What are Autism Spectrum Disorders?
Autism Spectrum Disorders (ASDs) are complex developmental disorders that typically appear during the first three years of life. Each disorder can affect a child's ability through impaired social interaction, problems with verbal and nonverbal communication and unusual or severely limited activities and interest. The term "spectrum" refers to the wide range of symptoms, skills and levels of impairment or disability that people with ASD can have. Some people are mildly impaired by their symptoms, while others are severely disabled. ASDs affect an estimated two to six per 1,000 children and strike males about four times as often as females. They do not discriminate against racial, ethnic or social backgrounds. The ASD's are Autism (defining disorder of the spectrum), Asperger’s Syndrome, Pervasive Development Disorder Not otherwise Specified (PDD-NOS), Rett Syndrome and Childhood Disintegrative Disorder (CDD).

Asperger's Syndrome involves several social impairments and restricted interests. A diagnosis of Asperger’s Syndrome is given to individuals who experienced no speech or cognitive delay as children—they were talking on time and have at least a normal IQ—but who nevertheless display a range of autistic-like behaviors and ways of taking in the world. Children with Asperger's have a hard time understanding what is really going on around them. Since they cannot read social or emotional cues well, they come off as insensitive, pushy or strange, yet have very little insight into how they are perceived.

What are common aspects of Autism Spectrum Disorders?
Children diagnosed with an ASD do not embrace the typical patterns of child development. Some hints of future problems may be apparent from birth, while in most cases, signs become evident when a child’s communication and social skills lag further behind other children of the same age. ASDs are defined by a definite set of behaviors that can range from very mild to severe. Children with ASDs might display:

- Absence or impairment of imaginative and social play
- Lack of interest and/or inability to make friends with peers
- Impaired ability to initiate or sustain a conversation with others
- Stereotyped, repetitive or unusual use of language
- Restricted patterns of interests that are of abnormal intensity or focus.
- Repetitive use of language and/or motor mannerisms (hand-flapping, twirling objects)
- Insistence on sameness, resistance to change, difficult to transition to other places.
- Lack of or delay in spoken language
- Failure to make eye contact
- Uneven gross/fine motor skills

Symptoms
Symptoms of ASD start to appear during the first three years of life. Typically, developing infants are social by nature. They gaze at faces, turn toward voices, grasp a finger, and even smile by 2-3 months of age. By contrast, most children who develop autism have difficulty engaging in the give-and-take of everyday human interactions.
Their symptoms may include:

- Delay in language development
- Repetitive and routine behaviors
- Difficulty making eye contact
- Sensory problems
- Difficulty interpreting facial expressions
- Problems with expressing emotions
- Fixation on parts of objects
- Absence of pretend play
- Difficulty interacting with peers
- Self-harm behavior
- Sleep problems

Symptoms of ASD fall on a continuum. This means that the learning, thinking, and problem-solving abilities of children with ASD can range from gifted to severely challenged. Some children with ASD need a lot of help in their daily lives, while others need less. With a thorough evaluation, doctors can make a diagnosis to help find the best treatment plan for the child.

Causes
Scientists have not discovered a single cause of ASD. They believe several factors may contribute to this developmental disorder.

- **Genetics.** If one child in a family has ASD, another sibling is more likely to develop it too. Likewise, identical twins are highly likely to both develop ASD if one of them has developed it. Relatives of children with autism show minor signs of communication difficulties. Scans reveal that people on the autism spectrum have certain abnormalities of the brain's structure and chemical function.

- **Environment.** Scientists are currently researching multiple environmental factors that are thought to play a role in contributing to ASD. Many prenatal factors may contribute to a child’s development, such as a mother’s health. Other postnatal factors may affect development as well. Despite many claims that have been highlighted by the media, strong evidence has been shown that vaccines do not cause ASD.

Diagnosis
Diagnosing ASD is often a two-stage process. The first stage involves general developmental screening during well-child checkups with a pediatrician. Children who show some developmental problems are referred for additional evaluation. The second stage involves a thorough evaluation by a team of doctors and other health professionals with a wide range of specialties. At this stage, a child may be diagnosed as having ASD or another developmental disorder. Typically, children with ASD can be reliably diagnosed by age 2, though some may not be diagnosed until they are older.

Treatment
Many treatment plans exist for ASD, and each is tailored to every person’s unique needs. These can consist of medications, therapy or both. Many therapists work closely with ASD children and adults, using a variety of therapies to help increase their social and communication skills.
**ASD is treated and managed in several ways:**

- Education and development, including specialized classes and skills training, time with therapists and other specialists
- Behavioral treatments, such as applied behavior analysis (ABA)
- Medication for co-occurring symptoms, combined with therapy
- Complementary and alternative medicine (CAM), such as supplements and changes in diet

**How are ASDs treated?**

At present, there is no specific treatment or “cure” for ASDs. In many children, symptoms of an ASD improve with interventions and many eventually lead normal or near-normal lives. Treatment strives to improve a child’s abilities to interact with other people and to function effectively in society. It might include social skills training, behavior management, parent education and training, educational interventions and individual psychotherapy. It is geared towards improving communication, social skills and behavior management. Since the severity of symptoms can vary, treatment should be designed to meet individual needs and available family resources. Many children with ASDs have co-existing conditions, including attention deficit hyperactivity disorder (ADHD), bipolar disorder, obsessive-compulsive disorder (OCD), social anxiety disorder and depression. These conditions place extra demands on parents who are already dealing with a child with extra needs. Counseling for the families of children with autism may also assist them in coping with the disorder.

See more at: [http://www.nami.org/Learn-More/Mental-Health-Conditions/Autism](http://www.nami.org/Learn-More/Mental-Health-Conditions/Autism)

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