Sensory Processing Training by the Middletown Centre for Autism 24/04/2013

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This was a training event aimed at professionals including OTs, SLTs and Special Education Teachers/Classroom assistants.

One of the main pieces of information I want to share from the course is the upcoming change in how Autism will be diagnosed. Many of us are familiar with the DSM (the Diagnostic and Statistical Manual) which is currently in its 4th edition. Within the next month (May 2013) the 5th edition (DSM-V) will be introduced. This will have a huge impact on those currently who have a current diagnosis, and those under the process of diagnosis. The following article helps to explain it more. The training also highlighted that although sensory processing difficulties are not currently needed for a diagnosis of ASD, they will be included under the DSM-V.

The article can be found here: http://www.autism.com/index.php/news_dsmV

If you have a child with autism you have likely heard of the DSM-IV. The DSM-IV stands for the Diagnostic and Statistical Manual-Fourth Edition (DSM-IV). It is published by the American Psychiatric Association and it's the primary manual used by clinicians to provide a formal diagnosis of autism and related disorders. The manual outlines the specific criteria that must be met to receive a diagnosis, as well as the corresponding label and numerical code that is sometimes used by insurance companies to identify the diagnosis. The main purpose is to provide standard guidelines for clinicians to use for the diagnosis of different psychological disorders and conditions.

The DSM-IV currently identifies a set of Pervasive Developmental Disorders that are considered "autism spectrum disorders" (ASDs). These include Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS). The DSM-IV has been under revision for several years and a new edition, the DSM-V, will be released in 2013. Significant changes to the criteria and categories of ASDs are planned for the new edition. As a parent it is important that you be well informed, so we will review the proposed changes and their possible implications.

One of the most significant changes is that the separate diagnostic labels of Autistic Disorder, Asperger's Disorder, and PDD-NOS will be replaced by one umbrella term "Autism Spectrum Disorder." Further distinctions will be made according to severity levels. The severity levels are based on the amount of support needed, due to challenges with social communication and restricted interests and repetitive behaviors. For example, a person might be diagnosed with Autism Spectrum Disorder, Level 1, Level 2, or Level 3. The DSM-V revision website says the reasons for using the umbrella term of "Autism Spectrum Disorder" are 1) the old way isn't precise enough—different clinicians diagnose the same person with different disorders, and some change their diagnosis of the same symptoms differently from year to year, and 2) autism is defined by a common set of behaviors and it should be characterized by a single name according to severity.

The removal of the formal diagnoses of Asperger's Disorder and PDD-NOS is a major change. People who currently hold these diagnoses will likely receive a different diagnosis when re-evaluated. This has

the potential to be confusing for parents of children with these diagnoses as well as children and adults who identify strongly with their diagnosis.

Revisions to the specific criteria needed for a diagnosis of Autism Spectrum Disorder have also been made. The new criteria are more thorough and strict compared to the old criteria. For example, more symptoms are needed to meet criteria within the area of fixated interests and repetitive behaviors. Other changes to the criteria include a reorganization. Currently, the domains for Autistic Disorder include impairments in Communication, Social Interaction, and Restricted Interests and Repetitive Behaviors. In the new edition, the Communication and Social Interaction domains will be combined into one, titled "Social/Communication Deficits." Additionally, the requirement of a delay in language development is no longer necessary for a diagnosis.

These proposed changes are based on research, analysis, and expert opinion. The revisions have been made with the hope that the diagnosis of autism spectrum disorders will be more specific, reliable, and valid. Despite these positive hopes, legitimate concerns have been raised regarding how these changes might impact people on the spectrum. One of the biggest concerns is that some who are higher functioning will no longer meet the more strict diagnostic criteria and will therefore have difficulties accessing relevant services. Questions have been raised about what will happen to people currently diagnosed with Asperger's Disorder or PDD-NOS. Furthermore, there is uncertainty regarding how state and educational services and insurance companies will adopt these changes.

It is clear these changes will have an impact on families and people currently diagnosed with an autism spectrum disorder. It remains to be seen how diagnosticians and clinicians will use the new criteria in evaluating children and the impact it will have on the availability of services. Therefore, it is important to remain informed and up to date. To follow and learn more about the proposed changes, see the DSM-V revision website.

Similar to the Talk Tools DVDs by Sara Rosenvelt-Johnson, the course helped to explain how the different thresholds of response (low threshold and high threshold) for sensory input can impact on a child's learning and day-to-day functioning.

The course helpfully provided a great range of suggestions for dealing with children with:

- tactile hypersensitivity
- vestibular hypersensitivity
- auditory over-responsiveness
- food sensitivity
- olfactory hypersensitivity (sensitivity to smells)
- sensory seeking behaviours

The suggestions focused on how to get children into the "calm and alert" state where they will be ready to learn and engage.