

Treating specific symptoms of autism or ADHD can help children, even without a diagnosis

July 14 2021, by Kaitlyn Parks and Ryan Stevenson



Credit: AI-generated image ([disclaimer](#))

For individuals experiencing mental health difficulties, early access to support services and effective intervention [can be life-altering](#). To access these services through the health-care system, however, most institutions require an official diagnosis.

But what about those who have symptoms, but don't quite meet the criteria for a mental [health](#) diagnosis? These individuals may be overlooked by the health-care system, despite symptoms that may be treatable.

In most cases, a diagnosis must meet the criteria in the [Diagnostic and Statistical Manual of Mental Health Disorders](#) (DSM-5). For example, a child suspected to have [attention deficit hyperactivity disorder](#) (ADHD) must have [six or more symptoms](#) that affect their quality of functioning. Some examples of these symptoms include:

- Often fidgets with or taps hands or feet, or squirms in seat.
- Often has trouble organizing tasks or activities.
- Often interrupts or intrudes on others.

This checklist serves as a line in the sand. If six boxes are checked, a diagnosis can be given but if any fewer are checked, no diagnosis can be given. Individuals in the latter category are often unable to access services, even though they would likely benefit from them.

On top of this, mental health conditions are not always clear cut and easy to identify. Two children with the same diagnosis could experience very different symptoms, and their daily lives may be affected in very different ways. To complicate things further, factors like [gender, age](#) or [having more than one diagnosis](#) can impact how symptoms present as well as whether (and how quickly) a diagnosis can be made.

Since symptoms can vary from person to person, there is no one-size-fits-all treatment plan. For example, some children with ADHD may benefit from programs aimed at improving language, while others may benefit from those focusing on attention. This variability isn't restricted to ADHD and is present in most if not all mental health conditions.

Symptoms and functioning vs. diagnoses

These factors have led some researchers to think of mental health difficulties in terms of specific symptoms as opposed to diagnostic categories. For example, one could focus on attention difficulties regardless of whether an individual had ADHD, a different diagnosis or even no diagnosis. The most widely used framework to do this is the [research domain criteria](#) or RDoC approach, where symptoms rather than diagnostic labels are used to understand an individual's mental health difficulties.

As developmental researchers, we use the RDoC approach to look at how symptoms of ADHD and autism spectrum disorder (ASD) in the general population can impact functioning. In two recent studies, we found that those with increased ADHD and ASD symptoms (but no official diagnosis) had more [learning](#), [language and social communication](#) difficulties.

These findings tell us that we do not need someone to be functioning at the lowest level in order to benefit from treatment. Those with varying levels of these disorders who are not yet diagnosed can also benefit.

Fully adopting an RDoC approach for mental health care would require a complete overhaul to the diagnostic system, and in reality, is not likely to happen any time soon. However, taking this approach in terms of research and support systems could lead to an immediate improvement for those presenting with symptoms.

This would include individuals who either fall short of a diagnosis, don't fall squarely into a specific diagnosis, or are waiting for an evaluation. And in Canada, the time from referral to evaluation of diagnosis can take [up to a year](#). The good news is that there are resources available and actions parents can take to provide support that may help with specific

difficulties.

- Gather information: You know your child best. A doctor is only able to pick up on the behaviors observed during the visit. Advocate for your child and let doctors and specialists know how they interact at home, school and within the community.
- Learning programs: There may be programs within your community that support [early learning](#) and help children develop important [language and social skills](#) regardless of diagnostic status. These programs may also be useful in helping your child [transition into the school system](#). Many of these programs include [speech language](#) or [occupational](#) therapists who can help address specific difficulties.
- Participate in research: As [developmental](#) and [language](#) researchers, we administer a broad range of assessments. By participating in research, you may gain a better understanding of your child's mental health and how their difficulties might be impacting their functioning. Participants are often compensated for taking part in our research

We believe the best way to understand mental health difficulties is to move beyond the simple binary choice of having a [diagnosis](#) or not, and towards focusing on the varying degrees of symptoms across the broader population. Taking this approach in terms of research and [support systems](#) could lead to improvements in individualized, targeted care and to better quality of life for anyone experiencing [mental health difficulties](#).

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