

Table of Contents

What is Asperger Syndrome?

Is there any treatment?

What is the likely outcome for an individual diagnosed?

Organizations

What is Asperger Syndrome?

Asperger syndrome (AS) is a developmental disorder. It is considered to be one of a few autism spectrum disorders. Autism Spectrum Disorders (ASD) are one of a distinct group of neurological conditions characterized by a larger or smaller degree of impairment in language and communication skills, as well as recurring or limited patterns of thought and behavior. Other ASDs include: classic autism, Rett syndrome, childhood disintegrative disorder, and pervasive developmental disorder not otherwise specified (usually referred to as PDD-NOS). One of the more distinctive differences between individuals with autism and individuals with AS; is individuals with AS retain their early language skills.

The most unique symptom of AS is an individual's obsessive interest in one particular object or topic to the exclusion of any other. Individuals with AS want to know everything about their topic of interest and their conversations with others will be about little else. Their expertise, high level of vocabulary, and formal speech patterns make them seem like little professors. Other characteristics of AS include: repetitive routines or rituals; odd speech and language; socially and emotionally inappropriate behavior; the inability to interact successfully with peers; problems with non-verbal communication; and clumsy and uncoordinated motor movements.

Individuals with AS tend to be isolated because of their poor social skills and limited interests. They may approach other people, but having a normal conversation may be difficult due to out of place or unusual behavior, or by wanting only to talk about their specific interest. Individuals with AS usually have a history of developmental delays in motor skills such as pedaling a bike, catching a ball, or climbing on outdoor play equipment. They are often awkward and poorly coordinated. Their walk can appear to look like they are walking on stilts or bouncy.

The following is a list of some general characteristics:

- Severe difficulty with social interactions; socially naïve, inappropriate, awkward
- Repetitive, narrow and unusual patterns of behavior and interests
- No clinically-significant delays in language or cognition, unlike classic autism.
- May appear clumsy or have delayed motor development.
- Appear eccentric to other Individuals.
- Loner, but intensely wants to be included by other Individuals; wants to be sociable.
- Often frustrated by writing.
- Needs space. May be hypersensitive to light, touch, noise, or smell.
- Lacks the ability to have a full reciprocated conversation, unless explicitly taught.

Is there any treatment?

The ideal treatment for AS is early intervention and coordinating therapies that address the three core symptoms of the disorder: poor communication skills, obsessive or repetitive routines, and physical clumsiness. There is no single best treatment package for all individuals with AS, but most professionals agree that the earlier the intervention, the better.

Effective treatment builds on the individual's interests. Individuals are more successful when treatment plans offer a predictable schedule, teach tasks as a series of simple steps, actively engage the individual's attention in highly structured activities, and provide regular reinforcement of behavior. It may include social skills training, cognitive behavioral therapy, medication for co-existing conditions, among other treatments.

Advice for parents, caregivers and service providers:

- Often an individual with AS's Verbal IQ score is much higher than Performance. Caregivers and service providers typically overestimate the individual's ability and underestimate frustrations. Remember, 80% of communication is non-verbal!
- The individual may have more difficult behavior in school or at work rather than home. Parents/Caregivers are more predictable -- hence less anxiety-provoking -- than peers.
- Use social stories (simple, first-person accounts of appropriate social behavior.)
- Compensate for writing difficulties. Reduce quantity of written work. Teach keyboarding. Use oral evaluation.
- Capitalize on verbal strengths. Relate subjects to the individual's limited interests.
- Delineate space so others don't intrude. (e.g. separate work space.)
- Avoid unstructured social situations.
- Avoid crowding in lines or hallways.
- Do not insist on eye contact. Encourage the individual to look at other person's forehead if eye contact is difficult.
- Prepare the individual for novel social situations well in advance. Rehearse and practice.
- Recognize and reward small steps toward desired behaviors.
- Provide plenty of structure.
- Individual's with AS may be soothed by whole-body pressure, squeezing into tight space (e.g. between bed and wall), or by rocking or spinning.
- Remember inflexibility often results from anxiety about unpredictable situations. Use social stories to clarify expectations, provide concrete guidelines.

What is the likely outcome for an individual diagnosed?

With effective treatment, individuals with AS can learn to cope with their disabilities, but they may still find social situations and personal relationships challenging. Many individuals with AS are able to work successfully in mainstream jobs, although they may continue to need encouragement and moral support to maintain an independent life.

Organizations

MAAP Services for Autism, Asperger Syndrome, and PDD

P.O. Box 524
Crown Point, IN 46307
info@maapservices.org
<http://www.maapservices.org>
Tel: 219-662-1311
Fax: 219-662-0638

Autism Network International (ANI)

P.O. Box 35448
Syracuse, NY 13235-5448
jisincla@syr.edu
<http://www.ani.ac>

Autism Society of America

7910 Woodmont Ave.
Suite 300
Bethesda, MD 20814-3067
<http://www.autism-society.org>
Tel: 301-657-0881 800-3AUTISM (328-8476)
Fax: 301-657-0869

Autism Research Institute (ARI)

4182 Adams Avenue
San Diego, CA 92116
director@autism.com
<http://www.autismresearchinstitute.com>
Tel: 866-366-3361
Fax: 619-563-6840

National Institute of Mental Health (NIMH)

National Institutes of Health, DHHS
6001 Executive Blvd. Rm. 8184, MSC 9663
Bethesda, MD 20892-9663
nimhinfo@nih.gov
<http://www.nimh.nih.gov>
Tel: 301-443-4513/866-415-8051 301-443-8431 (TTY)
Fax: 301-443-4279

This information is not intended to replace the advice of a doctor. The Arc of Monroe disclaims any liability for the decisions you make based on this information.

Information was collected from the following:

National Institute of Neurological Disorders and Stroke, Publications. All NINDS-prepared information is in the public domain and may be freely copied. Credit to the NINDS or the NIH is appreciated.

MAAP Services for Autism, Asperger Syndrome, and PDD