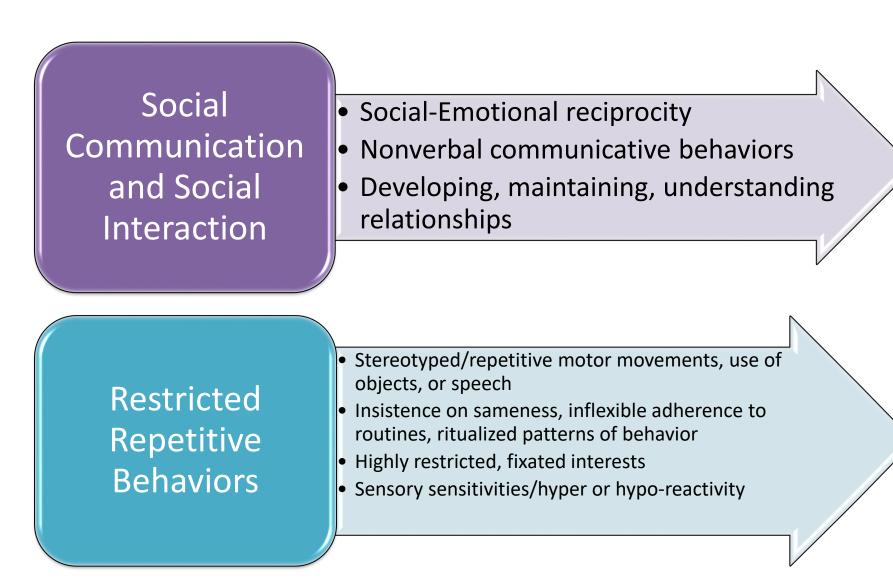


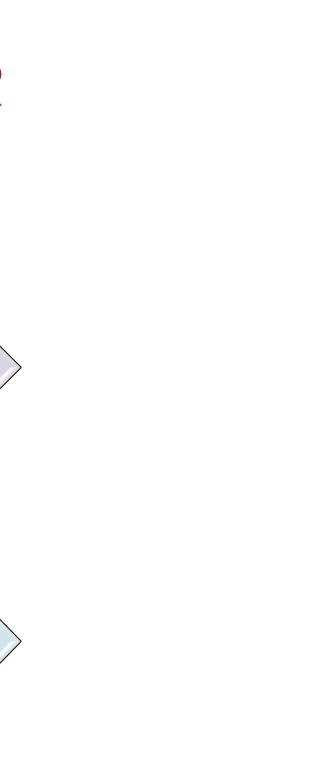
DIAGNOSTIC EVALUATION OF CHILDREN WITH AUTISM SPECTRUM DISORDER: "WHERE ON THE SPECTRUM IS MY CHILD?"

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AUTISM SPECTRUM DISORDER





WHERE ON THE SPECTRUM DOES MY CHILD FALL?

- "Mild, Moderate, Severe" ASD
- High versus low functioning
- Levels of Support



A DISCUSSION ON "SEVERITY"...

- Why does severity matter?
 - Families
 - Clinicians
- What is severity?
 - Language ability •
 - Intellectual Functioning •
 - Challenging Behaviors

Social Communication Impairment Repetitive/Restricted Interests and Behavior

Intensity of symptoms versus functionality



Bernier, R. (2012). How do we measure autism severity? SFARI Viewpoints. Retrieved February 2019 from http://sfari.org/news-and-opinion/viewpoint/2012/how-do-we-measure-autism-severity.

DEVELOPMENT

- Individual variability in development Inter and intra-individual variability
- Spectrum is heterogeneous
- Change in symptom presentation over time



MEASUREMENT

- Multiple measurement approach
- ADOS calibrated severity score
- Adaptive measures
- IÔŠ



THE ROLE OF CLINICAL JUDGEMENT

- Diagnosis relies on behavioral observations of behavioral manifestations¹
- Variability in symptom severity
 - Unfolding of symptoms
 - Differing developmental trajectories
- Baseline to measure progress

¹Guthrie, W., Swineford, L. B., Nottke, C., & Wetherby, A. M. (2013). Early diagnosis of autism spectrum disorder: stability and change in clinical diagnosis and symptom presentation. Journal of child psychology and psychiatry, and allied disciplines, 54(5), 582-90.



