

PSYCHOSIS IN AUTISM: DIAGNOSTIC AND TREATMENT CHALLENGES

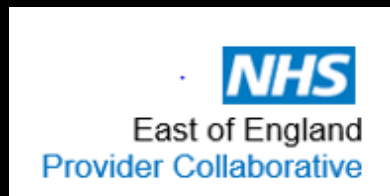
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A phenomenological approach to diagnosing psychosis in autism spectrum disorder and intellectual disability: a case series

Rahul Rai, Samuel Tromans, Chaya Kapugama, Verity Chester, Ignatius Gunaratna, Peter Langdon, Regi T. Alexander ▼

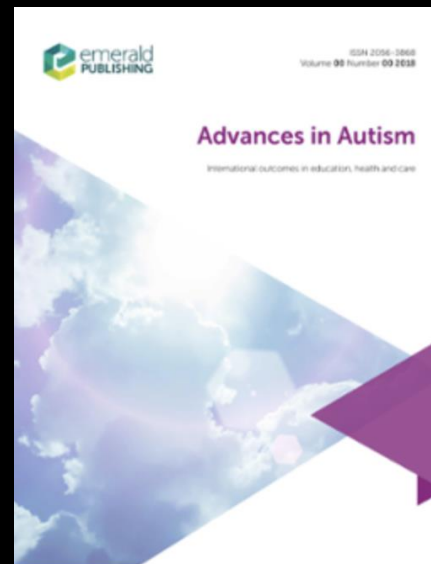
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Why are we talking about it?

Mis-diagnosing ASD as psychosis

Missing psychosis in ASD

Treatment issues

ASD FEATURES IN PSYCHOSIS

SYSTEMATIC REVIEW ARTICLE

Front. Psychiatry, 21 February 2019 |

<https://doi.org/10.3389/fpsy.2019.00078>



Autistic Symptoms in

Schizophrenia spectrum disorders have higher autistic symptoms than healthy controls.

Siracusano^{6,7}, Assia Riccioni⁸, Marco Armando⁹, Paolo Curatolo⁸ and Luigi Mazzone^{8*}

¹Department of Psychiatry, University of Oxford, Oxford, United Kingdom

²Pediatric University Hospital-Department, Bambino Gesù Children's Hospital, Rome, Italy

³Department of Epidemiology, La

⁴Department of Pediatrics, Scho

Medical Campus, JFK, Aurora, CO

⁵Brain and Body Integration - Me

⁶Department of Biomedicine and

Italy

⁷Department of Biotechnological and Applied

3.6 to 60%

Recognizing Psychosis in Autism Spectrum Disorder

Michele Ribolsi^{1*}, Federico Fiori Nastro^{2,3}, Martina Pelle^{2,3}, Caterina Me
Silvia Sacchetto^{2,3}, Giulia Lisi⁴, Assia Riccioni⁵, Martina Siracusano⁶, L

¹Department of Medicine, Unive
ity of Rome Tor Vergata, Rome, I
Italy, ⁴ Department of Mental H
y Unit, Department of Systems I
Prevention, University of Rome To

PSYCHOSIS IN ASD



[J Autism Dev Disord.](#) 2022; 52(4): 1568–1586.

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PMCID: PMC8938385

PMID: [33993403](https://pubmed.ncbi.nlm.nih.gov/33993403/)

Not just ASD, but all NDD: ASD, ADHD, ID

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PSYCHOSIS IN ID

'Pffropfschizophrenie' revisited

Schizophrenia in people with mild learning disability

G. A. DOODY, E. C. JOHNSTONE, T. L. SANDERSON,
D. G. CUNNINGHAM OWENS and W. J. MUIR

a prerequisite to inclusion. Subjects with a documented premorbid IQ below 50 or above 70 were excluded. Individuals believed to have Down's syndrome were excluded from the cohort as cognitive testing was to form an integral component of the study protocol and these people are

LD + schiz: more negative symptoms

LD + schiz: more soft neuro signs + epilepsy

LD + schiz: more episodic memory deficits

LD + schiz: more multiply affected families

LD + schiz: high rates of chromosomal variants

PSYCHOSIS IN ADHD



The European Journal of Psychiatry

Volume 37, Issue 3, July–September 2023, Pages 182-189



Original article

Psychosis in adults with autism spectrum disorder and attention deficit hyperactivity disorder at acute psychiatric wards

