PERVASIVE DEVELOPMENTAL DISORDER

DEFINITION:

Pervasive Development Disorder (PDD) is a nonprogressive disorder resulting from a central nervous system injury or abnormality that occurred during fetal brain development. This term is used to describe children and youth who have an impairment in the quality of their social interactions and communications, but do not meet the full descriptive or diagnostic criteria for other Pervasive Developmental Disorders including Autistic Disorder, Rett’s Disorder, Childhood Disintegrative Disorder, and Asperger’s Disorder.

CAUSES:

A number of factors have been associated with PDD including maternal infection, metabolic disturbance, injury to the nervous system, exposure to environmental toxins, and genetic abnormalities, however, no single etiology has been identified at this time.

POSSIBLE SIGNS, SYMPTOMS, AND CHARACTERISTICS:

- Lack of responsiveness to sounds
- Lack of social smile and limited social interaction
- