

# When It's Not Just Autism... ADHD, Anxiety, and Other Diagnoses

November 5, 2022

Dr. Barbara Kaminski

Green Box ABA, PLLC



# Overview

- Introduction
- ASD
- Frequently co-occurring diagnoses
- Deeper dives – Anxiety and ADHD
- Wrap up

# DSM Symptoms of Autism

## Social Communication

- Language delays
- Atypical or absent eye contact
- Difficulty reading facial expressions, gestures, and emotions in others
- Atypical vocal characteristics – monotone, flat, exaggerated or inappropriate voice
- Difficulty with perspective taking, understanding relationships
- Difficulty with conversation
- Lack of interest in others

## Repetitive patterns of behavior, restricted interests and resistance to change

- Preference for objects that may be used in a nonplay stereotyped manner or for self stimulation
- Rigidity & ritualistic habits (eg eating the same food everyday)
- Restricted interests - unusually intense interest with an object or a topic
- Resistance to change

# Co-occurring Diagnoses

Medical or psychiatric conditions that occur alongside autism

Nearly three-quarters of autistic children are diagnosed with a co-occurring condition.

Can appear at any time during a child's development (some might not appear until later in adolescence or adulthood)

Affect how autism therapies and supports help your child. That's why it's important to identify and diagnose the conditions and manage them separately

# Anxiety

Symptoms: tension, restlessness, hyperactivity, worry and fear

For autistic children:

- asking questions over and over again
- hurting themselves
- having trouble getting to sleep

40-60% of autistic children

Social anxiety resulting from a style of interacting that can make socializing difficult

Treatment/therapies:

- Cognitive behavior therapy
- Relaxation techniques
- Medication

# ADHD

Symptoms: difficulty with thinking before they act, sitting still, and focusing

Autism and ADHD share some common characteristics

30-80% meet the criteria for an ADHD diagnosis

ADHD creates barriers to learning

Treatment/therapies:

- Behavioral Treatments
- Relaxation techniques
- Medication

# Clinical Depression

Symptoms: low or cranky mood, poor sleep and appetite, irritability and a loss of motivation

Autistic people might be more likely to have symptoms of depression if they also have more severe characteristics of autism, are older and have higher IQ

Can be common in autistic children, especially among children who are aware that they're different from others and who experience bullying

Can affect motivation and reinforcement

Treatment/therapies:

- Behavioral Treatments (CBT and others)
- Medication

# Down Syndrome

Symptoms: characteristic facial features, developmental delays, intellectual disability, poor muscle tone, potential hearing and vision problems and congenital heart defects

Most people have 23 pairs of chromosomes. People with Down syndrome (also called Trisomy 21) have an extra 21st chromosome

Up to 40% of children with Down syndrome are also autistic

When along with autism, affects speed of learning, motivation, retention

## Treatment/therapies:

- Behavioral Therapy
- The health problems associated with Down syndrome can be treated, usually very well

# Gastrointestinal Symptoms

Symptoms: chronic constipation, abdominal pain, diarrhea, fecal incontinence, gastro-intestinal reflux disease (GORD), stomach bloating

Not clear why autistic children have relatively high rates of GI symptoms, but it might be because of altered gut bacteria, increased gut permeability, longer food transit time through the gut, or low fibre intake

Autistic children and children with developmental delays or disabilities appear to have more gastrointestinal symptoms than other children

There's no evidence to support the general use of a gluten-free or casein-free diet. However, some autistic children might have gluten intolerance, or other food sensitivities, allergies or intolerances. If this is the case, specific diets can help

## Treatment/therapies:

- Medical evaluation needed
- Treatment depends on medical diagnoses but can include altered diet, stool softeners, laxatives, increased water intake

# Intellectual Disability

Symptoms: trouble with verbal skills – like talking, listening and understanding – and generally slower learning of many skills

Autistic children with intellectual disability might have uneven skills, so there might be some things that they're quite good at and others they find hard

20-30% of children with autism, with another 20-25% having borderline intellectual disability with an IQ of 71-85

Early intervention and education can support people with intellectual disability and their families

## Treatment/therapies:

- Behavioral Therapy focused on learning and social skills

# Speech/Language Delay or Disorder

Language delay is when young children have difficulties understanding and/or using spoken language

A speech (sound) disorder is when children have difficulty pronouncing the sounds in words

Autistic children have particular ways of communicating with others. They might also have difficulties with other aspects of language, but their speech development is the least likely to be affected. Of autistic children, 25-50% don't communicate verbally or use only use a few words

Not all children who have language delay have problems with speech

Treatment/therapies:

- Behavioral Therapy
- Speech Therapy

# Motor Difficulties

Symptoms: Difficulties with fine or gross motor skills, motor skills involving the mouth

