Diagnostic Practices and Awareness of Autism Among Indian Pediatricians: A Decade of Data

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Merry Barua Action For Autism



INDIA: THE NUMBERS

- Current population estimate: 1,139,964,932
- One third the size of US with 3.5 times the population
- Accounts for 21% of world's population growth
- Epidemiological studies underway
- Typically cite Western prevalence rates

"We produce the second largest number of autistics in the world." – an Indian psychiatrist, 1998

DIAGNOSIS OF AUTISM IN INDIA

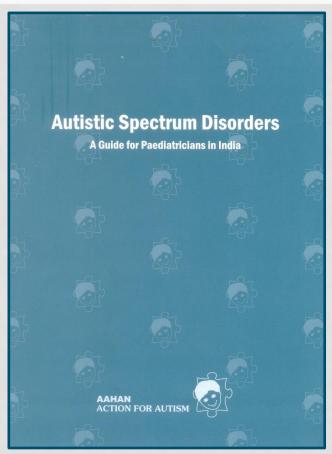
- Autism not "new" to India
 - Over 125 published articles to date (from 1959 onwards)
 - National organization started in 1991
- Not commonly diagnosed through early 1990s
- Diagnosed but idiosyncratic through mid-'90s (Daley, 2002)
 - Average of 2 years from first concern
 - Up to 6 additional (incorrect) diagnoses
 - Up to 10 doctors prior to dx (average about 4)

PROFESSIONAL AWARENESS CAMPAIGN

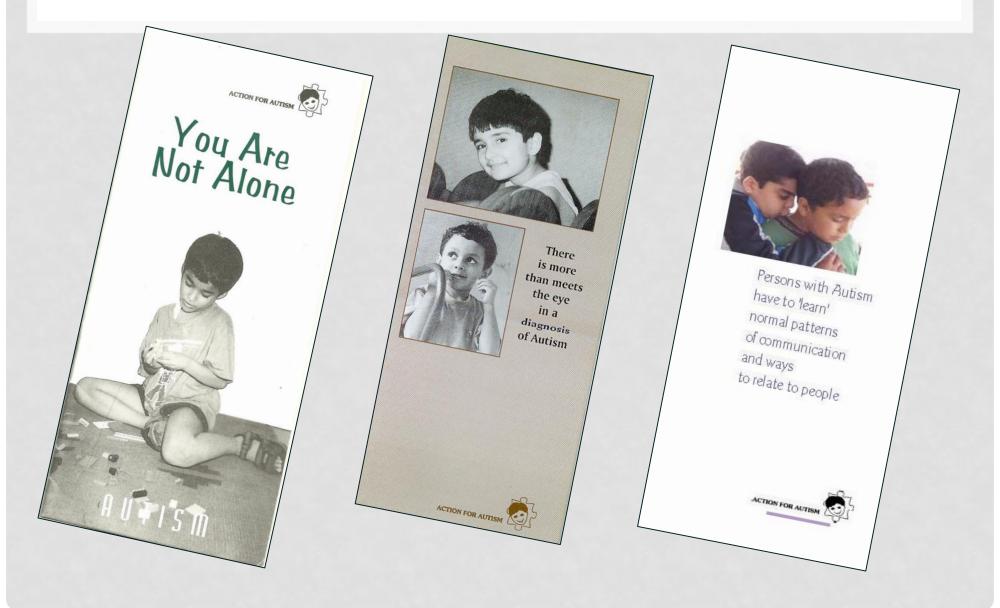
- Administered by Action for Autism
- Targeted pediatricians to improve diagnostic pathway
- Conducted in 1997-98 and 2007-08
- Provided free posters, brochures, FAQ book, and materials to distribute to parents
- Intended to document:
 - Beliefs about autism
 - Experience with diagnosis
 - Practices associated with diagnosis and referral

PROFESSIONAL AWARENESS CAMPAIGN





PROFESSIONAL AWARENESS CAMPAIGN



What is the current status of beliefs, experience, and practices related to diagnosis of autism among Indian pediatricians, and

How does this compare to pediatricians in India a decade ago?

