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## Functioning Autism Spectrum Disorders, 2nd ed

edited by James C. McPartland, PhD; Ami Klin, PhD; and Fred R. Volkmar, MD. The Guilford Press, New York, NY, 2014, 482 pages, \$65.00 (trade cloth).

The publication of DSM-5 in 2013 eliminated Asperger syndrome as an official diagnosis and incorporated it into the new general category of autism spectrum disorder. As a result, the editors of this comprehensive review added the subtitle, "Assessing and Treating High-Functioning Autism Spectrum Disorders." This new term is used interchangeably with the term Asperger disorder throughout the text. Both terms describe the same syndrome of social communication impairment and restricted interest or behavior patterns associated with age-appropriate language acquisition and cognitive functioning. Whatever name we choose to describe this disorder, the book Asperger Syndrome is likely to be a standard reference for educators, occupational and speech therapists, school and testing psychologists, psychiatric nurses, and psychiatrists for many years to come.

Different chapters will be of greater interest to different disciplines. The sections on screening and diagnostic instruments, neuropsychological characteristics, and behavioral treatments should appeal most to psychologists. Almost all of the instruments and scales that have been developed to define Asperger syndrome are described in detail and rated using evidence-based criteria developed by the Society of Pediatric Psychology. The authors conclude that while there is a "gold standard" regarding the diagnosis of autism (Autism Diagnostic Observation Schedule and Autism Diagnostic Interview-Revised), no such consensus exists for Asperger syndrome. They make the point, echoed many times in other chapters, that "no clinical neuropsychological or behavioral indicator reliably discriminates between individuals with Asperger syndrome and those with 'higher functioning autism'" (p 67).

The chapters on communication, peer relationships, treatment guidelines, and social communication should appeal most to educators, school psychologists, occupational therapists, and speech therapists. These chapters describe numerous methods of enhancing and teaching social, communication, and organizational skills. They also address behavioral management strategies and the use of computers to work around problems with handwriting, fine motor skills, executive function, and self-management.

on psychopharmacologic treatment to be a well-written and thoughtful review of most medications that have been effective in treating the "symptom clusters" that impede function in people with Asperger syndrome. The "symptom clusters" described include inattention and hyperactivity, affective symptoms, repetitive patterns of behavior, obsessive-compulsive symptoms, thought disorder, and problems with sleep. Of more general interest are the chapters describing historical perspective, diagnostic criteria, neuropsychology, forensic issues, and genetics.

While continuing many of the same themes of the first edition, the second edition differs in that it is less focused on educating the general public and more focused on the research and professional community. It is no longer divided into sections, and gone entirely is the chapter on motor function and the section on related diagnostic constructs such as nonverbal learning disability and schizoid personality. Also gone is the chapter containing parent essays that brought to life the human story of the disorder and the challenges it presents to the families and individuals who struggle with it.

The historical foreword written by Hans Asperger's daughter Maria Asperger Felder, MD, a child and adolescent psychiatrist and psychotherapist herself, appears in both editions. It contains a memorable quote from Hans Asperger on the art of medicine:

A doctor needs more than mere book knowledge, he needs not to have lost the ability to "look," which is a very holistic function of recognition and in which intuitive, instinctive, preintellectual skills play an important role. They lead us to the innermost regions of the child to be assessed because whatever a child expresses comes out of the innermost parts of him or herself.

His words are worth remembering as we endeavor to sort out and make sense of the new DSM-5 autism spectrum disorder criteria.

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