



Mental and physical health in adult autism

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Plan for today

- What is autism and why is it important we know about it?
- Key features of autism
- Autism and mental health
- Autism and physical health
- Service user and carer perspective
- Tips for working with autistic patients







Autism myths

- Autism is caused by the MMR vaccine
- Autism is caused by bad parenting
- Autistic people are all male
- Autistic people are all maths geniuses
- Autism is only a disorder of childhood
- Autistic people are disinterested in relationships
- Autistic people are all quiet introverts
- Autistic people never make eye contact

Autism epidemiology

Affects 1 in 100 people

Males 5:1 females

Across lifespan – not just children

30-50% have intellectual disability

Spectrum condition:

Asperger syndrome = 'high-functioning' autism

Neurodevelopmental condition

Cause: Complex genetics – NOT 'refrigerator mothers', NOT diet, NOT MMR

Why is autism important?

COMMON – affects 1 in 100 people (same as schizophrenia)

PRESENT ACROSS LIFESPAN – not just in children

MANY UNDIAGNOSED/MISDIAGNOSED

LOTS OF COMORBIDITY

RISKY / HIGH NEED

Only 16% of adults with autism in full time work

Suicidal ideation:

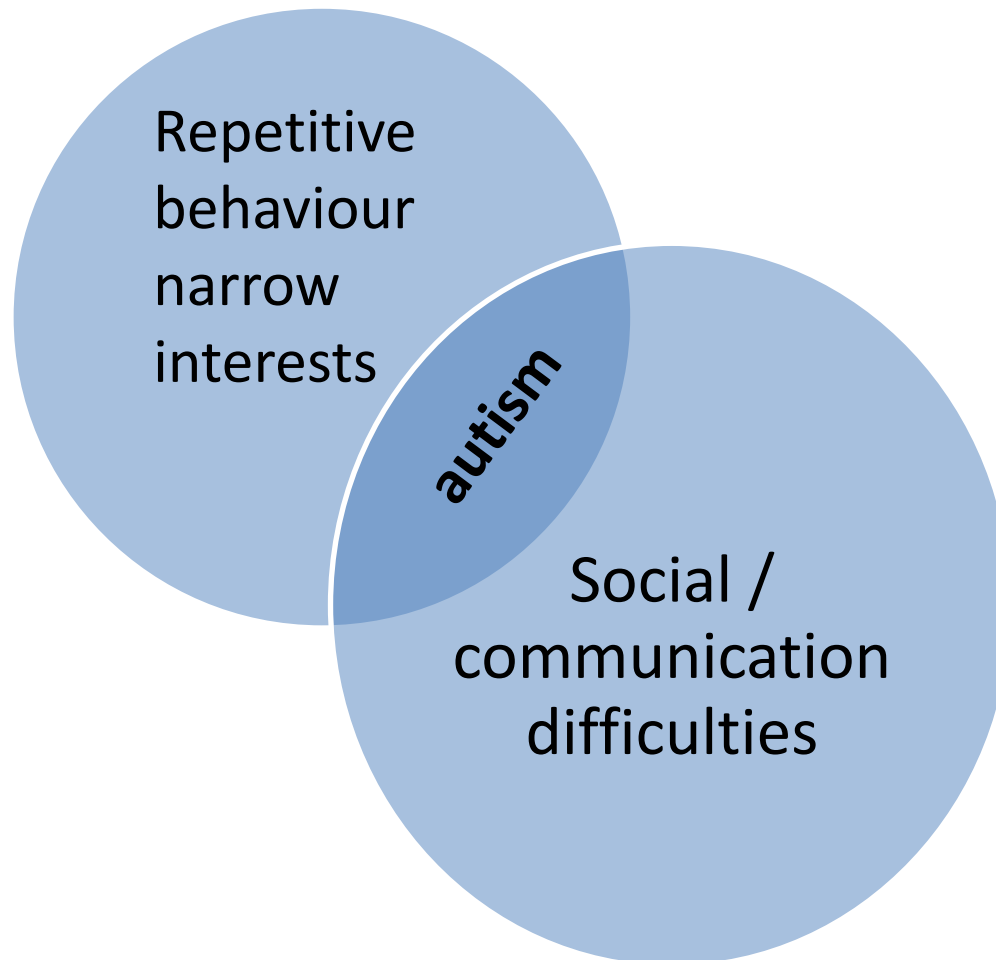
- Adults with AS 66%
- General population 17%
- Adults with psychosis 59%

