



# Child Health Notes

## 2015 3RD Quarter



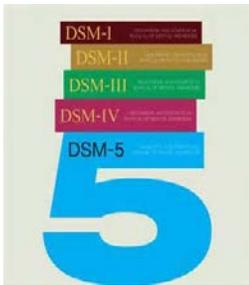
Promoting partnerships between primary health care providers, families & the community to support early identification of children with special health needs and comprehensive care within a primary care Medical Home.

Distributed by: **CLARK COUNTY PUBLIC HEALTH – Children with Special Health Care Needs**

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### What /s Autism Now? The New DSM-5 Definition

**The new Diagnostic and Statistical Manual-5 (DSM-5) was published in May 2013. Asperger disorder, Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS), and autism were replaced by the term, “autism spectrum disorder.” 1**



**WHY THE CHANGE?** According to Dr. Bryan King, the impetus for the most recent change was that “There wasn’t any evidence after 17 years that [the DSM-IV diagnoses] reflected reality. There was no consistency in the way Asperger’s or PDD-NOS was applied.”<sup>2</sup> Dr. King serves as program director of the Seattle Children’s Hospital Autism Center and was a member of the American Psychiatric Association Task Force charged with revamping the diagnosis.

#### 4 MAJOR CHANGES in the DIAGNOSIS OF AUTISM with the DSM-5:

- 1) Rett disorder was included in the DSM-IV diagnosis of autism, but was eliminated from the DSM-5 definition.
- 2) PDD-NOS, Asperger disorder, and childhood disintegrative disorder from DSM-IV were collapsed into one descriptive term: autism spectrum disorder in the DSM-5
- 3) The DSM-IV involved three categories of symptoms: (1) language, (2) social, and (3) repetitive /restrictive behavior, whereas the DSM-5 involves only 2 categories: (1) social communication / interaction, and (2) repetitive/restrictive behavior. Severity levels are included now.
- 4) Unusual sensory behaviors were not part of the DSM-IV diagnosis but they are part of the DSM-5 diagnosis.<sup>3</sup>



**See details of the new DSM-5 definition of autism spectrum disorder in this link to the full criteria:**

<https://www.autismspeaks.org/what-autism/diagnosis/dsm-5-diagnostic-criteria><sup>3</sup>

**A 2012 study of physicians revealed that only 55% routinely screen for autism spectrum disorders at the 18-month visit.<sup>4</sup> The good news is that this is up from 8% prior to the AAP recommendation to screen for autism at 18 and 24 months in 2007.<sup>3,4</sup> The bad news is that it’s still 45% too low.**

## 3 SCREENING TOOLS: The American Academy of Pediatrics (AAP) recommends screening 18 and 24-month olds for

autism. The AAP Autism Toolkit was designed to screen, identify, and treat children with autism spectrum disorders.<sup>3</sup> The Toolkit includes screening tools for three age groups:



- 1) For babies less than 18 months: **Communication and Symbolic Play Behavior Scales and Developmental Profile** <http://firstwords.fsu.edu/pdf/checklist.pdf>
- 2) For 18-30 month olds, the **Modified Checklist for Autism in Toddlers-Revised with Follow-up (M-CHAT-R/F):** [Available at Autismspeaks.org](http://www.autismspeaks.org)
- 3) Preschool and Elementary school children: the **Childhood Autism Spectrum Test.** [http://www.autismresearchcentre.com/arc\\_tests](http://www.autismresearchcentre.com/arc_tests) )

## 2 HELPFUL HINTS

- Individuals with well-established DSM-IV diagnoses of autistic disorder, Asperger's disorder, or pervasive developmental disorder not otherwise specified should be given the DSM-5 diagnosis of autism spectrum disorder. There is no need to review the diagnosis again to see if those individuals still qualify by DSM-5.<sup>1</sup>
- Individuals who have marked deficits in social communication, but whose symptoms do not otherwise meet criteria for autism spectrum disorder, should be evaluated for the new DSM-5 diagnosis of **social (pragmatic) communication disorder (SCD)**.<sup>1</sup> The SCD diagnosis was created to ensure the unique needs of affected individuals are met. While autism spectrum disorder (ASD) does encompass communication problems, it also includes restricted, repetitive patterns of behavior, interests, or activities and gives equal weight to both communication issues and repetitive behaviors. ASD must be ruled out for SCD to be diagnosed. Many individuals with such symptoms previously were given the diagnosis of *pervasive development disorder not otherwise specified*. This led to inconsistent treatment and services in across clinics. Communication disorders are treatable, so identifying distinct communication problems is important for getting people appropriate care.<sup>6</sup>

## 1 LAST THING... Centers of Excellence in Washington State

The Washington State Health Care Authority offers an Applied Behavior Analysis (ABA) therapy benefit to all Medicaid clients with a diagnosis of autism spectrum disorder. In order for a child to be eligible for ABA therapy through Medicaid, a recognized Center of Excellence (COE) must have conducted a comprehensive evaluation, and written an order for ABA within the last two years. Find Centers of Excellence near you:

[http://www.hca.wa.gov/medicaid/abatherapy/Documents/HCA\\_Centers\\_of\\_Excellence\\_for\\_ASD.pdf](http://www.hca.wa.gov/medicaid/abatherapy/Documents/HCA_Centers_of_Excellence_for_ASD.pdf) <sup>7</sup>

