CORRESPONDENCE

The Investigation and Differential Diagnosis of Asperger Syndrome in Adults

by Dr. med. Fritz-Georg Lehnhardt, Dipl.-Psych. Astrid Gawronski, Dipl.-Psych. Kathleen Pfeiffer, Dr. med. Hanna Kockler, PD Dr. med. Leonhard Schilbach, Prof. Dr. med. Dr. phil. Kai Vogeley in volume 45/2013

Comorbid Intellectual Disability

The article by Lehnhardt and colleagues successfully links empirically based facts with the authors' own clinical experiences from a specialized outpatient clinic for people with high-functioning autism; it can therefore be used as a practice guideline for the diagnostic evaluation of adults with suspicion of autism spectrum disorders (1).

However, the population described in this paper accounts for only about half of people with autism spectrum disorders. According to Fombonne, 30–74% of individuals with autism spectrum disorders have below average intelligence (2). In both, individuals with and without additional intellectual disability (ID), autism spectrum disorders often remain undiagnosed until adulthood. In fact, autism spectrum disorders were diagnosed as such in only every fourth affected individual (3). This is not least owing to the fact that specific diagnostic instruments have yet to be developed (3, 4). According to the Conventions of the United Nations on the Rights of People with Disabilities and the Charter for people with autism adopted by the EU, all individuals with autism spectrum disorders have the right to receive diagnostic evaluation and appropriate treatment. We think that adequate availability of services for individuals with ID and suspicion of autism spectrum disorders would be a highly desirable goal in Germany.

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Conflict of interest statement

The authors declare that no conflict of interest exists.

In Reply:

Sappok and colleagues mention a further aspect within the autism spectrum, which is socially and clinically of equal importance:

Persons with learning disabilities and comorbid autism are impaired in a particular way in their right to self-determination and participation in society, as well as in terms of access to adequate medical care. Especially their impairments in verbal and intellectual abilities make it difficult for those affected to describe their inner experiences in a precise and differentiated fashion. For this reason, the diagnostic evaluation depends even more on careful observation of behaviors and/or a history taken from persons close to the patient.

As for persons with high-functioning autism or Asperger syndrome, there is a grave lack of reliable diagnostic instruments, in order to identify hitherto undetected, affected adult persons and to enable them to have access to a therapeutic environment that is adapted to autism-specific ways of thinking, behaving, and perceiving. As early as in 2010, Sappok and colleagues published an article on autism in adults with mental handicaps that is very well worth reading (1). In a similar way to our own article, this article provides information on clinical particularities, comorbidities, differential diagnostic evaluations, and currently available psychodiagnostic approaches in this group of patients.

We also wish to point out the development of an S3 guideline “Autism disorders in childhood, adolescence, and adulthood” (2), which will consider the particular aspects of previously undetected autistic disorders in adults in the low-functioning and high-functioning range and that will hopefully provide momentum for the development of new diagnostic tools.

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