

**WORLD AUTISM ASSOCIATION**

**AUTISM BEYOND DSM 5**

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## Diagnosis:

Not Kanner's autism (he plagiarized Frankl. Silverman/Fitzgerald) or Aspergers autism, but Frankl G., Weiss A., Zak., V., Asperger H., Kanner L., Wing L.

Asperger had autism himself (Lyons & Fitzgerald) and obeyed Nationalist Socialist Laws.

## Diagnosis of Autism Spectrum Disorders:

1. Leo Kanner (1943) – Narrow criteria for Autism.
2. ADI-R – The International Meeting for Autism Research, “Lambasted ADI-R for missing many cases of autism”, (Feinstein, 2010); Misses over three quarters of persons with the broader autism phenotype.
3. Narrow criteria for autism – 25/10,000 (ADI-R/ADOS);
4. Broad criteria for Autism 116/10,000 (Baird et al, 2006)



In relation to almost everything you know about autism, the opposite can also occur. It's the most contradictory condition in the DSM 5 Bible.

## Social and Emotional Reciprocity:

- a. DSM 5 fails to mention clinginess to mother.
- b. Child gets on better one-to-one.
- c. A special problem with groups.
- d. Having one, “friend”.
- e. In groups, relates to one person only to the point of fixation.
- f. It's autistic wanders – Ernest Shackleton



## Social and Emotional Reciprocity cont'd:

- g. Makes socially inappropriate comments and shares too much personal information, inappropriately, e.g., saying to psychiatrist/psychologist, “you are very trendy”.
- h. Hiding behind mother in consultant’s room, particularly when addressed.

## Social and Emotional Reciprocity cont'd:

- i. Sitting in the, “parent’s chair”, when they come into the room.
- j. Particularly with adults with autism, sitting in the chair furthest from the assessor.

## Social and Emotional Reciprocity cont'd:

- k. Parents will describes themselves as loners and good mixers. When asked if they're loners, they are not able to come down on either side. They would express the importance of private time for them.
- 1. Very rough play with peers, (very common), including at times, choking other children etc.



## Social and Emotional Reciprocity cont'd:

- m. Experiences a great deal of suspicion, paranoid thoughts and feeling that people are against them, talking about them and not liking them.
- n. Hypersensitive to expressed emotion.
- o. Controlling and dominating in interpersonal relationships. Have to be first. Have to win. Very poor losers. Makes up their own social rules.

## Social and Emotional Reciprocity cont'd:

- p. In relation to oppositional defiance, the feature of spiteful or vindictive is a particularly common problem in children with autism and rarely mentioned in most other children with oppositional defiance. Oppositional Defiance is not mentioned in the Autism Spectrum Disorder section of DSM 5, even though it's one of the most common co-morbidities.

## Social and Emotional Reciprocity cont'd:

- q. A friend and a bully are often the same person.
- r. Invading personal space is extremely common. On the other hand, they may get extremely upset when somebody else invades their space, often unaware of interpersonal surroundings.

## Social and Emotional Reciprocity cont'd:

- s. They can present as very timid or aggressive. They can hit out for no reason and be extremely unpredictable in relation to interpersonal aggression. This is particularly serious with adults when an attack may be based on something happening within the mind of the person with autism, and therefore be extremely difficult or impossible to predict.



## Social and Emotional Reciprocity cont'd:

- t. Feels abandoned if a friends wants to hang out with someone else.
- u. Thinking paranoid, cynical and sarcastic or naïve and too trusting.
- v. Tries to be invisible e.g., in school and explodes when he comes home



## Social and Emotional Reciprocity cont'd:

- w. She can be outspoken if someone else is being picked on (contradiction)
- x. Cannot inject herself into social situations
- y. During a birthday party, was obsessed with a blanket and clinging to mother
- z. Not able to share mother with other children

## Social and Emotional Reciprocity cont'd:

- aa. When upset, says to mother, “I hate you and you’re ugly”
- bb. Shouts out, “you’re the worst mother ever”.
- cc. Needs an adult present to interact with other children

