Autism Diagnostic Research Centre Southampton

Andrew Stamp

Autism

- A Neuro-Genetic Pervasive Developmental Disorder
- Interacting with external environmental conditions
- Became a distinct diagnosis in 1992,
- International Classification of Diseases (ICD-10); in 1994

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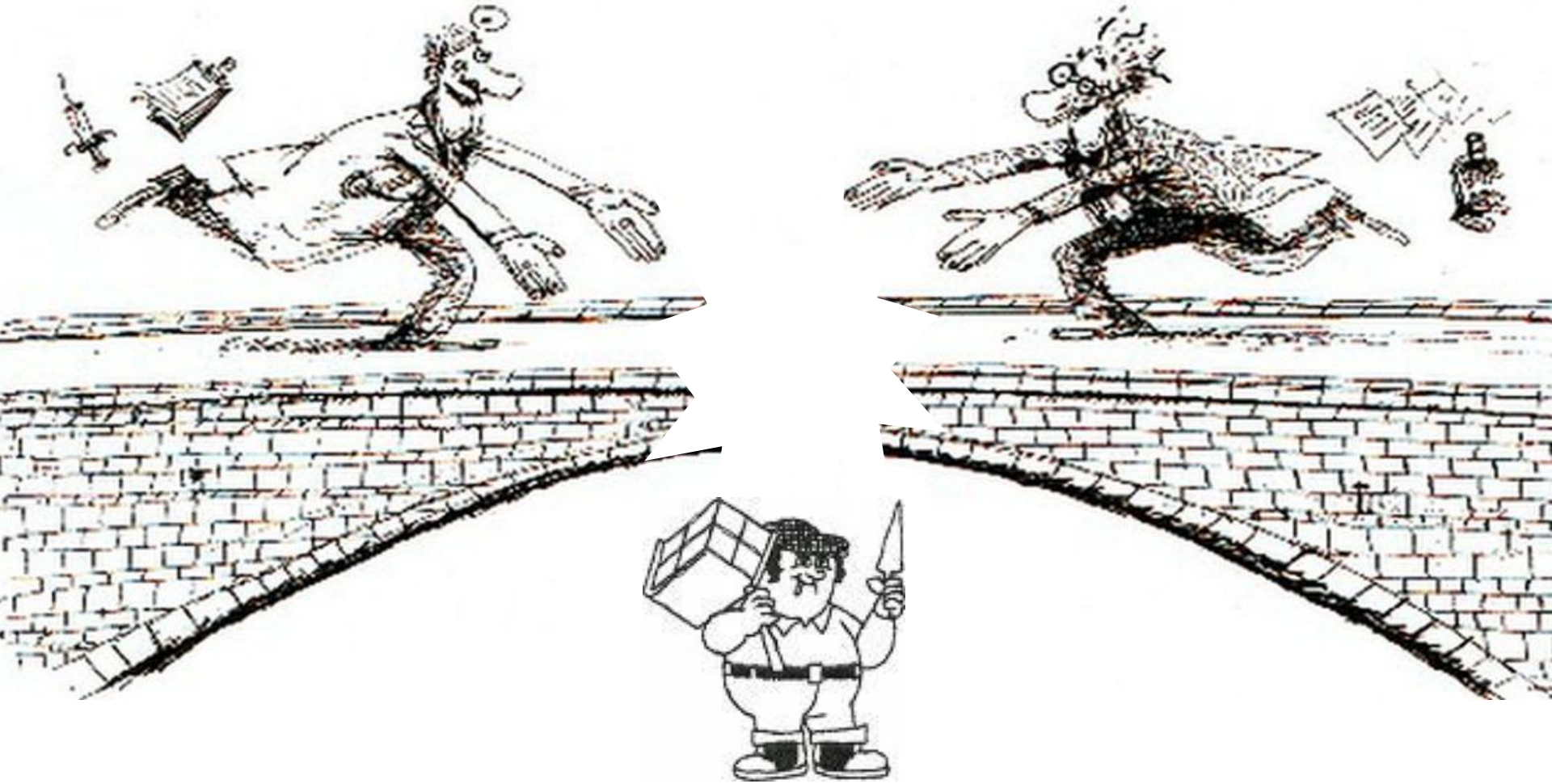
Is there a problem?

