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Last Modified: January 3, 2018 at 3:59 p.m. Pedro Muxfeldt . Autism refers to autism spectrum disorders after the publication of the fifth version of the American Psychiatric Association's Mental Health Manual in 2013. This classification applies to a number of conditions, most of which began as early as childhood and follow the patient throughout life. Autism is based on Asperger's syndrome, autistic disorder, childhood degradable disorder and general undetermined developmental disorder. These conditions form what we call autism spectrum disorders (ASD). Asperger's syndrome is also classified as mild autism. Patients affected by this disease are able to communicate, but also cause difficulties in this area, as well as in learning and socialisation issues. Despite the fact that the symptoms are not as severe as other forms of the disease, a patient with mild autism also needs medical monitoring, drug use and approximate treatment to develop in the best possible way. About three years ago, the newspapers began reporting that Argentine footballer Lionel Messi had Asperger's syndrome. The suspicion was based on repeated movements - one of the characteristics of the condition in many patients - that the athlete performed on and off the field. However, the athlete denied the diagnosis. The main symptom of autism is the difficulty of communication and socialization. In addition, the patient may have intellectual disability, motor coordination problems, sleep disturbances and repetitive movement. Autistic can also cause sensory sensitivity, meaning one or more of the five senses are more or less sharp. Finally, autism spectrum disorders may be associated with other diseases such as attention deficit, hyperactivity and dyslexia. People with autism have an increased risk of developing anxiety and depression. Potential disorders for autism are characterized by a huge variation in the intensity of symptoms from person to person. One of the main concerns of mothers and fathers of children with autism is education. In general, an autistic person has learning difficulties, as speech, interaction and cognition skills are required for this purpose, which can be lacking in patients with disorders. However, children with autism are as capable of learning as everyone else and should be enrolled in ordinary schools. They need more attention from teachers and guardians to achieve their goals in their development time. Treatment of autism spectrum disorders should be based on stimulating the child's abilities. Actions should be taken in the areas of communication, social interaction and the development of new patient skills. Both at these and other stages of treatment, parental participation and education is essential. Treatment for autism should also be supplemented by cognitive behavioral therapy, which according to recent scientific studies guarantees healing in 78% of autistic patients aged 7-11 years. In addition, the use of drugs for target symptoms such as irritability, hyperactivity, insomnia, obsessive-compulsive symptoms, anxiety and depression. It is also important that treatment is started as soon as the disease is diagnosed. The sooner he starts, the better the chances for the patient. Photo: © Dmitry Lobanov - 123RF.com Because autism is a spectrum that covers a wide range of levels of activity and disorders ranging from speechless, low-function autism to Asperger's syndrome, highly verbal. These disorders have some common characteristics, but also significant differences. Types of autism spectrum disorders Understanding different types of autism can help teachers and parents' expectations shape and work in challenging areas. If you are concerned that you or your child may have any of these developmental disorders, it is important to speak immediately with your doctor or special education professional. According to a study published in the journal Research on Developmental Disabilities, early intervention and treatment can dramatically improve a child's function, regardless of the type of autism they have. • CLASSICAL AUTISM, characterized by problems with communication, social interaction and repetitive behavior, classical autism is typically diagnosed before the age of three. Warning signs include the development of delayed language, lack of sharpener or gesturing, lack of objects and self-stimulating behavior, such as shaking or tapping hands. In most cases, the disease causes significant developmental delays and parents or carers notice that

something happens during the child's years. However, in cases of high level of activity, the child may be five years of age or older before receiving a diagnosis. • CLASSICAL AUTISM CAN RANGE FROM MILD TO HIGH FUNCTIONING DIFFICULT OR LOW FUNCTIONING: Functional autism is associated with symptoms such as delayed or un functioning language skills, compromising social development or lack of role-playing ability with toys, and performing other playful activities performed by neurotypical imaginative children. However, people with high-level autism has an IE in the normal range and must not have any compulsive or suicidal behaviors often found in low-functioning autism. Low-functioning autism is a more serious case of the disease. The symptoms of autism are profound and are associated with serious deficiencies in communication skills, poor social skills and stereotypical repetitive movements. In general, low-functioning autism is associated with a low-average IQ. • ASPERGER SYNDROME Although it has not been included as a separate diagnosis