Hiromitsu Uno^{a b}  , Wakaho Hayashi^{a b c} , Akari Nakagawa^{a d} , Takeshi Otowa^{a b} , Hiroki Yamada^e , Akira Iwanami^{a b d} 

29.2% have 'psychotic symptoms'
(Kennig et al)

ts and content ↗

PSYCHOSIS IN ASD

Literature Review

The co-occurrence of nonaffective psychosis and the pervasive developmental disorders: A systematic review

Fiona E. Padgett, Eleni Miltsiou & Paul A. Tiffin

Pages 187-198 | Published online: 02 Sep 2010

Download citation | <https://doi.org/10.3109/13668250.2010.494596>

Full Article

Figures & data

References

Citations



REVIEW

published: 28 February 2022
doi: 10.3389/fpsyt.2022.768586



Methodological problems

Results The methodology and estimated rates of psychosis or conclusions could be drawn due to the level of heterogeneity and. However, there were indications from the literature that rates of adolescents affected by juvenile-onset psychosis but the methodology a pooled prevalence.

Conclusions There is some evidence for elevated rates of onset psychosis. Further work is needed in order to understand co-occurrence and how such affected individuals can be

Keywords: autism spectrum disorders, pervasive developmental disorder, review, comorbidity

Recognizing Psychosis in Autism Spectrum Disorder

34.8% have 'psychotic symptoms'.

Medici^{2,3},
Luigi Mazzone⁵ and

University Campus Bio-Medico
Italy, ³ Psychiatry and
Health, Azienda Sanitaria

Locale (ASL) Roma 1, Rome, Italy, ⁵ Child Neurology and Psychiatry Unit, Department of Systems Medicine, University of Rome Tor Vergata, Rome, Italy, ⁶ Department of Biomedicine and Prevention, University of Rome Tor Vergata, Rome, Italy, ⁷ IRCCS-Fondazione Santa Lucia, Rome, Italy

ASD & Psychosis

**From ASD as precursor to
Schizophrenia to**

they are mutually exclusive

**& now the genetic overlap between
neurodevelopmental disorders and
schizophrenia**

ASD & Psychosis

BJPsych

The British Journal of Psychiatry (2011)
198, 173–175. doi: 10.1192/bjp.bp.110.084384

Reappraisal

Neurodevelopmental hypothesis of schizophrenia

Michael J. Owen, Michael C. O'Donovan, Anita Thapar and Nicholas Craddock

Summary

The neurodevelopmental hypothesis of schizophrenia provided a valuable framework that allowed a condition that usually presents with frank disorder in adolescence or early adulthood to be understood at least in part as a consequence of events occurring early in development. However, the implications of the neurodevelopmental hypothesis for nosological conceptions of the disorder can only now be fully appreciated. Recent research indicates genetic overlap between schizophrenia and syndromes in which psychopathology is manifest in childhood and that are often grouped together as 'neurodevelopmental disorders' such as autism-spectrum disorders, intellectual disability and attention-deficit hyperactivity disorder.

These findings challenge the aetiological basis of current diagnostic categories and, together with evidence for frequent comorbidity, suggest that we should view the functional psychoses as members of a group of related and overlapping syndromes that result in part from a combination of genetic and environmental effects on brain development and that are associated with specific and general impairments of cognitive function. This has important implications for future research and for the configuration of psychiatric services.

Declaration of interest

None.

Why are we talking about it?

