**What is Autism? Fact Sheet**

**There are three different types of ASDs:**

* **Autistic Disorder** (also called "classic" autism)
This is what most people think of when hearing the word "autism." People with autistic disorder usually have significant language delays, social and communication challenges, and unusual behaviors and interests. Many people with autistic disorder also have intellectual disability.
* **Asperger Syndrome**
People with Asperger syndrome usually have some milder symptoms of autistic disorder. They might have social challenges and unusual behaviors and interests. However, they typically do not have problems with language or intellectual disability.
* **Pervasive Developmental Disorder – Not Otherwise Specified** (PDD-NOS; also called "atypical autism")
People who meet some of the criteria for autistic disorder or Asperger syndrome, but not all, may be diagnosed with PDD-NOS. People with PDD-NOS usually have fewer and milder symptoms than those with autistic disorder. The symptoms might cause only social and communication challenges.

### Signs and Symptoms

ASDs begin before the age of 3 and last throughout a person's life, although symptoms may improve over time. Some children with an ASD show hints of future problems within the first few months of life. In others, symptoms might not show up until 24 months or later. Some children with an ASD seem to develop normally until around 18 to 24 months of age and then they stop gaining new skills, or they lose the skills they once had.

A person with an ASD might:

* Not respond to their name by 12 months
* Not point at objects to show interest (point at an airplane flying over) by 14 months
* Not play "pretend" games (pretend to "feed" a doll) by 18 months
* Avoid eye contact and want to be alone
* Have trouble understanding other people's feelings or talking about their own feelings
* Have delayed speech and language skills
* Repeat words or phrases over and over (echolalia)
* Give unrelated answers to questions
* Get upset by minor changes
* Have obsessive interests
* Flap their hands, rock their body, or spin in circles
* Have unusual reactions to the way things sound, smell, taste, look, or feel

Diagnosing ASDs can be difficult since there is no medical test, like a blood test, to diagnose the disorders. Doctors look at the child’s behavior and development to make a diagnosis.ASDs can sometimes be detected at 18 months or younger. By age 2, a diagnosis by an experienced professional can be considered very reliable.[1](http://www.cdc.gov/ncbddd/autism/facts.html#1) However, many children do not receive a final diagnosis until much older. This delay means that children with an ASD might not get the help they need.

### Treatment

There is currently no cure for ASDs. However, research shows that early intervention treatment services can greatly improve a child’s development.[2](http://www.cdc.gov/ncbddd/autism/facts.html#2)[3](http://www.cdc.gov/ncbddd/autism/facts.html#3) Early intervention services help children from birth to 3 years old (36 months) learn important skills. Services can include therapy to help the child talk, walk, and interact with others. Therefore, it is important to talk to your child’s doctor as soon as possible if you think your child has an ASD or other developmental problem.

### Causes and Risk Factors

We do not know all of the causes of ASDs. However, we have learned that there are likely many causes for multiple types of ASDs. There may be many different factors that make a child more likely to have an ASD, including environmental, biologic and genetic factors.

* Most scientists agree that [genes](http://www.cdc.gov/ncbddd/autism/facts.html) are one of the risk factors that can make a person more likely to develop an ASD.
* Children who have a sibling or parent with an ASD are at a higher risk of also having an ASD.
* ASDs tend to occur more often in people who have certain genetic or chromosomal conditions. About 10% of children with ASDs also have been identified as having Down syndrome, fragile X syndrome, [tuberous sclerosis](http://www.cdc.gov/ncbddd/autism/facts.html), or other genetic and chromosomal disorders.
* When taken during pregnancy, the prescription drugs valproic acid and [thalidomide](http://www.cdc.gov/ncbddd/autism/facts.html) have been linked with a higher risk of ASDs.
* We know that the once common belief that poor parenting practices cause ASDs is not true.
* There is some evidence that the critical period for developing ASDs occurs before birth. However, concerns about vaccines and infections have led researchers to consider risk factors before and after birth.
* A small percentage of children who are born prematurely or with low birthweight are at greater risk for having ASDs.

ASDs continue to be an important public health concern. Like the many families living with ASDs, CDC wants to find out what causes the disorder. Understanding the risk factors that make a person more likely to develop an ASD will help us learn more about the causes. We are currently working on one of the largest U.S. studies to date, called [Study to Explore Early Development (SEED)](http://www.cdc.gov/ncbddd/autism/seed.html). SEED is looking at many possible risk factors for ASDs, including genetic, environmental, pregnancy, and behavioral factors.

ASDs occur in all racial, ethnic, and socioeconomic groups, but are almost five times more common among boys than among girls. CDC estimates that about 1 in 88 children has been identified with an autism spectrum disorder (ASD).

More people than ever before are being diagnosed with an ASD. It is unclear exactly how much of this increase is due to a broader definition of ASDs and better efforts in diagnosis. However, a true increase in the number of people with an ASD cannot be ruled out. We believe the increase in ASD diagnosis is likely due to a combination of these factors.