

CLASSIFICATION OF CHILDREN WITH AUTISM SPECTRUM DISORDER

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Abstract

This article provides extensive coverage of the classification of autistic children and the specifics of child development.

Keywords: Autism, asperger's, syndrome, sensor, motor, socialization, mechanism.

Introduction

Autism is a mental condition that results from a developmental impairment of the brain and is characterized by a clear and comprehensive lack of social interaction and communication, as well as limited social relationships and repetitive movements. All these signs begin to manifest themselves before the age of three. Similar conditions in which mild signs and symptoms are noted are called autism spectrum disorder.

In many respects, the development of autism is due to the impact of ecology on nature by various harmful productions and the accumulation of these harmful substances in the human body by the lack of skills necessary to perceive and study the environment with the help of the intuitions present in the child. When it comes to autism spectrum disorder, parents notice unusual behavior in a child when a child reaches 18 months, and by 24 months, 80 percent of parents notice changes in the child. Parents should keep in mind. This mental state in children is corrected only with the help of pedagogy, the formation of nerve cells in the brain necessary to study the world around them. Due to the fact that the delay in the complex pedagogical effect can affect the long-term result, the child should be immediately shown to a specialist if there are any of the following signs:

- By 12 months of life, the baby does not cuddle yet;
- by 12 months of his life, he does not make gestures (does not wave his hand at things, does not wave to say goodbye, etc.);
- by 16 months, they cannot pronounce words;
- By 24 months, he does not utter two-word phrases (with the exception of Exolalia);
- By any age, there is a sudden loss of language or social skills.

The diagnosis is based on the analysis of the child's behavior, not the underlying factors or mechanisms. Autism should have at least six symptoms on the recommended list, at least two of which should imply a qualitative impairment of social interactions, and one should describe limited and repetitive behaviors. The list of symptoms is determined by the absence of social or emotional interactions, the stereotypical or repetitive nature of speech use, or the specificity of speech, and the presence of a persistent interest in certain details or things.





According to the International Classification of Diseases published by the World Health Organization

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- F84. 0 Child Autism (Child Autism)
- F84. 1 atipik autizm (Atypical Autism)
- F84. 2 Rett syndromes (Rett syndromes)
- F84. 3 Childhood Disintegrative Disorder
- F84. 4 Hyperactive disorder coupled with mental impairment / stereotypic behaviour (extreme impairment which is associated with mental withdrawal and stereotypical behaviour)
- F84. 5 Asperger syndrome (Asperger syndrome)
- F84. 8 Other major developmental disorders (Pervasive developmental disorders)
- F84. 9 Nonspecific Primary Developmental Disorders (Unidentified Primary Developmental Disorders)

Childhood Autism (Childhood Autism) Qualitative impairments in social interaction are characterized by at least two of the following five:

- 1. Inadequate use of eyes, facial expressions, body positions, and gestures to regulate social interactions;
- 2. Inability to develop relationships with peers using mutual interests, emotions, or common exchange of activities;
- 3. To calm or sympathize during aggression, those who rarely seek the help of other people and are unable to sympathize with the grief symptoms of others;
- 4. Lack of search to share joys, interests, or accomplishments with other people;
- 5. Lack of social-emotional interactions that manifest in response to other people's emotions, or lack of modulation of behaviors appropriate to the social context, or weak integration of social and communicative behaviors.

Qualitative breakdowns in the communications industry are presented by at least one of the following:

- 1. Delayed or incomplete development of spoken language, which does not accompany attempts to compensate through the use of gestures or facial expressions as an alternative model of communication;
- 2. the absence of various spontaneous fantasy, or (at an early age) social imitation game;
- 3. Relative inability to start or continue a conversation;
- 4. Stereotypical or repeated use of language, specific use of words and sentences.

