



CARD Fact Sheet 5

What is Asperger Syndrome?

Asperger Syndrome (AS) is considered a pervasive developmental disorder at the higher functioning end of the autism spectrum. It is characterized by sustained impairment in social interaction and the development of restricted, repetitive patterns of behavior, interests and activities. In contrast to autism, there are no obvious delays in language or cognitive development, or in age-appropriate self-help skills and adaptive behaviors though there are subtle impairments.

Differential Diagnosis

Some of the characteristic features of Asperger syndrome overlap to varying degrees with those of other clinical diagnoses. Therefore a diagnosis of Asperger syndrome must be differentiated from disorders such as schizoid personality, schizophrenia, obsessivecompulsive disorder, Rett syndrome and childhood disintegrative disorder. There is considerable debate over whether or not Asperger syndrome should be differentiated from high-functioning autism.

Characteristics

Communication

Unlike most people with autism, individuals with Asperger syndrome experience no delay in the onset of speech. In fact, their speech tends to be formal, pedantic and long-winded. Persons with AS often have monotonous vocal intonation and limited use of gestures. They may have difficulty comprehending other people's expressions, gestures and non-literal statements. Therefore, individuals with Asperger syndrome usually do not understand jokes, irony and metaphors.

Social Interaction

Many individuals with AS want to develop friendships and interact with their peers, but lack the ability to understand and use rules governing social behavior. They have difficulty using and interpreting gestures, judging proximity to others, and maintaining eye contact, all of which may impede the development of personal relationships.

The social behavior of persons with AS tends to be naive and peculiar and movement is likely to be awkward and clumsy. Because of an intense interest in one or two topics, the individual with Asperger syndrome may talk at people instead of to people, disregarding the listener's interest or attention. Although individuals with AS may make efforts to socially interact with others, their unusual manner may leave many people not knowing how to respond. The person with Asperger syndrome may then be left misunderstood and isolated.

Special Skills and Interests

Individuals with Asperger syndrome often have average to above average intelligence. They tend to possess excellent abstract thinking abilities and rote memory skills. One characteristic unique to AS is an intense interest in one or two subjects to the exclusion of all others. Many times individuals with AS are respected for their unusual abilities, and due to their extensive knowledge of certain topics or activities may be regarded as "eccentric." The individual's singleminded pursuit of his or her interest can lead to great achievements later on in academic and professional life.

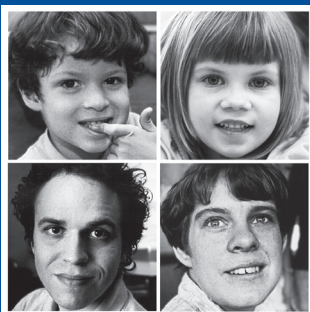
Associated Features and Disorders

Parental reports of early development may reveal that motor milestones were delayed and motor clumsiness is often observed in persons with Asperger syndrome. An uneven profile of skills, attention deficits and cognitive disorganization may also be key features of individuals with AS.

Prevalence

Asperger syndrome is an uncommon disorder and information on prevalence is limited. The disorder appears to be more common in males than females. As diagnosticians become more familiar with the syndrome, its use as a diagnostic category is likely to increase and prevalence figures are likely to rise.

RELATED DISABILITIES



Educational and Environmental Supports

No two people with Asperger syndrome are identical. Treatment and educational interventions should be individualized to suit the needs of the person. Supports and interventions may include: ã Teaching skills and concepts in naturally occurring situations and across settings to maximize generalization. ã Providing a predictable environment with consistent daily routines and minimal transitions. ã Role playing social situations in which the individual with AS is taught how to react to social cues. ã Teaching social awareness, taking the perspective of another, and interpretations of non-literal language. ã Teaching appropriate nonverbal behaviors such as eye contact, gestures, proximity to others and correct posture. ã Instruction on reading the nonverbal communications of others (e.g., facial expression, body language). ã Restricting the discussion of the individual's special topic to specific times and/or places. ã Creating a buddy system in which a peer can help with instructional directions by the teacher, remembering homework assignments and staying on task. Buddies may also facilitate active socialization with others.

Suggested Readings

Frith, U. (1991). *Autism and Asperger Syndrome*. Cambridge, Great Britain: Cambridge University Press. Sacks, O. (1995). *An Anthropologist on Mars*. New York: Alfred A Knopf, Inc.

Williams, K. (1995). *Understanding the Student with Asperger Syndrome: Guidelines for Teachers*. Focus on Autistic Behavior, 10, 9-16.

The Center for Autism and Related Disabilities

The Center for Autism and Related Disabilities (CARD) seeks to provide support and assistance with the goal of optimizing the potential of people with autism, dual sensory impairments, and related disabilities. Located at six university sites throughout Florida, CARD develops programs offering support and training for individuals, families, professionals, and peers throughout Florida. This fact sheet is made possible through the cooperative efforts of Florida's CARD Centers.

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