## Social and Emotional Reciprocity cont'd:

- dd. Shouts out, “why does the lady have a cross face”.
- ee. Won’t do anything by himself in terms of personal hygiene, dressing, toileting or homework
- ff. Adult has to initiate play and all activities for the child
- gg. Needs adult affirmation for everything

## Social and Emotional Reciprocity cont'd:

- hh. Very clingy versus no desire for contact
- ii. Can manage casual friendship and has to have total control of the other person in a one:one situation to the point of fixation and absorption of the friend with no reciprocity
- jj. Always right, has to win

## Social and Emotional Reciprocity cont'd:

- kk. Has to be amused
- ll. No filter, shares everything or shares nothing
- mm. Give everything away inappropriately or shares nothing
- nn. Does not want people looking at him or sitting beside him



## Social and Emotional Reciprocity cont'd:

- oo. Says, “why are you looking at me?”
- pp. Spends a huge amount of time in bedroom with school refusal following endless traumatic social experiences with peers
- qq. Intelligent persons develop social scripts and strategies for dealing with people and camouflage their autism

## Social and Emotional Reciprocity cont'd:

Parents often describe them as having a Jekyll/Hyde personality. They can be very secretive or the opposite, excessively open. They can often tell people including parents, that they hate them. Of course they often say the opposite as well; that other people hate them.

## Emotions and Autism:

1. They are often very ambivalent and have an inability to make up their minds in relation to emotional matters.
2. They often present as emotionally immature, even though they may have high intelligence.

## Emotions and Autism, cont'd:

3. They can have massive emotional meltdowns, going on for hours, for very minimal or not very clear reason or shows no emotion.
4. They are often over-anxious and terrified of the world and socially phobic or the opposite; fearless.



## Emotions and Autism, cont'd:

5. If they are asked if they have worries or anxiety, they will say, “what is anxiety?”. In relation to depression, they will ask, “what is depression?”, and they will often answer the above questions with, “I don’t know”.
6. When asked if they’re happy or sad, they will say, “happy and sad”, or they will sometimes say, “medium”.



## Emotions and Autism, cont'd:

7. They can show massive separation anxiety and be extremely clingy to a parent, particularly mother or be fearless.
8. Co-morbid anxiety, separation, generalised or panic is common.

## Emotions and Autism, cont'd:

9. Some won't go upstairs to their bedroom on their own at night.
10. They can show a great deal of moodiness, often confused with bipolar disorder (Boston Bipolar)
11. No awareness of safety or be excessively cautious.

## Emotions and Autism, cont'd:

12. They will appear to be in their own emotional world.
13. They will often say to parents, “don’t leave me, don’t be late, don’t forget me, please come back to me”. They will show a lot of fear of death and of their parents dying. They will show fear of darkness, bugs, spiders and car accidents. They will show a great deal of emotional dysregulation.

## Emotions and Autism, cont'd:

14. Gets anxious if needs are not met fast enough.
15. Constantly wants to go home.

## Imitation and Autism:

1. DSM 5 describes, “reduced or absent imitation”.
2. This is a serious error in DSM 5.
3. Comedians who often have autism, show a massive capacity for imitation.
4. Takes on the accent of the person they’re with



## Imitation and Autism, cont'd:

5. Pretends to be a dog or has an imaginary dog
6. Girls with autism often survive by imitating others one second after their peer has done something. In that way, they hide their social interactional skills problems.

## Imitation and Autism, cont'd:

7. Persons with autism show massive imitation of accents and often have unusual accents, based on imitation of other people's accents. They will often take on the accent of the person they are talking with. They can be brilliant at mimicking and very good at non-verbal, slapstick humour.

## Groucho Marx (Fitzgerald, 2015):

1. “I don’t want to belong to any club that will accept me as a member”.
2. Mathematical calculator.
3. Pared down language (like Beckett).
4. Jekyll & Hide figure

## Groucho Marx (Fitzgerald, 2015), cont'd:

5. Promiscuous.

6. “Paying alimony is like feeding hay to a dead horse”.

7. Misogynistic

# Humour:

1. Problems with sharing enjoyment and laughter.
2. Minority unimpaired in humour appreciation (like TOM).
3. Better with pictorial jokes.



