

CHALLENGES OF LIVING WITH AND TREATING OCD WITH AUTISM/ASPERGER'S

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AUTISM AND OCD

- Symptom presentation overlap
- Obsessions vs. Fixations
- Different reasons supporting symptoms, perhaps similar physiology (i.e. Need for sameness)
- OCBs vs. OCD
- Comorbidity - Patients Can Have Both

OCD: NEW PERSPECTIVES

- Increased Awareness Via Media Exposure
- Earlier ID and Treatment
- Longer history of Evidence-Based Treatments
- Increased understanding of OCD symptoms and behaviors in other conditions (i.e. eating disorders, autism, schizophrenia)

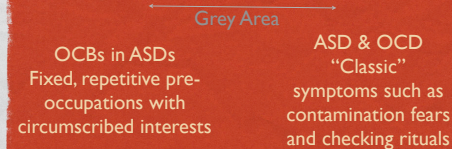
OBSESSIVE COMPULSIVE BEHAVIORS (OCBS)

- OCBs (also referred to as repetitive and stereotyped behaviors) are a diagnostic criteria for individuals with ASD
- Anywhere from 1.5% to 81% of individuals with autism are diagnosed with OCD; most recent estimate was 37% of children (Leyfer et al., 2006)

ASDS: NEW PERSPECTIVES

- Increasing in frequency?
- Earlier Diagnosis
- More children with mild forms of ASDs being diagnosed (high functioning, gifted population with poor social functioning)
- Changing belief that everyone suffering from ASDs had OCD
- New understanding of "OCD" in ASDs and how this patient CAN benefit from CBT

WHEN ARE OCBS OCD?



WHY ARE THEY CALLED OCBS?

- It is a broader term, than stereotyped/repetitive behaviors
- Allows for inclusion of more of the rigid, fixed, and restricted aspects of ASDs than would be appropriate under OCD
- Reminds us that OCBS are subsumed under the primary diagnosis of ASDs

OCBS IN ASDS INTERESTS

- Narrowness
- Atypical interests
- Difficulties shifting
- Examples:

Maps, cars, animals, computer games, card games, focus on selected dialogue from movies or T.V., Titanic, population statistics, etc.

OCBS IN ASDS: SAMENESS

- Places
- Rules
- Routes
- Routines
- Need for symmetry (literal & social)
- Examples:
 - >First in line
 - >Sit in a specific chair
 - >Keep items in the same place or same order
 - >Travel the same route to school
 - >Wear the same clothing
 - >Aggressiveness when order is changed
 - >Over-reactions to minor social asymmetries

WHAT ARE POSSIBLE FUNCTIONS OF OCBS IN ASDS?

- Control Environment (e.g., getting parents to sit in certain places in living room)
- Decrease interaction with new stimuli (e.g., avoidance behaviors when introduced to new people)
- Reduction of discomfort (e.g., washing repeatedly until feel "totally clean")

OCBS IN ASDS: SENSORY-MOTOR

- Dysperceptions
- Dysregulations
- Sensitivities
- Examples:

Rocking, spinning, other movements, smelling books, atypical reactions to noise, food selectivity, discomfort with eye contact, having to see a particular item in visual field, must be spoken to in a certain way, cannot have hair touched, clothing sensitivities, etc.

HOW DO OCD/OCBS AFFECT FUNCTIONING FOR PATIENTS WITH ASDS

MODULE 1 Examiner: _____ Chronological Age: _____

ADOS Algorithm for DSM-IV-TR-TR-TR Autism Spectrum
(Current scores of 2 are reported in 3, and in 4 if score on the item is 3 or 4.)

Communication		
Frequency of Vocalization Directed to Others	(A-2)	0
Stereotyped/Idiosyncratic Use of Words or Phrases	(A-3)	1
Use of Other's Body to Communicate	(A-4)	0
Pointing	(A-7)	0
Gestures	(A-8)	0
Communication Total		1
<i>(Autism cut-off = 4, autism spectrum cut-off = 2)</i>		
Reciprocal Social Interaction		
Unusual Eye Contact	(B-1)	2
Social Responses Directed to Others	(B-2)	2
Shared Enjoyment in Interaction	(B-3)	1
Showing	(B-9)	2
Spontaneous Initiation of Joint Attention	(B-10)	1
Responsiveness to Joint Attention	(B-11)	0
Quality of Social Overtures	(B-12)	0
Social Interaction Total		6
<i>(Autism cut-off = 7, autism spectrum cut-off = 4)</i>		
Communication + Social Interaction Total		7
<i>(Autism cut-off = 12, autism spectrum cut-off = 7)</i>		
Play		
Functional Play With Objects	(C-1)	0
Imaginative/Creativity	(C-2)	2
Play Total		2
Stereotyped Behaviors and Restricted Interests		
Unusual Intensity Interest in Play Materials/Themes	(D-1)	1
Hand and Finger and Other Complex Manoeuvres	(D-2)	0
Unusually Repetitive Interests or Stereotyped Behaviors	(D-4)	1
Stereotyped Behaviors and Restricted Interests Total		2

HOW CAN PARENTS/FAMILY MEMBERS HELP?

- Better Understanding Of The Condition
- Addressing your Expectations
- Decrease Emotionality
- Become a Coach
- How Can You Stay True To Your Values and Philosophy?




Oh No !!!

SHORT TERM PAIN FOR THE LONG TERM GAIN? IS IT WORTH IT?