Mis-diagnosing ASD as psychosis

Missing psychosis in ASD

Treatment issues

Schizophrenia

Delusions

Bizarre ideas

Hallucinations

Imaginary friends

Disorganised
thought

Preoccupation with control

Disorganised
motor
behaviour

Proneness to psychotic reactions
when stressed'

Negative
symptoms

Schizophrenia

Delusions

Obsessional thoughts can have a quasi-hallucinatory quality

Hallucinations

Internal dialogue interpreted as hallucinations

Disorganised thought

Fleeting 'visual hallucinations'

Disorganised motor behaviour

Negative symptoms

Schizophrenia

Delusions

Hallucinations

Oddities of speech

Disorganised
thought

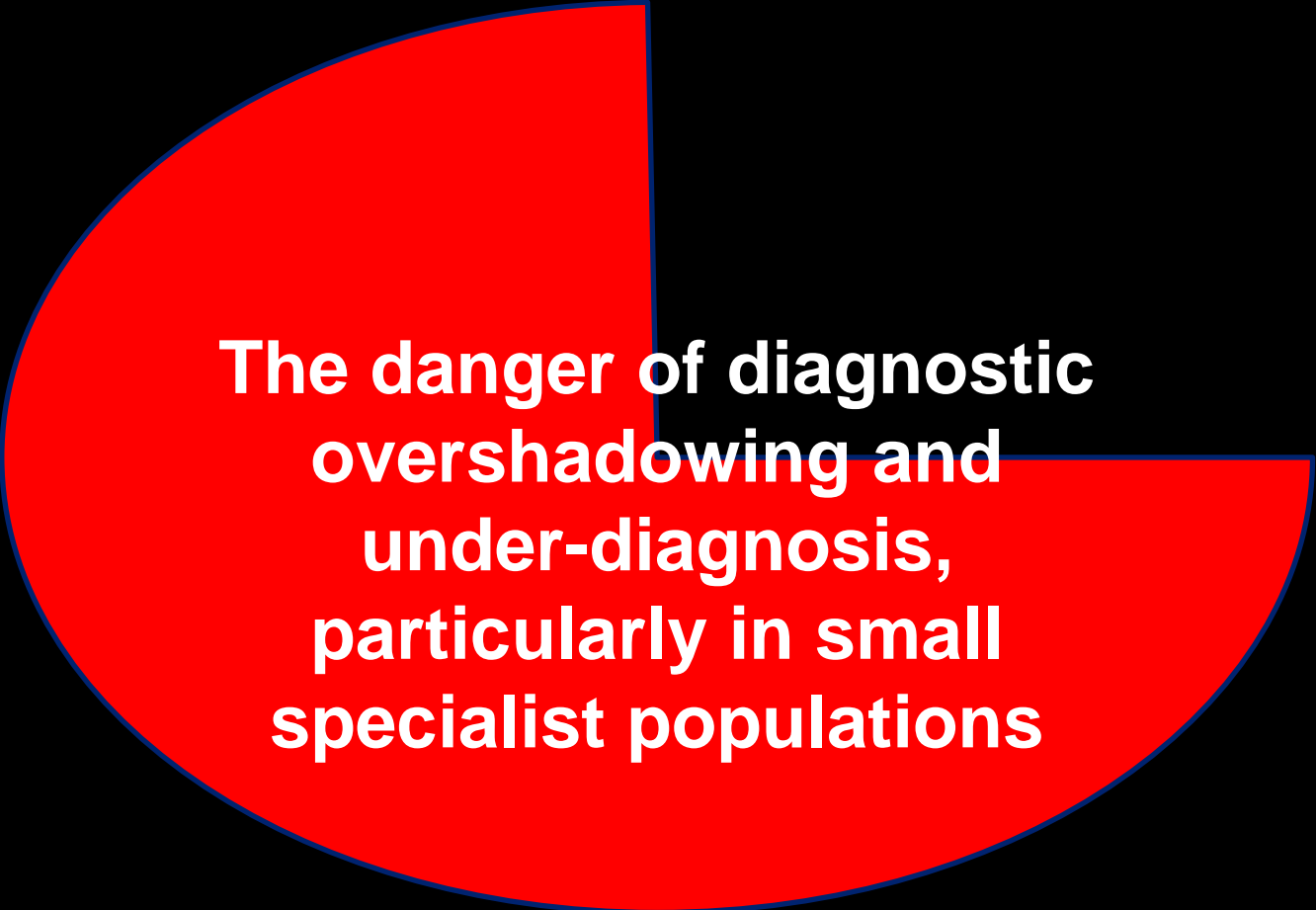
Concrete thinking

Disorganised
motor
behaviour

Stereotypies and catatonic features

Negative
symptoms

Social isolation



**The danger of diagnostic
overshadowing and
under-diagnosis,
particularly in small
specialist populations**

Why are we talking about it?

