

Autism spectrum disorder: What you need to know

What is autism spectrum disorder

Autism spectrum disorder, or ASD, is a neurodevelopmental disorder that involves challenges with social communication, restricted interests, repetitive patterns of behaviour, and unusual sensory sensitivities or interests. About 1 in 66 children in Canada are living with ASD.

ASD is a diverse and lifelong condition, but early and ongoing supports and services can enhance long-term outcomes. Interventions for children with ASD that take into account a child's unique strengths and challenges can help improve their daily functioning and quality of life for the whole family.

Early signs

ASD varies in initial presentation, developmental course and long-term needs.

Early detection and diagnosis will help you access the supports and services your child needs. Talk to your health care provider if your child misses any developmental milestones and, in particular, if:

- **At 6 months of age or older, your child:**
 - has few big smiles or other joyful expressions directed at other people,
 - has reduced eye contact,
 - has little or no babbling,
 - shows limited or no response to hearing their name, or
 - is less responsive or over-reactive to sounds (despite normal hearing) and/or other sensations.

- **At 9 months of age or older, your child:**
 - is not yet using gestures to communicate, (e.g., pointing, reaching, waving)
 - is developing repetitive behaviours (e.g., repetitive spinning, lining up objects), or
 - seems more focused on examining toys or other objects rather than playing (e.g., intense focus on one part of an object or toy).

- **At 12-18 months of age or older, your child:**
 - does not say any single words,
 - does not engage in “pretend play,” or
 - rarely or never tries to show you something or respond to something you bring to their attention.

- **At any age:**
 - your child becomes less interactive (e.g., reduced eye contact, directing your attention to share their interests with you) or communicates less (e.g., stops using words that were used regularly before), or
 - you have other concerns about your child’s communication, social, or play skills.

The assessment: What to expect

In most provinces and territories, only physicians and psychologists are able to diagnose ASD. Paediatricians and family physicians are often the first to identify suspected ASD. Depending on the professional’s background, and how challenging the diagnosis is to make, there is a range of possible approaches, including:

- A single experienced medical professional, drawing on information from multiple sources.
- A medical professional may work directly with another health care professional, such as a psychologist, to inform the diagnosis.

- In a team-based approach, health care professionals from different disciplines work together to make a diagnosis.

No matter which approach is taken, these steps should be included in the assessment:

1. Review of medical and other relevant records (e.g., school, childcare)
2. Parent/family caregiver interview. The diagnosing clinician will ask about:
 - your questions and concerns,
 - your child's early development,
 - your child's current challenges and behaviours,
 - any medical concerns, especially those more common in children with ASD (e.g., sleep difficulties, eating habits),
 - others in the immediate or extended family with developmental challenges, and
 - your and your child's priorities, strengths, needs, and current supports as a family.
3. Assessment for ASD
 - The physician and/or other member(s) of the assessment team will observe and interact with your child to directly assess their social and communication skills, and patterns of behaviour.
 - They may want to observe your child in other settings (such as at home, in daycare) or this may be done exclusively in the clinic.
 - Specific diagnostic tools may be used.
4. Comprehensive physical evaluation to rule out other disorders that could look like ASD, and to evaluate for other conditions.
5. Needs-based evaluation to help with recommendations for interventions/therapies
 - Clinician(s) will assess your child's challenges and strengths to develop a general plan individualized to your child and family.

- Your child's ASD management plan should take into account your child's and your family's concerns, strengths, values, and priorities.
- In many cases, the specific recommendations about a child's therapy needs may not be determined at the diagnostic assessment; rather, the diagnosing professional may make general recommendations and the service provider (e.g., school, behaviour analyst, speech-language pathologist) will make more specific recommendations.

6. You should receive a report that is easy to understand and includes:

- a clear statement of whether or not your child has ASD,
- a description of how the diagnosis was made,
- a description of your child's current behaviours and functioning as well as earlier developmental history that helped inform the diagnosis of ASD,
- any other conditions that were identified or that need further evaluation,
- an assessment of your child's current functioning,
- recommended supports including: referral for services, individualized recommendations for interventions, resources for parents and siblings, and
- a follow-up plan.

