Pervasive Development Disorders

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Pervasive Development Disorders (PDD), also known as Autism Spectrum Disorders (ASD), describes five conditions that all have similar characteristics (Pervasive development disorders, n.d., ¶ 1). These disorders include autism, Asperger’s syndrome, Childhood Disintegrative Disorder, Rett syndrome, and Pervasive Development Disorder Not Otherwise Specified (PDD-NOS). All these conditions involve a child having difficulty or delay in basic concepts and functions, such as communication and social skills. Symptoms of PDD range from mild to severe, and although parents may notice symptoms during infancy, the onset/diagnosis usually occurs when a child is around three years old.

Early signs of PDD may include the following:

- problems with social interactions
- avoidance of eye contact
- difficulty with verbal and nonverbal language
- difficulty accepting and/or adjusting to change
- aggressive behavior
- anxiety
- repetitive movements
- temper tantrums
- extreme sensitivity to noise

At this point, the cause of PDD is not known: however, research suggests a connection with the nervous system. Much of the current research focuses on the brain and spinal cord of people with PDD. Researchers hope that further studies will help us better understand, treat, and, ultimately prevent PDD (Pervasive development disorders, n.d., ¶ 4).

**Diagnosis for PDD has changed significantly. This handout no longer reflects current information.**
Because there is such a wide range of symptoms for PDD, there is not one definitive treatment. Certain medications can improve some of the symptoms, such as aggressive behaviors, inattention, obsessive-compulsive behaviors, and mood swings, but there is no one medication that can cure PDD. Discuss possible medical treatments with your child’s pediatrician. He/she will look at your child’s unique needs and recommend any medicines that may be helpful.

There are several treatment options for PDD (Buckendorf, 2008). Keep in mind that treatment should target the specific needs of the child. Some children benefit from explicit one-on-one instruction while others thrive in a regular classroom setting. Treatment options can include:

- special education
- speech therapy
- occupational therapy
- physical therapy
- peer/sibling training
- social skills practice

Under the Individuals with Disabilities Education Act (IDEA), children with disabilities have access to federally mandated early intervention programs from birth until age three. Parents work with their state’s early intervention program to develop an Individualized Family Service Plan (IFSP) that directs the child’s treatments, speech/occupational therapy for example (Autism and other pervasive development disorders, n.d., ¶ 5).

Also, under IDEA, children three years old and up have access to services through their school district. Parents, speech-language pathologists, teachers, therapists, and psychologists can work together to develop an Individualized Education Plan (IEP) that focuses on meeting the child’s social and educational needs.

Resources


The list of Super Duper® products below may be helpful when working with children who have special needs. Visit www.superduperinc.com or call 1-800-277-8737. Click the links below to see the product description.

*Photo Feelings Fun Deck®*

*Webber® Story Time Communication Boards*

*What Do You Say…What Do You Do…™ At Home?*