



NORTHEASTERN PENNSYLVANIA HEALTH CARE QUALITY UNIT

IT'S YOUR HEALTH SPRING 2007

*the Advocacy
Alliance*
A Mental Health Association
Toll Free 1-877-315-6855
www.theadvocacyalliance.org

APRIL IS NATIONAL AUTISM AWARENESS MONTH

What is autism?

Autism is a complex developmental disorder of brain function that is usually diagnosed by age 3. Because the characteristics can vary in degree and number, autism is referred to as a “spectrum disorder”.

What are the characteristics?

Difficulty with social interactions

Many people with autism do not understand how to engage in simple everyday social interactions. They may not respond to their name, may avoid direct eye contact with others, and may appear to be unaware that other people have feelings and thoughts. They may have trouble regulating their emotions. This can take the form of behavior outbursts such as screaming, property destruction and physical aggression to themselves and others. With life long, effective education many people can learn to respond and interact in a more socially appropriate way.

Difficulty with communication

Some people with autism do not develop functional speech. Some may remain completely mute. Words and sentences may be used in unusual ways. Echolalia (repeating a word or phrase) is very common. There may be unusual voice volume, pitch and inflection.

Many people also have difficulty with nonverbal communication such as facial expression, gestures and body language. Through education, speech and behavior therapy many children and adults can be taught to use picture boards, computers and other augmentative equipment.

Unusual and/or over focused behaviors

Many children and adults with autism engage in repetitive behaviors such as spinning, rocking, walking on toes and arm flapping. Some may display repetitive self-injurious behavior like head banging.

There may be a persistent, intense preoccupation with one interest. This may be a particular toy, an electronic object, or a fascination with numbers, calendars and schedules.

Sensory stimulation

Many people with autism exhibit abnormal responses to sensory stimulation from taste, smell, touch, sight and sound. The brain seems unable to balance the senses appropriately. For example, a person may respond violently to a light touch yet seem oblivious to extreme pain.



What is the cause?

Currently, there is no known cause of autism. Research suggests that it is a genetic disorder that may be triggered by a variety of factors including environmental, neurologic, immunologic, and metabolic.

How is it diagnosed?

There is no diagnostic test for autism. Diagnosis is based on observation of the child in the areas of communication, social interaction, and unusual behaviors or interests. Usually the parents are the first to suspect a problem when the child fails to meet the expected developmental milestones or seems to respond abnormally to parental affection.

Care and treatment

Although there is no cure for autism, several interventions can be very beneficial.

- Many people with autism feel more at ease and secure when their environment and schedule is routine and structured.



- Medications used to treat anxiety, hyperactivity and behavior problems are sometimes prescribed to relieve these symptoms.
- Early diagnosis and intervention with a highly structured individualized education program is extremely important. Education protocols that use behavior analysis, occupational, physical and speech therapies can be very effective in helping children and adults with autism learn new skills to help them reach their full potential.

For more in-depth information on autism, check these websites:

www.nichd.nih.gov/autism

www.cdc.gov/autism

www.autism-society.org

www.autism.org

The Northeastern Pennsylvania Health Care Quality Unit Presents:
PORTRAITS OF AUTISTIC SPECTRUM DISORDER IN THE INDIVIDUAL
WITH A DEVELOPMENTAL DISABILITY—USING POSITIVE BEHAVIORAL
SUPPORTS TO CHANGE DISRUPTIVE BEHAVIORS

April 18, 2007

9:30 A.M.—2:00 P.M.

Quality Inn & Suites

400 Route 315, Pittston Township, PA 18640

Theories about Autism are important to understand...but what should be done with the hitting, screaming, and other disruptive behaviors that are happening? This workshop focuses on actions that can be taken immediately to change disruptive behaviors and create adaptive ones. A variety of composite examples will be provided representing individuals with autism engaging in disruptive behaviors and how specific techniques can reduce those behaviors and slowly adapt them into functional behaviors.

Please RSVP by April 6, 2007 to Sharon Falzone of The Advocacy Alliance at Toll Free at 1-877-315-6855 or sf@theadvocacyalliance.org.



MAY IS NATIONAL STROKE AWARENESS MONTH

Strokes rank third in the cause of death following behind heart disease and cancer. On average every 45 seconds someone in the United States has a stroke and every 3-4 minutes someone dies of a stroke.

A stroke is an interruption of the blood supply to any part of the brain. A stroke is sometimes called a brain attack, a cerebral vascular accident, a cerebral infarction, or a cerebral hemorrhage.

The symptoms of a stroke depend on what part of the brain is damaged. In some cases a person may not even be aware he or she has had a stroke. Usually a sudden development of one or more of the following indicates a stroke.