After the diagnosis

Children diagnosed with ASD should receive individualized medical, behavioural and developmental interventions, and family supports, including on how to navigate the service system. Goals of treatment are to improve social, language, and behavioural challenges and to address interfering behaviours.

What treatments are available?

Treatments for ASD should target the child's challenges and draw on their strengths. This often requires coordination between a number of health professionals, therapists and educators. These interventions might include:

- behavioural interventions. Services vary across the country so available treatments will depend on which province you're in. Autism Speaks Canada has a list of

funded programs broken down by province,

- speech-language therapy to improve verbal, non-verbal, and social communication skills,
- occupational therapy to address challenges in daily living and to help acquire play and self-care skills, and/or
- physiotherapy to help improve endurance, strength, balance and coordination.

When behavioural strategies have already been implemented and appropriate changes to a child's environment have been made, medications may be used in combination with other strategies to address behavioural symptoms and mental health disorders in children with ASD. Medications require careful monitoring with your child's physician.

Are there other ways to treat ASD?

Several products and treatments are advertised as treatments for ASD. While some may benefit certain patients, others are expensive, ineffective, and can be harmful or even fatal.

Autism does not have a cure: If a product makes a claim that seems too good to be true, it probably is. For more information on how to assess whether online information is credible, check out 'A parent's guide to health information on the Internet'. **Always consult your physician before trying any therapy.**

The following therapies **do not** treat symptoms of ASD and **can pose a risk** to your child:

- Hyperbaric oxygen therapy
- Chelation
- Certain chiropractic practices, such as cervical spine manipulation
- Secretin
- Bleach- or chlorine-based solutions
- Antibiotics and antifungals
- Facilitated communication

The following therapies are considered safe, but **do not yet have strong evidence** that they work:

- Vitamins B6, C, D, and Mg
- Omega-3 supplements
- Dietary interventions, such as gluten- and/or casein-free diets

The following therapies are considered safe and **may benefit some individuals** with some ASD:

- Massage therapy
- Music and expressive therapies
- Therapeutic horse-back riding and other types of animal/pet therapy

Additional challenges

There are several physical health and mental health conditions that are especially common in people with ASD. These include anxiety, ADHD, depression, sleep disorders, eating disorders, and gastrointestinal symptoms such as constipation. Special attention to dental care and nutrition is also needed. Your primary care provider can help monitor for and manage these conditions, and will refer to specialists as necessary.

Self-care and family support

Awareness and understanding of ASD has increased dramatically over the past several years. Children with ASD often grow up to live fulfilling, independent lives. Getting the correct diagnosis is the first step, and you will be your child's greatest champion in the coming years. Joining a parent support group or attending recreational programs are great ways to meet other families and engage your child in meaningful activities.

Many parents of children with ASD have increased levels of stress and financial difficulties. Taking care of yourself and finding the support you need will help both you and your child in the long run. Local autism societies are a wealth of information and often coordinate support groups for families. Parents often play leadership roles within these organizations, and can help families who are just learning about the diagnosis and service system. Talk to your physician if you are feeling overwhelmed or discouraged, and check out the links below for more information and resources.

Additional resources

- Sesame Street and Autism: See amazing in all children
(<https://autism.sesamestreet.org/>)
- Autism Canada
(<https://autismcanada.org/#home-row-1>)
- Autism Speaks Canada
(<https://www.autismspeaks.ca/>)
- Autism Spectrum Disorder (Health Canada)
(<https://www.canada.ca/en/public-health/services/diseases/autism-spectrum-disorder-asd.html>)

Reviewed by the following CPS committees

- Autism Spectrum Disorder Guidelines Task Force

Last updated: February 2020



© 2024 – Canadian Paediatric Society
cps.ca/en/ – info@cps.ca

Available at www.caringforkids.cps.ca