



COMPREHENSIVE DIAGNOSIS  
AND EVALUATION  
OF CHILD & ADULT ATTENTION,  
LEARNING, AND MEMORY DISORDERS  
(ON-SITE EVALUATIONS AVAILABLE)

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# Learning Disability & ADHD Update

## Aspergers Disorder, ADHD-Inattentive Type and DSM-5



In anticipation of the new version of the Diagnostic Statistical Manual-Fifth Edition (DSM-5) in the next several years, a variety of psychiatric diagnoses are being eliminated, subsumed and/or reclassified to meet the scientific research and clinical criteria that have emerged over the last seventeen years, when the DSM IV was first published. Among the modifications that have affected Child

Psychiatry most significantly concerns the proposed changes regarding the reclassification of Aspergers Disorder, and the proposed changes effecting ADHD-Inattentive Type.

Aspergers Disorder has been one of the most common and frequently diagnosed disorders in the last twenty years. However, research has consistently suggested and supported that instead of being a discrete disturbance characterized by unique clinical and biochemical and genetic markers, Aspergers Disorder is in fact more closely associated with the criteria that clinicians and other researchers have used to describe high functioning Autism. In fact, repeated

*(ASPERGERS DISORDER... cont'd. on pg. 2)*

## Characteristics of Memory in Normal Aging and Alzheimer's Disease

One of the most pressing and important questions in the next generation is to gain more precision regarding characteristics of normal aging in an effort to determine when and whether memory difficulties may be due to the effects of getting older, or whether a neurocognitive degenerative disorder such as Alzheimer's disease may be occurring. As treatments for Alzheimer's and other dementias become more effective (which unfortunately have limited therapeutic efficacy at the current

time) it is clear that becoming more knowledgeable about the characteristics of normal aging is of utmost importance.

Although the final chapter is far from being written, normal memory loss is most often characterized by word retrieval difficulties (and particularly remembering names), difficulty with episodic memory and source memories (or when and where a particular event may have taken place), as well as a

*(CHARACTERISTICS OF..... cont'd. on pg. 2)*

In addition to his outpatient testing, Dr. Howard is pleased to announce that he has been appointed as a Neuropsychological Consultant for the Germaine Lawrence Treatment Center in Arlington, MA. This is an inpatient treatment facility for emotionally and behaviorally disturbed adolescent girls, and since the summer of 2010 he has been performing neurocognitive and projective testing with this population. Dr. Howard continues to provide supervision, in-service presentations, and consultation to schools, healthcare facilities and clinics in both Massachusetts and New Hampshire. He appreciates the opportunity to perform neuropsychological evaluations for the educational and medical community in the Greater Boston area.

*(ASPERGERS DISORDER... cont'd. from pg. 1)*



studies have confirmed that there is no reliable way to clearly differentiate these disorders, and in reality, they are likely identical in

terms of their symptomatic presentation, genesis, treatment and life history. Therefore, a tentative decision has been made in the new DSM-5 for Aspergers Disorder to be part of what will be termed Autistic Spectrum Disorder. As opposed to early speech disturbances and limited intellectual potential being the two distinguishing features of high functioning Autism, it is now understood that the severity of the disorder is the defining issue in making an accurate diagnosis with children and adolescents who present with features of Aspergers or Autistic like symptoms.

In an analogous manner, there has been much discussion about redefining and reclassifying ADHD-Inattentive Type as a discrete disorder without any mention of hyperactivity in the name of the disturbance. Different groups of clinicians and researchers have emerged advocating for a change of a less significant nature, but it appears somewhat likely that the new DSM-5 will list ADHD-Inattentive Type as Attentive Deficit Disorder, without any descriptors.

As mentioned previously with respect to the debate regarding High Functioning Autism and Aspergers Disorder, it appears more likely that there are more fundamental differences between ADHD-Impulsive Hyperactive Type and ADHD-Inattentive Type. However, both disorders are primarily treated by the same medications (Dopamine and NE agonists), both disorders start early in childhood, and both disorders have diminishing effects

on functional abilities at home, school, work, and in social situations. It appears however that the inclusion of hyperactivity in the very name of the disorder leads to problems listing ADHD-Inattentive Type as a disruptive disorder that shares some links with Oppositional Defiant Disorder as well as Conduct Disorder. Reducing confusion and enhancing symptomatic identification are the main criteria that exist for this proposed reclassification, but the boundaries of these two forms of ADHD remain unclear. As with all diagnoses, the progression of time and the emergence of new ideas and techniques converge at critical points in each generation lead to a new formulation and understanding of these disorders.

Evaluations for those seeking extra time on the SAT, GRE, LSAT, etc. are also done on a regular basis.

*(CHARACTERISTICS OF... cont'd. from pg. 1)*



phenomenon know as TOT or tip of the tongue, a maddening experience in which there is an explicit knowledge of the correct word,

but a frustrating inability to recall it on demand. Slowed speed of processing and difficulty in terms of remembering incidental information are also prominent signs of memory problems associated with the aging process. Difficulty with inhibition, self initiated processing (such as remembering to take medication at a particular future time as in prospective memory tasks) and impaired conscious recollection, are also often diminished as an individual ages.

Reduced cognitive control, or the diminution of attentional resources is thought to contribute to the decline of memory in normal aging, as there is an age related reduction in dopamine receptors as well as a reduction in blood flow and volumetric changes, particularly in the frontal lobes. This then has a cascading effect in terms of constricting the amount and

quality of information that is accessible in working memory (or as Shallice and Baddeley term the "central executive" of the supervisory attentional system).

On the other hand, the changes that occur as a result of the disease process in Alzheimer's, such as the formation of neuritic plaques and neurofibrillary tangles, cause much more profound memory problems, as well as major difficulties with respect to receptive and expressive language skills, abstraction, and visual motor and non-verbal reasoning tasks. Geographical dislocation such as getting lost in familiar surrounding, difficulty remembering basic information, such as the names of loved ones and close friends and family members, as well as profound word retrieval problems are common in even the earliest stages of Alzheimer' Disease, whereas they are much more uncommon with the decline of memory issues with normal aging.

The most recent research regarding the cognitive difficulties associated with Alzheimer's Disease show that the gross accumulation of amyloid bodies appear to be most responsible

for this cognitive deterioration, along with neuronal and synaptic loss. Although there is increasing evidence to suggest that amyloid production also increases in normal aging, there seem to be some mitigating factors as well as variability in determining who is most vulnerable to actually exhibiting the clinical symptoms of AD. With the critical mass of effort and funding being directed toward research on both a preventative and treatment level, there is every reason to expect that a landmark initiative is truly imminent.

Dr. Howard is also available to assess other neuropsychological disorders, such as Alzheimer's Disease, Head Trauma, M.S., and Stroke. He also does testing to evaluate emotional and behavioral disorders, and career and vocational issues.