More information about the ABA benefit: <http://www.hca.wa.gov/medicaid/abatherapy/Pages/index.aspx> <sup>7</sup>

### References / Resources

1. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders. Washington, DC. (2013). DSM-5 (2013) 5<sup>th</sup> edition.
2. [Luz, Amy. You do not have Asperger's. Slate. May 22, 2013.](#)
3. [Autism Speaks website listing full criteria for autism according to the American Psychiatric Association, Version 5, 2013. Washington D.C.](#)
4. [Johnson CP, Myers SM, and the Council on Children with Disabilities. Identification and Evaluation of Children with Autism Spectrum Disorders. Pediatrics November 1, 2007; Vol. 120 No. 5; 1183-1215.](#)
5. [Carbone PS, Murphy NA, Norlin C, Azur V, Sheng X, Young PC. Parent and pediatrician perspectives regarding the primary care of children with autism spectrum disorders. J Autism Dev Disord \(2013\) 43: 964-972.](#)
6. [American Psychiatric Association. Social Communication Disorder Fact Sheet. Published by the American Psychiatric Association Publishing 2013: http://www.dsm5.org/Documents/Social%20Communication%20Disorder%20Fact%20Sheet.pdf](#)
7. [Health Care Authority of Washington state website: http://www.hca.wa.gov/medicaid/abatherapy/Pages/index.aspx](#)
8. [Autism Speaks Family Services Tool Kit by the Autism Treatment Network. http://www.autismspeaks.org/family-services/tool-kits](#)
9. [Harrington JW, Allen K. The clinician's guide to autism. Pediatrics In Review 2014; 35; 62-113.](#)

## CLARK COUNTY SPECIAL NEEDS INFORMATION AND RESOURCES

|                                |   |   |
|--------------------------------|---|---|
| Children Birth to 18 years old | Primary Care Provider   | 360-750-7500  |
|                                | ESD 112   | 360-896-9912  |
|                                | Early Opportunity Children & Families<br>Innovative Services NW | 360-892-5142  |
| Family Support                 | Children w/Special Health Care Needs                            | 360-397-8440<br><a href="http://www.clark.wa.gov/public-health/family/needs.html">http://www.clark.wa.gov/public-health/family/needs.html</a> |
| Autism Empowerment             | 360-852-8369  | <a href="http://www.autismempowerment.org">www.autismempowerment.org</a>  |

## WASHINGTON STATE SPECIAL NEEDS RESOURCES

|                                   |                                  |  |
|-----------------------------------|----------------------------------|--|
| WithinReach Family Health Hotline | 800-322-2588,<br>800-833-6388TTD | <a href="http://www.withinreach.org">www.withinreach.org</a>   |
| Autism Society of WA              |                                  | <a href="http://www.autismsocietyofwa.org">www.autismsocietyofwa.org</a>                               |
| WA Autism Alliance and Advocacy   |                                  | <a href="http://www.washingtonautismadvocacy.org/updates">www.washingtonautismadvocacy.org/updates</a> |

**PUBLIC HEALTH**  
ALWAYS WORKING FOR A SAFER AND  
HEALTHIER WASHINGTON



Connie Callahan, RN, BSN  
CSHCN (360) 397-8000 ex.7400  
1601 E. Fourth Plain Blvd., Bldg 17, 3<sup>rd</sup> Floor  
PO Box 9825, Vancouver, WA 98666-8825

 **For other formats**  
Clark County ADA Office, Voice (360) 397-2000  
Relay (800) 833-6384, E-mail ADA@clark.wa.gov

### “Caring for Children with Autism Spectrum Disorders in Your Practice: Practical Strategies”

**October 10, 2015 – CME Conference at Seattle Children’s**

Please join us for this program, which is designed for primary care practitioners (PCPs) and their staff to discuss practical strategies for the management of children with autism spectrum disorder (ASD) in the clinical setting. National and state experts will discuss common medical, behavioral, and mental health issues; practice-based tools; resources; and accessing services.

Primary care providers, developmental pediatricians, psychologists, nurses, family members and other experts from around Washington and the US collaborated on the planning of this conference to ensure that the material would be relevant, cutting edge, practical and immediately usable for participants from all primary care settings.

**Who Should Attend: Pediatricians, Family Physicians, Physician Assistants, Residents, Nurse Practitioners, Nurses and Clinic Care Coordinators**

**Course Fee: \$100**

**7.75 Category 1 CME – applies for nursing CEARP as well. AAFP credits have been applied for as well**

- Location: Wright Auditorium, Seattle Children's, Seattle, WA
- [View the brochure](#) (PDF), [Register online](#). Children’s CME website:  
<https://www.seattlechildrens.org/healthcare-professionals/education/cme/calendar/>

Presented by:

- *Seattle Children’s and the Leadership Education in Neurodevelopmental and Related Disorders (LEND) Program at the University of Washington’s Center on Human Development and Disability*

In collaboration with

- *The Washington Autism Advisory Council and the Washington Autism Alliance and Advocacy*

**Questions? Contact Kate Orville, Conference Program Director at [orville@uw.edu](mailto:orville@uw.edu)**