

GP autism factsheet

What is autism?

Autism is a lifelong developmental disability that affects how people perceive the world and interact with others.

Autistic people see, hear and feel the world differently to other people. If you are autistic, you are autistic for life; autism is not an illness or disease and cannot be 'cured'. Often people feel being autistic is a fundamental aspect of their identity.

Autism is a spectrum condition. All autistic people share certain difficulties but being autistic will affect them in different ways. Some autistic people also have learning disabilities, mental health issues or other conditions, meaning people need different levels of support. All people on the autism spectrum learn and develop. With the right sort of support, all can be helped to live a more fulfilling life of their own choosing.

The National Autistic Society estimate that 11 in every 1,000 people (1.1% of the population) are on the autism spectrum. This means if you are a GP with a list size of 2,000 people, you're likely to have around 22 people on the autism spectrum on your list.

Behaviours

- Lifelong difficulties making/keeping social relationships.
- Naivety/vulnerability out of keeping with age.
- Rigidity/routine or rituals which when broken cause marked upset.
- Crisis at a time of change out of keeping with what one might normally expect.
- When someone asks you to consider it!
- Those identified by the criminal justice system (victims or offenders).
- The reliable history/information from an informant (family/friend/consultant/ police etc.) with the person's agreement.
- Poor eye contact, also staring.
- Awkward body language.
- Clothing unusual in appropriateness for season/weather/colour combinations/may always been the same.
- Few gestures or over the top gesticulation.
- Voice - loud, monotone, too quiet, labile affected modulation.
- Responding literally to direct questions and not to comments/humour.

Communication

Autistic people have difficulties with interpreting both verbal and non-verbal language like gestures or tone of voice. Many have a very literal understanding of language, and think people always mean exactly what they say. They may find it difficult to use or understand:

- facial expressions
- tone of voice
- jokes and sarcasm

Some may not speak, or have limited speech. They will often understand more of what other people say to them than they are able to express, yet may struggle with vagueness or abstract concepts. Some autistic people benefit from using, or prefer to use, alternative means of communication, such as sign language or visual symbols. Some are able to communicate very effectively without speech.

Others have good language skills, but they may still find it hard to understand the expectations of others within conversations, perhaps repeating what the other person has just said (this is called echolalia) or talking at length about their own interests.

It often helps to speak in a clear, consistent way and to give autistic people time to process what has been said to them.

Practical tips

- Consider best form of communication to use for the person, i.e. telephone, email, letter.
- Offer appointments at start or end of a day.
- Give consultations the same structure. You may have this set down in written form so that the patient knows what to expect and can even fill in the presenting complaint before coming in.
- Ability to book appointments online.
- Touch screen booking in for appointments.
- Quiet waiting area.
- Double appointments.
- Give patients time to talk, assimilate information and respond.
- Valuable information may be gleaned from family/carer/friend.
- Direct, closed, simple, clear and short questions work!
- Check on shared understanding of history, assessment and management.
- Don't assume "I understand" means they do.
- Where ever possible offer written evidence of the above.
- Offer patient leaflet to take away.
- Poor eye contact does not mean they are not listening to you.
- Don't expect eye contact.
- Try to keep consulting room's tidy, low arousal for any sensory issues.
- Keep sentences short direct and avoid sudden changes in voice volume.
- Don't use lots of body / hand movements when talking. Limit non-verbal communication.
- Treat the person not the disorder.
- Give advance warning of what is going to happen. If possible demonstrate.
- Empathise with their point of view. You may not understand it but we should respect it.
- Offer few and simple options.
- Use special interests if known to help communication and motivation.
- Avoid ambiguity, sarcasm, cynicism and other idioms etc.

See link for further advice: www.autism.org.uk/gp