Muscle weakness often causes these difficulties

About 80% of autistic children have some form of motor difficulty

Some children have difficulties with coordination even though their muscles are fine

Treatment/therapies:

- Behavioral Therapy
- Occupational Therapy
- Physical Therapy

# Seizures and Epilepsy

When a child has a seizure, there's usually a temporary period of unconsciousness, a body convulsion, unusual movements or staring spells

It can be hard to spot epilepsy in autistic children because some seizure symptoms can be similar to some autism characteristics, like failing to respond to your name or doing repetitive, tic-like behaviors

Of autistic people, 20-30% have epilepsy. Seizures are most common in children under 5 years and in teenagers

Autistic people with moderate to severe intellectual disability, autistic people with neurological conditions (for example, cerebral palsy), or children who show regression in their skills are more likely to develop epilepsy

## Treatment/therapies:

- Anti-epileptic medicine
- Getting enough sleep
- Avoiding stressful situations

# Sleep Problems

Symptoms: trouble falling asleep, trouble staying asleep, night terrors, sleep walking

Treatment usually involves changes in routines

About two-thirds of autistic children might have sleep problems at some time

Limit caffeine  
Increase exercise  
Limit screens before bedtime  
Have a bedtime routine

Treatment/therapies:

- Behavioral Treatments
- Medication (usually only recommended if behavior therapy is not effective)

# Tourette and Tic Disorders

Tics are sudden, repetitive and uncontrollable movements and sounds

Tourette disorder is when children have movement tics and sound tics for longer than a year

About 5% of autistic children have Tourette disorder and another 9-12% have tics of some kind

Education and reassurance can help children understand the tics and learn strategies to manage them

## Treatment/therapies:

- Behavioral Treatments
- Medication (usually only recommended if behavior therapy is not effective)

# Deeper Dive: Anxiety



# OVERVIEW

Autism and anxiety can have similar symptoms, such as difficulties in social situations and with routine changes.

Autism is neurodevelopmental, while anxiety is a mental health condition. Research indicates that autistic people are more prone to having anxiety than the general population.

Autistic people who may have anxiety should receive a formal evaluation by a mental health professional.

Utilizing coping mechanisms and services, like mindfulness, CBT, ABA, and social skills training, can help make anxiety more manageable.

# Challenge of recognizing anxiety in children with ASD



overlapping symptomatology and altered presentations of symptoms



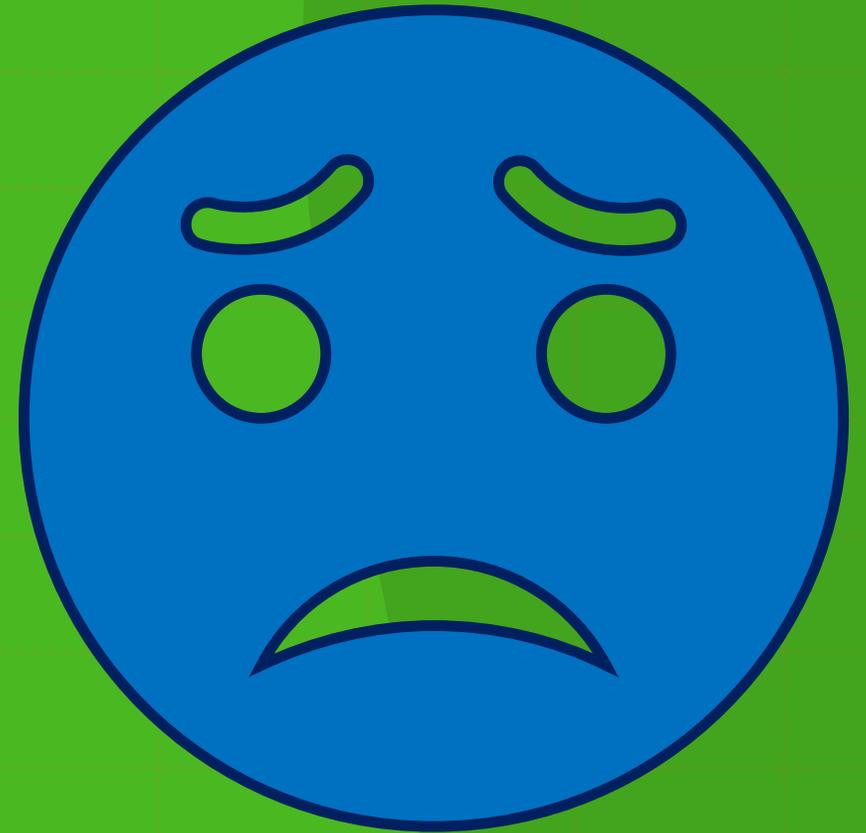
The minimally verbal may be unable to report their internal states (eg worry) and instead demonstrate anxiety through disruptive behaviors



others may be verbally fluent but present with difficulties in understanding ones' own emotions and expressing these emotions