Mis-diagnosing ASD as psychosis

Missing psychosis in ASD

Treatment issues

Delusions

1. Subjective certainty

Hallucinations

2. Impervious to counter arguments

Disorganised
thought

3. Implausible content

Disorganised
motor
behaviour

Negative
symptoms

TABLE 1 | Key elements for the differential diagnosis of delusions in ASD and Psychosis.

Autism spectrum disorder

Impairment to understand the rules of common social interactions

Greater impairment in ToM

Difficulty in distinguish between their subjective perceptions and reality

Psychosis

Aberrant interpretation of others' mental states

Greater tendency to external attributions

Hostility bias



Recognizing Psychosis in Autism Spectrum Disorder

Michele Ribolsi^{1*}, Federico Fiori Nastro^{2,3}, Martina Pelle^{2,3}, Caterina Medici^{2,3}, Silvia Sacchetto^{2,3}, Giulia Lisi⁴, Assia Riccioni⁵, Martina Siracusano⁶, Luigi Mazzone⁵ and Giorgio Di Lorenzo^{2,3,7}

¹ Unit of Neurology, Neurophysiology, Neurobiology and Psychiatry, Department of Medicine, University Campus Bio-Medico of Rome, Rome, Italy, ² Department of Systems Medicine, University of Rome Tor Vergata, Rome, Italy, ³ Psychiatry and Clinical Psychology Unit, Fondazione Policlinico Tor Vergata, Rome, Italy, ⁴ Department of Mental Health, Azienda Sanitaria Locale (ASL) Roma 1, Rome, Italy, ⁵ Child Neurology and Psychiatry Unit, Department of Systems Medicine, University of Rome Tor Vergata, Rome, Italy, ⁶ Department of Biomedicine and Prevention, University of Rome Tor Vergata, Rome, Italy, ⁷ IRCCS-Fondazione Santa Lucia, Rome, Italy

Schizophrenia

Delusions

Objective space

Hallucinations

Voluntary control

Disorganised
thought

Substantiality

Disorganised
motor
behaviour

Negative
symptoms

TABLE 2 | Basic differences between ASD and SCZ patients for the detection of delusions, hallucinations, and negative symptoms.

Delusions	<p>Not fully evaluable in non-verbal ASD patients</p> <p>Clinicians should distinguish between “childish fantasies” and clinical delusional beliefs in ASD patients</p> <p>In ASD patients, delusional ideas have a precise and recognizable time of onset along the clinical course of pre-existing childhood-onset neurodevelopmental disorder</p>
Hallucinations	<p>ASD patients show more frequently anomalous perceptual experiences (APEs) than true psychotic hallucinations</p> <p>First-hand descriptions of APEs are usually made only by adult high-functioning ASD patients</p> <p>APEs should be considered as psychotic hallucinations only if their source is attributed to the outside world.</p>
Negative symptoms	<p>Unlike autistic symptoms, negative symptoms occur after the psychotic onset and have a progressive worsening clinical course</p> <p>ASD subjects show “poverty and inappropriateness of reciprocity” rather than affective flattening</p> <p>Compared to SCZ patients, in ASD loss of social contact is frequently associated with repetitive behaviors</p>



Recognizing Psychosis in Autism Spectrum Disorder

Michele Ribolsi^{1*}, Federico Fiori Nastro^{2,3}, Martina Pelle^{2,3}, Caterina Medici^{2,3}, Silvia Sacchetto^{2,3}, Giulia Lisi⁴, Assia Riccioni⁵, Martina Siracusano⁶, Luigi Mazzone⁵ and Giorgio Di Lorenzo^{2,3,7}

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PMID: [33993403](https://pubmed.ncbi.nlm.nih.gov/33993403/)

Autism Spectrum Disorder and Clinical High Risk for Psychosis: A Systematic Review and Meta-analysis

[Julio Vaquerizo-Serrano](#),^{1,2,3} [Gonzalo Salazar de Pablo](#),^{1,3,4} [Jatinder Singh](#),^{1,2} and [Paramala Santosh](#)^{✉1,2}