in the final review of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V), many people have had asperger's syndrome marked. This type of well-functioning autism has some specific characteristics, such as exceptional verbal skills, problems of symbolic play, problems with social skills, challenges involving the development of thin and coarse motricity, and powerful or even obsessive special interests. Asperger's syndrome differs from classical autism in that it does not mean significant delay or weakening of the tongue. However, children and adults taking Asperger's can consider the challenge of functional use of the language. For example, they can mark thousands of objects, but they may have difficulty asking for help with one of these items. • INVASIVE DEVELOPMENTAL DISORDER – WITHOUT FURTHER SPECIFICATION (PDD-NOS) Invasive developmental disorder – No other specification (PDD-NOS) is another autism spectrum disorder that no longer performs a separate official diagnosis in DSM-V. Instead, mental health professionals diagnose these individuals with functional or poorly functioning autism. Also known as atypical autism, PDD-NOS contains some, but not all, of all the classic characteristics of autism. People diagnosed with PDD-NOS may struggle with language or social skills and repetitive behavior, but they cannot face challenges in all three areas. This disorder differs from Asperger's syndrome due to language skills; some PDD-NOS surprises may have language delays. • RETT DISORDER ANSWERS TO FREQUENTLY ASKED QUESTIONS ABOUT DSM-5 When considered an autism spectrum disorder, Rett syndrome is not included in the DSM-V autism spectrum. This is because Rett's disorder is caused by a genetic mutation. Although the symptoms of the disorder, which include a loss of social and communication skills, mimic classical autism, the disease goes through several different stages. Typically, children diagnosed with Rett's disorder overcome many challenges similar to autism. They may face other challenges, such as: and posture problems that do not affect most people on the autism spectrum. • DEGRADABLE CHILDHOOD DISORDER. Another autism spectrum disorder that does not lead to a separate diagnosis in DSM-V, childhood decomposing disorder (CDD), is characterized by a loss of communication and social skills at the age of two and four. This disorder has a lot in common with regressive autism and is usually classified as a disorder of the autism spectrum. Seek help if you are concerned understanding different types of autism, whether or not these disorders have a separate official diagnosis, can be very useful in forming expectations, planning a treatment plan, and experimenting with behavioral strategies. For all autism spectrum disorders, it is important to seek help as soon as you suspect that something may not be right. Active involved in treatment is the biggest thing you can do to help your child or yourself overcome some of the challenges of autism spectrum disorders. Source: AutismTypes credit: Autistic space autism is a developmental disorder that compromises communication skills and social interaction and usually occurs up to 3 years of life. (1) Photo: shutterstock/Chinnapong In May 2013, the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) was published, bringing with it some significant changes, such as new diagnoses and changes to the names of diseases and diseases that have already been seen. In this guide, autism as well as Asperger's syndrome were included in a new medical and comprehensive term called Autism Spectrum Disorder (ASD). DON'T STOP NOW. YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) With this new definition, Asperger's syndrome is therefore considered a milder form of autism. Thus, patients are diagnosed only in degrees of deterioration, and the diagnosis becomes more complete. Autism spectrum disorder is defined by DSM-V as persistent gaps in social communication and social interaction on multiple occasions, currently or according to previous history. Symptoms Symptoms of autism Most parents of children with autism suspect something is wrong before the child turns 18 months old and seeks help before he or she reaches the age of 2. DON'T STOP NOW. YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Among the symptoms presented, children with autism tend to have difficulties: (3) Playing social interaction Social communication Verbal and non-verbal communication How do you know if a child takes too long to talk? Some autism seems common before one or two years, but suddenly declines and loses the linguistic or social skills it acquired in the past. This type of autism is called regressive autism. DON'T STOP NOW. YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) A person with autism may have symptoms: You have too sensitive vision, hearing, touch, smell or taste (for example, they can refuse itchy clothes and become anxious if they are forced to wear them) Get an abnormal emotional change when the routine changes Make repeated body movements abnormal affection for objects. The characteristics of autism can range from moderate to severe. DON'T STOP NOW. YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Autism communication problems may include: Starting or maintaining a social conversation Communicate with gestures instead of words Develop a language slowly or don't develop it Don't adjust the vision to look at objects viewed by other people Don't refer to yourself correctly (for example, say you want water when a child means I want water) Don't show to pay attention to objects (it happens