

Child Health Notes



Promoting early identification and partnerships between families, primary health care providers & the community.

Distributed by Public Health-Seattle & King County—Children with Special Health Care Needs Program. This newsletter provides physicians, nurse practitioners, primary health care providers, public health centers and community partners with current information regarding identification and management of special health issues for children. Contributing agencies and programs include: Washington State Department of Health and UW – Center on Human Development & Disability



Parents of toddlers whom we have diagnosed with autism often report a gut level sense that their child's development is off course. New parents know to expect their baby to look at them, smile, vocalize, & play social games. When such behaviors are missing, parents worry.

Jessica Greenson, PhD
UW Autism Center

AUTISM SPECTRUM DISORDERS: EARLY IDENTIFICATION

Autism spectrum disorders (ASDs) are chronic neurodevelopmental conditions characterized by impaired social interactions and communication skills, and restricted/repetitive behaviors and interests. Most affected children fall within one of three specific ASD diagnoses. These include: Autistic Disorder; Asperger's Disorder; and, Pervasive Developmental Disorder - Not Otherwise Specified (PDD NOS). ASDs are 3 to 4 times more common in males than females, and affect 1 in 150 children according to a recent 2007 report by the Centers for Disease Control and Prevention. (www.cdc.gov/od/oc/media/pressrel/2007/r070208.htm)

Signs include:

- decreased reciprocal social interaction
- poor use of eye contact
- speech delays/oddities
- impaired peer relations
- resistance to environmental change or change in daily routines
- stereotyped motor mannerisms (e.g. hand flapping or finger posturing)
- sensory sensitivities

Children with ASDs are also at increased risk for seizures and disturbances in gastrointestinal, sleep, behavior and motor systems.

Role of Primary Health Care Providers in Early Identification

Research has found that developmental concerns are evident in the majority of children with an ASD before age three years. To date the only empirically supported effective treatment strategies are early, intensive behavioral intervention. Recognizing the early signs of ASD can be crucial in improving prognosis. Consider these steps:

- **Listen to Families**
Parents usually have concerns when something is wrong, and they generally offer accurate and quality information that is useful to providers. Be sure to always ask parents whether they have any concerns.
- **Conduct Routine Developmental Surveillance**
Use validated developmental screening tools periodically and when there are exceptional concerns. Use the Modified Checklist for Autism in Toddlers (M-CHAT), a brief, 22-item screener for Autism Spectrum Disorders, at the 18- and 24-month well-child visits. Copy and instructions available at: <http://www.firstsigns.org/downloads/m-chat.PDF>. If a child fails 3 or more M-CHAT items, refer to one of the diagnostic centers in Washington State
- **Consider Genetic Factors**
ASDs are largely influenced by genetic factors. A child with an older sibling diagnosed with an ASD is at an increased risk between 2 and 10 times higher than that of the general population. Carefully monitor the social and language development of children who have a sibling diagnosed with ASD.
- **Refer Whenever You Suspect ASD**
 - To an autism specialist or team of specialists
 - To an audiologist to rule out a hearing impairment
 - To community-based early intervention services based, family, educational and other support resources
Lead Family Resources Coordinator 206-284-0331 if ≤ 3 yrs OR Local School District Special Education if ≥ 3 yrs.
- **Monitor**
Schedule follow-up appointments for ongoing monitoring of the child. Monitor for medical conditions associated with autism. Help the family access and use the community-based resources they desire. Provide a medical home.

RED FLAGS AND EARLY RISK MARKERS FOR ASDS

The average age of diagnosis is 3 to 4 years. Yet some children with ASDs can be diagnosed as early as 14 months of age and many studies have found that red flags are evident very early in life. **Some red flags include:**

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| <ul style="list-style-type: none"> ❖ Little or no babbling/cooing by 9-12 months ❖ No single words by 16 months of age ❖ No response when own name called ❖ Decreased to-and-fro babbling ❖ Reduced gesturing (pointing, waving bye-bye, clapping, etc) by 12 months of age | <ul style="list-style-type: none"> ❖ Lack of appropriate eye gaze ❖ No initiation or response to another person's attempts to share attention to an object or event. (e.g. follow a pointing finger) ❖ Delayed or ritualistic play skills ❖ Loss of <u>any</u> language or social skills at any age |
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Centers for Diagnostic ASD Evaluation in Washington State:

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| ◆ UNIVERSITY OF WASHINGTON, CENTER ON HUMAN DEVELOPMENT AND DISABILITY | |
| Autism Center | 206-221-6806 |
| Child Development Clinic | 206-598-3327 |
| ◆ UNIVERSITY OF WASHINGTON, AUTISM RESEARCH PROGRAM 1-800-994-9701 | |
| http://depts.washington.edu/uwautism/research/index.html
Currently enrolling families who fit study criteria.
Research clinicians can provide new diagnoses and written reports | |
| ◆ CHILDREN'S HOSPITAL AND REGIONAL MEDICAL CENTER, SEATTLE | |
| Clinical Intake Department..... | 206-987-2080 |
| www.seattlechildrens.org/health_care_professionals/access
See Ambulatory Services→ New Appointment Request Form | |
| ◆ MARY BRIDGE CHILDREN'S HOSPITAL, TACOMA | |
| Information and Resource Referral Line..... | 1-800-552-1770 |

ASD INTERNET RESOURCES

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| ◆ American Academy of Pediatrics | http://www.aap.org/healthtopics/autism.cfm |
| <ul style="list-style-type: none"> ▪ AAP policy papers for early identification and clinical management ▪ Autism: Caring for Children with ASD: A Resource Toolkit for Clinicians ▪ Many useful links and resources for providers and families | |
| ◆ Autism Speaks: ASD Video Glossary | www.autismspeaks.org |
| <ul style="list-style-type: none"> ▪ Free video clips of typical and atypical development to assist in identifying red flags for ASD | |
| ◆ Autism Alarm Fact Sheet | www.medicalhomeinfo.org |
| ◆ Autism Info Center, CDC | www.cdc.gov/ncbddd/autism/index.htm |
| ◆ National Library of Medicine, Medline plus: Autism | www.nlm.nih.gov/medlineplus/autism.html |
| ◆ NIH Autism Fact Sheet | www.nichd.nih.gov/health/topics/asd.cfm |
| ◆ WA State Medical Home Website | www.medicalhome.org/diagnoses/autism.cfm |
| ◆ Northwest Autism Center | www.nwautism.org |

FAMILY RESOURCES

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| ◆ State: | Families for Effective Autism Treatment (FEAT) of Washington | www.featwa.org |
| | Parent to Parent Support Programs of Washington | 1-800-821-5927 |
| ◆ National: | Autism Society of America | www.autism-society.org/site/PageServer |
| | Autism Speaks | www.autismspeaks.org |
| | First Signs: <i>Could it Be Autism?</i> | |
| | <i>A Parent's Guide to the First Signs and Next Steps</i> | www.firstsigns.org |



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Electronic version and copies are available by calling the CSHCN Program at 206-296-4610. Suggestions and comments are welcome.