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Detecting Autism Spectrum Disorder

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Symptoms, Milestones and Therapy

Detecting Autism can be a tricky and long process. Diagnosis depends on the child’s symptoms, which can vary from child to child. For children who demonstrate clear symptoms, Autism can be detected as early as 15 to 18-months of age. The disorder may not be diagnosed until around ages three or four for those with more subtle symptoms. It isn’t uncommon for children with mild symptoms to go undiagnosed or misdiagnosed until the school age years or even adulthood.

Dr. Melissa Hale, Licensed Psychologist and Certified Behavior Analyst for University of Miami and Nova Southeastern University Center for Autism and Related Disabilities (CARD), says there isn’t a specific number of “red-flags” which need to be met for a parent to be concerned.

“Children are most likely to receive appropriate care when parents take a pro-active role in monitoring their development and seek help as soon as concerns emerge,” said Hale.

Parents who notice any red flags, should immediately consult with a child development professional.

“Early intervention is key in helping children reach their full potential,” said Hale.

Autistic children commonly meet their motor milestones on time, like walking by the first year. Language milestones are most commonly delayed, though not every Autistic child is delayed in language. Children who develop Autism fail to respond to their names, show reduced interest in people and have delayed babbling, by eight to ten-months-old. Toddlers, show difficulty playing social games, don’t imitate others’ actions, prefer to play alone, don’t respond to their parents’ displays of affection or anger.

Though parents continue to be skeptical of vaccinations for fear they cause Autism, research has consistently shown there isn’t a link.

“I always encourage families to speak openly with their pediatricians about their concerns. Pediatricians can offer specific information about the benefits and risks,” said Hale.

If you have any concerns, the worst thing you can do is remain silent. Parents sometimes believe that if the pediatrician doesn’t notice anything wrong, then their child must be fine. Hale says this is an assumption that parents shouldn’t have. They know their child best and should communicate any concerns no matter how small to their child’s doctor.

“Pediatrician’s typically only have brief periods to observe a child, and don’t have the opportunity to see a child engage in a range of social and play experiences” said Hale.

“Pediatricians largely rely on a parent’s
report to gain a full understanding of their development.”

Hale suggests that the more clear and specific a parent is, the better a pediatrician will be in assessing if there’s a developmental problem. When it comes to your children, there are no dumb questions.

Autism is very broad, there are significant differences in how symptoms or impairments manifest from one child to another. All individuals with Autism Spectrum Disorders display some impairments in communication, social interaction and exhibit repetitive behavior. In more severe cases, an individual may have little or no language, be socially isolated, and prefer interacting with objects rather than people. On the milder end, an individual may have well developed vocabulary but exhibit difficulties with social interactions or communication, like holding a conversation. They may desire friendships, but experience difficulty establishing or maintaining them.

Autism Spectrum Disorder and Autism are general terms for the group of complex disorders of brain development. Under the current guidelines, Asperger’s is considered part of the spectrum. In Asperger’s, individuals demonstrate normal language development and intellect is generally average to above average. Children with Asperger’s display Autism like difficulties in social interactions and display some type of stereotyped or repetitive behavior. In Autism, there are more clear abnormalities in language development and intellect may be below-average. The updated diagnostic standards, slated to be released in 2013 (DSM-5), will eliminate Asperger’s as a separate category. There will be a unified category called “autism spectrum disorders,” including autistic disorder, Rett syndrome, childhood disintegrative disorder, pervasive developmental disorder-not otherwise specified (PDD-NOS) and Aspergers.

Parents often want to know the severity of the diagnosis. In young children, it’s challenging to determine since there isn’t a way to know how a child will progress and develop. Several factors influence long-term outcomes, such as the severity of the delays, intensity and quality of treatment, and a child’s responsiveness to treatment.

Once a child is diagnosed it can be very overwhelming. Currently, 1 in 110 children and 1 in 70 boys are diagnosed.

“One of the most helpful resources in South Florida, is the UM-NSU CARD,” said Hale. “CARD clinicians work with families to better understand the diagnosis, evaluate treatment options and access therapies.”

The most common therapies are: Speech and Language Therapy, Occupational Therapy, Physical Therapy, Applied Behavior Analysis, Psychotherapy and/or Specialized Educational programs.

“The therapy a child needs should be selected and tailored to a child’s developmental profile,” she said.

Parents of Autistic children need remember they need the same things other children do - an environment enriched with developmental interaction. They should continue to play with, read to and sing to their child.

“Many children with Autism don’t respond as receptively to these activities as other typically developing children,” said Hale.

Autistic children can demonstrate challenging behavior that make even simple tasks difficult. They may tantrum, avoid interaction, aggress towards themselves or others, or refuse to participate. In these cases, parents may feel overwhelmed and frustrated.

“One thing parents can do is seek the support and guidance of professional therapists. Many therapists work directly with parents to foster improved interactions and experiences at home,” said Hale.

If you recognize these symptoms in a child, be careful when getting involved. It’s not a topic that can be brought up lightly.

“If a friend or family member feels comfortable approaching the topic, then it is best to do it in a private and supportive manner,” said Hale.

Parents of Autistic children should rely on their support group to tackle the situation. “Don’t go it alone,” said Hale.

Red Flags in toddlers and young children to detect Autism:

- Delayed language development
- Lack of interest in social games like peek-a-boo
- Not waving bye-bye, not pointing
- Tip-toe walking
- Loss of interest in social interactions
- Repetitive behavior: Hand-flapping, rocking, jumping, twirling, rearranging objects, repeating sounds/words
- Oversensitivity to noise, sights and touch
- Appearing “deaf” at times
- Overly intense/unusual interests
- Regression or loss of skills
- Don’t mimic facial expressions of adults
- Difficulty relating to others
- Do not keep eye contact