## Humour, cont'd:

4. Copy (Wy et al, 2014), aggressive humour from peers and use it indiscriminately
5. Groucho Marx/aggressive humour and scant sympathy, (Deer, 2007)

## W.C. Fields, (Fitzgerald, 2015):

1. “Never give a sucker an even break”.
2. Fixated on juggling
3. Massive observer
4. Autistic wanderer

W.C. Fields, (Fitzgerald, 2015), cont'd:

5. Odd tone of voice – monotonous and also “gravelly”.
6. Sensory issues
7. Identity diffusion
8. Enigma

## W.C. Fields, (Fitzgerald, 2015), cont'd:

9. Moodiness and depression.
10. Solipstic.
11. Einstein also had a sense of humour

## Aggression in persons with ASD:

1. Preschool biting, kicking, head banging, pinching, self injury, flight risk, Judy Garland was a head banger.
2. Rare extreme aggression, criminal autistic psychopathy. See book, “Young, Violent and Dangerous to Know”, published by Nova Science, (Fitzgerald, 2013).



## Aggression in persons with ASD, cont'd:

3. Criminality not mentioned in DSM 5, ASD. This is a serious error.
4. Some children can be dangerous to peers and parents will not allow them to be in the room with peers in case they choke them, stab them, etc.

## Aggression in persons with ASD, cont'd:

5. Sometimes the children can be sometimes overly affectionate and at other times, overly aggressive.
6. They often have no sense of hurting others or cats etc.

## Autism and aggression (controversial issue):

1. Frith (1991) stated, “Autistic people not interested in hurting”.
2. Howlin (1997), “Little if any significant association between autism and offending”.
3. Wing, (1991), “Bizarre antisocial acts”.

## Autism and aggression (controversial issue), cont'd:

### 4. Allen et al, (2006)

33 out of 126 with Aspergers syndrome in the general population showed evidence of aggression associated with:

## Autism and aggression (controversial issue), cont'd:

- (a) a history of verbal aggression – 75%
- (b) inappropriate sexual behaviour - 69%
- (c) offences arson, murder, stalking and violent assault



# Autism and aggression (controversial issue), cont'd:

## 5. Predisposing factors:

- (a) Obsessions – 44%
- (b) Naivety – 88%
- (c) Social reject – 69%
- (d) Sexual rejection – 50%

## Autism and aggression (controversial issue), cont'd:

6. Profile of offenders (Mawson et al, 1985, Tantum, 1988):

- (a) No gain
- (b) Daylight hours
- (c) Misinterpretation of others' motives
- (d) Unpredictable

## Graham Young (Poisoner) (Holden, 1995):

1. Autodictate.
2. “Mad professor”
3. Wanted to be a famous poisoner

## Graham Young (Poisoner) (Holden, 1995), cont'd:

4. Antimony/narrow interests poisons
5. Diagnosis psychopathy.
6. Psychiatric directors, “blue eyed boy”

# Graham Young (Poisoner) (Holden, 1995), cont'd:

## 7. Criminal autistic psychopathy

(a) Autism plus criminality

(b) Overlaps with psychopathy

(c) Theory      (i) Autism of empathy and theory of mind deficits  
                     (ii) Psychopathy – no theory of mind deficits



## Graham Young (Poisoner) (Holden, 1995), cont'd:

### 8. Young, “withdrawn and secretive”

Told the factory workers where he was killing people  
about antimony

## Graham Young (Poisoner) (Holden, 1995), cont'd:

### 9. Others with criminal autistic psychopathy:

- (i) Ted Bundy;
- (i) Joan of Arc;
- (iii) Albert De Salvo;
- (iv) Jeffrey Dahmer;
- (v) Lee Harvey Oswald;
- (vi) Harold Shipman;
- (vii) Irma Grese.

Suicide and attempted suicide (not mentioned in the ASD Section of DSM 5), (Fitzgerald M), Editorial:

1. This is not mentioned in DSM 5, but is a risk, especially as children with autism get older and I have observed it myself. Bullying can be associated.

Suicide and attempted suicide (not mentioned in the ASD Section of DSM 5), (Fitzgerald M), Editorial, cont'd:

2. Thoughts of suicide and death very common. A lot of death anxiety associated with anxiety and depression.
3. Cassidy N = 365 adults – 65 had contemplated suicide (Lancet, 2017)

## Eyes and autism:

1. Grabbing mother's face roughly and getting her to look directly at the child.
2. Looking past people or, "through" people.
3. Staring at people.



