

The Autism Gut and Behaviour Checklist

Checking the Autism Gut-Brain Connection



Autism, along with other neurodevelopmental disabilities, has been regarded as primarily a central nervous system disorder. Medical professionals have by and large ignored the various other disorders coexisting with autism, such as dysfunction of the gastrointestinal system. There is very strong evidence that children with autism spectrum disorder (ASD) tend to suffer from a wide variety of gut symptoms and abnormal gut pathologies. Sometimes there may be severe gut problems that are neglected and not considered in routine ASD evaluations. The incidence of gut symptoms is much higher in ASD than in either typical development or other developmental disorders. The most frequent complaints are **chronic constipation and/or diarrhoea, flatulence, abdominal discomfort/pain and distension.**

So what gut clues should we be looking for that can be masquerading as problem behaviour?

In 2010 a multidisciplinary expert panel reviewed the medical literature, and produced a report outlining signs and symptoms of possible gut related problems in ASD. The consensus expert opinion of the panel was that ***"individuals with ASDs deserve the same thoroughness and standard of care in the diagnostic workup and treatment of gastrointestinal concerns as should occur for patients without ASD"***.

Evaluation, Diagnosis, and Treatment of Gastrointestinal Disorders in Individuals With ASDs: A Consensus Report. Timothy Buie, et al. PEDIATRICS Volume 125, Supplement 1, January 2010.

The Autism Gut and Behaviour Checklist on the next page, is based on this consensus expert report.

A very strong recommendation from another study in the *Journal of Pediatrics* stated:

"At a minimum, GI dysfunction in ASD warrants the adoption of a lower referral threshold by practitioners for evaluation and treatment by a gastroenterologist if an underlying problem is suspected. Children with ASD often present with limited verbal communication, and as a result, their symptom presentation may be unusual compared with that of their peers. For example, the emergence or exacerbation of problem behaviors, such as aggression, self-injury, sleep disturbance, or irritability, without clear environmental influence (ie, antecedents or consequences), may be the only indication of an underlying GI problem."

Gastrointestinal Symptoms in Autism Spectrum Disorder: A Meta-analysis. Barbara O. McElhanon, Courtney McCracken, Saul Karpen and William G. Sharp. PEDIATRICS Volume 133, Number 5, May 2014.



Further a study in the *Journal of Abnormal Child Psychology* linked ***"GI issues with behaviour, showing that ASD children who have GI issues often experience extreme anxiety as well as regressions in behaviour and communication skills"***. ***"The side effects of the psychotropic drugs that are prescribed to ASD children may intensify their digestive issues."***

Check your child against the **The Autism Gut and Behaviour Checklist** over the page. See if your child may have undiagnosed gut issues contributing to difficult behaviour and poor treatment outcomes.

The Autism Gut and Behaviour Checklist

Family History

- | | |
|--|---|
| <input type="checkbox"/> Lactose or other food intolerances | <input type="checkbox"/> Gastritis or ulcers |
| <input type="checkbox"/> Food allergy | <input type="checkbox"/> Coeliac disease |
| <input type="checkbox"/> Reflux | <input type="checkbox"/> Non-coeliac gluten sensitivity |
| <input type="checkbox"/> Irritable Bowel Syndrome (IBS) | <input type="checkbox"/> Eating disorders |
| <input type="checkbox"/> Inflammatory bowel disease – e.g. ulcerative colitis, Crohn's disease | <input type="checkbox"/> Other gastrointestinal issues: "sensitive stomach", "need to watch what I eat" |
| <input type="checkbox"/> Problems swallowing, e.g. eosinophilic oesophagitis | |

Past and Present Medical History

- | | |
|---|---|
| <input type="checkbox"/> Constipation or diarrhoea as an infant | <input type="checkbox"/> Hard to settle after feeding |
| <input type="checkbox"/> Persistent colic | <input type="checkbox"/> Sleep issues in the past or currently |
| <input type="checkbox"/> Projectile vomiting | <input type="checkbox"/> On medication (e.g. antipsychotic, antidepressant) |

Physical Signs of Poor Gastrointestinal Health

- | | |
|---|--|
| <input type="checkbox"/> Chronic constipation | <input type="checkbox"/> Flatulence |
| <input type="checkbox"/> Loose stools / diarrhoea | <input type="checkbox"/> Straining |
| <input type="checkbox"/> Alternating constipation and diarrhoea | <input type="checkbox"/> Reflux or reflux medication |
| <input type="checkbox"/> Malodorous stool | <input type="checkbox"/> Vomiting |

Behaviours That May Be Markers of Abdominal Pain or Discomfort in Individuals With Autism Spectrum Disorders

- | | |
|---|---|
| <input type="checkbox"/> Restricted eating | <input type="checkbox"/> Facial grimacing |
| <input type="checkbox"/> Screaming | <input type="checkbox"/> Frequent clearing of throat, swallowing, tics, etc |
| <input type="checkbox"/> Sobbing "for no apparent reason" | <input type="checkbox"/> Teeth grinding |
| <input type="checkbox"/> Whining, moaning or groaning | <input type="checkbox"/> Tapping behaviour: finger tapping on throat |

Less obvious behaviours associated with gut issues

- ☐ Agitation: pacing, jumping up and down
- ☐ Unexplained increase in repetitive behaviours
- ☐ Self-injurious behaviours: biting, hits/slaps face, head banging, scratching, unexplained increase in self-injury
- ☐ Aggression: onset of, or increase in, aggressive behaviour
- ☐ Constant eating/drinking/swallowing ("grazing" behaviour)
- ☐ Mouthing behaviours: chewing on clothes (shirt sleeve cuff, neck of shirt, etc), pica
- ☐ Application of pressure to abdomen: leaning abdomen against or over furniture, pressing hands into abdomen, rubbing abdomen
- ☐ Any unusual posturing, which may appear as individual postures or in various combinations: jaw thrust, neck torsion, arching of back, odd arm positioning, rotational distortions of torso/trunk, sensitivity to being touched in abdominal area/ flinching

The Take Home Message For Parents

The more boxes that you have ticked for your child, the more likely it is that your child has an underlying gut issue that needs to be treated.

Treat your child's gut issue and you may be surprised how quickly their behaviour improves, and the gains they make with other therapies.



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