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Individuation of children in Autism Spectrum : study on a sample of 1161 patients

evalued among May 2012 and January 2015 at the Multidisciplinary Unit in the country of Vasto (Italy) (ASL2 Lanciano-Vasto-Chieti, Abruzzo) .

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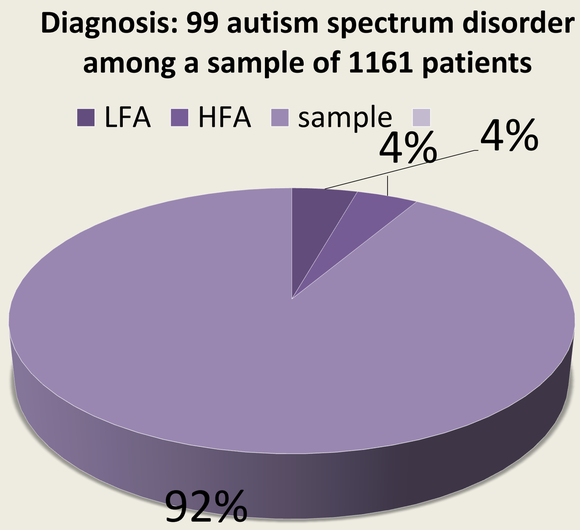
Object

This study evalued a sample of 1161 patients affered in the period from May 2012 to January 2015, within our multidisciplinary unit. Patients were selected assessing autism spectrum features and taking into account the diagnosis of access, received in the past in other clinical centers , compared with our diagnosis made with official diagnostic tools (SINPIA guidelines, 2002).

Instruments

The diagnostic assessment was done through anamnesis, patient examination, behavior's observation , DSM5 criteria, as well as the utilization of the following assessment:

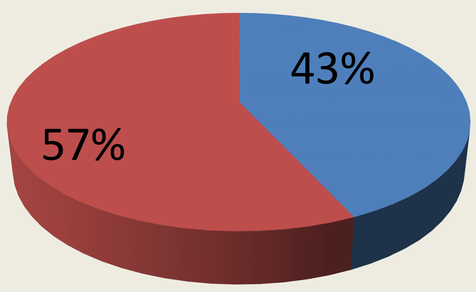
CARS[1]ADI-R[2,] CBCL[3], CRS-R extended form[4] ,Leiter-r[5], WPPSI3[6],WISC4[7], coloured matrices[8], Vineland[9], DDE-2[10],MT[11],AC-MT[12], TPL[13], TVL[14], DSM4-TR[15], DSM5[16].

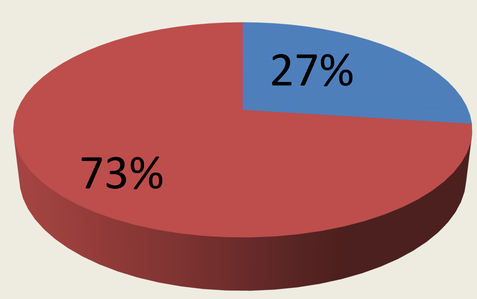


Results

Within the sample of 1161 patients, we identified 99 patients who met criteria for Autism Spectrum Disorder (ASD). The ASD patients were divided into two groups : High Functioing ASD (HFA) and Low Functioning ASD (LFA) and we compared the outer diagnosis with our diagnosis, than emerged that N.51 patients (51,5 %, mean age: 9 years) of ASD patients met criteria for ASD and low cognitive functioning, while N.48 patients (48,5%, mean age 9 years) met criteria for ASD and High Cognitive Functioning.

In the LFA group and HFA group , 22 patients (44%) and 13 patients (27%) respectively have been already diagnosed in Autism Spectrum by other clinician.





DISCUSSION

The prevalence of Autism Spectrum Disorders , showed an important increase in recent times, with 1/68 cases reported (Baio 2014). It is always more declared that this increase is caused to non-etiological factors, but dued to changing of diagnostic criteria, with the alternation of the DSM editions in the years (Hansen et al., 2014). Another study on a psychiatric adult population (Traolach, 2011) , highlighted as actually the phenomenon of growth of prevalence in Autism Spectrum Disorders , is not only interesting the new generations of young people with autism , but rather concerns a consistent adult population , which over time received diagnoses based on psychiatric secondary characteristics , underestimating the primary diagnosis of Autism Spectrum.

Our Multidisciplinary Unit examined in the range of May 2012 and January 2015 , a sample of 99 ASD patients, partly already evalued in other health services, partly never evalued. The use of evaluation instruments for the assessment recommended by the guidelines (SINPIA, 2002), has allowed us to refine the diagnostic capacity for diagnosis assessment in patients with autism spectrum disorders with mild features. Infact, the external diagnosis in access to our Unit, showed high concordance with our diagnosis in the case of Autistic Spectrum Disorder and Low Cognitive Functioning (DSM5: Level 3) (44% of cases). In the case of the milder features and high cognitive functioning (DSM5: Level 1) (old diagnosis of Asperger Syndrome and PDD NOS (DSM 4-TR), the concordance among the diagnosis in access and in output from our evaluation is drastically reduced (27% of cases). We can explain this fact, assuming that milder diagnosis was identified from other clinical centers on the basis of secondary or comorbidity problems, more represented by ADHD, learning disorders, aspecific disturbance of emotions. So, it is possible affirm that the strong increase of Autism Spectrum Disorder in our country is dued to the increase of the diagnostic assessment that permit us to identify the milder and the high cognitive functioning cases of ASD.

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Notes

(1)ASL02 Abruzzo Assistenza consultoriale interdistrettuale-Unità Multidisciplinare Vasto;

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