## Eyes and autism, cont'd:

4. Looking at people blankly.
5. Covers face with hair
6. Alfred Hitchcock “did not make eye contact”,  
(Chandler, 2005)

## Autism co-morbidity and DSM 5:

1. There is no mention in the co-morbidity section of tic disorder, bipolar disorder, schizophrenia, oppositional defiant disorder, conduct disorder. This is a serious error. Psychosis is mentioned in the differential diagnosis.

## Autism co-morbidity and DSM 5, cont'd:

2. Nobel Prize Winner John Nash had autism and schizophrenia (Fitzgerald).
3. Philip Dick did not have schizophrenia, but autism

## Autism co-morbidity and DSM 5, cont'd:

4. There is no mention of anorexia nervosa in the co-morbidities.
5. Avoidant restrictive food intake disorder (would have been better placed in ASD DSM 5, but is not)

## Autism co-morbidity and DSM 5, cont'd:

6. Pica not mentioned in differential diagnosis or co-morbidity although it is mentioned under Pica DSM 5. There it mentions that it is possible to make ASD and a pica diagnosis at the same time.
7. Simon Weil – Philosopher/writer had autism and anorexia nervosa



# Neurodevelopmental Disorders (Fitzgerald, 2017):

1. Intellectual disability
2. Autism
3. Schizophrenia (not DSM 5, mistake)

## Neurodevelopmental Disorders (Fitzgerald, 2017), cont'd:

4. Bipolar (not DSM 5, mistake)
5. Language disorder
6. Social pragmatic communication disorder

# Neurodevelopmental Disorders (Fitzgerald, 2017), cont'd:

7. ADHD
8. Tic
9. Dyslexia
10. Dyspraxia

# Overlap Autism & Schizophrenia (Sasson et al, 2011):

1. Theory of mind
2. Eye gaze on face in social scenes
3. Impairments of facial (CHECK)

# Imagination:

It has been said that persons with autism have no imagination, for example, but they can have massive imagination, writing science fiction, (Dick), science, (Einstein). I think they are reduced in social imagination



# Lorna Wing (1997) Triad Impaired Imagination:

Fitzgerald, 2015:

Writers – James Joyce, Samuel Beckett, William Shakespeare, TS Elliott, Ian Fleming, Anton Chekov, Henrik Ibsen, Luigi Pirandello, WB Yeats, F Scott Fitzgerald, HG Wells.

# Scientists with imagination:

Einstein,

Charles Darwin,

Isaac Newton,

Archimedes,

Nikola Tesla,

Henry Cavendish

# Philip K. Dick (writer):

1. Science Fiction writer.
2. Blade Runner, Total Recall.
3. Problems separating fact from fiction

## Philip K. Dick (writer), cont'd:

4. Hated sports. Adored reading.
5. Founded a magazine where he was the sole contributor (Carrere, 2005)
6. Chameleon

## Philip K. Dick (writer), cont'd:

7. Sexual identity diffusion - androgynous
8. “Universe spins around me, without any purpose than to torture me”.
9. Severe anxiety and autistic hypochondriasis



## Philip K. Dick (writer), cont'd:

10. Five marriages. (More “mothers”)
11. Severe misogyny.
12. Neologisms e.g., “Kipple” – a state of decomposition

# William Shakespeare, (Fitzgerald, 2013):

1. Workaholic.
2. Novelty seeker.
3. Ambitious.

## William Shakespeare, (Fitzgerald, 2013), cont'd:

4. Massive reader.

5. Neologisms.

6. Hyperkinetic.

## William Shakespeare, (Fitzgerald, 2013), cont'd:

7. Confused fact and fiction.
8. Sexual identity diffusion.
9. Autistic marriage.

William Shakespeare, (Fitzgerald, 2013), cont'd:

10. Obsessed with Dark Lady.

WB Yeats who also had autism, was obsessed with Maud  
Gonne



## Truman Capote (Fitzgerald, 2015):

1. In Cold Blood and Breakfast at Tiffanys.
2. Born New Orleans
3. Narcissistic, egocentric, intelligent, naive.
4. Great reader, great imagination, massive observer.

