


Asperger's Syndrome



DSM-IV DIAGNOSTIC CRITERIA FOR 299.80 ASPERGER'S DISORDER

(A) Qualitative impairment in social interaction, as manifested by at least two of the following:

- 1. marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
- 2. failure to develop peer relationships appropriate to developmental level
- 3. a lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g., by a lack of showing, bringing, or pointing out objects of interest to other people)
- 4. lack of social or emotional reciprocity.

(B) Restricted repetitive and stereotyped patterns of behavior, interests, and activities, as manifested by at least one of the following:

- 1. encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
- 2. apparently inflexible adherence to specific, non-functional routines or rituals
- 3. stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
- 4. persistent preoccupation with parts of objects

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(C) The disturbance causes clinically significant impairment in social, occupational, or other important areas of functioning.

(D) There is no clinically significant general delay in language (e.g., single words used by age 2 years, communicative phrases used by age 3 years)

(E) There is no clinically significant delay in cognitive development or in the development of age-appropriate self-help skills, adaptive behavior (other than in social interaction), and curiosity about the environment in childhood.

(F) Criteria are not met for another specific Pervasive Developmental Disorder or Schizophrenia.

Signs & Symptoms

* Social Skills

- Lacks social skills.
- Has problems making friends.
- Seems unaware of others' feelings.
- Unable to carry on conversations.

* Communication Skills

- Cannot start an appropriate conversation or keep one going
- May have problems with nonverbal communication or body language.
- Avoids eye contact.
- Does not use or understand hand gestures
- Does not change facial expressions (or inappropriate) when talking with others
- Does not understand other people's facial expressions.
- May have a short attention span.
- Repeats a word or phrase over and over again.
- Words may be very formal and loud.

* Behavior

- › Difficulty with gross motor skills
- › Does not like changes in every-day routines.
- › Only interested in a few things.
- › May have obsessive behavior.
 - › Collects categories of things such as rocks or paper clips.
 - › Knows categories of information like Latin names of flowers or football statistics.
- › May have problems with reading, writing or math skills.
- › Lacks organization skills.
- › Repeats certain behaviors over and over again.

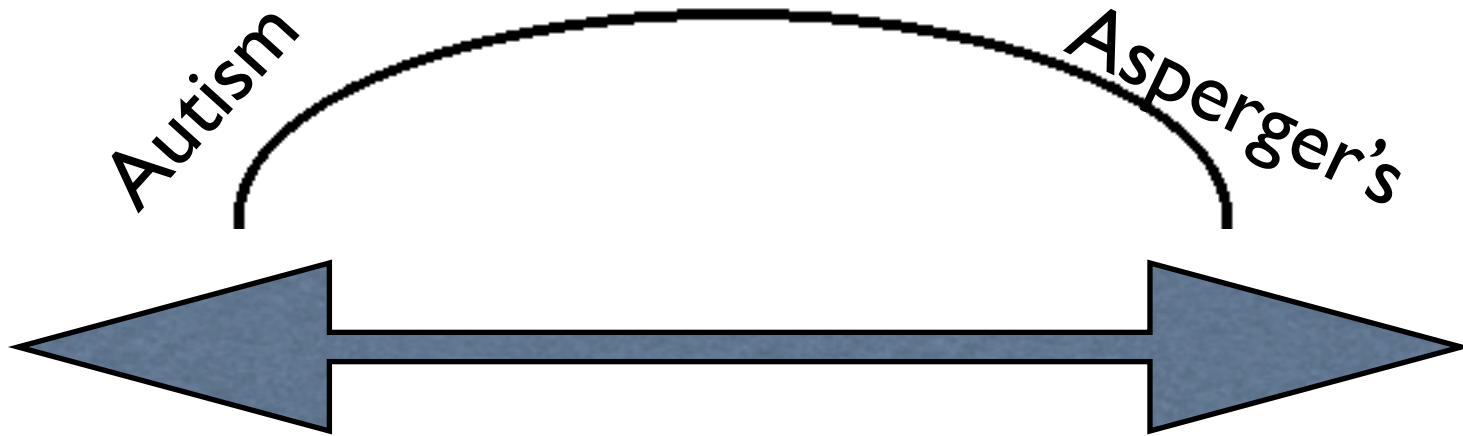
What is Asperger's?