(Cassidy et al 2014)

Life expectancy of people with autism 16 years less than general population

(Hirvikoski et al 2015)

DSM-V – 2 core dimensions



Other important features

- Associated neurodevelopmental difficulties: eg dyspraxia, learning difficulties, attention deficit
- Sensory sensitivities
- Stimming
- Meltdowns
- Autistic fatigue
- Social camouflage

Autism in ten minutes

- Patient requests referral! Consider using AQ10
- Patient is odd, eccentric, 'one of a kind'
- Unusual verbal and/or non-verbal communication
- History of underachievement in education & employment
- Difficulties initiating and sustaining relationships
- Repetitive behaviours, unusual intense interests, problems coping with change
- Long history of unexplained sleep, GI, fatigue or anxiety problems
- Patient says 'I've never fitted in...I've never understood other people'

Mental health Comorbidities

- Anxiety disorders 40%+
 - Particularly social anxiety
- Clinical depression 30%
- Bipolar and psychosis more common

- Often more difficult to assess:
 - Anxiety, Literalness, alexithymia, unusual MSE, symptom overlap

Autism suicides

- 119 suicides by patients with ASD diagnosis in 2005-15 in UK – an average of 11 deaths per year.
- 87% male, 38% aged under 25.
- Rates are rising – estimate for 2015 is 17 suicides.
- Certain risk factors, including alcohol misuse, were less frequent in ASD group, while previous self harm more common.
- 66% of adults with Aspergers have contemplated suicide (Cassidy, 2014)
- Death by suicide is 7.5 times more likely in people with autism than the general population (Hirvikoski et al, 2016)

Physical health

- Genetic conditions – eg fragile X; Downs
- Epilepsy in up to 25%
- Chronic GI problems
- Sleep problems
- Fatigue and tiredness
- Cardiovascular problems
- Physical health risks magnified if autism + learning disability

Treatment considerations

- What is the role of general adult mental health services?
 - No autism cluster
 - But autism + MI = ↑complexity = lower threshold for CMHT?
- Lack of effective treatments for core ASD symptoms in adults
- But specific areas of functioning can be improved
- Comorbidities can be treated

Prescribing

- None evidence based for core features
- SSRIs (citalopram) for anxiety/depression
- ?Risperidone for challenging behaviour



