

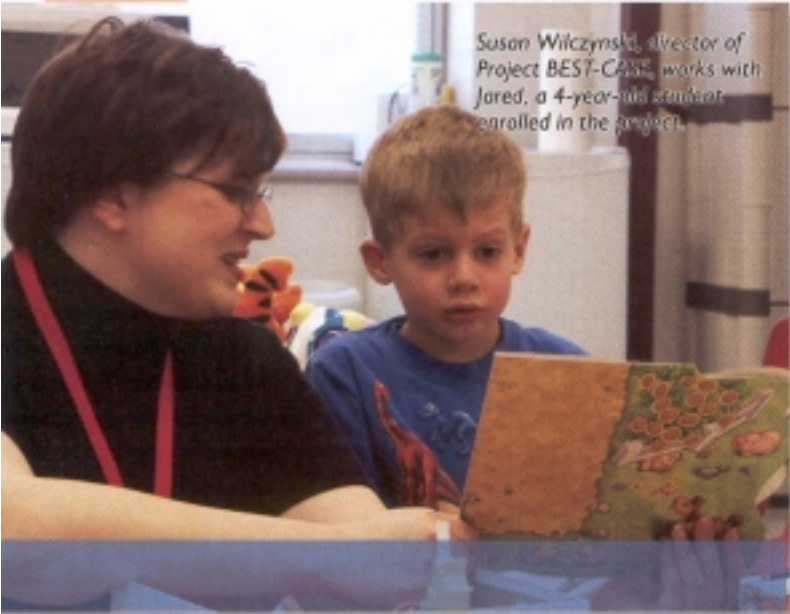
# BEST-CASE Autism Program

## New project expands treatment opportunities for children with autism

By Walter Brooks

Parents seeking an accurate diagnosis for a child with autism would do well to remember the proverbial tale of three blind men feeling a different part of an elephant and each thinking the elephant was a completely different animal.

A pediatrician might focus on a hearing disorder because the child may not even turn his or her head at a clanging or loud jarring noise. A speech therapist might diagnose a language problem because the 3-year-old child still won't talk except to obsessively repeat the words of other people. A psychologist or psychiatrist might decide the child is emotionally disturbed because of extended screaming fits and never doing what he or she is told.



Susan Wilczynski, director of Project BEST-CASE, works with Jared, a 4-year-old student enrolled in the project.

Moreover, while parents of autistic children walk through a gauntlet of frustration trying to find out what is wrong, precious time for effective treatment is slipping away. There is no known cure for autism, but the best treatment is intensive intervention as early in life as possible, and Susan Wilczynski, Ph.D., is working to see that children receive that intervention.

Dr. Wilczynski is the director of Project BEST-CASE, an autism program at the UNMC Munroe-Meyer Institute for Genetics and Rehabilitation. BEST-CASE is the acronym for Building Empirically Supported Treatments-Communication, Adaptive/Academic and Social Skills Education.

"The most important things we want the community to learn through Project BEST-CASE is that early diagnosis and early intervention can yield positive outcomes in

communication, IQ, social interaction, and development of appropriate play and adaptive skills," Dr. Wilczynski said.

Project BEST-CASE began with three children in February 2002, and all three successfully transitioned to regular school in six to nine months. Children in Project BEST-CASE attend classes five days a week for five hours per day.

The number of children with autism appears to be growing nationwide. Results from the largest-ever study on autism in the United States was published in January 2003 by the Journal of the American Medical Association. The study, conducted in metro Atlanta in 1996, indicated that autism is almost 10 times more prevalent today than it was in the 1980s. That means as many as 425,000 U.S. youths under age 18 have some form of autism.

Autism is not a single disorder; it is actually an array of disorders and is clinically known as Autistic Spectrum Disorders (ASD). ASD is a developmental disorder characterized by impairments in communication and social interactions, as well as restricted, repetitive, nonadaptive patterns of behavior.

The goal of Project BEST-CASE is not simply to increase MMI's immediate treatment capacity, but to expand the staff's ability to reach beyond Omaha and train special education teachers, speech pathologists, occupational therapists, school psychologists, physical therapists and parents. Several schools send their educators of children with ASD to MMI for training.

"Another key component in treating children with ASD is that their schools' educators, paraprofessionals, speech language pathologists, parents and others also receive regular training from us. The children must return to environments that are better prepared to meet their needs," Dr. Wilczynski said.

Project BEST-CASE currently has five primary staff members and three research staff. Dr. Wilczynski credits the staff for their expertise in dealing with the complex issues of ASD. While showing success in treating children with ASD, they know that there are many more children with ASD locally and in rural communities who can't be served at the present time.

Early intervention for children with ASD is cost-effective, as well. Before a child is transitioned back, the cost of his or her training could reach \$16,000. But children with no intervention may never make a transition and may eventually require institutionalization, which could amount to \$1.5 million in care costs in a lifetime.

"Society has a stake in expanding services for children with ASD. With early intervention and intensive training, many of these children can grow up to become active, productive citizens," Dr. Wilczynski said. "Although a program like Project BEST-CASE is expensive and difficult to perform, the outcomes we experience make it clearly worthwhile for the children, their families and ultimately, society at large."