Learning Disabilities

Psychiatric Disorders



Is there a problem?

- Each case is unique
- It is not just a question of “yes or no”
- Standards and definitions vary
- Transition: to adulthood **and** other life events
- Need for:
  - consistent standards...from
  - qualified professionals...who have received
  - thorough training
  - consistent, accurate and up-to-date data

Is there a problem?

- Those not diagnosed
- Those diagnosed in infancy
- Incorrect diagnosis
- Time taken to get a diagnosis
- Variable definitions and standards
- More than one condition (dual diagnosis)
- What to do after diagnosis

Particularly important at times of transition

Autism Diagnostic Research Centre Southampton

- Not-for-profit “spinout” company
- Diagnosis and assessment
- Adults/Adolescents
- Sustainable Business Model
  - Low fixed costs
  - £125,000 charitable funding
- Research opportunities

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Our aims

- Determine a formal diagnosis
- Address co-existing conditions
- Identify an individual's specific profile of strengths
- Enable the individual to live a more engaged, safe and fulfilling life (and cope with transitions)
- High standards, evidence based, replicable

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Referrals

- Sources:
  - GPs via PCT
  - Psychiatry
  - Social Services
  - Courts
  - Lawyers
- Triggers
  - Transition
  - Life event
  - Crisis

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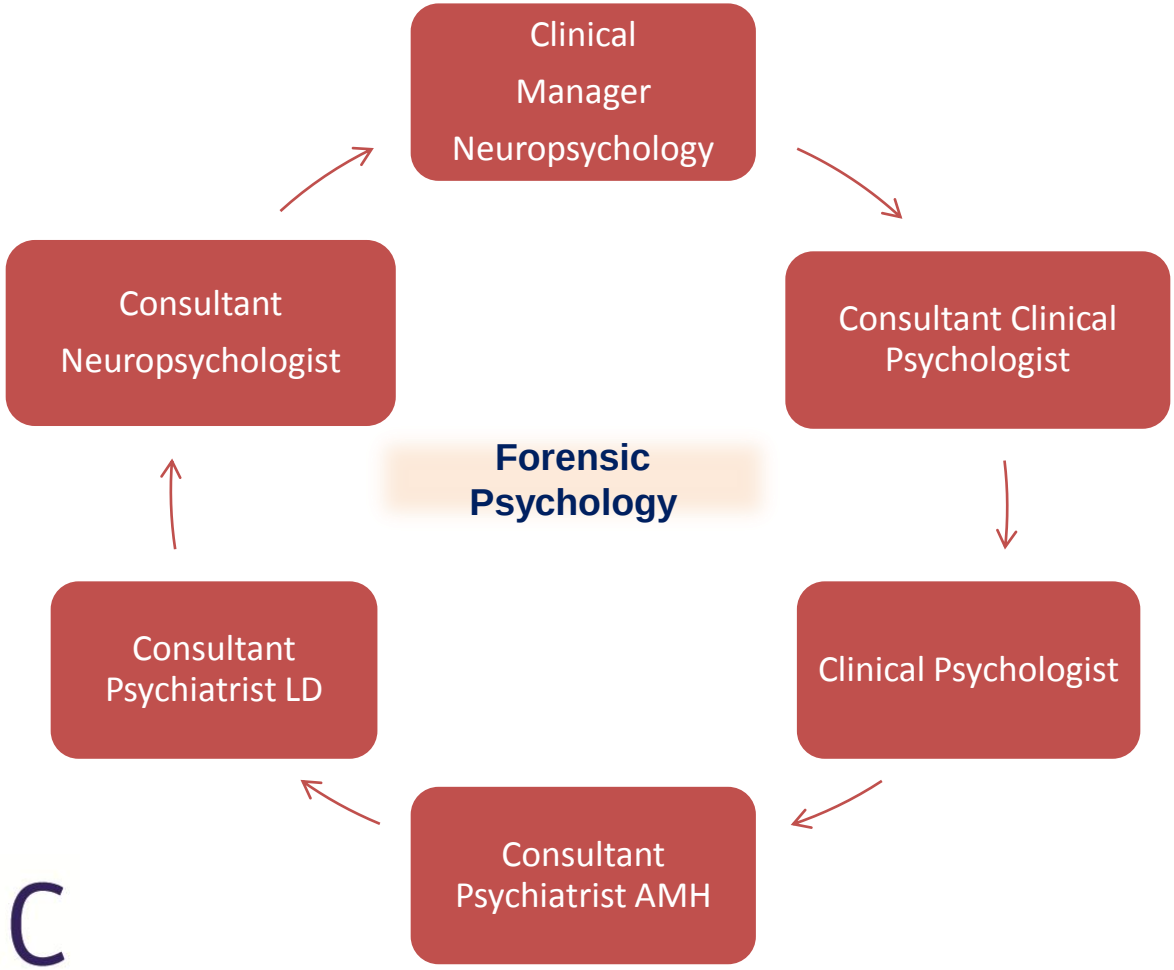
ADRC Clinical Team