## Truman Capote (Fitzgerald, 2015), cont'd:

5. “Squeaky voice, very high pitched” (Plimpton, 1998).
6. Used people for his own advancement.
7. Jekyll & Hyde (“Extreme luxury” or “spartan life”, (Clarke, 2006).

## Walt Disney, (Fitzgerald, 2015):

1. “Whole Disney Family ... aloof and unbending”, (Gabler, 2007).
2. Massive autistic memory.
3. Confused fact and fiction.
4. Usually shy, diffident, naïve with autistic narrative.

## Walt Disney, (Fitzgerald, 2015), cont'd:

5. Chamelion.
6. Poor empathy and brilliant at exploiting workers.
7. Overbearing, mercurial, ungrateful and impossible to please (Gabler, 2007)
8. Extremely controlling and dominating.

# Females and Autism Spectrum Disorders:

1. Females often present with what's called an, “as if”, personality and show a great deal of chameleon-like behaviour. They copy others' behaviour and are very easily missed, diagnostically.
2. Tom Boyish and often get on better with opposite sex. Often have contempt for female peers



## Females and Autism Spectrum Disorders, cont'd:

Otherwise, I have seen very similar features of ASD in females and males. It is not uncommon for females to be diagnosed as adults by me and others. (Not mentioned in DSM 5). Some of the most severe autistic symptoms that I've seen have been in females with ASD.

## Sensory issues:

1. These are incredibly important and often contradictory in persons with ASD.
2. Sometimes, they will put their feet into a confined space and into tight boxes as they find this pleasurable.

## Sensory issues, cont'd:

3. Some hate to be hugged.
4. Others love putting their fingers through mother's hair.
5. Some will pull out their hair and others will eat their hair.

## Sensory issues, cont'd:

6. Others will take off their shoes and socks when they come into a room and can't bear these.
7. Some get upset by smells and this is very important and some will smell all food before eating it and indeed, smell everything.
8. Food fads, Walt Disney (Gabler, 2007)

## Sensory issues, cont'd:

9. They are both sensory seeking and sensory avoiding.
10. They can be hypersensitive around the area of the mouth and nose.
11. Some can't bear having clothes on and want to be top less. Others want to take off their clothes constantly and find that is the most relaxed position.



## Sensory issues, cont'd:

12. Some are obsessed and fascinated with lights and others are upset by lights.
13. Some will lick everything, including walls.
14. Some will want a tight fleece on them at night to go to sleep.

## Sensory issues, cont'd:

15. Peter Sellers, “low sensitivity to temperature”.  
“high sensitivity to noise”
16. Some are so upset by crying that a baby crying can be at a serious risk from a child with ASD.
17. Most persons with ASD hate the noise of a hoover but a few adore it.

## Sensory issues, cont'd:

18. Some will chew wood, clothes etc and others will put everything into their mouth, non-edible objects (pica).
19. Some are not bothered by their own noise that they make but are extremely bothered by another child making the exact same noise.
20. Dental extractions under anaesthetic

## Sensory issues, cont'd:

21. Loves slime or hates slime
22. Oversensitive to body sensations, hypochondrysis (Howard Hughes). Obsessed with bodily function
23. Undersensitive to bodily sensations, danger of serious illness being missed

## Sensory issues, cont'd:

- 24. Rocking or jumping on trampoline
- 25. Hates hugs or loves hugs



## Eating and ASD:

1. Never stops eating, leading to obesity, possibly due to sensory issues in bowel wall, not transmitting the sense of being full. Orson Wells and Alfred Hitchcock.
2. Pyloric stenosis.
3. Hiatus hernia.
4. Food fads. Walt Disney (Gabler, 2007)

## Eating and ASD, cont'd:

5. Connoisseur of Food. Sam Spiegel, Alfred Hitchcock.
6. Superior taste buds. Groucho Marx, food to be separated on the plate.
7. Eat the same food repetitively and had it cooked to his exact specification (Browne & Broeske, 1998)

