

Child Health Notes

Promoting early identification and partnerships between families, primary health care providers & the community.

Distributed by the Lewis County Interagency Coordinating Council (ICC) and Parent to Parent.
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Health Management of Children with Autism Spectrum Disorder: Co-Occurring Gastrointestinal Problems and Sleep Disorders

Primary health care providers have an important role in the management of problems associated with autism spectrum disorder (ASD). This newsletter focuses on two health issues that many families of children with ASD bring as a concern to their primary health care provider - gastrointestinal problems and sleep disturbances. There is much research investigating the relationship of ASD with co-occurring problems in these systems. While conclusive findings are not yet fully available, gastrointestinal and sleep problems are health concerns that families frequently report and should be part of the review of systems at each primary health care appointment.

Gastrointestinal Problems and ASD

Problem: The relationship between gastrointestinal problems and ASD is unclear. There is no rigorous scientific data documenting increased prevalence of GI problems in children with ASD in comparison to children with other developmental delays or the general population. However, anecdotal evidence indicates parents frequently report functional GI differences in their children. Reported symptoms may include presumptive abdominal discomfort and/or problems with the consistency and frequency of bowel movements. Many children with ASD can not clearly communicate about their body symptoms or discomfort, and may express their distress in exaggerated behaviors and irritability. This causes stress for the entire family.

Common Presenting Concerns: Constipation, diarrhea, vomiting, gaseousness, sometimes associated with discomfort or pain. Feeding disorders such as selectivity in food choices and/or food refusal are often reported.

Management: When child and family present concerns for GI symptoms:

- Evaluate as in any other child according to targeted history and physical examination
- Use your history and physical examination to determine need for further work-up
- Consider possible GI side effects of psychotropic medications.
- Consider a child's self-selected diet or a diet the family is using for the child as possible contribution to a GI problem.
- Consider the possibility that a child with ASD may be resistant to toilet training or voiding which could contribute to constipation.

Consider Referral:

- To a pediatric gastroenterologist for consultation or evaluation for unresponsive chronic GI symptoms
- To a pediatric nutritionist for consultation or evaluation of child's diet and nutrition

RESOURCES

American Academy of Pediatrics <http://www.aap.org/healthtopics/autism.cfm>

Tool Kit: *Caring for Children with Autism Spectrum Disorders: A Resource Toolkit for Clinicians*

Clinical Report: *Management of Children with Autism Spectrum Disorders*

WA State Nutrition Network for CSHCN <http://depts.washington.edu/cshcnnut/>

Find a pediatric nutritionist trained in working with children with special needs including ASDs in your area.

Erickson, CA, Stigler, KA, Corkins, MR, Posey, DJ, Fitzgerald, JF, McDougle, CJ. Gastrointestinal Factors in Autistic Disorder: A Critical Review. *Journal of Autism and Developmental Disorders*. 2005, 35(6):713-727.

Sleep Problems and ASD

Problem: There is a high prevalence of sleep disorders reported by parents of children with ASD. Research suggests that the rate of sleep problems is greater for children with special needs, including ASDs, when compared with typically developing children. Consequences of poor sleep include parental exhaustion, family stress, disruption of family life, and can adversely affect the daytime functional and behavioral performance of all family members.

Common Presenting Concerns: Difficulty falling asleep and/or difficulty staying asleep are most frequently reported, as well as irregular sleep-wake patterns, early morning awakenings, and poor sleep routines. The etiology of sleep disturbance continues to be studied and likely involves a complex interaction of neurobiological, behavioral, and other coexisting issues.

Management:

Inquire about the adequacy of sleep for all family members at each primary health care appointment.

Take a complete history of bedtime routine, night wakings, and caregiver responses. Consider asking parents/caregivers to keep a 2-week sleep diary.

Rule out any possible medical contributions to poor sleep such as obstructive sleep apnea or gastroesophageal reflux. Consider whether any medications a child is prescribed may be adversely affecting sleep.

Behavioral interventions can be effective for children with ASD and should be considered for addressing sleep disturbances.

Discuss good sleep hygiene practices: regular and consistent bedtime, structured predictable bedtime routines, bedroom conducive to sleep, bed associated with sleep and not other things such as play or time-out. Help the family establish behavioral strategies for responding to child's behavior and nighttime waking and monitor implementation along with the family.

Medication for sleep may need to be considered; pair with a behavioral intervention plan.

Consider Referral:

To appropriate pediatric specialists for consultation or evaluation if medical contributions are suspected

To a developmental pediatrician or pediatric psychologist experienced in working with children with ASD and implementation of practical behavioral strategies

RESOURCES

American Academy of Pediatrics <http://www.aap.org/healthtopics/autism.cfm>

Tool Kit: Caring for Children with Autism Spectrum Disorders: A Resource Toolkit for Clinicians

ASD INTERNET RESOURCES

- ◆ **American Academy of Pediatrics** <http://www.aap.org/healthtopics/autism.cfm>
 - AAP policy papers for early identification and clinical management
 - Autism: Caring for Children with ASD: A Resource Toolkit for Clinicians
 - Many useful links and resources for providers and families
- ◆ **Autism Speaks**.....www.autismspeaks.org
- ◆ **WA State Medical Home Website**.....www.medicalhome.org/diagnoses/autism.cfm

FAMILY RESOURCES

- ◆ **State:** Families for Effective Autism Treatment (FEAT) of Washington www.featwa.org
Parent to Parent Support Programs of Washington 1-800-821-5927
- ◆ **National:** Autism Society of America www.autism-society.org/site/PageServer
 - Autism Speaks.....www.autismspeaks.org
 - First Signs: *Could it Be Autism? A Parent's Guide to the First Signs and Next Steps*www.firstsigns.org

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