**Autism Spectrum Disorders in Young Children**

**Abstract**

Autism is primarily a continuum of disorders, which, therefore, implies that there is a wide range of variations regarding the manner in which it affects people.  Autism Spectrum Disorder, as it is sometimes referred to, is usually diagnosed based on the presence of multiple indicators, which disrupt an individual’s ability to communicate effectively, engage in relationships, play, explore as well as engage in learning activities. Therefore, it should be understood that when a child shows few autism-like symptoms it does not necessarily mean that he or she has the ASD. In this particular excerpt, this paper seeks to explore a number of issues regarding the abovementioned condition in young children. The questions of concern here revolve around:

* What are the predisposing factors and symptoms of ASD?
* How treatable is the condition and why is it common in children?

Moreover, this research will employ secondary research methods to get the required information, which then will be used to make informed interpretations as well as conclusions. As a point of departure, it is critical to allude to the fact that research from the US center for disease control (CDC) indicate that the prevalence of Autism Spectrum Disorders in children is more in boys than in girls.

**Introduction**

As earlier mentioned Autism Spectrum Disorder is epitomized by the challenges experienced especially in social skills, repetitive behaviors, speech, non-verbal communications as well as unique strengths and differences (Matson, 2011). There are four core sub-types of autism, which include:

* Autistic Disorder - people with this type of disorder have substantial delays in communication, unusual behavior mannerisms as well as funny or unexpected interests.
* Asperger Syndrome – people who have this form of autism disorder do not display difficulties in language and communication but rather exhibit social challenges, behaviors as well as strange interests.
* Childhood Disintegrative Disorder - this form of autism is extremely rare and is widely associated with disintegrative psychosis.
* Pervasive Developmental Disorder-Not Otherwise specified PDD (NOS) - this form of autism also exists in isolated cases, which is why it is referred to as Not Otherwise Specified (NOS).

As a point of emphasis, parents and caregivers should be able to understand that two children with the same autism condition can display different behaviors and social deficiencies hence should avoid making ‘informed assumptions’ (Hollander, 2011). Rather, learning about the different disorders to understand them better coupled with meaningful consultations with medical practitioners is an ideal and desirable practice.

**Results and analysis of Secondary Research**

**What are the predisposing factors of ASD?**

Studies that have been conducted over time indicate that Autism Spectrum Disorders are caused by a combination of factors, which revolve around generic and non-generic (Hollander, 2011). Some of the most notable predisposing factors include but not limited to the following:

* The use of anti-seizure medicines during pregnancy
* Maternal metabolic conditions characterized by obesity and diabetes.
* Advanced parent age
* Alterations in certain genes, which results in the increase of the risks associated with children developing ASD. For instance, if a parent carries one gene or more they may get transferred to their offspring even though they are not expressed by the parents themselves (Recessive)
* The presence of untreated phenylketonuria
* Use of alcohol

**What are the symptoms of ASD?**

* Avoiding eye contact and desiring to be alone always
* Being very interested in people but not knowing how to relate to them, play or even talk to them
* Being unaware always when other people are talking about them
* People with the condition do not tend to look at objects when other people are pointing towards them
* People with the abovementioned condition might also have no interest in other people at all.
* Repetition of actions over and over again
* People with the condition also lose the skills they once had

**Why is autism common in young children?**

Young children are the biggest causalities when it comes to diagnosis of the Autism Spectrum Disorders. Various reasons have been given to support this argument but they tend to vary since behaviors of different people also vary (Dawson& Geschwind, 2006). First, since ASD is sometimes passed through genetic inheritance, parents may not be able to be expressive of the gene phenotypically, the genes can easily combine to express themselves both genotypically and phenotypically in their offspring. Additionally, non-genetic causes such as alcohol consumption, chemical exposure during pregnancy, advanced parentage, use of anti-seizure drugs and so forth are practices, which adults commonly engage in not bearing in mind the negative implications such practices might have in matters of childbearing and overall reproduction.

**How is ASD diagnosed and treated?**

In matters of diagnosing this condition, it might be a little difficult since there is no medical test like a blood test to be conducted to determine whether or not someone is affected or not. However, doctors have to rely on the behavioral expressions of the child in the course of his/her development in order to make a diagnosis. Similarly, it is essential to underscore the fact there are two steps, which are usually used in diagnosing this condition (Bernier, 2010).

 They are:

a)    Developmental screening

b)    Comprehensive Diagnostic Evaluation

Developmental screening is usually a short test, which enables specialists to tell whether children are learning basic skills which they are expected to learn. The screening should be done at intervals of nine or so months (Dawson& Geschwind, 2006). On the other hand, comprehensive Diagnostic evaluation encompasses chromosomal analysis, electroencephalography as well as MRI investigations to demystify the presence or absence of intellectual disabilities, seizures and structural brain differences respectively.

**Treatment mechanisms of ASD**

Applied Behavioral Analysis

This treatment mechanism is applied through the breakdown of skills such as communication and cognitive skills into simpler tasks. The tasks are then taught in a way that is structurally planned thereby coalescing them over time into complex skills, which assist in the development of the affected children thereby restoring them.

Use of curative medicines

Obviously, the above-mentioned condition is an assemblage of conditions, which can be treated through medication in isolation. Thus, it is realizable that medicines are applied to treat related conditions and problems such as depression, anxiety, obsessive-compulsive behaviors, and hyperactivity among others (Chawarska, 2008).  Other treatment mechanisms such as speech and language therapy (SLT), Occupational therapy and stem therapy can also be combined to reduce the negative effects associated with ASD.

**Conclusion**

Since it is common knowledge, that prevention of any disease or condition is always preferred for treatment, it should be embraced even in managing this condition among young children. Thus, early diagnosis of related conditions like celiac disease, phenylketonuria, German measles among others is pivotal to rectify any mess that might complicate the ASD condition in young children and even adults by extension (Chawarska, 2008).

**References**

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