



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™
EL PASO



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™
EL PASO

Division of Child and Adolescent Psychiatry

Hanna Garza, MS, LPC

Hanna.Garza@ttuhsc.edu

tchatt.ep@ttuhsc.edu

915-215-6170



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER.[™]
EL PASO

Autism

TCHATT

(Texas Child Health Through Telemedicine)



What is Conduct Disorder?

- **Autism or Autism Spectrum Disorder (ASD)** is a developmental disorder characterized by difficulties with social interaction and communication, and by restricted and repetitive behavior.
- Individuals diagnosed with ASD may communicate, interact, behave, and learn in ways that are different from most other people. The learning, thinking, and problem-solving abilities of people with ASD can range from gifted to severely challenged. Some people with ASD may require a lot of help in their daily lives and others may need less.



Symptoms

Children or adolescents with ASD might:

- have trouble relating to others or not have an interest in other people at all
- avoid eye contact and want to be alone
- have trouble understanding other people's feelings or talking about their own feelings
- repeat actions over and over again
- have trouble adapting when a routine changes
- have trouble expressing their needs using typical words or motions
- have abnormal body posturing, facial expressions, or tone of voice
- not engaging in play with peers
- have preoccupation with specific topics
- have self-abusive behaviors
- be socially withdrawn



Diagnosis

- Diagnosing ASD can be difficult since there is no medical test, like a blood test, to diagnose the disorders. Doctors look at the child's behavior and development to make a diagnosis.
- ASD can sometimes be detected as early as 18 months. By age 2, a diagnosis by an experienced professional can be considered very reliable. However, many children do not receive a final diagnosis until much older. This delay means that children with ASD might not get the early help they need.



Diagnosis

The ASD diagnosis consists of two separate stages.

- **Stage 1:** General developmental screening during regular checkups with a pediatrician during their 9, 18, and 24 or 30 month check up visits and specifically for autism at their 18 and 24 month check up visits. Additional screening might be needed if a child is at high risk for ASD or developmental problems. Those at high risk include children who have a family member with ASD, have some ASD behaviors, have older parents, have certain genetic conditions, or who were born at a very low birth weight.
- Children who show developmental problems during this screening process will be referred for a second stage of evaluation.



Diagnosis

- **Stage 2:** Additional Evaluation with one or several specialists to determine a diagnosis is required. These specialists may include but not limited to **a developmental pediatrician, a child psychologist, a child psychiatrist, a neurologist, and a speech-language pathologist.**
- The evaluation may assess: cognitive level or thinking skills, language abilities, age-appropriate skills needed to complete daily activities independently, such as eating, dressing, and toileting.
- Because ASD is a complex disorder that sometimes occurs along with other illnesses or learning disorders, the comprehensive evaluation may include: blood tests and hearing test.
- The outcome of the evaluation will result in a formal diagnosis and recommendations for treatment.



Treatment

- Treatment for ASD should begin as soon as possible after diagnosis and should depend on severity: mild, moderate, or severe type. Early treatment for ASD is important as proper care can reduce individuals' difficulties while helping them learn new skills and make the most of their strengths.
- The wide range of issues facing people with ASD means that there is no single best treatment for ASD. Working closely with a doctor or health care professional is an important part of finding the right treatment program.



Treatment

- **Medications** can be used to treat some symptoms that are common with ASD. With medication, a person with ASD may have fewer problems with: irritability, aggression, repetitive behavior, hyperactivity, attention problems, anxiety and depression.
- **Behavioral therapy utilizes** intensive highly structured modalities and may involve parents, siblings, and other family members. Programs may help people with ASD: learn life-skills necessary to live independently, reduce challenging behaviors, increase or build upon strengths, and learn social, communication, and language skills.



Causes and Risk Factors

- There may be many different factors that make a child more likely to have an ASD, including **environmental, biological, and genetic** factors.
- Children who have a sibling with ASD are at a higher risk.
- Individuals with certain genetic or chromosomal conditions, such as fragile X syndrome or tuberous sclerosis.
- When taken during pregnancy, the prescription drugs valproic acid and thalidomide.
- Children born to older parents.
- Children whose parents abuse alcohol and drugs
- The critical period for developing ASD occurs before, during, and immediately after birth.



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER.[™]
EL PASO

Questions