

New guidelines employ a team approach to autism diagnosis and care

March 5 2014, by Karen N. Peart

Improving diagnosis and treatment for individuals with autism has been the focus of a growing body of research. New information from these studies led the American Academy of Child and Adolescent Psychiatry to revise key parameters for evaluating and treating autism. Researchers led by Yale Child Study Center director Dr. Fred Volkmar have published the new practice parameters in the Feb. issue of the *Journal of the American Academy of Child and Adolescent Psychiatry*.

"Early diagnosis of children with autism spectrum disorders means treatments will be introduced that lead to more positive outcomes for children," said Volkmar the Irving B. Harris Professor of Psychiatry, Pediatrics, and Psychology at the Yale School of Medicine.

According to the [parameters](#), clinicians should routinely look for symptoms of [autism spectrum disorder](#) in young children undergoing developmental assessments, and in all psychiatric evaluations. If significant symptoms are detected, clinicians should then coordinate a careful medical, psychological, and communication evaluation. These evaluations should differentiate between autism and a variety of developmental and other disorders, as well as intellectual and behavioral disabilities.

"Our goal was advocacy for individuals with autism and their families, and to ensure that services are coordinated across clinical care," said Volkmar. "Our field is changing rapidly, and these parameters are meant to promote effective care and move professional medical methods closer

to current practices."

Volkmar and his co-authors reviewed abstracts from 9,481 research articles on autism that were published between 1991 and 2013. They then fully studied 186 of those articles based on their quality and ability to be applied more generally.

"Treatment should involve a team approach," said Volkmar, who notes that under these treatment parameters, psychiatrists will closely coordinate diagnosis and treatment with teachers, behavioral psychologists, and speech and language pathologists, and look for commonly occurring conditions.

A key addition to the new parameters is a focus on how clinicians should address the use of non-traditional therapies, like chelation and secretin. Clinicians are urged to ask families if they are using alternative/complementary treatments and to discuss the therapies' risks and potential benefits. Volkmar estimates that about 90% of parents of children with [autism](#) use some kind of alternative or complementary therapies. "It is important to encourage a discussion with parents about the potential harms of some of these therapies, as well as to educate them about evidence that supports what they're doing."

More information: *Journal of the American Academy of Child & Adolescent Psychiatry*: www.jaacap.com/article/S0890-8...
 [\(13\)00819-8/fulltext](http://www.jaacap.com/article/S0890-8...)

Provided by Yale University

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