Asperger Syndrome (AS)

Asperger Syndrome (AS) is a disorder of the brain. It causes children to have unusual behaviors and difficulty with communication and friendships. Children with AS often seem to be in their own world. They may have little interest in interacting or considering others. Children with AS often have well developed language skills but difficulty caring on normal conversations. They often have obsessions with one subject or item. AS is related to autism but tends to be much milder.

CAUSES

AS may be due to brain abnormalities. The abnormalities may be in:

- The brain's structure.
- The way the brain works.
- In the brain's structure and the way it works.

Problems like AS may run in families, but the exact genetic cause is not known.

SYMPTOMS

There can be many different symptoms of AS, but the most common are:

- Obsessive interest in one topic or object. Children with AS want to know everything about their area of interest. Their conversations are often about little else.
- Unusual speech patterns, such as monotone, lack of rhythm, difficulty with appropriate volume.
- Poor social skills, inappropriate or eccentric behavior - making conversations and interactions difficult.
- Delayed motor (movement) skills like walking, pedaling a bike, etc.
- Clumsiness or awkwardness.
- High levels of activity.

DIAGNOSIS

The diagnosis of Asperger Syndrome is often a two step process. The first stage may occur during a check up. Caregivers look for several signs, in addition to the symptoms mentioned above. These signs may be:

- Abnormal eye contact.
- Aloofness.
- The failure to respond when called by name.
- The lack of use of gestures to point or show.
- A lack of interactive play.
- A lack of interest in peers or others in the same room.

The second stage may include an evaluation and testing by of a team of specialists with expertise in diagnosing children with AS.

TREATMENT

There is no one single best treatment for AS. There is no cure, but research is ongoing. Treatment may vary from one child to another but it is usually a combination of:

- Social skills training - teaching children to interact better with others, especially other children.
- Behavioral therapy - for children with behavioral or emotional problems. This can also help to cut back on obsessive interests or repetitive routines.
- Medication - no current medication exists for AS but medicines may be used to treat depression and anxiety, which can develop with AS.
- Physical therapy - to help with poor coordination and other issues.
- Speech therapy - to help children who have trouble with their speech or conversations.
- Parent training and support- to teach parents how to manage behavior issues.

With continued and effective treatment, most children with AS and their families learn to cope with the symptoms of the disease. Social and personal relationships can continue to be challenging. Many adults with AS have normal jobs, but they may struggle to live on their own without family or group support.

HOME CARE INSTRUCTIONS

Home treatments are usually directed by the caregiver or the team of caregivers treating the child.

Parents often need support to help best deal with children with AS. It helps to lean on family and friends. Support groups can often be found for families of AS.

Children with AS often need help with social skills. Parents may need to teach them how to use eye contact or respect another person's personal space. Parents can model how to identify and be empathic with others' emotions.

Physical activities are often helpful with clumsiness and coordination.

Children with AS respond well to routines for doing everyday things. Cooking, eating, and cleaning at the same time each day often works best.

Parents, teachers and school counselors should meet to make sure that they are consistent in their approach to the child and to closely monitor problems at school.

Older children and teenagers may become sad when they realize they are different because of their AS. Parents should be prepared to empathize with their children when this occurs. Counseling may be needed. If other issues like depression or anxiety develop, medicine may be needed.

SEEK MEDICAL CARE IF:

- Your child has new symptoms that are worrying you.
- You think your child is having reactions to medicines prescribed.
- Your older child is depressed - unusual sadness, decreased appetite, weight loss, lack of interest in things that are normally enjoyed, poor sleep.
- Your older child shows signs of anxiety - excessive worry, restlessness, irritability, trembling, difficult with sleep.

SEEK IMMEDIATE MEDICAL CARE IF:

Your child or adolescent is at risk for suicide. Look for:

- Talk about suicide or death.
- Giving away favorite possessions (a common sign that one is thinking about suicide).
- A sudden cheerful or happy mood after having been sad for a long time (can mean that a decision has been made to attempt suicide).

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