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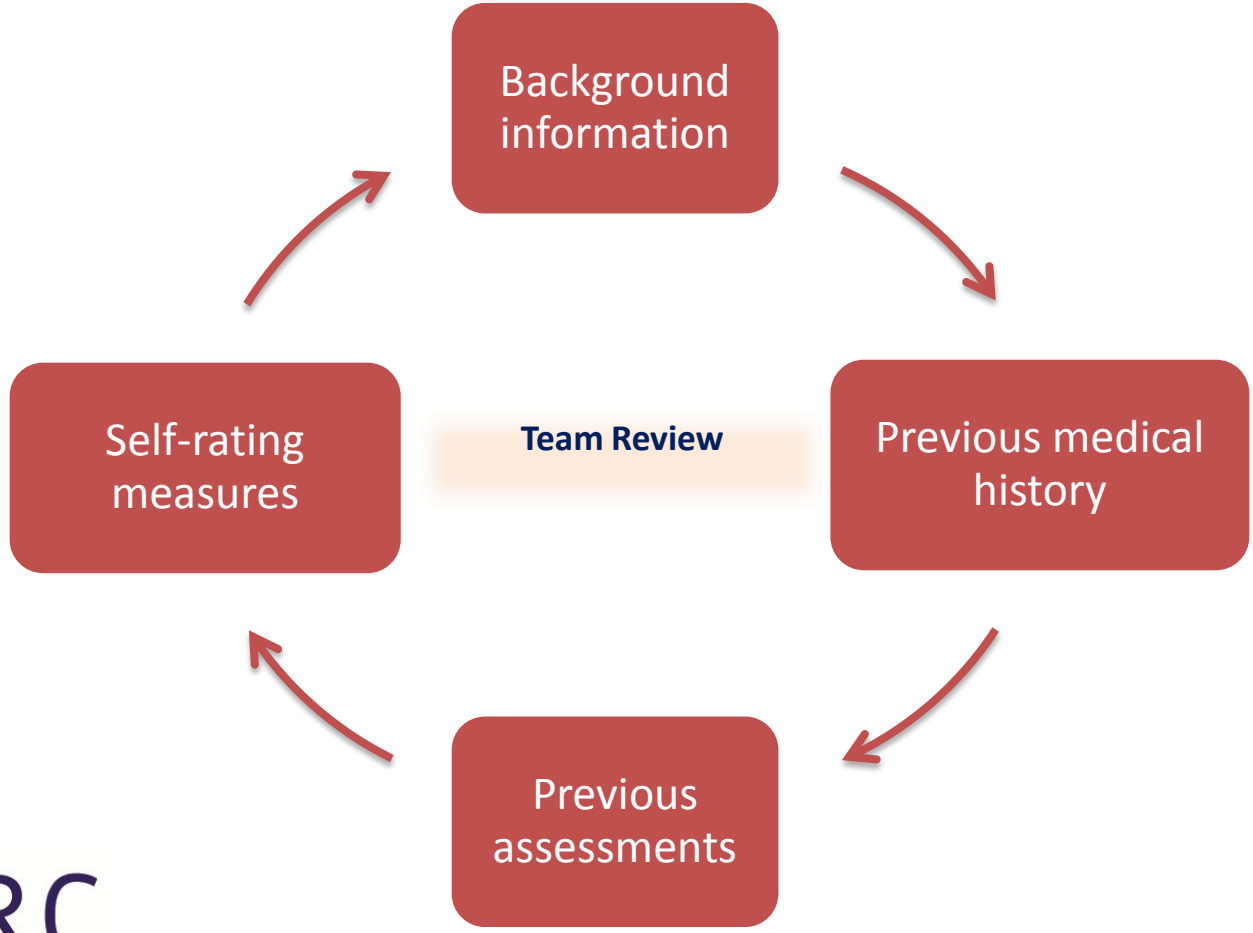
Process for ADRC

