5 tests you should not order for a child with autism

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(HealthDay)—A leading medical group is offering testing guidelines for

children with autistic behaviors.

The American Academy of Pediatrics Council on Environmental Health emphasized that certain measurements to test for exposure to chemicals are not helpful to guide treatment. The council pointed out that just because a chemical is found in the body doesn't mean it will cause harm.

The council offered a list of five things doctors and patients should question in evaluating tests for kids with behavioral or developmental disorders, including autism. They include:

Tests for metals and minerals: Routine testing for metals and minerals may be harmful if these results guide treatment, the council said, because exposures have not been conclusively linked to the development of autistic behaviors.

The council referred to certain preservatives used in multidose vaccine vials—thimerosal and ethylmercury—that have been blamed for the increase in autism rates without proof of a causative link.

"As symptoms of autism occur early in childhood and, possibly, months to years after any potential exposure may have resulted in neurotoxicity, the likelihood of continued presence of such toxicant is low," the council said.

But parents may be desperate for answers and seek out alternative sources that recommend laboratory analysis for minerals and metals, the council said. "Finding an abnormal result has led to ill-advised treatments and death in some patients," the council explained in a news release.

Hair analyses: The council also advised against ordering hair analyses for environmental toxins in children with behavioral or developmental

disorders, saying these have no scientific basis.

Mold testing: The council said mold sensitivity testing should not be ordered for patients without clear allergy or asthma symptoms, particularly those with chronic fatigue, joint stiffness, mental ('cognitive') problems and affective disorders.

For those with allergy or asthma symptoms who have not responded to efforts to reduce allergen exposures, mold sensitivity testing may be performed by an allergist or pulmonologist, but should not routinely be performed in the primary care setting, the council added.

"Mold can cause sensitization and clinical disease. Skin prick and in vitro tests can effectively identify patients who are sensitized to molds, although this does not always translate to clinical disease. Results of these tests must be interpreted in the context of the patient's clinical presentation," the council said.

Urine testing: The council also advised against ordering 'chelation challenge' urinary analysis for kids with suspected lead poisoning. Evidence exists that it is no more valuable than a standard blood lead level test, and it may be dangerous.

Blood tests: With the exception of certain heavy metals, such as lead, measurements of environmental chemicals in a person's blood or urine should not be used to make clinical decisions, the council said.

"It is virtually impossible for people not to come into contact with hundreds of chemicals each day—whether those chemicals are in our food, air, water, soil, dust, or the products we use. And it is even more difficult for people to know whether those chemicals are harmful to their health or not," the council said. "Presence does not mean toxicity."

Separate studies are needed to determine whether blood or urine levels result in disease. Pediatric Environmental Health Specialty Units can provide additional information about indications, measurement, and interpretation of environmental chemicals in blood or urine, the council suggested.

More information: The U.S. Centers for Disease Control and Prevention has more about autism spectrum disorder.