



Clinical Research in Brain and Neurological Disorders

Case Report

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Behavioural Outcomes of Autism Spectrum Disorder: A Stereotyped Behaviour

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Abstract

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterized by social communication difficulties and restricted and repetitive behaviours among strengths in varied domains. ASD is highly prevalent but there is considerable heterogeneity in its aetiology, clinical presentation and underlying brain connectivity. Consequently, a variety of behavioural and psychosocial treatments are sought by families.

Keywords: Brain; neurological disorders; psychiatric disorders; repetitive stereotyped behavior; autism spectrum disorder

Introduction

Stereotypic behavior is a core diagnostic feature of children with autism or other pervasive developmental disorders. Although stereotypy does not appear to serve an obvious function, research indicates that many individuals with autism engage in this behavior because of the sensory consequences obtained for doing so. Functional behavior assessment allows treatment agents to identify the purpose or function of behavior; this information improves the effectiveness of a treatment and is an important component of treatment planning.

Motor stereotypies are suppressible, repetitive, rhythmical, coordinated, purposeless, fixed, and nonfunctional pattern of movements. Sensory behaviors are not formally part of the repetitive behavior diagnostic criteria on either the DSM-IV or the International Classification of Disorders (ICD) 10 classification systems. However, unusual sensory interests or behaviors are assessed on diagnostic instruments such as the Autism Diagnostic Interview.

Case Study

The purpose of this study was to examine RSB in children between 18 and 24 months of age who were later diagnosed with ASD, and matched groups of children with DD and TD. The specific research objectives and corresponding hypotheses were: (1) to describe the duration, frequency, and types of RSB displayed by children with ASD, DD, and TD between 18 and 24 months of age during systematic observation and to examine group differences. It was hypothesized that the group with ASD would show both higher frequency and longer duration of RSB than both the DD and TD groups; (2) to examine concurrent and predictive relationships between RSB in the second year and developmental level, specifically verbal (second and fourth year) and nonverbal developmental level and adaptive behavior (fourth year).

Collectively, these findings suggest that identifying effective techniques to assess and treat stereotypy is a worthwhile area of study to improve the lives of individuals with ASD.

The present meta-analysis also showed that due to the relative weight of some of the studies included they should be discussed in further detail as they provide new relevant and complementary information to explain the role and the effects of exercise in the reduction of the number of episodes of stereotypic behavior in children with ASD.

Vibroacoustic music decreases stereotypic behaviors in individuals with autism and developmental disabilities. The peer-mediated intervention and social engagement and educating social interaction decrease stereotypic behavior of children with autism. Self-management procedures consisting of self-assessment, self-recording, and self-reinforcement decrease stereotypic behaviors in autism.

Antipsychotics reduce stereotypies

Risperidone may improve some sensory problems such as hyperacusia in

children with autism. Double-blind, placebo-controlled trial studies indicated that risperidone improves the restricted, repetitive, and stereotypic behavior of autistic children. The synergistic effect of combination of risperidone and pentoxifylline improves behavioral problems and stereotypies in autism.

The efficacy of naltrexone on stereotypic behavior in children with ASD was not confirmed in double-blind placebo-controlled trials. Implications for electroconvulsive therapy in children with ASD for management of some behavioral problems is encouraged.

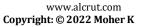
Conclusion

Findings also provide evidence for the need to improve the quality of the design used to plan and implement the physical exercise programs in children with ASD. Future studies should report objective information including frequency, duration, intensity, volume, and type of intervention used as it is important to identify the characteristics and the most appropriate intensity of stimulus necessary to generate effective responses in the reduction of stereotypical behaviors. Considering the classification system directs clinicians for future decision making. Sometimes its management is part of an underlying disease or common co-morbid conditions such as tics, autism and mental retardation. So, sometimes wider assessment may be required to prevent misdiagnosis or incorrect treatment. Its management is most likely behavioral interventions.

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