Restricted, repetitive, or stereotypical types of behaviors, interests, or activities represented by at least one of the following four are:

- 1. active activities in stereotypical and limited types of interest;
- 2. Strictly compulsive adherence to certain non-functional routines and habits;
- 3. Stereotyping and repetitive mechanics
- 4. Stereotypical or repeated use of language, specific use of words and sentences.

Restricted, repetitive, or stereotypical types of behaviors, interests, or activities represented by at least one of the following four are:



- 1. Active activity in stereotypical and limited types of interest;
- 2. Strictly mandatory adherence to certain non-functional procedures and ceremonies;
- 3. Stereotypical and repetitive mechanical movements;
- 4. Actions with parts of subjects or non-functional elements of game material.

To be diagnosed, one must have symptoms of a developmental disorder in the first three years of life. Reflecting the attempts to reach diagnostic consensus in this area, it can be argued that the differences between the last 2 diagnostic criteria are not major.

There are some common symptoms in autism, but are not considered basic for diagnosis. However, they are noteworthy, these are hyperactivity (especially during early childhood or adolescence), auditory hyper and photosensitivity and various reactions to sound (especially pronounced in the first 2 years of life, but usually occasionally or continuously present in adults), hypersensitivity to touch, unusual habits during eating including non-food eating, selfharm, low sensitivity to pain, aggressive manifestations and mood swings. They occur in at least 1/3 of people who have this disease.

Rett's Syndrome

Rett syndrome (Rett syndrome) A neuropsychiatric hereditary disorder that occurs in girls with a frequency of almost 1:10000 \u2012 1:15000 is the cause of severe mental impairment in girls. The disease was first founded by Austrian neurologist Andreas Rett (German Andreas Rett) in 1966. Between the ages of 6 and 18 months, the development of a child is typical, but then begins to lose the skills that are familiar with speech, motor and subjects. What is characteristic of this situation is the stereotypical, monotonous movements of the hands, rubbing them, while at the same time acting inappropriately. Speech becomes difficult, answers become monotonous or exolic, sometimes speech disappears completely (mutism). There is a low psychological tone. The child's face gradually acquires a sad, "lifeless" expression, his gaze is not in the center of attention or is directed to a point in front of him.

Childhood Disintegrative Disorder. A rare disease that occurs after the first two years of normal development. Characteristic: abrupt loss of previously learned skills in areas such as speech, social skills, control of bowel or bladder functions; Sensor-motor coordination is also impaired. As a result, deep and irreversible dementia develops. The nature of the disease is not established, effective methods of preventing the disease are currently not available. It is thought to be associated with early childhood autism, such as Rett syndrome. Synonym: regressive syndromes.

Asperger Sindromi (Asperger's Syndrome)

Asperger's Syndrome (Asperger's Syndrome) Five common social interaction difficulties, as well as developmental disorders characterized by a repertoire of restricted, stereotypical, repetitive interests and activities. It differs from autism primarily in that speech and cognitive abilities are generally preserved. The syndrome is often characterized by obvious discomfort. The syndrome is named after the Austrian psychiatrist and pediatrician Hans Asperger, who in



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1944 described children limited to lack of nonverbal communication skills, empathy for their peers, and physical discomfort. Asperger himself used the term "childhood psychopathy with autism."

The modern concept of the syndrome, coined by English psychiatrist Lorna Wing (Lorna Wing) in a 1981 publication, coined the term "Asperger's syndrome" in 1981, and after a period of popularization, diagnostic standards were developed in the early 1990s. There are still many unresolved questions about various aspects of the syndrome. Thus, it is unclear whether this syndrome is different from high-functioning autism, so its prevalence has not been determined. It has been proposed to abandon the diagnosis of Asperger's syndrome altogether and replace it with a diagnosis of "autism spectrum disorder" that indicates violence. The exact cause of the syndrome is unknown. There is no single cure, and data are limited in favor of the effectiveness of existing support modalities.