- Weakness or paralysis of an arm, leg, side of the face, or any part of the body.
- Numbness, tingling, decreased sensation.
- Vision changes.
- Slurred speech, inability to speak or understand speech, difficulty reading or writing.
- Swallowing difficulties or drooling.
- Loss of memory.
- Vertigo (spinning sensation).
- Loss of balance or coordination.
- Personality changes.
- Mood changes (depression, apathy).
- Drowsiness, lethargy, or loss of consciousness.
- Uncontrollable eye movements or eyelid drooping.

If you or someone you're with develops any of these stroke symptoms **call 911 immediately**. "Call for emergency help even if the symptoms seem to fade away," says David Wiebers, M.D. of the Mayo Clinic. "Mini-strokes, or TIA'S, fool a lot of people. You might lose vision in one eye for 5 to 10 minutes, then it returns. There's no pain, so you have a false sense of security. But you should still be evaluated." **Remember it is always better to err on the side of caution!**



As the saying goes, an ounce of prevention is worth a pound of cure. To help prevent a stroke:

- Get screened for high blood pressure at least every 2 years, especially if you have a family history of high blood pressure.
- Treat high blood pressure, diabetes, high cholesterol, and heart disease if present.
- Follow a low fat diet.
- Quit smoking.
- Exercise regularly.
- Lose weight if you are overweight.
- Avoid excessive alcohol use (no more than 1-2 drinks per day).





MAY IS MENTAL HEALTH MONTH

Mental illnesses are medical conditions that interrupt or change a person's thinking, feeling, mood, ability to relate to others, and daily function. Just as a heart attack is a problem with the heart's functioning, mental illnesses are conditions that often lead to a decreased ability to cope with the everyday demands of life. The term "mental" is often misleading, as current research shows that there is much physical symptomology in mental illness and vice-versa.

Mental illnesses are biologically based. They cannot be overcome through will power and are not related to a person's character nor intelligence. These illnesses fall on a continuum of severity. It is estimated that mental illness affects 1 in 5 families in America. According to the World Health Organization, 4 of the 10 leading causes of disability in the United States and other developed countries are mental illnesses.

Early identification and treatment are critical for recovery. Adults who experience one or more of the following symptoms should be evaluated by a psychiatrist or other physician as soon as possible:

- **Marked personality changes.**
- **Difficulty in coping with everyday problems and daily activities.**
- **Anxieties that interfere with normal, everyday life.**
- **Prolonged depression and apathy.**
- **Strange or grandiose ideas.**
- **Extreme highs and lows in mood.**
- **Significant changes in eating or sleeping patterns.**
- **Excessive anger, hostility, or violent behavior.**
- **Excessive use of alcohol or other drugs.**

Some of the more commonly known mental illnesses are depression, bipolar disorder (manic-depression), anxiety disorders, obsessive-compulsive disorder (OCD), panic disorder, phobias, schizophrenia, other psychotic disorders, post traumatic stress disorder (PTSD), and borderline personality disorder. Current treatments mean that recovery is possible for most people affected by mental illness. These may include a combination of talk therapy, medication management, and lifestyle changes. Mental illnesses can affect people from all ages and any socio-economic, racial, and cultural background. It is worth emphasizing that mental illnesses are not the result of a personal weakness, lack of character, or poor parenting.



Anyone who is considering or talking about suicide or homicide should immediately seek professional help. For more information, you may go to: <http://www.nimh.nih.gov> or <http://www.nami.org>.



Check out these websites mentioned in this edition of “It’s Your Health”.

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<http://www.nami.org>

www.cdc.gov/autism

www.autism.org

www.nichd.nih.gov/autism

www.autism-society.org

APRIL IS NATIONAL OCCUPATIONAL THERAPY MONTH

AND MAY IS “BETTER HEARING AND SPEECH MONTH”

This provides us with an opportunity to talk about occupational and speech therapists, and the services that they can provide for the individual with a developmental disability.

An **Occupational Therapist** is a professional who helps people improve their ability to perform tasks in their daily living and working environments. If you think about all the different things that you do from the time you get up in the morning, until the time you go to bed in the evening, this encompasses quite a bit. There are so many things that we take for granted in the ways our body works. For example, consider brushing your teeth. You need the fine motor coordination of getting the toothbrush, putting toothpaste on it, and using that brush to clean all of your teeth, front and back, hard to reach corners, and now you get the idea. If you have any weakness of your arm or hand, have difficulty with hand/eye coordination, or have difficulty opening your mouth, this may present a whole range of challenges. This is a situation where an occupational therapist may be helpful. Through the process of doing an evaluation, the occupational therapist would observe the way an individual is doing an activity, and then see if there is a way to make it easier, or more energy efficient. Is there a way that this consumer can do more of the task himself or herself? Is there some kind of assistive device that may be beneficial? The OT would then move on to looking at other areas that the consumer might be having difficulty. These may include bathing, dressing, grooming, doing household chores, and transferring in and out of the shower or tub.