Level 1 "Requiring Support"	
Social Communication	 Without supports in place, deficits in a communication cause noticeable imparent of Difficulty initiating social interactions, examples of atypical or unsuccessful resocial overtures of others. May appear to have decreased interest interactions. For example, a person we speak in full sentences and engages in but whose to- and-fro conversation we and whose attempts to make friends a typically unsuccessful.
Restricted and Repetitive Behaviors	 Inflexibility of behavior causes signific with functioning in one or more conte Difficulty switching between activities Problems of organization and planning independence

social airments. and clear response to

st in social ho is able to communication vith others fails, are odd and

ant interference exts.

g hamper

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders

Level 2 "Requiring Substantial Support"	
Social Communication	 Marked deficits in verbal and nonvector communication skills social impairments apparent even place limited initiation of social interact and reduced or abnormal response from others. For example, a person who speaks whose interaction is limited to na and who has markedly odd nonverteraction is limited.
Restricted and Repetitive Behaviors	 Inflexibility of behavior, difficulty of other restricted/repetitive behavior enough to be obvious to the casual interfere with functioning in a vari Distress and/or difficulty changing

nverbal social

n with supports in

ctions nses to social overtures

ks simple sentences, arrow special interests, erbal communication.

coping with change, or viors appear frequently al observer and riety of contexts. ng focus or action.

American Psychiatric Association. (2013). Diagnostic and statistical manual of

Level 3 "Requiring Very Substantial Support"	
Social Communication	 Severe deficits in verbal and non communication skills cause seve functioning, very limited initiation and minimal response to social of For example, a person with few verspeech who rarely initiates interverses and responds to only very direct
estricted and Repetitive Behaviors	 Inflexibility of behavior, extreme change, or other restricted/repermarkedly interfere with function Great distress/difficulty changing

nverbal social ere impairments in ion of social interactions, overtures from others. words of intelligible raction and, when he or aches to meet needs only t social approaches

e difficulty coping with etitive behaviors ning in all spheres. ng focus or action.

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental

CASE EXAMPLE

- "Ben"
- 4 years old
- ADOS module 2 CSS Score=10 "High"
 - Social Affect=15
 - RRB=6
- Full Scale IQ=71 "Borderline"
- General Adaptive Composite=63 "Extremely Low"
 - Conceptual=63 _
 - Social=73 _
 - Practical=67 —
- Challenging Behaviors
 - SIB _
 - Tantrums _
 - Incontinence _



CLINICIAN-RATED SEVERITY OF

AUTISM SPECTRUM AND SOCIAL COMMUNICATION DISORDERS

Name:		Age: Se:	x: 🛛 Male 🖵 Female	Date:
a result of: a) Any socia b) Any restr for the individual diagnose Based on all the informatio	al communicatio icted interests d with (please s Au So son you have on	ed for the assessment of the lev on problems AND and repetitive behaviors select [✓] the disorder that ap tism Spectrum Disorder OR cial Communication Disorder the individual receiving care an interests and repetitive behavior	plies to the individual receivin d using your clinical judgment	g care): , please rate (√) the social
	Level 0	Level 1	Level 2	Level 3
SOCIAL COMMUNICATION: Rate the level of interference in functioning and support required as a result of SOCIAL COMMUNICATION deficits for this individual.	None	Mild Mequining support (i.e., Without supports in place, deficits in social communication cause noticeable impairments. Has difficulty initiating social interactions and demonstrates clear examples of atypical or unsuccessful responses to social overtures of others. May appear to have decreased interest in social interactions.)	Moderate Requiring SUBSTANTIAL support (i.e., Marked deficits in verbal and nonverbal social communication skills; social impairments apparent even with supports in place; limited initiation of social interactions and reduced or abnormal response to social overtures from others.)	Severe Requiring VERY SUBSTANTIAL support (i.e., Severe deficits in verbal and nonverbal soc communication skills cau severe impairments in functioning; very limited initiation of social interactions and minima response to social overture from others.)
RESTRICTED INTERESTS and REPETITIVE BEHAVIORS: Rate the level of interference in functioning and support required as a result of RESTRICTED INTERESTS and REPETITIVE BEHAVIORS for this individual.	None	Mild Requiring support (i.e., Rituals and repetitive behaviors [RRBs] cause significant interference with functioning in one or more contexts. Resists attempts by others to interrupt RRBs or to be redirected from fixated interest.)	Moderate Requiring SUBSTANTIAL support (i.e., RRBs and/or preoccupations and/or fixated interests appear frequently enough to be obvious to the casual observer and interfere with functioning in a variety of contexts. Distress or frustration is apparent when RRBs are interrupted;	Severe Requiring VERY SUBSTANTIAL support (i.e., Preoccupations, fixe rituals and/or repetitive behaviors markedly interfere with functioning all spheres. Marked distre when rituals or routines a interrupted; very difficult redirect from fixated interest or returns to it quickly.)



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RESOURCES

 <u>Clinician-Rated Severity of Autism</u> Spectrum and Social Communication Disorders





Questions?

