

Autism far more common than formerly thought

Written by

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April is Autism Awareness Month, and from TV talk shows to media coverage, we are all coming face to face with autism. Some readers may have friends or family members whose lives have been touched by this common yet complex condition. Autism is essentially three things — abnormal social engagement, abnormal verbal and/or nonverbal communication, and repetitive behaviors/insistence on sameness. All three of these must be present for a diagnosis.

There is so much variability, from children who have severe intellectual disability and who are entirely nonverbal and “in their own world,” to those who are intelligent but whose quirky interests and behaviors and poor social skills lead to social rejection and isolation.

The term autism spectrum disorder is often used to emphasize that this is not one condition but a range of abnormalities. For example, Asperger's syndrome is a term used to describe individuals with mild, high-functioning autism who have average or above-average.

The majority of individuals with autism have identifiable evidence of autism as early as 12 months of age. ASD is largely caused by genetic factors. There are several known genetic abnormalities that may affect early brain development and give rise to autistic behavior. Environmental factors may contribute to the development of autism, but immunizations do not cause ASD.

Over the last decade, we have learned that ASD is far more prevalent than we previously believed, probably affecting 6-9 per 1,000 children. The increase in occurrence has been largely in the milder end of the spectrum. This may reflect the growing awareness of the autism spectrum, rather than a true increase in the incidence of autism. Controversy remains about whether there is truly an “epidemic” of autism.

Diagnosis and intensive treatment of ASD at an early age can lead to improved outcomes. Primary care doctors have tools such as the M-CHAT (modified checklist for

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autism at 2) to effectively screen for autism at age 18-24 months.

Children suspected of having an ASD should be referred to a center that specializes in the diagnosis and treatment of children with developmental problems. Diagnosis in WNC is typically done by a developmental pediatrician.

Parents whose child is diagnosed with an ASD will need guidance and support from their developmental pediatrician, other providers, family and friends to sort through the many therapeutic choices available. Treatment needs to be individualized and include parents as partners. Read about treatment approaches at www.autismspeaks.org.

This is the opinion of Dr. Adrian Sandler, medical director of the Olson Huff Center at Mission Children's Hospital in Asheville.

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