- Triage
- Developmental History
- Diagnostic Assessment
- Rapid process
- Thorough and replicable tests
- “Peer review” of findings
- Report and recommendations for action

Triage



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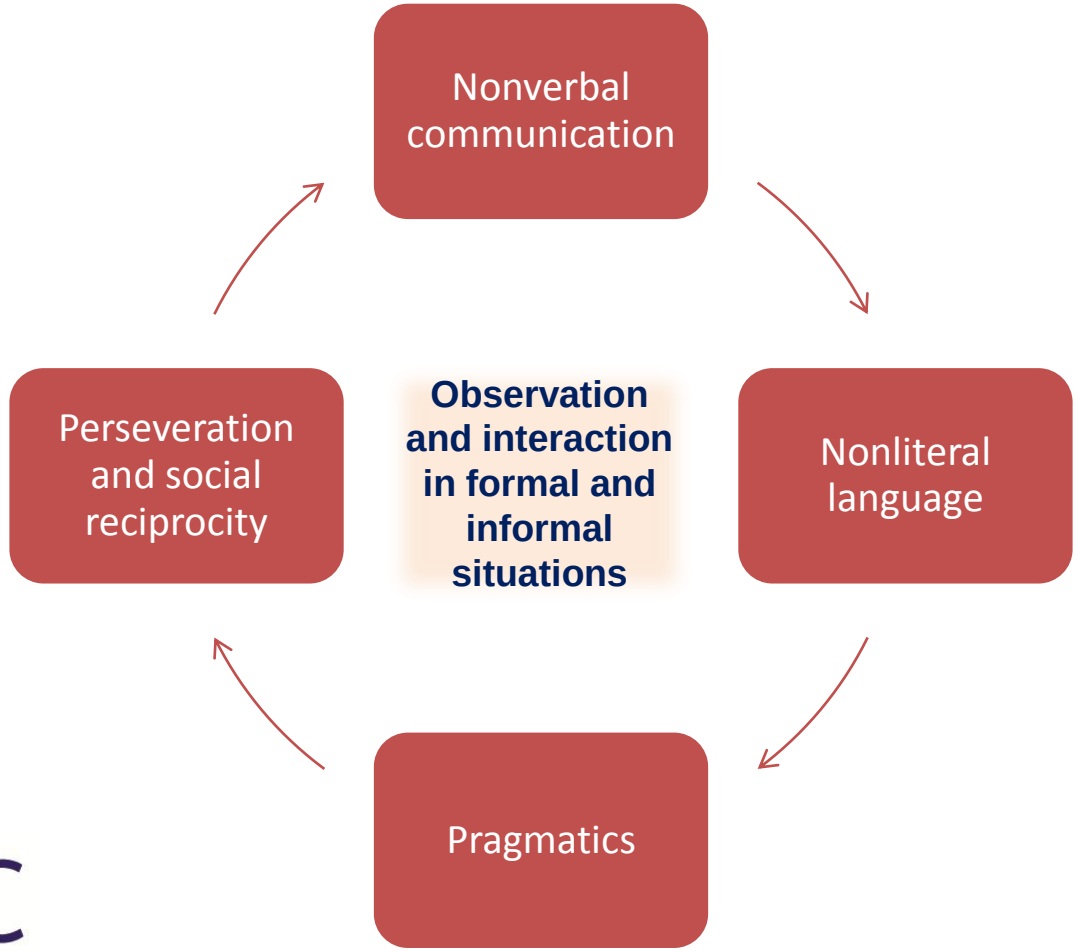
Diagnostic Assessment