They also have a wealth of information on adaptive equipment that can help individuals become more independent and productive.

A **Speech Therapist** is focused on all aspects of speech, language, and swallowing. They can be of assistance with individuals who cannot produce speech sounds, or cannot produce them clearly; those with speech rhythm and fluency problems, such as stuttering; people with voice disorders, such as inappropriate pitch or harsh voice; those with problems understanding and producing language; those who wish to improve their communication skills; and those with cognitive communication impairments, such as attention, memory, and problem solving disorders. They also work with people who have swallowing difficulties. For individuals with little or no speech capability, speech-language pathologists may select augmentative or alternative communication methods, including automated devices and sign language, and teach their use. They teach these individuals how to make sounds, improve their voices, or increase their oral or written language skills to communicate more effectively. They also teach individuals how to strengthen muscles or use compensatory strategies to swallow without choking or inhaling food or liquid. Speech-language pathologists help people develop, or recover, reliable communication and swallowing skills so patients can fulfill their educational, vocational, and social roles. Speech therapists also work with families to help facilitate communication in the person, and not impede it. They work with individuals and caregivers in implementing safe feeding and swallowing techniques that will help insure the consumer's safety. They make recommendations regarding the type of diet that would work best, and give guidance regarding how the individual should take in liquids.



Research shows that participation in family centered early intervention services during the first years of life has substantial positive effects on the cognitive development, social adjustment, and overall development of children with developmental disabilities. Some of our consumer's for one reason or another may not have had access to the services of the occupational or speech therapist through an early intervention program, but may have received them in another environment.

In some cases consumers, as adults, have had ongoing access to therapy services, which may also include the care of a physical therapist. In other situations they may not have. Whatever the situation is, there may be times when discussing the need for an Occupational or Speech Therapist with the PCP would be in the consumers best interest.

When would an Occupational Therapy evaluation be indicated?

- ✓ Consumer has had a recent change in their ability to do a certain task as the result of a recent stroke, is weak due to a recent hospitalization, injured their arm or hand, and may need to find new ways to do tasks they were able to do before.
- ✓ Consumer has a recent change in cognition due to trauma, onset of dementia, etc.
- ✓ Consumer is in a new environment and cannot safely navigate the bathroom.
- ✓ There is a need for some form of assistive device that will help the individual become more independent.

When would a Speech Therapy evaluation be indicated?

- ✓ Consumer is working hard to speak clearly, but people often misunderstand her.
- ✓ Staff are at a loss of how to communicate with individual.
- ✓ New onset of cognitive impairment, after the physician has evaluated it.
- ✓ Consumer is demonstrating some of the symptoms of dysphagia (difficulty swallowing).

Test your knowledge and have some fun. Please answer true or false.

1. Coughing during a meal always means the person has a cold?
2. If a person has trouble transferring in the bathroom, the first step should be transferring the person to a new house?
3. It is important for staff to be consistent in the way they assist consumers with transfers, and to tell them what to expect before they actually start the transfer. This helps the consumer feel more confident and safe.
4. Jennifer, a 38-year-old consumer has dentures that she needs assistance putting in. Staff assists her with oral care that includes making sure that her dentures are in properly. They realize that by doing this they are also making sure that this will make it more manageable for her to chew and then swallow her food.
5. Marie had a communication device that she was using regularly. She has moved to a new house and the staff is not familiar with the device. The best thing for the consumer would be to have her point and use gestures for what she needs.
6. George is taking 2 hours to eat his meals. Chances are that this is happening because he is not getting enough sleep at night.
7. People need to eat to eat slowly, and have 1 to 1 staff supervision if they have dysphagia or difficulty swallowing.
8. A person recently fractured her foot, and cannot bear weight on that leg, and cannot get into the shower. The person who would be most helpful in this situation is a behavior specialist.
9. One of the most challenging places to assist a person transfer is in the bathroom.
10. John H. cannot feed himself with a regular spoon. The best way to assist him is for staff to feed him.

Quiz Key: 1) false, 2) false, 3) true, 4) true, 5) false, 6) false, 7) true, 8) false, 9) true, 10) false

P.O. Box 1368
846 Jefferson Avenue
Scranton, PA 18501



IDEAS FOR OUR NEWSLETTER?

Contact Sharon Falzone, Ph.D.,
Director of the Northeastern PA
Health Care Quality Unit toll-free at
1-877-315-6855 or (570)207-9192
or sf@theadvocacyalliance.org with
your suggestions.