to us for the first 14 months of life) Repeat words or metican-taught excerpts such as commercial Use meaningless rhymes There are several symptoms that may indicate autism, and the child does not always present them all. Symptoms of autism can be grouped: DO NOT STOP NOW... YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Don't befriend Don't be friends Don't participate in interactive games It's pulled Out It may not respond to eye contact and smiles or avoid eye contact Can treat people like objects Prefer to be alone, instead of sociable Shows lack of empathy Don't be afraid with loud noises Vision, hearing, touch, smell or taste increase or decrease Can keep normal sounds painful and cover your ears with your hands Can avoid physical contact by being too stimulating or reduced anxiety Hieroo surfaces , put your mouth in objects or lick Them seem to increase or decrease the pain response does not mimic the actions of others Prefer lonely or ritual games Do not joke or imagination DO NOT STOP NOW ... YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Intense rage attacks Get stuck in one topic or task (perseverance) Low attention Capacity Few interests It is hyperactive or too passive Aggressive behavior with or with other people A strong need for repetition Makes repetitive body movements . My Life Overview Types Autism Spectrum Disorder can be divided into three types: (5) DO NOT STOP NOW... YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Asperger's syndrome is a neurobiological disorder that falls into the category of global developmental disorders. For many years, it was considered a separate condition, but closely and closely related to autism. Asperger's syndrome, as well as autism, has been included in a new medical and comprehensive term called Autism Spectrum Disorder (ASD). With this new definition, the syndrome is now considered a milder form of autism. Thus, patients are diagnosed only in degrees of deterioration, so the diagnosis becomes more complete. Read more about Asperger's syndrome. People with autism disorder often face significant language delays, social and communication challenges, as well as unusual behaviors and interests. Many people with autism disorders also have intellectual disabilities. DON'T STOP NOW. YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) People who meet some of the criteria for autistic disorder or Asperger's syndrome, but not all, can be diagnosed with an invasive developmental disorder. People with this type of disorder tend to have small and lighter symptoms than autistic disorder. Symptoms can only cause social and communication challenges. Currently, autism spectrum disorder is divided into degrees and its severity: DON'T STOP NOW... YOU HAVE MORE AD :) DON'T STOP NOW. YOU HAVE MORE AD :) Media: Serious deficiencies in verbal and non-verbal social communication skills cause serious dysfunction, restrictions on initiating social interactions, and minimal response to social openings starting with others. Repetitive and limited behavior: Behavioral inflexibility, extreme difficulties in dealing with change or other limited/repetitive behaviors strongly interfere with activity on all spheres. Great suffering/difficulty changes concentration or actions. Media: Serious deficiencies in verbal and unspoted social communication, obvious social disabilities even in the presence of support, restrictions on starting social interactions, and weakening or abnormal response to other social openings. Repetitive and limited behavior: Behavioural inflexibility, difficulty dealing with change or other limited/repetitive behaviors seem to be obvious to the casual observer often enough and interfere with activity in various Suffering/difficulty changes focus or actions. Media: In the absence of support, media deficits cause significant losses. Difficulties in opening up social interactions and clear examples of atypical or failed responses to other people's social openings. You may not be interested in social interaction. Repetitive and limited behavior: Behavioral inflexibility causes significant disruptions in activity in one or more contexts. Difficulties in changing the way things work. In organisation and planning, problems are obstacles to independence. The causes of autism are not yet known, but research in the area is becoming increasingly intensive. There is likely to be a combination of factors that lead to autism. It is known that genetics and external substances play a key role in the causes of the disorder. According to the American Medical Association, a child's chances of developing autism due to genetic inheritance are 50%, and the other half of cases can correspond to exogenous factors such as the reproductive environment. (2) In any case, many genes appear to be involved in the causes of autism. Some make children more susceptible to disorder, others affect brain development and communication between neurons. Others determine the severity of the symptoms. External factors that can contribute to the onset of the disorder include air pollution, complications during pregnancy, infections caused by viruses, gastrointestinal changes, mercury contamination and vaccine sensitivity. And speaking of which, it is still strongly believed that some vaccines can cause autism in children. Parents may ask a doctor or nurse to wait or even refuse to use the vaccine. However, it is also important to consider the risks of not vaccinating the child. Some people believe that a small amount of mercury (called throsal), a common preservative in multidose vaccines, causes