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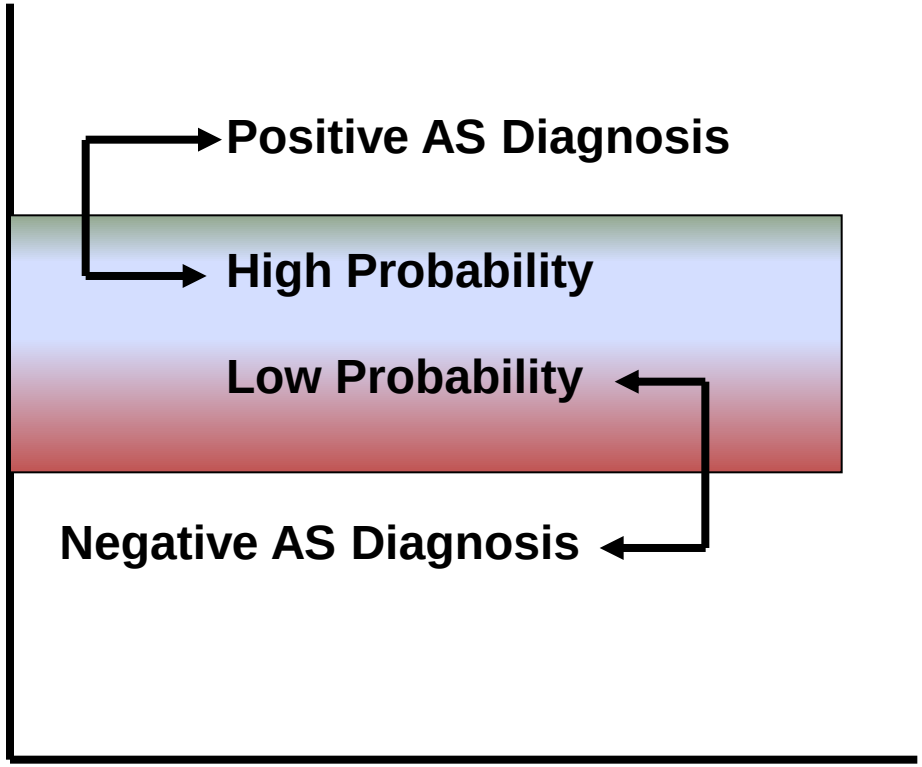
No Developmental History



