Autism (Tuberous Sclerosis, Fragile X, Angelman’s syndrome and others). A hearing impairment needs to be ruled out as part of the diagnostic assessment. Not all of these tests may be necessary for your child.
7. Speech and Language Evaluation- Most children with ASD have language impairments and will require testing and therapy with a Speech Language Pathologist. However, this assessment is for treatment planning, Speech Therapists are not able to make an autism diagnosis. They may however note classic features of autism in their assessment such as: echolalia, pragmatic language delay, poor or non-existent gestural communication, and other findings.
8. Other Therapy Evaluations – Children with ASD may have fine and gross motor skills delay necessitating physical or occupational therapy evaluations. These assessments may contribute to treatment planning for the child with Autism but are not required to make a diagnosis.

For more information visit the following websites: www.firstsigns.org, www.autismspeaks.org , and www.cdc.gov.