autism or ADHD. However, studies DO NOT show that this risk is true. The U.S. Academy of Pediatrics and the U.S. Institute of Medicine agree that no vaccine, or part of it, is responsible for the number of children who are currently diagnosed with autism. They concluded that the benefits of vaccines outweigh the risks. All routine childhood vaccines are available in single dose forms with no mercury added. The exact number of children with autism is unknown. A report released by the U.S. Centers for Disease Control and Prevention (CDC) suggests that autism and related disorders are much more common than one might think. It is unclear whether this is due to or increasing the diagnostic capacity of the problem. Autism affects boys 4-5 times more than girls. Family income, education and lifestyle do not seem to affect the risk of autism. Some doctors believe that the higher prevalence of autism is due to new definitions of the disorder. The term autism now includes a wider range of children. Today, for example, a child diagnosed with highly functioning autism could simply be considered shy or in learning difficulties 30 years ago. Other similar developmental disorders include: Rett syndrome: very different from autism, occurs only in women Childhood degradable disorder: a rare disease in which a child acquires skills and then forgets everything before the age of 10 A pervading development, although a disorder: an undetermined one also called atypical autism. Risk factors Some factors are considered to be at risk of developing autism. See: Gender: boys are four to five times more likely to develop autism than girls in family history: families who have already had someone with autism are at greater risk of having another later. Similarly, it is common for some parents who have raised an autistic child to have communication and social interaction problems themselves Other disorders: children with specific health problems tend to have a higher risk of developing autism than other children. Epilepsy and tuberous sclerosis are among these disorders The age of parents: the older the age of the parents, the more chances the child has of developing autism until the age of three. Symptoms Seeking medical help Children usually give the first signs of autism in the first year of life. If you notice any signs of a disorder in your child, talk to your doctor. He may recommend specific tests. The behavior of a vigilant child is: Do not respond with a smile or a statement of good health after six months Do not imitate sounds or facial expressions after nine months Do not babble at the age of 12 months Do not gesticular at 12 months Do not say a word at 16 months of age Do not say phrases consisting of at least two words at 24 months of age Lose social and communication skills at any age. Autism diagnosis and diagnostic examinations The doctor is looking for signs of delay in the child's development. If the main symptoms of autism are detected, it will refer the child concerned to a specialist who can make a more accurate and accurate diagnosis. Usually it is done before the age of three, since signs of disturbance usually appear early. To make a diagnosis, the doctor uses a diagnostic and Mental disorders from the American Psychiatric Association. According to him, a child may have autism diagnoses if they have at least six classic symptoms of the disorder. Exams All children should have routine developmental tests with a pediatrician. Further tests may be required if the doctor or parents are concerned. For the sake of autism, this should be done primarily if the child does not reach the language milestones. These children can take a hearing assessment, blood lead test and autism screening test, such as an autism screening list in children (CHAT) or an autism screening questionnaire. Diagnosing usually requires an experienced doctor to diagnose and treat autism. Since there are no biological tests for autism, diagnosis is often made on the basis of very specific criteria. Photo: shutterstock/Dmytro Zinkevych Autism assessment typically includes complete physical and neurological research. It may also include some specific research tools, such as: Revised Autism Diagnostic Observation Program (ADOS) Autism Classification Scale in Children (CARS) Gilliam Autism Classification Scale Screening Test for Invasiiv Developmental Disorders. Children with autism or suspected autism typically undergo genetic testing for chromosome abnormalities. Autism contains a wide range of symptoms. Therefore, a single and rapid assessment cannot demonstrate a child's true abilities. Ideally, a team of different experts should evaluate a child with suspected autism. They are able to assess: communication, language, motor skills, speech, school performance and thinking skills. Treating and treating autism There is no cure for autism, but an early, intensive and appropriate treatment program greatly improves young children's chances of the disorder. Most programs increase a child's benefits with a highly structured schedule of constructive activities. Visualizations are often useful. The main objective of treatment is to maximise the child's social and communication skills by reducing autism symptoms and supporting development and learning. But the most successful form of treatment is what is directed to the special needs of the child. An expert or an experienced team should develop a program for each child. There are several treatments available for autism, including: Communication treatments and behaviorAl medications Occupational therapy Physiotherapy Therapy