METHOD AND SAMPLE

- Members of Indian Academy of Pediatrics invited to participate
 - Only association of pediatricians in India
 - In 1998: 10,000 members
 - In 2008: 15,000 members
 - Has State, District, and City level branches
- Sample size
 - 1998: N=643
 - 2008: N=584

SURVEY INSTRUMENT

- Respondents provided 3 page survey
 - Based on The Autism Survey (Stone, 1987)
 used by others (e.g., Stone & Rosenbaum, 1988; Campbell et al,
 1996; Heidgerken et al, 2005)
- Participants asked:
 - Location of practice (urban/rural)
 - Years of experience
 - 30 statements about autism (agree/disagree)
 - Number of cases seen and diagnosed
 - Recommendations upon diagnosis
 - 20 characteristics: considered necessary, helpful but not necessary and not helpful in making a diagnosis

SAMPLE CHARACTERISTICS

	1998	2008
Sex		
Male	74.8	74.4
Female	25.2	25.6
Area		
North	17.7	20.2
South	33.7	36.4
Central	13.8	12.9
East	12.3	7.7
West	22.4	22.8
Urbanicity		
Urban	80.9	78.8
Rural	19.1	21.2

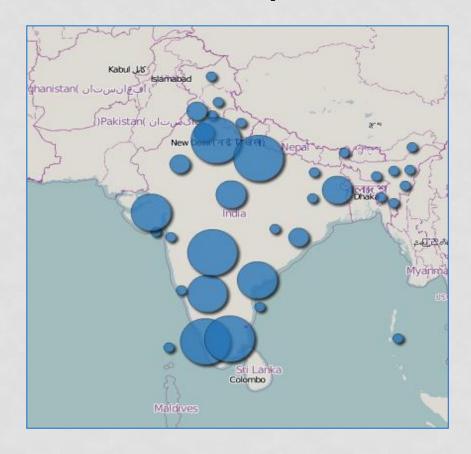
- No differences in background characteristics
- 2008 cohort had significantly more years of practice
 M=16.9 (SD=10.7) compared to M=14.5 (SD=9.7) p < .0001

GEOGRAPHIC DISTRIBUTION OF SAMPLES

1998 Sample

Maldives

2008 Sample



BELIEFS: GENERAL TRENDS

- An overly positive perspective of autism
 - With the proper treatment, most autistic children eventually "outgrow" autism:

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61.2% (significant ↑)
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Most autistic children have special talents or abilities:

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74.3% (significant ↑)
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Autism exists only in childhood:

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37.8% (significant ↓)
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BELIEFS: GENERAL TRENDS

- Outdated beliefs
 - It is difficult to distinguish between Autism and childhood schizophrenia:

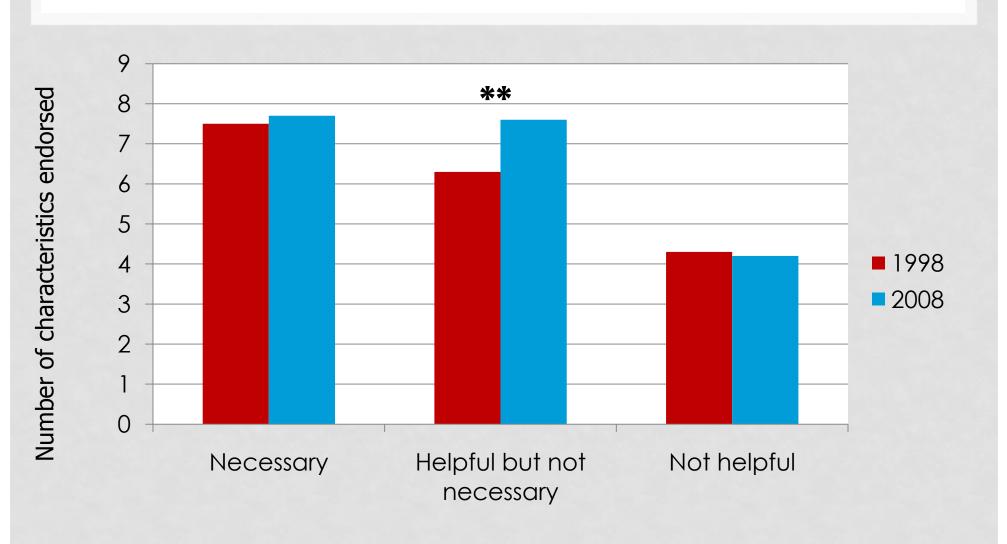
46.4% (significant ↓)

