

# Autism

Autism Spectrum Disorder (ASD) is a developmental disorder that affects communication and behavior. Although autism can be diagnosed at any age, it is said to be a “developmental disorder” because symptoms generally appear in the first two years of life.

Typically, a person with ASD will exhibit:

- Limited interests
- Problems communicating and interacting with others
- Repetitive behaviors
- Symptoms that impair a person’s ability to function in school, work and other areas of life, including:
  - An inability to understand or predict other people’s actions
  - Becoming upset by slight changes in a routine
  - Difficulties with conversation
  - Facial expressions, movements and gestures that do not match what is being said
  - Failure to notice social cues in others (e.g., boredom, anger, disinterest)
  - Focused interests, such as with moving objects or parts of objects
  - Little enjoyment in activities
  - Little or inconsistent eye contact
  - Monotone or robotic tone of voice
  - Not looking at or listening to people
  - Not responding when called
  - Repetition of behaviors, words or phrases
  - Sensitivity to sensory input such as light, noise, smells, clothing or temperature

Individuals diagnosed with ASD often:

- Are strong visual and auditory learners
- Excel in math, science, music or art
- Learn things in detail
- Remember information for long periods of time

Symptoms and their severity vary. Children with autism often have high intellect, so symptoms of ASD sometimes are not evident until the child is in school and social deficiencies become more apparent.

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Early diagnosis and treatment can improve a person's symptoms and level of functioning. The American Academy of Pediatrics recommends that all children be screened for autism at their 18- and 24-month well-child checkups with ongoing monitoring throughout childhood.

Providers should refer for specialized services and treatment at the time of diagnosis to ensure early intervention.

## Screening tools

There are several tools to screen for possible Autism Spectrum Disorder:

- **Modified Checklist for Autism in Toddlers—Revised with follow-up (M-CHAT-R/F)**—This is the most common screening tool used in pediatric offices and is the tool preferred by the American Academy of Pediatrics. It is a 23-point questionnaire completed by the parent/caregiver and assists with identifying early concerns about language delay, behaviors and additional developmental risks that may need further evaluation and testing.

### Access the Modified Checklist for Autism in Toddlers →

- **Ages and Stages Questionnaires SE-2 (ASQ-SE2)**—This questionnaire screens for social and emotional issues in children 6 years old and younger. This instrument screens in seven key social and emotional areas: self-regulation, compliance, adaptive functioning, autonomy, affect, social communication and interaction with people.

### Ages and Stages Questionnaires SE-2 (ASQ-SE2) →

- **Communication and Symbolic Behavior Scales (CSBS)**—Designed to assess infants, toddlers and preschoolers at risk of communication delays. The scale measures the following seven language predictors: emotion and use of eye gaze, use of communication, use of gestures, use of sounds, use of words, understanding words and use of objects.

### Communication and Symbolic Behavior Scales (CSBS) →

## Treatment

Since ASD is a developmental disorder, developmental delays may be observed prior to receiving an ASD diagnosis. The American Academy of Pediatrics (AAP) recommends that specialized services and full evaluation begin as soon as the delays are noted.

Specialists who can evaluate for ASD include:

- Developmental-behavioral pediatrician
- Neurodevelopmental pediatrician
- Neurologist
- Psychiatrist
- Psychologist

Treatment and services can include:

- Behavioral training/Applied Behavioral Analysis (ABA)
- Inclusive leisure activities
- Individual education plan for school-based services
- Occupational therapy
- Physical therapy
- Respite care
- Social skills training
- Speech therapy

Since autism is a lifetime chronic condition, a collaborative approach is recommended. Providers should be prepared to:

- Assist with referrals for identified services
- Participate in multi-disciplinary teams on behalf of the child
- Educate parents/caregivers

Providers should screen for and educate on co-occurring conditions including but not limited to:

- Anxiety
- Attention deficit hyperactivity disorder
- Feeding problems
- Obesity
- Seizures
- Sleep disorders

## References

“Autism Spectrum Disorder,” American Academy of Pediatrics (AAP), accessed Nov. 21, 2022, <https://www.aap.org/en/patient-care/autism>.

“Autism Spectrum Disorder,” Centers for Disease Control and Prevention (CDC), accessed Nov. 21, 2022, <https://www.cdc.gov/ncbddd/autism/index.html>.

“Autism & Safety Facts,” National Autism Association, accessed Nov. 21, 2022, <https://nationalautismassociation.org/resources/autism-safety-facts/>.

“Autism Spectrum Disorder,” National Institute for Mental Health (NIMH), accessed Nov. 21, 2022, <https://www.nimh.nih.gov/health/topics/autism-spectrum-disorders-asd>.

Clinical Practice Guidelines

Clinical Practice Guidelines for Autism Spectrum Disorder

January, 2019, NIH, National Library of Medicine

Executive Summary: Identification, Evaluation, and Management of Children With Autism Spectrum Disorder, January, 2020, American Academy of Pediatrics (AAP)