therapy/language therapy There are several programs for treating problems communication and behaviour related to autism. Some focus on reducing behavioral problems and learning new skills. Others tend to teach children how to act in certain social situations and communicate appropriately. One such program is ABA, short for Applied Behavior Analysis. ABA uses personalized learning that strengthens the practice of different skills. ABA programs are typically done at the child's home under the supervision of a behavioral psychologist. Another very recurring program as an alternative treatment is TEACCH (Short for Treatment and Education for Autistic and Children with Communication-Deficit Relateds), which uses other visual resources that help a child work independently and organize and structure their environment. TEACCH is trying to improve a child's abilities and adaptation while accepting problems related to autism spectrum disorders. Unlike ABA programs, TEACCH programs do not expect children to achieve normal development through treatment. There are no drugs capable of treating the main symptoms of autism, but often drugs are used to treat behavioral or emotional problems that autism patients are present in, such as aggression, anxiety, attention deficit problems, extreme compulsions that cannot be controlled by a child, hyperactivity, impulsivity, irritability, mood swings, outbreaks, sleep difficulties and anger attacks. Not all experts agree that dietary changes matter, not all studies of this method have shown positive results, but if you consider these or other dietary changes as your child's treatment pathway, it is advisable to talk to a gastroenterologist (gastrointestinal specialist) and nutritionist. Some children with autism seem to react to gluten-free or uninserted diets. Gluten is found in foods containing wheat, rye and barley. Casein is found in milk, cheese and other dairy products. Many treatments without scientific basis and stories of miracle cures that do not meet expectations are advertised for autism. If your child has autism, it may be useful to talk to parents of other children with autism and autism specialists. Follow the progress of research in the rapidly developing region. An example of these early treatments is a secret infusion. There has been a lot of excitement about this method of treatment in the past. Now that there's been a lot of research in different labs, it's possible secretin won't do anything. children with autism. However, the investigation continues. Autism medications The most medications to treat autism are: Only a doctor can tell you which medication is best suited for your case, as well as the correct dosage and duration of treatment. Always follow your doctor's instructions and I will never self-medicate. Do not stop taking this medicine without consulting your doctor first, and if you take it more than once or more than prescribed, follow the instructions in the package leaflet. Living (prognosis) Does autism have a cure? There is no cure for autism. However, there are several methods to enable learning and development so that people on the autism spectrum have a good quality of life. (4) Diagnostic and possible complication tests Autism may be associated with other disorders affecting the brain, such as brittle X syndrome, intellectual deficit and tuberous sclerosis. Some people with autism may also develop seizures. Autism treatment stress can lead to social and emotional complications for family and carers, as well as autism for the person himself. Therefore, psychological monitoring for both one and the other is necessary. Housing/prognosis Autism is still a difficult disorder for children and their families, but the current perspective is much better than in the previous generation. At that time, the majority of people with autism were admitted to institutions. Today, with the right treatment, many symptoms of autism can improve, although some people remain with some symptoms throughout their lives. Most people with autism can live with their families or in society. The perspective depends on the severity of autism and the level of care a person receives. Seeking help from other families with relatives with autism and professionals who provide the necessary support to relatives is also an interesting option. Prevention There is no formula to prevent autism, but recent studies show that the role of genetic inheritance in the development of the disorder is not as great as it was supposed to be. Genes play 50% of a child's chances of developing autism. Unlike at least half of the cases, there is not much to do against human genetics. But the other 50% correspond to external factors that are well related to the environment in which the child grows up and behavioral habits. This opens up a huge field of research, particularly in the field of autism prevention. References reviewed by Dr Evelyn Vinocur, psychiatrist and neuropsychiatry master fluminense from Federal University (UFF) and cognitive behavioural psychotherapist specialising in mental health ja Santa Casa de Misericórdia do Estado do Rio de Janeiro (SCMRJ) ja Rio de Janeiro osavaltionyliopiston (UERJ) nuoruus. Brazilian psykiatrisen yhdistyksen (CRM-RJ: 303514) (1) DSM-V, American Psychiatric Association - Diagnostinen ja tilastollinen käsikirja mielenterveyshäiriöistä 5(1) Muokkaa. Medical Arts (2) Maailman terveysjärjestö (WHO) (3) Journal of American Medical Association (JAMA) (4) National Autistic Society (5) Centers for Disease Control and Prevention (CDC)

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