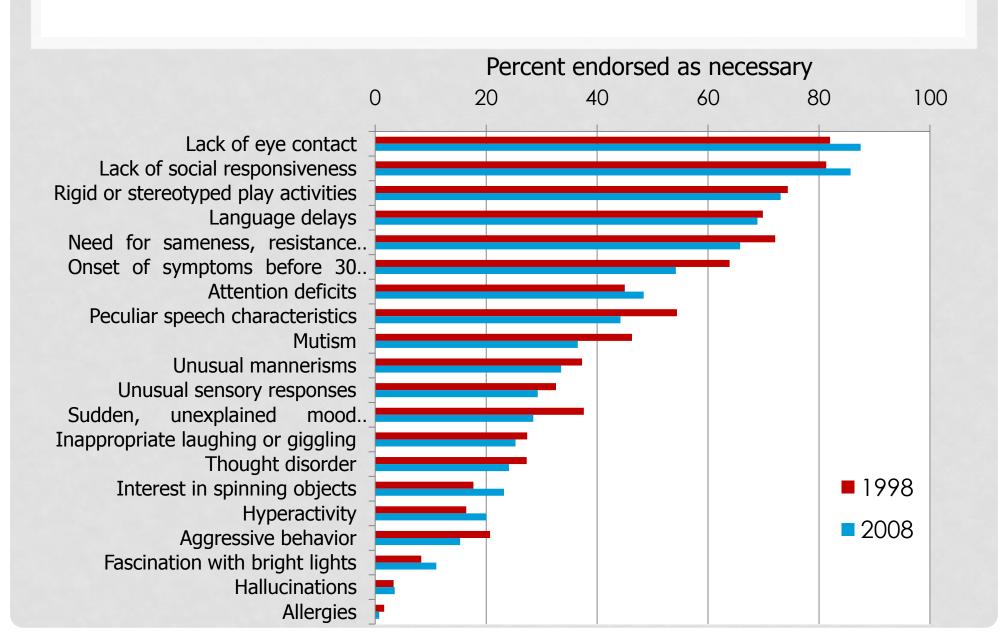
 Emotional factors play a major role in the etiology of Autism:

52.2%

 Autistic children's withdrawal is mostly due to cold, rejecting parents.

28.6%





Core features of autism identified as necessary (50% or more of 2008 sample)

- Lack of eye contact
- Lack of social responsiveness
- Rigid or stereotyped play activities
- Language delays
- Need for sameness, resistance to change in routine
- Onset of symptoms before 30 months

Continued reliance on additional characteristics that broaden the scope of autism

 Attention deficits 	48.4%
 Peculiar speech characteristics 	44.2%
• Mutism	36.5%
 Unusual mannerisms 	33.5%
 Unusual sensory responses 	28.3%
 Sudden, unexplained mood changes 	28.5%

EXPERIENCE WITH AUTISM

• In 2008, 10% of pediatricians had never seen a case of autism vs. 30% in 1998 (p < .0001)

	1998	2008
Mean number of cases seen	15.3 (SD=35.8)	30.9*** (SD=64.4)
Mean number of cases diagnosed	9.4 (SD=19.8)	17.4*** (SD=41.2)
Mean number of cases diagnosed, past 5 years	5.0 (SD=10.2)	11.0*** (SD=23.8)

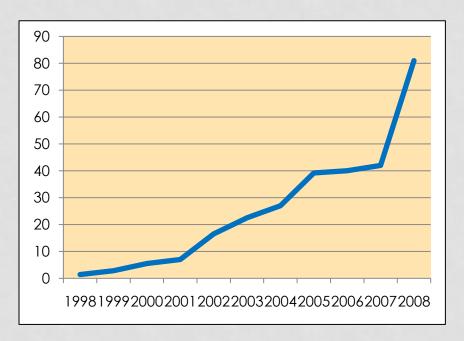
^{***}p < .0001

WHAT IS GOING ON?

