

Medication Study for Children with Fetal Alcohol Spectrum Disorder (FASD) and Attention Deficit and Hyperactivity Disorder (ADHD)

Researchers from the Waisman Center and the departments of family medicine, genetics, and psychiatry are collaborating to investigate the effectiveness of medication in improving the behavior of children with FASD and ADHD. The ultimate goal of the study is to identify treatments that increase the ability of children with FASD to learn and succeed as independent adults. The FASD diagnoses include fetal alcohol syndrome (FAS), fetal alcohol effects (FAE), alcohol-related birth defects (ARBD), and alcohol-related neurodevelopmental disorder (ARND).

A child may be eligible for the study if a parent or teacher has concerns about a child's attention and/or hyperactivity as well as concerns about whether a child was affected by alcohol during the mother's pregnancy. Eligible participants should be between 6 and 17 years old and enrolled in school or daycare for at least 4 hours per day. The total study time is 8 weeks with the medication portion lasting 3 weeks. The study requires about 6 visits to the Waisman Center. Participating families will be paid \$300 plus mileage for completing the study.

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Waisman Center Opens Early Autism and Communication Research Clinic (EACRC)

The Waisman Center's newest clinic will help researchers learn more about language development in young children newly diagnosed with autism. The Early Autism and Communication Research Clinic (EACRC), co-directed by Susan Ellis Weismer and Morton Gernsbacher, provides developmental, communication, and diagnostic evaluation services to children between ages 2 and 3 years old who have been diagnosed or are suspected to be on the autism spectrum and who participate in the Toddler Talk Project. This project is a federally-funded longitudinal study of early communication skills in children on the autism spectrum.

Evaluations are provided by specialists in autism and speech-language disorders who provide families with information on diagnosis (when appropriate) and speech and language development. Families work closely with the psychologist and speech-language pathologists during the evaluation, and families and staff meet together after the evaluation to review findings. Families are given information on community resources that may be available to them to access needed services for their child.

Appointments are available during clinic hours, and additional hours are offered on an individual basis to accommodate families' schedules. Families who participate in the Toddler Talk Project receive the developmental evaluation free of charge.

According to Ellis Weismer, "Difficulty with communication is often one of the first red flags noted by parents of toddlers on the autism spectrum. In the Toddler Talk Project we're using a range of measures, including standardized tests, psycholinguistic tasks and parent report, to assess early language abilities in children who are newly diagnosed. By following the same group of children over time, we hope to identify early predictors of language outcomes at 5 years of age. Findings from this study will be

useful for early differential diagnosis and may assist with designing more effective language interventions."

The Toddler Talk Project is currently seeking participants between the ages of 2 and 3 years who are native English speakers, and have been diagnosed or are suspected to be on the autism spectrum. In addition to the clinic evaluation, participation in the study will involve annual follow-up visits to the Waisman Center until the child is 5 years old. Families who participate will be reimbursed for their time, and travel and hotel costs will be paid for by the project.

For more information about the project, clinic, or to learn how to enroll, contact Chris Hollar at (608) 263-3123.



Children between 2 and 3 years old who have been diagnosed or are suspected to be on the autism spectrum are invited to participate in the Toddler Talk Project.

Study Profiles Rate of Autism in Wisconsin

February 8, 2007
by Jill Sakai
University Communications

A Wisconsin autism surveillance project released in February reported that approximately five out of every 1,000 Wisconsin children born in 1994 display symptoms indicative of autism.

The Wisconsin Surveillance of Autism and Other Developmental Disabilities System, part of a national study overseen by the Centers for Disease Control and Prevention (CDC) in Atlanta, evaluated children in the first phase of a study to determine the prevalence of autism spectrum disorders in the United States. The national study is the largest effort to date to obtain accurate counts and monitor affected populations over time. The CDC today released the first set of results from the project, reporting autism prevalence in study sites nationwide among children born in 1994.

Reported cases of autism — a developmental neurological disorder characterized by avoidance of social interactions, poor communication skills and unusual behaviors — have increased dramatically more than the past 15 years, but it is unclear whether those increases simply reflect growing awareness and recognition of the disorder or something more, says Maureen Durkin, an epidemiologist in the University of Wisconsin-Madison School of Medicine and Public Health and leader of the Wisconsin project.

“The public health community was caught off-guard by the increasing numbers reported in the 1990s,” she says. “But there was no system in place for monitoring autism.”

The CDC-led study, launched in six states in 2000 and expanded to 14 states, including Wisconsin, in 2002, aims to fill that need by obtaining more accurate counts of children with autism in multiple geographic locations, comparing autism rates among different groups of chil-

dren and looking for changes in rates or populations over time. Rather than relying upon previously recorded autism diagnoses, trained clinicians evaluated information in children’s medical records against standardized psychiatric criteria to assign autism diagnoses.