Support focuses on improving symptoms and performance and draws on behavioral therapy, focusing on specific defects, and addressing poor communication skills, repetitive regular movements, and physical discomfort. Most children will improve as they get older, but social and communication problems may remain.

Atipik autism (Atypical Autism)

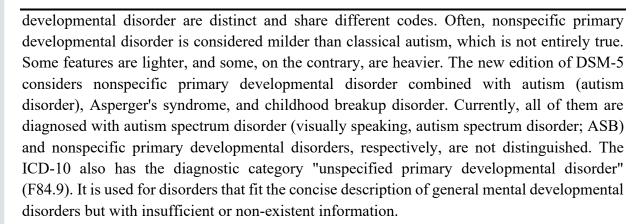
Atypical Autism (Atypical Autism) is caused by a developmental disorder of the brain and is characterized by a clear and comprehensive lack of social interaction and communication, as well as limited interests and repetitive movements. In childhood autism (F84.0), the age of onset (after 3 years) or the absence of at least one of the 3 diagnostic criteria. It is most often found in children with profound intellectual disabilities and in people with severe specific developmental disorders of receptive speech. To be diagnosed with atypical autism, the condition must meet the following criteria:

- 1. Abnormal or impaired development manifests at age 3 years or older;
- 2. Qualitative impairment of social interaction or qualitative impairment of communication, or restricted, repetitive and stereotypical behaviors, interests, and activities;
- 3. Not all of the symptoms shown in the diagnostic criteria for autism (F84.0) are present.

Unspecified Pervasive Developmental Disorders (unspecified)

Pervasive developmental disorders are not otherwise specified; PDD-NOS) is one of the three autism spectrum disorders and one of the five major developmental disorders in the obsolete classification. According to the 4th Edition of the American Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), a nonspecific primary developmental disorder is a profound impairment of social interaction or verbal and nonverbal communication, or is diagnosed if restricted behaviors, interests, and occupations do not meet specific criteria for primary and other disorders. Often a non-specific primary developmental disorder is called atypical autism because it does not meet the criteria for an autism disorder — for example, it manifests itself later, is otherwise or less defined, and all three criteria are combined. Nevertheless, the ICD-10 has atypical autism. However, in the ICD-10, atypical autism and nonspecific primary





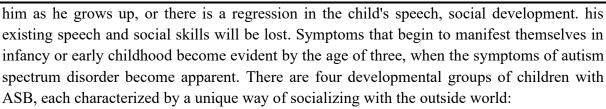
Overactive disorder associated with mental retardation and stereotyped movements. Hyperactive Disorder, combined with mental impairment and stereotypic behavior (excessive impairment associated with mental repulsion and stereotyped behavior), is characterized by a marked manifestation of hyperactivity, inability to concentrate, as well as insufficiently pronounced impairment in severely mentally impaired children with stereotypic behavior. Stimulants usually do not improve their condition—furthermore, drug addicts can experience severe dysphoric reactions when taking them. Hyperactivity during adolescence is often replaced by a decrease in activity.

Autism Spectrum Disorder (ASB) \u2012 Autism Spectrum Disorder (ASB) \u2012 is a term that combines a number of conditions that are characterized by a social development disorder, communication difficulties (both speech and non-speech), behavioral deficits, the presence of stereotypical behaviors, and more. The term "autism spectrum" is also widely used in the literature. The concept of autism-related disorders has been present in theoretical concepts since the days of Kanner and Asperger: both recognized that the level of ability and functionality differed markedly, as did the manifestations of autism. Many people with Asperger's syndrome are well-developed or even highly intellectual, with special interests that form deep fields of knowledge in narrow subjects. Under these conditions, productivity can reach an incredibly high level. Nevertheless, it is common for them to experience cognitive difficulties that do not fit into the social and behavioral framework.