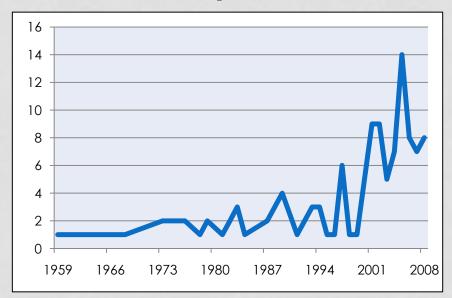
- AFA Awareness campaign
 - Families → center
- Popular media
 - Koi Mil Gaya ("Finding someone"), 2003
 - Main Aisa Hi Hoon ("I am like this only"), 2005
 - Newspapers
- Increased services & organizations
 - 1998: 2 schools, 3 orgs vs. 2008: 50+ orgs and schools
- Research articles
- Internet usage



Internet usage (in millions)



Research publications



FUTURE DIRECTIONS

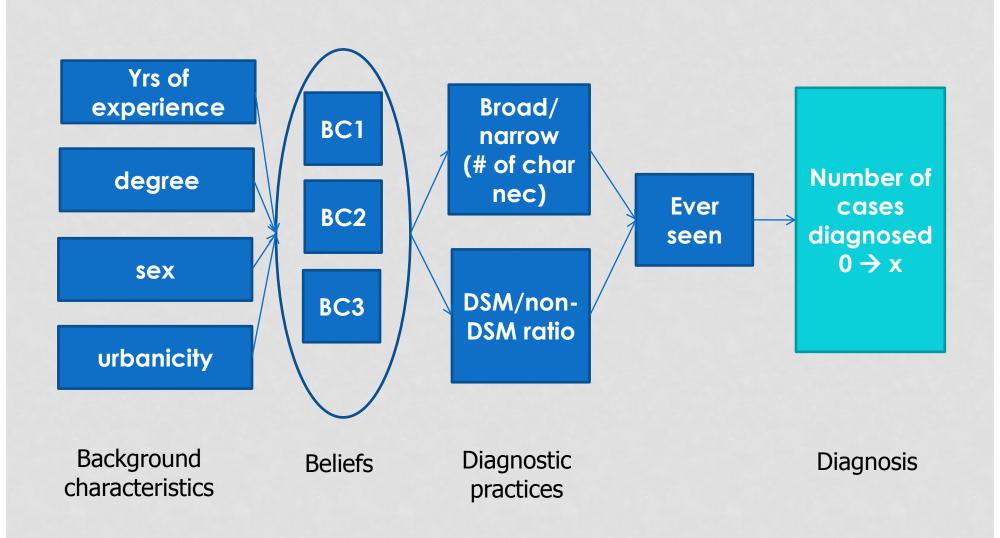
Awareness:

- Expand campaign to other professions
- Incorporate training on developmental disabilities in medical school curriculum

Analysis:

- What is the relationship between beliefs about autism, criteria used in diagnosis, and practitioner experience in diagnosis?
 - Factor analysis of beliefs
 - Path model

RELATIONSHIP BETWEEN BELIEFS, PRACTICES AND DIAGNOSES



SUMMARY

- Numerous changes in beliefs about autism between pediatricians in 1998 and 2008
 - Current perspective both overly positive and perhaps overly negative
- Indian Pediatricians consider similar core features of autism necessary
 - But also rely on characteristics that broaden the scope of what they identify as autism
- A significant increase in the number of cases of autism pediatricians are seeing and diagnosing
 - Dramatic changes in public awareness through multiple strands

WHY SHOULD WE CARE?

This is not about India

- Public awareness impacts families AND professional beliefs everywhere
- Beliefs affect practices everywhere
- Pediatricians are a key group everywhere
- Epi work needs groundwork
- India is a model of other low resource countries

This is about India

- Anything that happens is on a different scale
- Development of diagnostic tools, recommendations, interventions must consider the majority world

THANK YOU!

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