For the Wisconsin survey, collaborators at UW-Madison’s Waisman Center and elsewhere analyzed medical records as of 2002 for all children in 10 southeastern Wisconsin counties who were 8 years old that year, an age past the usual time of autism diagnosis. The group surveyed 35,126 children, which represent nearly half the 8-year-olds in the state that year.

The researchers found evidence of autism in 5.2 per 1,000 Wisconsin children born in 1994, slightly lower than the average value of 6.6 per 1,000 children born that year in all the participating states. Commenting on the CDC report, Durkin says, “The rates vary somewhat across states, but are all considerably higher than previously thought.”

The Wisconsin team found that autism was three to four times more common in boys than in girls, which agrees with previously published scientific reports. In ethnicity comparisons, they reported that autism prevalence was higher in non-Hispanic whites than non-Hispanic blacks and lowest of all among Hispanics.

The researchers also noted an apparent geographic difference, with autism rates more than twice as high in Dane County as in Milwaukee County.

“We don’t know what’s causing this,” Durkin says. “We see these dramatic ethnic and geographic differences that need further research.”

The researchers are still analyzing data for 8-year-olds in 2004 and 2006 and will conduct one additional survey in either 2008 or 2010. The Wisconsin team is also studying rates of cerebral palsy in the same populations.

Although the data released today paint the most thorough statistical picture to date of autism in Wisconsin,

the researchers worry that picture is still incomplete. Although most states in the autism surveillance program used both school and medical records to diagnose children, the Wisconsin team was denied access to school files on the grounds of the Family Educational Rights and Privacy Act, a federal law designed to protect the privacy of student educational records.

The team believes a complete reliance on medical records may miss children who have limited or no access to health care. If so, the actual prevalence of autism could be higher than their results indicate.

Since autism develops in very early childhood and persists throughout life, affected children often require special education and behavioral intervention to help them function in society.

“Autism spectrum disorders are a huge public health issue in this state, affecting between one-half to one percent of school-age children, and we have to be able to plan services accordingly,” Durkin says. “We want the best numbers we can get.”

One goal of surveillance is to complement research into the science underlying autism and other developmental disorders, including several studies currently pursued by other research groups in the Waisman Center and else-

where at UW-Madison.

“Population changes give clues to understanding what’s going on in autism,” Durkin says. “Our goals ultimately are to better serve children and families with autism and to develop strategies for prevention.”



Are You Planning A Move?

If you are moving and would like to continue receiving our newsletter, please provide us with your new mailing address. Contact Susan Vial by phone at (608) 263-5192, toll-free at 1-800-965-9205 or via email at vial@waisman.wisc.edu

In Other News...

The Waisman Center is home to 60 laboratories, with faculty representing 25 different departments of the University of Wisconsin-Madison. Here is a sampling of our recent notable events and projects.

- Research of Richard Davidson, Ph.D., shows how meditation changes the mind
- Robin Chapman, Ph.D., receives Career Scientist Award for her outstanding contribution to research in mental retardation and developmental disabilities.
- The Infant Learning Lab, run by Jenny Saffran, Ph.D., investigates processes that lead to language development.

To learn more about Waisman Center researchers and to get up-to-date information about current studies, please visit www.waisman.wisc.edu

Wisconsin Twin Project Expands: The Addition of an Early Adolescent Follow-Up

The Wisconsin Twin Project (WTP) is excited to announce a new phase of its study of twins born in Wisconsin. Made possible through a recent grant awarded from the National Institute of Health, this new phase will allow WTP to follow up with families when the twins reach 12 to 14 years of age. WTP plans to visit over 1,000 adolescent twins in their homes over the next five years.

Over the past eight years, WTP has assessed with more than 10,000 twins and their families, providing an opportunity to learn more about the genetic and environmental factors influencing social and emotional development. Research methods have included structured diagnostic interviews and questionnaires, home-based behavioral assessments, observer ratings, salivary cortisol measures, prenatal records, DNA analyses, and cognitive testing. One of the richest components of the research has been the opportunity to visit the homes of over 960 twins throughout Wisconsin and capture the unique perspectives from both twins and parents.

The goal of the early adolescent study is to learn more about the genetic aspects of social and emotional development and change during adolescence. To do this, WTP will study several different aspects of adolescent life. Similar to the middle childhood assessment, WTP is interested in each twin’s behavior, temperament, environment and cognitive abilities. A new focus in the adolescent study will be to ask twins to report more of their own life experiences, rather than relying as much on parent ratings. Twins will have an opportunity to tell WTP more about how they view themselves and their lives. For instance, twins are asked to rate life events and their perceived impact, how they spend their free time, and how they cope with challenges. Additionally, puberty is assessed with questionnaire ratings and hormones collected in saliva. During the home visit, twins will complete a series of cognitive tasks, engage in computer challenges, and report how they perceive a number of different social scenarios.

This comprehensive research design of behavioral and biological measures and the opportunity to link toddler development and adolescence may provide a new window to questions concerning individual differences and environmental and genetic sources of variation in child development. We are excited to see the adolescent study get started!