Psychological and pedagogical features of autism spectrum disorder "Autism spectrum disorder" is not a separate diagnosis, it refers to a group of cases, but also reflects the idea of the manifestation of autism disorders and high variability of aggression, significant differences in the level of speech, cognitive development of children of this group. In the early development of children diagnosed with ASB, the researchers say there are several options for how and when autism symptoms appear. In some children, specific features of interaction with other people in the first months of life are noted, which cause concern of loved ones, although family members do not always voice their concerns to professionals. Another part of the child usually develops in a close variant, and the characteristics of the child appear to those close to



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Group 1. When trying to interact with a child, complete indifference to what is happening around is characterized by the phenomenon of extreme discomfort. A lack of social activity is hard to get any response from a child, even when it's close: looking with a smile. The children of this group try not to have any contact with the outside world, they can ignore vital needs, for example, hunger. Tolerate eye contact and avoid a variety of body contacts.

Group 2. Actively reject the environment. It is characterized not as a separation, but as a cautious selectivity in contact with the outside world, the child communicates with limited people, often these are parents, close people. Any disturbance of the usual rhythm of life leads to a strong affective reaction in the child. Children of this group tend to experience a greater sense of fear than others, as they behave aggressively, while aggression takes the form of autoaggression (self-directed aggression). Despite the severity of the variety, these children are more accustomed to life than children belonging to group 1.

Group 3. The children of this group try for their own benefit to find refuge from the world around them, and live in their own world. At the same time, their hat movements have a stable repetition form (stereotypical form) and developmental features are not featured. Hobbies are of a constant character, a child can speak for years in the same subject, draw or repeat the same plot in games. Their curiosity is often of a frightening, aggressive character.

Group 4. It is characterized by difficulties in interacting with the environment. The mildest variant of ASB manifestation. The main feature is an increase in emotional vulnerability, which is manifested in the avoidance of relationships if the child feels any obstruction.

Children with autism often have impaired communication skills, that is, the ability to communicate with other people. The first signs of these babies may manifest themselves up to 2 years of age. If eye contact is disturbed, both mild and generally more severe symptoms may occur. Signs of autism in children under the age of one are manifested by the fact that they use a certain gesture, want to get something, but at the same time do not seek to attract the attention of parents by incorporating them into their game. The child cannot perceive the holistic image of the person with whom he is trying to communicate. Even in the photo and video, one can admit that facial expressions such a baby do not correspond to the current situation. He doesn't smile when someone wants to cheer him up, but he can laugh for no reason at all.

The baby uses gestures only to indicate needs. As a rule, interest is sharply manifested even in children under the age of one, if they see an interesting subject – the baby laughs, shows a finger, demonstrates joyful behavior. Children with autism often do not participate in dialogue. Usually, how another person expresses themselves is perceived by them as something incomprehensible. Speech in children with autism is usually monotonous, free of emotions. Phrases are often disconnected, for example, children with autism say "I want water" instead



of "I want water." Often people with autism syndrome repeat sentences and phrases that other people say, children with autism often do not understand the meaning of what they are saying. Children with autism may yell or grab something in their eyes instead of speaking. Behavioral Autism is unpredictable for a person with autism. Such people often touch different things to get a feel for the shape.

Many children and adults with autism may have persistent habits. Even such activities as bathing can be very difficult for a person with autism: he or she requires a certain amount of water in the bathtub, the exact temperature of the water, the same towel, and the same soap that he used earlier. Unintended behaviors or actions can also be observed. For example, a person can always pull their hair out or wrap it around their finger, walk on their toes, clap their hands, etc. A child or adult may play the same game or carry the same toy on a regular basis. For example, a child can place all his toys in a row, and an adult can do the same with clothes, repeating the same movement every day.

With any attempt to stop children with autism, one can expect an unpredictable reaction, including one that is shocking. Objects that can be twisted, opened or closed capture the attention of children with autism. If a child with autism is left alone, he or she may sit alone for hours, watch something spin or spin, turn a lamp on or off. Some children with autism develop a special "love" for inanimate objects, such as grunting paper or a piece of paper.

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