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CHR-P

Unusual
thought
content

1. ATTENUATED PSYCHOTIC SYMPTOMS (APS)

Suspiciousness

Grandiose
ideas

2. BRIEF LIMITED INTERMITTENT PSYCHOTIC SYMPTOMS (BLIPS)

Perceptual
abnormalities

3. GENETIC RISK AND DETERIORATION SYNDROME

Disorganised
communication

A phenomenological approach to diagnosing psychosis in autism spectrum disorder and intellectual disability: a case series

Author(s):

4 patient stories with common themes

Content vs Form of psychopathology

Linking with core symptoms

Longitudinal change

Abstract:

Purpose

untreated psychotic symptoms and the subsequent impact on the quality of life of the patients concerned. The paper aims to discuss this issue.

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Information

Advances in Autism

056-3868

Online from: 2015

Subject Area: Health & Social Care

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ASD & Psychosis

Specific sub type of ASD linked to co-morbid psychosis

Atypical psychosis- particularly with affective features

ASD- fewer stereotyped interests and behaviours

Psych... features
of bo... ort

Felicity V.
Simon Bar

Background

There is limited
characteristic
with autism

Aims

To describe autistic and psychotic phenomenology in a group
of individuals
compare this
alone.

Method

We studied
features of the
psychosis (ASD-NP), and clinical characteristics of psychosis
in ASD-P with people with psychosis only.

Results

Individuals with ASD-P had more diagnoses of atypical


Conclusions

... type of ASD
... port findings
... pical,

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MTF more common in the ASD+Psychosis cohort???



THE JOURNAL OF
CLINICAL PSYCHIATRY

Cognitive Tests Vs Patient History

Doctors Who Perform Cognitive Tests 33%

Doctors Who Rely on Patient History 60%

Should they do both?

COGNITIVE IMPAIRMENT IN PATIENTS WITH DEPRESSION

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Vol 78, No 09

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Early Career Psychiatrists

The Association Between Comorbid Autism Spectrum Disorders and Antipsychotic Treatment Failure in Early-Onset Psychosis:
A Historical Cohort Study Using Electronic Health Records

Johnny M. Downs, MSc, MRCPsych^{a,b,*}; Suzannah Lechler, MSc^{a,b}; Harry Dean, MSc^{a,b}; Nicola Sears, MSc^{a,b}; Rashmi Patel, PhD, MRCPsych^{a,b}; Hitesh Shetty, MSc^b; Emily Simonoff, MD, FRCPsych^{a,b}; Matthew Hotopf, PhD, MRCPsych^{a,b}; Tamsin J. Ford, PhD, FRCPsych^c; Covadonga M. Diaz-Caneja, MD^d; Celso Arango, MD, PhD^d; James H. MacCabe, PhD, FRCPsych^{a,b}; Richard D. Hayes, PhD^{a,b}; and Laura Pina-Camacho, MD, PhD^{a,b,d}

Following treatment guidelines all the way to Clozapine and beyond

Why are we talking about it?

Mis-diagnosing ASD as psychosis

Missing psychosis in ASD

Treatment issues

<https://www.youtube.com/watch?v=vyyEDD9JT-8>



The image shows a YouTube video player interface. At the top left is the YouTube logo with 'GB' next to it. A search bar is located at the top right. The main video area displays a title sequence on a blue background with a sun-like icon. The word 'RADIANT' is written in colorful, stylized letters. Below it, the text 'AUTISM IN THE CRIMINAL JUSTICE SYSTEM' is displayed in white, uppercase letters. At the bottom of the video player, there is a control bar with a play button, a progress bar showing '0:49 / 50:05', and various settings icons including closed captions (CC), a gear, a full screen icon, and a share icon. Below the video player, the video title 'Training Video 1 - Autism in the Criminal Justice System' is visible.

YouTube^{GB} Search

RADIANT

AUTISM IN THE CRIMINAL JUSTICE SYSTEM

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0:49 / 50:05 • Title Sequence - "Autism in the Criminal Justice Syst... >

CC

Training Video 1 - Autism in the Criminal Justice System

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