

GI problems common in children with autism

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Parents of children and adolescents with autism spectrum disorders (ASDs) sometimes report that their children suffer from gastrointestinal (GI) symptoms, such as diarrhea and constipation. However, studies on how prevalent these symptoms are have had conflicting results.

A new study conducted by [Autism Speaks'](#) Autism Treatment Network (ATN) shows that GI symptoms occur in nearly half of [children](#) with ASD, and the prevalence increases as children get older.

Results of the study, and three others conducted by the ATN, will be presented Sunday, May 2 at the Pediatric Academic Societies (PAS) annual meeting in Vancouver, British Columbia, Canada.

An estimated one in 110 U.S. children has autism, a group of complex developmental brain disorders that affect behavior, social skills and communication.

The ATN, which includes 14 treatment and research centers in the United States and Canada, enrolls patients ages 2-18 years with a diagnosis of autism, Asperger's syndrome or pervasive developmental disorder-not otherwise specified.

In this study, researchers sought to determine how frequently parents of children enrolled in the network reported GI symptoms and what factors might be associated with these symptoms. Families filled out a battery of questionnaires, including a GI symptom inventory tailored to the needs of nonverbal children, a behavior checklist, sleep questionnaire and quality of life survey.

Data from 1,185 children showed that 45 percent had GI symptoms at the time of enrollment, with [abdominal pain](#), constipation and diarrhea reported most commonly. Reports of symptoms were more common in older children (39 percent of children under 5 years of age vs. 51 percent of children 7 and older).

In addition, children with GI symptoms had a higher rate of [sleep problems](#) than those without GI issues (70 percent vs. 30 percent), more behavior problems and an overall lower health-related quality of life.

No relationship was found between GI symptoms and type of autism, gender, race or IQ.

"These findings suggest that better evaluation of GI symptoms and subsequent treatment may have benefits for these patients," said Daniel Coury, MD, medical director of the ATN and professor of pediatrics and psychiatry at The Ohio State University. "Primary care physicians and specialists should ask families about these symptoms and address these as part of the overall management plan for the child or adolescent with ASD."

Autism Speaks' Autism Treatment Network (ATN) is the first network of hospitals and physicians dedicated to developing a model of comprehensive medical care for children and adolescents with autism. The ATN offers families care from doctors highly experienced in helping individuals with autism and providing treatment for associated conditions such as gastrointestinal and sleep disorders, while disseminating best practices to the greater medical community.

Provided by American Academy of Pediatrics

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