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Psychopathological differences between Asperger syndrome/normal IQ, no language impairment autism spectrum disorder and schizotypal disorder in an adult sample

Introduction

Social difficulties, odd but not psychotic behaviour and a sense of “not being as everyone else” can be prominent in both schizotypal disorder (SD) and Asperger syndrome (AS). Experience in diagnosing AS in Adult Psychiatry is scarce, and studies suggest that adults with AS symptoms are either overlooked, or diagnosed within the schizophrenia spectrum.

Alterations in self-experience are typical for the schizophrenia spectrum, and are therefore not thought to be equally present in AS as in SD. If this assumption is true, an examination of altered self-experience will be valuable to aid clinical differentiation between the two disorders.

The *aim* is to improve differential diagnostic precision, by elaborating our psychopathological understanding of AS and SD. The *objective* is to investigate differences in psychopathology between the two and the *hypotheses* are that the total level of altered experiences is higher in SD, with a different pattern of altered experiences in AS.

Methods

The study will include 50 subjects with AS (F84.5), and 50 with SD (F21), aged 18-30. Exclusion criteria are non-verbal IQ < 80, psychotic symptoms (>1 day), severe physical illness, organic brain disorder and/or active heavy alcohol or substance abuse. Included subjects will be interviewed with SCAN, ADOS module 4 and EASE.

Results

Data are analysed quantitatively, with group wise comparisons between SCAN/ADOS algorithms and EASE outcomes, as well as secondary correlations and cross-diagnostic factor analysis.

Discussion

An examination of anomalous self-experiences will, if the hypotheses are true, significantly aid clinical differentiation between the two disorders. Diagnostic precision is the crucial first step to an optimal treatment for the individual patient, and is imperative to guide neuropsychiatric research.