# Eating, ASD and GIT:

1. Delayed toilet training.
2. “Colicky baby”, constantly crying.
3. Problems with textures of food.

## Eating and ASD, cont'd:

4. Constipation.

5. Poor hygiene problems.

6. Smearing of faeces.

## Eating and ASD, cont'd:

7. Eating faeces.
8. Only drinking from a specific cup.
9. Bites lower lip before food.



## Howard Hughes, Tycoon, (Fitzgerald, 2015):

1. Narrow interests, mechanics, mathematics and engineering.
2. Autistic hypochondriac.
3. Used others for his benefit.

# Howard Hughes, Tycoon, (Fitzgerald, 2015), cont'd:

4. Depression and OCD.

5. Total control.

# Language and autism:

1. Some will speak as a, “mini adult” and as if on the same level as a teacher.
2. Some have extremely correct language with precise pronunciation of every word.
3. Some will present with a very, “posh”, accent or with a very different accent from people in their culture. Massive imitation of t.v. accents

## Language and autism, cont'd:

4. Some will speak extremely quietly and you can hardly hear them, while others speak extremely loudly with a high pitched tone of voice, repetition is very common.
5. Inappropriate sharing of personal thoughts can be a problem, leading to more bullying.

## Language and autism, cont'd:

6. More common is answering questions with just one word or with the phrase, “I don’t know”, or by shrugging shoulders. Minimal conversation or indeed mutism can occur. Indeed, selective mutism and autism can occur together. It is often not realised that autism spectrum disorder and selective mutism can occur together.



## Language and autism, cont'd:

7. Children can show the most severe plaintive, most soulful, most upset cry that one will ever hear from a child and this is characteristic of ASD and those who are familiar with it will recognise it as part of the clinical gestalt. DSM 5 does not.

## Language and autism, cont'd:

8. Has to have the last word.
9. They often have what's called a “babyish” or immature voice.
10. Pedantic and can't read between the lines. Makes the sound pigs make and horses make.

## Language and autism, cont'd:

11. They engage in a great deal of self-talk (Ludwig Wittgenstein) as a way of calming themselves and trying to sort out emotional puzzles. There can be a lot of sub-vocal thinking or singing. Using swear words and muttering under breath.

## Language and autism, cont'd:

12. Einstein, late speaker until the age of four, Einsteinian syndrome (Sowel et al,).Einstein was called, “Dopey One”.
13. Also Ramanujan, mathematician, also a late talker, (Fitzgerald, 2004)

## Language and autism, cont'd:

14. There's often repetitive questioning.
15. There's often an autistic narrative, (Fitzgerald, 2004). This does not give the listener the social context and is evidence in autobiographies in persons with autism. There are problems doing personal, social writing.



## Language and autism, cont'd:

16. They can be obsessed with language (Ludwig Wittgenstein), and numbers.
17. They are slow in answering questions, due to problems in processing including auditory processing.

## Language and autism, cont'd:

18. Dribbles when talking.
19. In terms of regression in language DSM 5 discusses before the age of two but I have seen this often after three and indeed, after four years of age.

## Language and autism, cont'd:

20. In general, they are extremely truthful and this causes social difficulties but they can be often liars as parents describe them to me. They can fabricate stories about parents. They confuse fact and fiction.

## Language and autism, cont'd:

21. Conversation not very coherent, tending to the risk of being misdiagnosed as having thought disorder and schizophrenia.
22. They make up words, neologisms, (William Shakespeare).

## School:

1. Very commonly, bullied. Pretty close to universally happening.
2. Bullying often missed in school. Poor self-protective skills. Need SNA to protect from bullying.
3. Children feel everybody else in the class is against them and feel very paranoid.



## School, cont'd:

4. Bullying after leads to suicidal thoughts and indeed, suicidal behaviour.
5. Often lay their head on the desk in the classroom or go under the table.
6. Often bullied in the school yard, walking around on their own in the school yard, and excluded

## School, cont'd:

7. School attendance problems very common.
8. School refusal very common. Problem with home tuition that it increases this problem.
9. They often perform as the class clown as a way of getting attention in the class.

## School, cont'd:

10. They often shout out in the class, answer all the questions and are commonly disruptive. They can also control their behaviour in the classroom and then explode immediately they get home in the evening. This causes huge confusion to professionals who believe that one should have pretty similar behaviour at home and school. Nothing could be further from the truth.

# Sport and ASD:

1. Problems with rules of sport.
2. Group games are played by hidden rules, which of course are unwritten and which means the players break the rules until they're stopped by a referee. Persons with autism can't understand why people don't play by the written rules.

## Sport and ASD, cont'd:

3. They show gross rigidity in following the rules of a game.
4. They either keep the ball to themselves during a group game and don't pass it.
5. They will play the group game for a couple of minutes and then walk off and not want to play anymore.



## Sport and ASD, cont'd:

6. Their controlling and dominating behaviour can interfere with their participation as can their wish that they hold, that they always have to win.
7. Social reciprocity is massive in sport, involving groups and this is their major problem and it's rare for a person with autism to take part in these games.

# Behaviour:

1. During assessment sessions, persons with ASD tend to get under the desk, under the chair of the assessor etc. The other activity they often engage in is hyperactivity and constant climbing. They seem to find comfort getting under a chair and tables. They do the same thing often in the classroom. This may also reduce sensory input. It also may give a protection from other people.

## Behaviour, cont'd:

2. They often perform as the class clown as a way of getting attention in the class.
3. They often shout out in the class, answer all the questions and are commonly disruptive. They can also control their behaviour in the classroom and then explode immediately they get home in the evening. This causes huge confusion to professionals who believe that one should have pretty similar behaviour at home and school. Nothing could be further from the truth.

## Narrow interests:

Technology, computers, computer games, how things work, police activities, World War II and guns, horror movies and Sci-Fi, turning the pages of books, music, obsessed with time and asking what time it is, serial killers, death, suicide, pushing buttons on and off, turning lights on and off, opening doors and closing doors, lists, massive collecting.



## Parental occupations:

1. Police officer/legal profession.
2. Engineer.
3. Computer specialist.
4. Carpenters and plumbers.



## Parental occupations, cont'd:

5. Painters and decorators.
6. Involved in the construction industry.
7. Butchers.
8. Gardeners.

## Parental occupations, cont'd:

- 9. Lorry drivers.
- 10. Unemployed and house husbands.

This is the default position for fathers from the stress of work and interpersonal relationships. This relates to fathers who also have ASD traits.

- 11. Stones masons

## Non-verbal behaviour:

1. Wearing unusual outfits, (rabbit outfits, teddy bear outfits, unicorn regalia), and headphones.
2. Opposite sex dressing.
3. Contradiction between verbal and non-verbal behaviour.

## Non-verbal behaviour, cont'd:

4. In consulting room, always wants to lie down on the couch and often seems tired.
5. Stamps feet.
6. Awkward gait.
7. Flicking ears with hands.

## Non-verbal behaviour, cont'd:

8. Makes unusual faces.
9. Laughs when someone is hurt.
10. Dribbles when talking
11. Tapping thumb and index finger together in front of eyes.



## Non-verbal behaviour, cont'd:

12. Playing while lying on the floor.
13. Obsessed with trying to read faces. Always checking faces.
14. Misidentifies faces.
15. Grinds teeth.

## Non-verbal behaviour, cont'd:

16. Walks with head down, shoulders rounded, upper body leaning forward.
17. Stiff walk with arms rigidly beside body.
18. Slides through the door sideways.

## Repetitive behaviour in ASD:

1. Putting things in and out of boxes.
2. Repetitive switching on and off of lights.
3. Repetitive opening and closing doors.
4. Loves nature and playing in the garden

## Identity/gender:

1. Identity diffusion and confusion in a sense of self.
2. Sexual and non-sexual identity diffusion.
3. Gender dysphoria, (co-morbidity). Not mentioned as a co-morbidity in DSM 5.

## Identity/gender, cont'd:

4. Having contradictory identities occurring side by side.  
(Multiple senses of self and gender).
5. Rapid switching of identities can occur.
6. Contradictory identities confuse people.



## Identity/gender, cont'd:

7. Some males have soft female facies and some females have male facies.
8. Androgyny very important in ASD.
9. They don't have a clear sense of themselves or others, which is a factor in interpersonal stress.