A difference in cognitive and social-emotional skills that creates difficulty for an individual to understand their world and how to interact with it.

History

- Hans Asperger - 1944 Autistic Psychopathology
- Lorna Wing & others labeled it as Asperger's syndrome in the 1970s & 80s
- Included in DSM-IV in 1994

Pervasive Developmental Disorders



Causes of Asperger's

- Neurobehavioral disorder - neurological dysfunction in the way the brain processes information.
- Medial frontal and temporal lobe dysfunction. Some evidence for right hemisphere cortical dysfunction (similar to nonverbal ld).
- Genetics - high incidence of inheritance, particularly with fathers and other first and second-degree relatives. Some indications of fragile sites on X chromosome and chromosome 2.
- Difficulty with pre, peri and postnatal conditions that might have caused minimal brain damage. (toxemia and other infections, older mothers, etc.)
- Asperger's syndrome can occur with other disabilities. (attention deficit disorder, cerebral palsy, other learning disabilities)

Cognitive Flexibility

- Executive functioning skills are often impaired.
- Difficulty making transitions.
- Highly sensitive to environmental stressors.
- Eccentric preoccupations with special interests, often one subject.
- Can miss general gestalt, focus on details.
- Problems generalizing and applying skills and info.
- Problem solving skills erratic.
- Attention shifting and multitasking difficult.
- Organizational problems evident.

Executive Functioning

Higher order thinking skills that govern language, cognitive and motor processes

- > Formulate plans
- > Initiate activities
- > Follow through
- > Delay action when needed
- > Operate on multiple levels
- > Integrate and generalize information

Poor Motor Coordination

- Between 50% and 90% of AS have motor coordination problems
- Both gross and fine motor skills affected
 - puppet like gait
 - balance
 - manual dexterity
 - handwriting
 - lax joints
 - rhythm

Sensory Sensitivity

- Estimate 40% AS have some abnormality of sensory sensitivity
- Most common - Sound and Touch
- Affect ability to attend, concentrate and learn

Emotional Vulnerability

- Adolescents regular education may be compromised due to a lack of resources to cope
- Adolescents may be prone to depression
- Temper outbursts called “Meltdowns” are common responses to stress and frustration
- Can have low self-esteem, are often self-critical, and unable to tolerate making mistakes

Impairment in Social Interactions

- “Small group conversations make my nerves feel like they are wearing stilts on an icy pavement.”
- People with AS present with an inability to understand the complex rules of social interactions
- May want to be a part of the “neurotypical world, but don’t know how

Strategies for Teaching Pro-Social Skills

- Teach the “Hidden Curriculum”
- Teach social communication and cognition
- Create situations that pull on academic strengths
- Direct teaching on “How to make friend”
- Teach empathy and the understanding of others views

Pragmatic/Communication Skills

- What is Pragmatics?
- Linguistic versus pragmatic-(communicative) competence
- Pragmatic Language Functions
- Pragmatic Language Skills
- Theory of Mind

Academic Difficulties

- Comprehension
- Abstract thought
- Social cognition
- Reading comprehension
- Organization
- Inferential thinking and judgements

Strategies for Academic Difficulties

- Concrete presentation
- Break down tasks (especially written assignments) into smaller units
- Create a predictable environment
- Carefully plan group dynamics and recognize social interaction issues
- Graphic organizers
- Clear expectations
- Provide specific examples of assignments
- Explain non-literal language

Asperger's and Nonverbal Learning Disabilities

Similarities and Differences

- Processing of information
- Social interaction
- Language
- Learning environment

Resources

<http://www.udel.edu/bkirby/asperger/aswhatisit.html>

[http://www.agre.org/program/criteria.cfm?](http://www.agre.org/program/criteria.cfm?do=program#aspergers)

[do=program#aspergers](http://www.agre.org/program/criteria.cfm?do=program#aspergers)

<http://www.mental-health-matters.com/disorders/>

[dis_details.php?disID=10](http://www.mental-health-matters.com/disorders/dis_details.php?disID=10)

<http://kidshealth.org/parent/medical/brain/asperger.html>

<http://www.vh.org/pediatric/patient/pediatrics/cqqa/>

[aspergersyndrome.html](http://www.vh.org/pediatric/patient/pediatrics/cqqa/aspergersyndrome.html)

<http://www.aspergersyndrome.org/>

<http://www.tonyattwood.com.au/>