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## Early diagnosis can mean a world of difference

By Liz Szabo  
USA TODAY

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Geraldine Dawson, chief science officer for the advocacy group Autism Speaks, discusses with USA TODAY's Liz Szabo how early screening and intervention could help kids with autism. (See story, 1A.)

Autism resources

Q: How common is early screening for autism today?

— First Words Project at Florida State University (firstwords.fsu.edu) includes the checklist that was used in the new study (story, 1A) to help screen 1-year-olds for signs of autism. It also has a “video glossary” illustrating typical behaviors in children with and without autism.

— Autism Speaks: Advocacy group’s site (autismspeaks.org) lists symptoms and red flags, and links to state resources for services for autistic children.

A: The current recommendation from the American Academy of Pediatrics is that all children be screened for autism at the 18- and 24-months-old well-baby checkups. However, there are still many pediatricians who are not systematically screening for autism as part of routine well-baby checkups.

Q: At what age are most kids seen for initial suspicions of autism? At what age are they diagnosed?

A: Unfortunately, although it is possible to screen for autism in toddlers and diagnose reliably by 18 to 24 months, the average age of diagnosis in the USA is close to 5 years. Similarly, although interventions now exist for toddlers as young as 12 months, often children don’t begin intervention until much later in the preschool period. The fact that the kids in this study began intervention, on average, by 17 months was very

positive.

Q: Does age of diagnosis vary by region, race or income?

A: Yes. Studies have shown that children from ethnic minority backgrounds and lower socioeconomic status often receive their autism diagnosis at a much later age and require more visits to the doctor to receive a diagnosis.

Q: Could doctors begin using the new screening checklist right now?

A: Keep in mind that the pediatricians using this screening tool were working closely with a university-based center that specializes in autism. The center staff offered training in its use and were able to evaluate and provide recommendations for children who screened positive on the questionnaire. With appropriate training and support from professionals with expertise in autism, pediatricians could certainly use the questionnaire.

Q: Are enough services available for the babies who will need them?

A: All infants who demonstrate developmental delays are eligible for “Birth to Three” services paid for by the state. Some states offer generic intervention, others autism-specific services. Some autism treatment centers offer interventions for infants as young as 12 months, but this is still a relatively new area of research. There are still only a few published studies on interventions for infants with autism.

Q: About one in 110 kids have an autism-like condition. Will better screening increase the prevalence?

A: The CDC is tracking changes of autism prevalence over time. They study children who are 8 because most children are diagnosed by that age. So, detecting autism very early should not increase the prevalence. If providing intervention at a very young age is very effective in reducing symptoms of autism, it is possible that it could actually decrease prevalence of autism by age 8.

Q: Why does early intervention matter? What kind of brain changes are taking place?

A: During early life, the brain circuitry that supports social and language behavior is rapidly developing and shaped by our experiences. One of the first autism symptoms to emerge during infancy is a lack of attention to other people - faces, emotions, gestures, and speech. The infant with autism, who is not paying attention to other people, does not have the learning opportunities that are afforded through social interaction to promote and shape the development of social brain circuitry. Early intervention is designed to draw the infant’s attention to others and engage them in pleasurable interactions, thereby increasing the opportunities for learning and a more normal trajectory of brain development.

Q: Why does autism take so much time to become apparent?

A: The autism symptoms that are apparent before 6 months of age are typically subtle and difficult to detect. Most autistic children meet their major motor milestones, such as sitting and walking. Many infants who develop autism, however, begin to show symptoms between 6 and 12 months. Early symptoms include a lack of eye contact and communicative babbling and not responding when the child's name is called. Some symptoms, such as delays in use of words and gestures, lack of imaginary play, and poor peer relationships, are not apparent until 18 to 24 months, when such skills are typically acquired.

Q: Why has it taken so long to get this kind of early screening test?

A: Because many autism symptoms involve skills that don't develop until 18 to 24 months, such as imaginary play and peer relationships, clinicians weren't certain that they could reliably screen for or diagnosis autism before that age. We have learned a lot about how autism emerges in infants by studying home videotapes or by following infants who are at high risk for autism because an older sibling has the condition. This has allowed us to define earlier symptoms and has led to screening measures for infants and toddlers.

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