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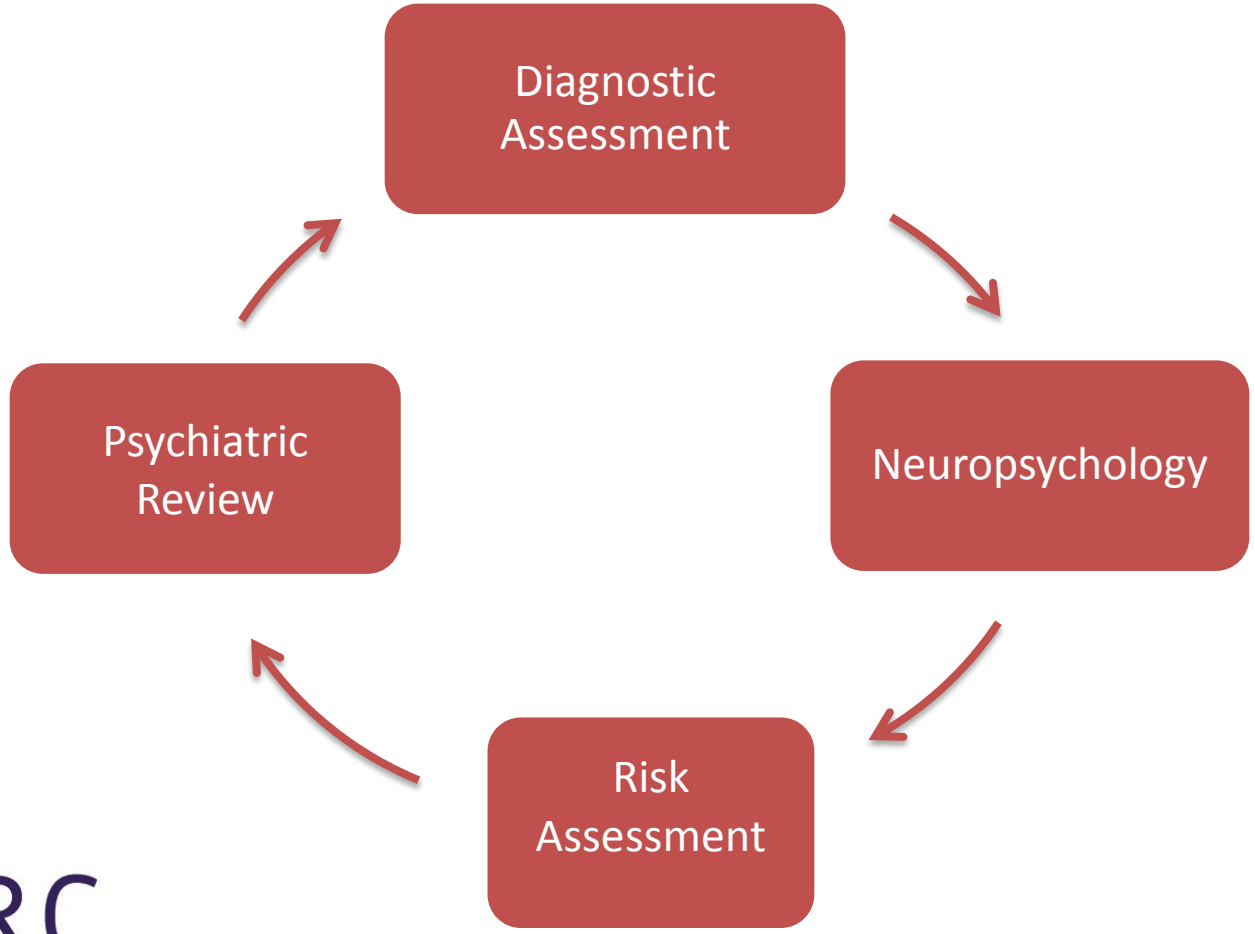
Interdisciplinary Assessment



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Difficulties of Diagnosis

PROBABLE DIAGNOSIS

- Presence of triad of impairments
- Absence of any other explanation

DIFFERENTIAL DIAGNOSIS

- It may be something else that is presenting as Asperger syndrome

DUAL DIAGNOSIS

- It may be that there is something else overshadowing Asperger syndrome

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ADRC Report

- Plain Language
- For patient, family, GP. Social Services
- Clear Diagnosis
- Strengths as well as deficits
- Recommendations for living and support (Includes coping with transition)

ADRC Measures

Triage Review

Diagnostic Assessment

•Revised Cambridge Personality Questionnaire (SQ)
•Adult Autism Spectrum Quotient (AQ)
•Cambridge Behaviour Scale (EQ)
•Adult Asperger Assessment (AAA)

Psychiatric Assessment

•Standard Psychiatric Interview

Neuropsychological Assessment

•Behavioural Assessment of the Dysexecutive Syndrome (BADS)
•Hayling Sentence Completion and Brixton Spatial Anticipation Tests
•Revised Eyes Task
•Rey-Osterrieth Complex Figure Test (RCFT)
•Speed and Comprehension of Language Processing (SCOLP)
•STROOP Test
•Trail Making Test
•Wechsler Adult Intelligence Scale-III (WAIS-III)
•Wechsler Memory Scale-III Abbreviated (WMS-III abbreviated)
•CANTAB: Tests presented using a touch-screen computer:

visual recognition memory
visual spatial span
visual sustained attention
rule acquisition and attentional set shifting
spatial planning and motor control.

CANTAB®

Cambridge Cognition

ADRC Report

Working memory refers to the ability to hold and manipulate information for a very short period of time (i.e. seconds).

	Weakness	'Average' range	Strength
Repetition of verbal / auditory information			
Manipulation of verbal / auditory information			
Repetition of nonverbal information			
Manipulation of nonverbal information			

ADRC Outcome

- Sustainable organisation
- Attracts complex cases
- Follow-up research suggests positive outcomes
  - for those diagnosed
  - for funding authorities
- Future:
  - Extended services
  - Facilitate more clinics