# Symptoms of Anxiety

- Racing heart or muscle tension
- Sweating
- Crying, throwing tantrums, and yelling
- Stomachaches
- Repetitive behaviors, such as rocking, pacing, or tearing paper
- Trouble with concentration and memory
- Fatigue
- Avoiding certain situations, such as crossing the street
- Irritability
- Muscle tension
- Reduced amount or quality of sleep



# Specific Phobia

an intense, irrational fear of something that poses little or no actual danger

may arise early in the course of ASD because of over responsiveness to sensory stimulation, such as a loud environment

specific phobias usually involve highly unusual stimuli (eg advertisement jingles, balloons popping, vacuum cleaners, toilet flushing, alarms at school..), but may also present fears (eg of the dark, insects, needles) that are typical of developing youth

# Obsessive Compulsive Disorder

characterized by unwanted and intrusive thoughts and consequent compulsive behaviors

identifying OCD is important because while the engagement in repetitive behaviors which is typical of ASD is unrelated to distress

compulsions are performed as a coping mechanism to relieve anxiety

# Social Anxiety

intense anxiety or fear of being negatively evaluated in a social or performance situation

social communication impairment may underline the development of social anxiety

Impairment leads to avoidance of social situations, therefore limiting the patient's opportunities to practice social skills, and may predispose the individual to negative reactions from peers and even bullying

# Separation Anxiety

anxiety that arise when child has to separate from attachment figures

Is not limited to young children – for example, may be experienced at the moment of leaving the family for college

social impairment may evoke reactions that in turn may strengthen avoidance behavior in the child

# With ASD, common triggers

separation from  
a loved one or  
caregiver

transitioning to  
new  
environments

nervousness or  
fear over  
meeting new  
people

change to a  
routine

social situations

overwhelming  
environments

During ABA treatment for autism, we can't treat anxiety but we can help

Flexibility

Social  
skills

Emotional  
regulation

# Some things you can do at home



ASKING FOR A  
"BREAK" FROM  
THE SITUATION



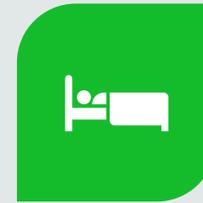
BREATHING



BEING ACTIVE;  
GOING FOR A  
WALK



GETTING A DRINK  
OF WATER



GETTING  
ENOUGH SLEEP



EATING WELL

# Deeper Dive: ADHD



# ADHD versus Autism

- A neurodevelopmental condition that makes it hard for kids to concentrate, pay attention, sit still, and curb impulsivity
- A range of neurodevelopmental conditions that causes challenges with social skills, communication, and thinking. Repetitive behaviors are also part of autism spectrum disorder (ASD)

# ADHD Symptoms

- Seems forgetful, easily distracted or daydreamy
- Appears not to listen and has trouble following directions
- Is prone to tantrums and meltdowns due to frustration or lack of impulse control
- Struggles with organization and completing tasks
- Has trouble staying on task unless an activity is very enjoyable
- Struggles with social skills
- Struggles to sit still during quiet activities, such as mealtimes or during independent work time at school
- Has trouble waiting their turn and being patient
- Is constantly “on the go” or moving; fidgets and needs to pick up and fiddle with everything
- Interrupts people, blurts things out inappropriately, and may struggle with non-verbal cues
- Acts without thinking and may not understand the consequences of their actions
- May overreact to sensory input, like the way things sound, smell, taste, look, or feel
- Plays roughly and takes physical risks

# ADHD versus Autism

- Trouble following social rules can make it hard to make and keep friends. Frequent negative feedback for acting out or not paying attention can impact self-esteem and motivation, making a child feel he's "bad" or "no good."
- The main struggles of ASD involve social understanding, communication and repetitive routines or behaviors. Many kids with ASD — even those without significant cognitive challenges — have trouble making friends, understanding how to relate to other people and making sense of social cues.

# What you can do - ADHD

1

Set clear rules and expectations for your child

2

Create daily routines to provide structure

3

Break directions and tasks into smaller chunks

4

Use visual prompts like checklists, picture schedules and sticky notes

5

Allow for flexibility during homework time for brain and movement breaks

6

Create an organized homework and study area

7

Give warning about changes in the schedule and explain what to expect in new situations.

During ABA autism treatment, we can't treat ADHD but some areas we work on can help

Following  
directions

Social  
skills

Emotional  
regulation

## Adjusting treatment

If you suspect that your child has a co-occurring condition, it is important to speak with your developmental pediatrician

Knowing about the other diagnosis helps us to make adjustments to how we work, to take the challenges of that condition into account