## Identity/gender, cont'd:

10. Boys have long hair, hoodies and caps. Girls dress like boys and vice versa.
11. They may feel that they have an, “as if”, personality as living in a film. They can be very deceptive.
12. They can appear asexual but can get involved in perverse sexual activity.

## Identity/gender, cont'd:

13. He does not know what he wants.
14. Does not know where they fit in because of identity diffusion. Jekyll & Hyde. (R.L. Stevenson had autism). (Fitzgerald, 2014)
15. Read psychology bokos in order to make sense of their self

## Identity/gender, cont'd:

16. As if personality types means that people with autism can be great actors, e.g., Orson Wells, Rudolf Valentino, Richard Burton, Harry Houdini, Greta Garbot, (I want to be alone and I want to be let alone), (Fitzgerald, 2015)

## Motor issues:

1. In DSM IV, only mention as an associated feature.  
They are far more important than this.
2. Bum-shuffling (massively important).
3. Rocking.
4. Moves leg like a horse.



## Motor issues, cont'd:

5. Heavy footed.
6. Poor colouring skills.
7. Falls easily, bumps into things.
8. Unable to throw or catch a ball.

## Motor issues, cont'd:

9. Stiff gait.
10. Arms rigidly beside body.
11. Moves, “with one leg out and one leg underneath him”.
12. “Crawls on abdomen”.

## Motor issues, cont'd:

- 13. Never crawled, went straight to walking.
- 14. Legs crossed and jumping up and down.
- 15. Head banging.
- 16. Frog-like crawling.

## Motor issues, cont'd:

17. Crawling backwards.
18. Asymmetrical movements of body, arms and legs.
19. Rolled over rather than crawled.

## Motor issues, cont'd:

20. Tippy-toe walking.
21. Combat crawl, crabby crawl, “walks on knees”, never crawled, just stood up and walked.
22. Bounces from one foot to the next when distressed.



## Motor issues, cont'd:

23. Can't use spoon or fork.

24. Walks into things.

## Pregnancy/labour:

1. Very stressed pregnancies.
2. A lot of vomiting in pregnancy.
3. High blood pressure.

## Pregnancy/labour, cont'd:

4. Diabetes.

5. Early labour.

6. Drugs of various kinds, including valproate.

## Pregnancy/labour, cont'd:

### 7. Emergency caesarean section;

- (a) Foetal distress.
- (b) Failure to progress.
- (c) Labour stopping.
- (d) Long labour.

## Pregnancy/labour, cont'd:

### 7. Emergency caesarean section;

- (e) Reduced amniotic fluid.
- (f) Placenta praevia.
- (g) Breech.
- (h) Face presentation.



## Pregnancy/labour, cont'd:

7. Emergency caesarean section;

(i) Multiple pregnancies (twins).

8. Assisted reproduction.

9. Premature and low birth weight and placenta not functioning.

## Transitional object versus autistic object:

1. Bowlby confused these. Very commonly uses blankets and teddy bears to comfort.
2. Winnicott thought that these had something to do with child development. He was completely wrong. These are used to;

## Transitional object versus autistic object, cont'd:

(a) Reduce anxiety;

(b) Comfort;

(c) Preservation of sameness.

(d) Sensory issues.

(e) Self-protection.

## Transitional object versus autistic object, cont'd:

3. Has to have something in his hand all the time, a teddy bear, a towel, a dinosaur.

## Selective mutism:

1. Selective mutism is mentioned as a differential diagnosis in DSM 5 but it is not mentioned as a co-morbidity when it should be.



# Sleep:

1. Sleep problems extremely common.
2. Often associated with undiagnosed co-morbidities.
3. Sleep routine at night.

## Sleep, cont'd:

4. Melatonin.

5. Associated with gastrointestinal problems.

6. Constant waking up during the night, or waking up at 4.00 a.m., fully awake.

## Physical issues:

1. Low immune system.
2. Ear infections.
3. Alexithymia and somatic symptoms.

## Physical issues, cont'd:

4. Genetic abnormalities.
5. Large head (can be there from birth, in my experience).
6. Very tall and lanky, like parents.

## Physical issues, cont'd:

7. Hypermobility.

8. Low muscle tone.