

# Social Skills

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## Control a factor

Autistic children are more social when they are allowed to select their own activities than when they are participating in adult-directed activities, according to a study by Robert Koegel et al.

The researchers measured the "social avoidance" of ten autistic children, and found that when the children were allowed to choose their own toys and conversation topics, they were far less likely to avoid social contact than when activities were selected by others.

Koegel et al. say their findings "suggest that the children engaged in social avoidance behavior to terminate interactions that were non-reinforcing, possibly due to the lack of direction that they were allowed."

"The influence of child-preferred activities on autistic children's social behavior," Robert L. Koegel, Kathleen Dyer, and Lynn K. Bell; *Journal of Applied Behavior Analysis*, Vol. 20, No. 3, Fall 1987, pp. 243-252. Address: Robert L. Koegel, Speech and Hearing Sciences Department, University of California, Santa Barbara, CA 93106.

## Prompts effective

Samuel Odom and Phillip Strain recently studied three autistic students' progress in initiating and continuing social exchanges during two different training procedures.

One procedure involved having trained, non-disabled children initiate conversations with autistic children. The other approach involved having teachers prompt autistic children to initiate social exchanges with non-disabled children who were trained to respond in a reinforcing manner.

The researchers report that while both methods resulted in better social responding by the autistic students, the teacher-prompt method also resulted in a greater number of initiations. In addition, teacher-prompted conversations were longer than those initiated by the children's peers.

"A comparison of peer-initiation and teacher-antecedent interventions for promoting reciprocal social interaction of autistic preschoolers," Samuel L. Odom and Phillip S. Strain; *Journal of Applied Behavior Analysis*, Vol. 19, No. 1, 1986, pp. 59-71. Address: Samuel L. Odom, Indiana University, Developmental Training Center, 2853 East Tenth Street, Bloomington, Indiana 47405.

# Autism and manic-depressive illness

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Linter notes that this case differs from other reported cases involving both manic depression and developmental disability, as there was no history of manic-depressive disorder in the subject's family.

The Institute for Child Behavior Research has recently been in contact with a mother whose 19-year-old autistic son also had extreme short-term mood changes, including terrible outbursts of violence. The child's physician tried lithium, with excellent results. Since the father also varied between moodiness and rage, he too was given lithium, with similarly good results. The Institute has also corresponded with a young woman diagnosed as both autistic and manic-depressive, whose symptoms of bipolar illness respond well to lithium

### DST test indicates link

Evidence for a link between depressive illness and autism includes a study showing that, like people suffering from depression, autistic children react abnormally to the dexamethasone suppression test (DST). An abnormal reaction to this test indicates improper function of the endocrine and nervous systems.

In the DST, a drug called dexamethasone is given and then the blood level of the hormone cortisol is measured. In normal people, the test causes a suppression of the amount of cortisol in the blood. This is because cortisol and dexamethasone are very similar, and the normal person's "feedback" mechanisms tell the body to stop producing cortisol when either high levels of cor-

tisol or the "mimic" dexamethasone are circulating in the body.

In people suffering from depression, cortisol levels are not reduced by dexamethasone. A study by Jonathan Jensen et al. showed similar test results in a group of autistic children, indicating that the disorders may be related.

"Short-cycle manic-depressive psychosis in a mentally handicapped child without family history: a case report," C. M. Linter, *British Journal of Psychiatry*, No. 151, 1987, pp. 554-555. Address: C. M. Linter, Consultant Psychiatrist, Tatchbury Mount Hospital, Calmore, Southampton, Hants SO4 2RZ, England.

— and —

"Lithium carbonate in the treatment of two patients with infantile autism and atypical bipolar symptomatology," Jacob Kerbeshian, Larry Burd, and Wayne Fisher; *Journal of Clinical Psychopharmacology*, Vol. 7, No. 6, 1987, pp. 401-405. Address: Larry Burd, 1300 S. Columbia Road, Grand Forks, ND 58202.

— and —

"The dexamethasone suppression test in infantile autism," Jonathan Jensen, George Realmuto, and Barry Garfinkel; *Journal of the American Academy of Child Psychiatry*, Vol. 24, No. 3, 1985, pp. 263-265. Address: Jonathan Jensen, Department of Psychiatry, University of Minnesota Medical School, Box 95, Mayo Building, 420 Delaware Street, S.E., Minneapolis, MN 55455.

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