How Do Experts Diagnose Asperger Syndrome in Adults?

By Lisa Jo Rudy  Updated June 01. 2009

**Question:** How Do Experts Diagnose Asperger Syndrome in Adults?

You've never really grasped small talk, and would rather talk to a computer than another human being. Does that mean you have Asperger Syndrome (AS)? To find out, you'll have to see an expert. But how exactly do experts diagnose AS in adults?

**Answer:** Dr. Shana Nichols of the Fay J. Lindner Center for Autism on Long Island in New York specializes in diagnosing and treating teens and adults with Asperger Syndrome. While she uses several specific diagnostic tools to identify specific symptoms, she says that even those tools are somewhat out of date, as is the DSM IV, a psychiatric diagnostic manual, which was last updated in 1994. "We've learned an enormous amount since then," she says.

When adults come to the Lindner Center for a diagnosis, Dr. Nichols begins her exam with an IQ test. Since people with AS have normal or above normal IQs, this is a good place to start. She also administers an assessment of adaptive skills which tests the patient's ability to manage complex social situations.

"If a parent is available," says Nichols, "we administer a parent interview called the ADI (Autism Diagnostic Interview Revised). We're looking at current functioning and early history to get a sense of the patient's skills in social, communication and behavior domains." After all, as she says, 'autism doesn't suddenly show up when you're 25, so most people with true AS showed symptoms throughout their childhood.' If parents aren't available, Nichols and her colleagues ask the patient to recall their childhood, asking such questions as "Did you have a lot of friends?" and "What did you enjoy doing?"

Nichols also administers the ADOS Module IV. ADOS is the autism diagnostic observation schedule, and module four is for high-functioning verbal young adults and adults. Along with the ADI, it allows doctors to look carefully at social and communication skills and behavior. For example, says Nichols, the tests look at such questions as "Can you have a reciprocal social conversation? Are you interested in the examiner's thoughts and feelings? Do you demonstrate insight into relationships? Do you use appropriate non-verbal gestures and facial expressions? Do you have odd or over-focused interests?" The tests allow doctors to attach a grade in each domain to determine whether the patient meets the criteria for AS.

It's not unusual, says Nichols, for a patient to come in expecting an AS diagnosis and to leave with a different diagnosis: "Distinguishing between social phobias or shyness and actual impairment with AS can be very tough for a layperson," she says. Other disorders, such as obsessive compulsive disorder (compulsions, hoarding, needing to do things over and over) or social anxiety can sometimes look like AS. If doctors do pick up on these other disorders, they can recommend appropriate therapy and/or medication.

**Sources:**

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Interview with Dr. Shana Nichols, North Shore Long Island Jewish Health System, Fay J. Lindner Center for Autism. May, 2007

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