

# The Co-Occurrence of Other Neurodevelopmental Disorders and ADHD

## TOURETTE SYNDROME AND ADHD



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*The Tourette Association of America partnered with CHADD's National Resource Center on ADHD and brought together three experts for this Ask the Expert webinar. Barbara J. Coffey, MD, MS, is chief of the Tics and Tourette's Clinical and Research Program, the Tourette Association of America Center of Excellence, and professor in the department of psychiatry at the Icahn School of Medicine at Mount Sinai. Pamela Malley, CCC-SLP, a speech-language pathologist with twenty-five years of professional experience, has served on the TAA education advisory board since 2011. Kathleen Giordano, BS, an education specialist at TAA, is chair of its education advisory board.*

### **CHADD: What is the overlap between ADHD and tic disorders or Tourette syndrome?**

**COFFEY:** The rates of tic disorders are higher in children with ADHD than in children without ADHD. Ten to thirty percent of children with ADHD have a co-occurring tic disorder as compared to children without ADHD, where only one to ten percent have a tic disorder. Rates of ADHD are high in children with Tourette syndrome. Perhaps fifty, even seventy-five percent of kids with TS also have ADHD.

### **CHADD: How can you tell if misbehavior is caused by Tourette syndrome or is common misconduct?**

**MALLEY:** The bottom line is that if a child has a symptom that is causing issues, we want to teach him or her a better way. Whether the child is meaning to do it on pur-

pose or not, we have to get to the root of why the action is happening and teach the child an alternate behavior. Whether the misbehavior is caused by Tourette syndrome, ADHD, or neither, we want to handle it correctly.

Tourette syndrome is a disorder of disinhibition and suggestibility. It's really important to keep in mind the suggestibility piece, because the more we suggest something, the more we say, "Stop! Stop! Don't do it," the more we're actually planting that seed for the impulsive child to actually do it. Sometimes, the more we call attention to negative behavior and punish it, the more we're actually reinforcing it. Instead we want to focus on finding and teaching a positive replacement behavior.

## THE RELATIONSHIP BETWEEN ADHD AND AUTISM SPECTRUM DISORDER



Ericka Wodka

*Ericka Wodka, PhD, ABPP-CN, is a pediatric neuropsychologist with the Center for Autism and Related Disorders at the Kennedy Krieger Institute in Baltimore, Maryland. Dr. Wodka's broad research interest includes examining cognitive and behavioral aspects of neurodevelopmental disorders, specifically related to brain behavior relationships involving attention and language. Her focus primarily includes children with autism and ADHD.*

### **CHADD: How are ADHD and autism related?**

**WODKA:** ADHD and autism spectrum disorders are related in that they are both neurodevelopmental conditions. We know that the brain controls our behavior and that there are differences in the way the brains of children with ASD and/or ADHD develop. Both reflect how the brain has developed through specific behaviors.

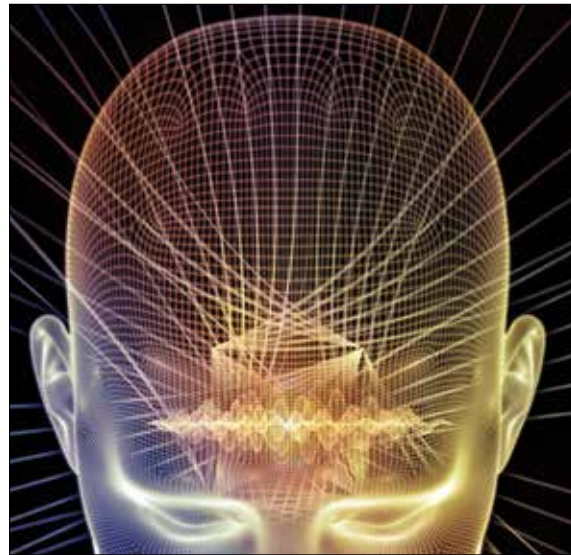
They are also related in some ways in how they are treated. Environmental and behavioral supports that may be appropriate for a child with ADHD might also be appropriate for a child with ASD and vice versa.

What types of behaviors would you expect to see in a child who has a dual diagnosis of both ADHD and ASD?

The behaviors would be the kind of behaviors you

would see in the two disorders respectively. If a child has autism, we would expect to see deficits in social communication, such as difficulties in making and maintaining friendships, and with reciprocal conversations. We'd also see repetitive and restrictive behaviors, such as things like hyperfocused interest, being very focused on a particular topic, or engaging in repetitive motor mannerisms, such as pacing or rocking. The child might also experience abnormal sensory functioning, such as being supersensitive to loud noises or textures.

These children also have the pattern of inattention and/or hyperactivity/impulsivity that is a separate difficulty. They cannot under any circumstances sit still, or they



are so impulsive that they cannot stop their behavior. They might have a difficult time sustaining and maintaining attention, more so than the withdrawn attention seen in a child with only ASD. Children

with both ADHD and ASD not only have trouble disengaging with their own thoughts, but they also have trouble inhibiting their actions and difficulty with being distracted by everything in the environment. 🗣️

**Robyn Maggio, MSW**, is the education and training coordinator at the National Resource Center on ADHD: A Program of CHADD. You can watch or listen to the entire recordings of these webinars in the Ask the Expert Archives at [www.help4adhd.org](http://www.help4adhd.org).

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