- May be more prone to side effects from psychotropic drugs

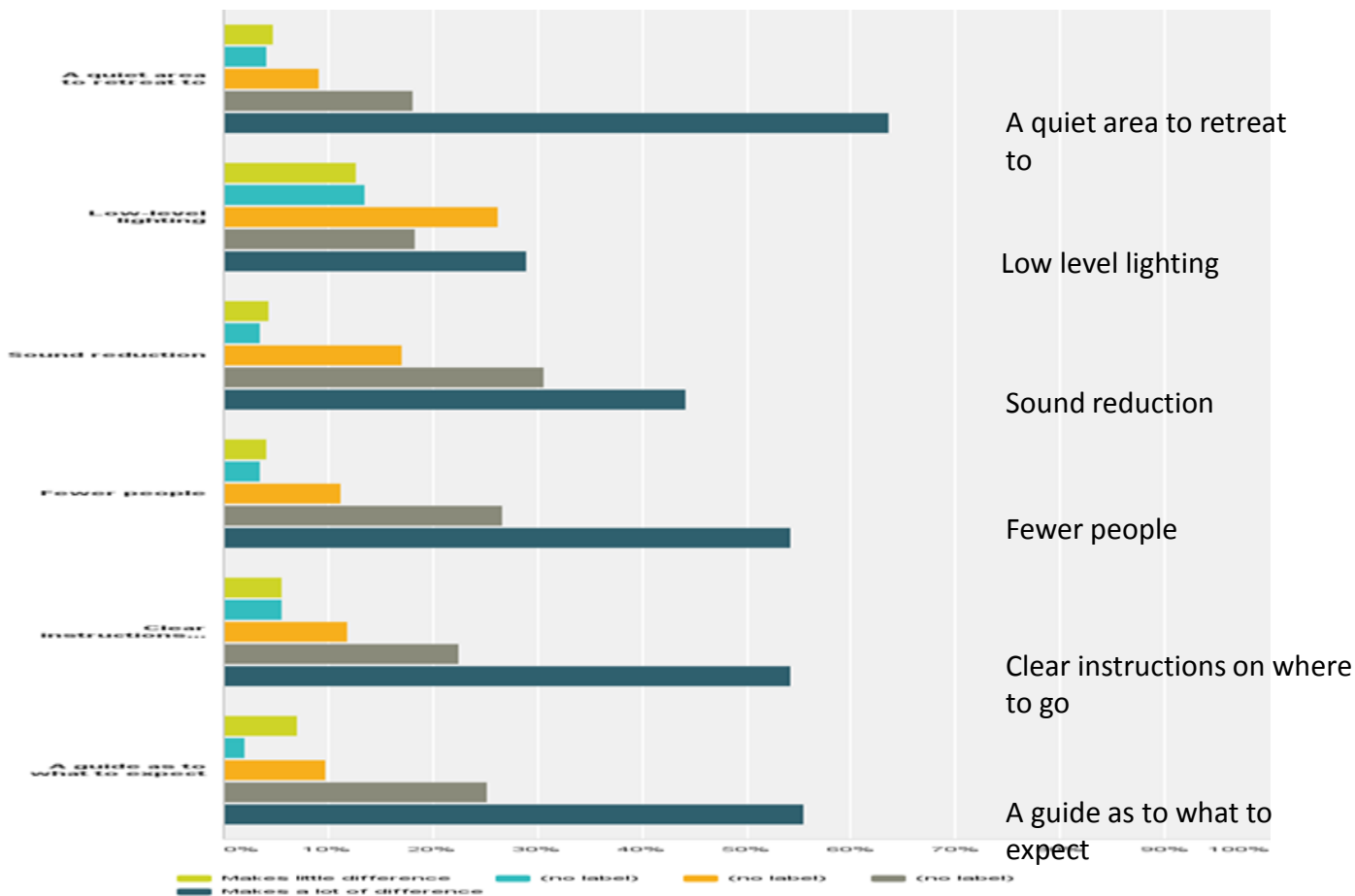
Examples of reasonable adjustments

- Do not discriminate against people with autism
- Every autistic person is different so reasonable adjustments need to be personalised
- Clear, specific language
- Allow for processing delay
- Use of visual materials
- Longer appointment times
- First appointment of day
- Environment – non florescent lighting; dimmer switches, minimise ambient noise
- Same staff members if possible
- Continuity of meds
- Flag up changes well in advance



**The Equality Act,
making equality real**

The survey – what helps



AUTISM INCLUSIVE

We are autism inclusive

- ✓ We are aware of people's sensory differences
- ✓ We try to provide a quiet area as a break-out space if possible
- ✓ We have staff who are autism aware should you have any concerns
- ✓ We make every effort to provide clear directions and to indicate EXITS clearly
- ✓ We indicate clearly when we experience the busiest times



Hazel Griffiths

Resources

- Royal college of GPs autistic spectrum disorders toolkit

<http://www.rcgp.org.uk/clinical-and-research/toolkits/asd-toolkit.aspx>

- Carole Buckley RCGP autism champion
- National Autistic Society information for GPs

<http://www.autism.org.uk/professionals/health-workers/gp-info.aspx>

- AQ10

<http://docs.autismresearchcentre.com/tests/AQ10.pdf>



TEWV autism strategy

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