

Dealing with a patient with Autistic Spectrum Disorder

Accident and Emergency department staff



Particular difficulties are likely to be encountered if a patient with ASD is unfortunate enough to need to attend A&E due to the factors associated with their condition. Below are some important points to note which may assist you in minimising the difficulties and assisting you in helping them with the least disruption to the department.

Factors affecting their behaviour:

- A&E is a very stressful experience for anybody, but for the person with an ASD it can be totally overwhelming. Not only is it a strange place, and often apparently chaotic, but the sensory experience of bright lights, beeping monitors and other equipment, can completely overload their system causing a 'meltdown' or total withdrawal.
- A meltdown occurs when someone becomes over stimulated, for example by noise, or too much information, or due to anxiety leading to a state of not being able to cope with any further incoming information and possible behavioural outbursts or withdrawal. Given their hyper or hypo- sensitivity in many of their senses in particular, hearing, vision and touch, over stimulation is a real and likely outcome of their attendance.
- Whereas some might withdraw (e.g. put their fingers in their ears, close their eyes) others 'stim'. This means to make motions such as flapping hands, rocking or flicking fingers in order to stimulate sensation or to deal with stress. **This kind of behaviour may also be calming to the individual, or aid balance and posture, so do not try and stop it unless absolutely essential.**
- In addition to the anxiety felt by anyone needing to attend A&E, those with ASD will have added anxiety due to the disruption to their normal routine on which they rely in order to remain calm and functional.
- 'Autistic spectrum disorder' is a term used to describe a lifelong developmental disorder that is characterised by a 'Triad of impairments' in social interaction, communication, and social imagination. There is a 'spectrum' or range of disorders with these features, including autism and Asperger syndrome.
- Some people with an autistic spectrum disorder have severe learning disabilities, and some may never speak. People with Asperger syndrome, on the other hand, usually have an average or above average IQ and their excellent use of language may mask the more limited level of their communication and social understanding.
- People with an ASD can have a very high pain threshold. Even if they do not appear to be in pain, they may, for example, have broken a bone. They can be either under or over sensitive to pain so that some may feel the pain acutely and be very distressed whereas others may not appear to react at all. They may show an unusual response to pain that could include laughter, humming, singing and removal of clothing.
- People with an autistic spectrum disorder find it difficult to understand another person's perspective. They may not understand what you intend to do, but may expect you to know what they are thinking.

- People with an ASD may not understand personal space. They may invade your personal space or need more personal space than the average person.
- Don't be surprised if the patient doesn't make eye contact, especially if he or she is distressed. Lack of eye contact does not necessarily mean they are not listening to what you are saying.
- Don't assume that a non-verbal patient cannot understand what you are saying. People with ASD will take what you say literally so avoid words with a double meaning and humour that could be misunderstood.
- They may display unusual body language or speak inappropriately or about inappropriate topics.

Advice:

- Inform the triage nurse that the patient has an autistic spectrum disorder so that they can be given a higher priority than would be normal. This is to minimise the time the patient has to wait.
- Allow the patient and carers to use the relatives room if it is free.
- Ask the patient or carer what support they may need to enable you to treat them successfully.
- Try to limit the number of staff caring for the patient predictability helps them understand what is happening to them and to identify the roles of care providers. Allocate a key person to the patient if possible
- They may react violently through fear or in response to over stimulation, do not over react and call security. Remain calm and do not shout, if they have a carer with them allow them to take control to calm them down using tried and tested techniques specific to that individual. If they are alone maintain a distance and talk calmly until the episode subsides.
- Sometimes doctors and nursing staff ask relatives/carers to leave the room whilst giving emergency treatment. In treating patients with an ASD, it may be helpful to allow them to stay if possible. This can help reassure the patient, and will also allow the relatives/carers to give valuable information about the patient and their behaviour, if appropriate.
- Physical examinations may prove very stressful to the patient and it is essential to warn them before touching them.
- Explain what you are doing and why before actually doing it, using their name at the beginning of the explanation so they understand you are talking to them.
- Use clear simple language with short sentences and draw or show pictures if necessary to explain things.
- People with an ASD tend to take everything literally. Thus, if you say "It will only hurt for a minute" they will expect the pain to have gone within a minute.
- Make your language concrete and avoid using idioms, irony, metaphors and words with double meanings, e.g. "It's raining cats and dogs out there." This could cause the patient to look outside for cats and dogs.

- Give direct requests, e.g. "Please stand up." If you say, "Can you stand up?" this may result in the person staying seated or the answer "yes", as the person with an ASD may not understand you are asking them to do something.
- Check that they have understood what you have said by asking them - some people with an ASD may speak clearly but can lack full understanding.
- Avoid using body language, gestures or facial expressions without verbal instructions. These may not be understood.
- Ask for the information you need. A person with an ASD may not volunteer vital information without being asked directly.
- Allow time for them to understand what you have said as they have difficulty processing information.
- Enlist the parent/carers help wherever possible, especially if the patient is non-verbal or uses an alternative communication method or aid.
- If the patient needs an injection or blood test, try and divert their attention elsewhere.
- The use of pictures or a doll is a good idea to demonstrate what is going to happen before attempting any procedure.
- It is advisable to assume that the patient will feel the pain and use a local anaesthetic cream such as EMLA cream to numb the site of injection.
- **Remember, always consider the person's behaviour in terms of their ASD even if it becomes challenging, they are not willfully trying to make your job difficult unlike the drunken patients you encounter.**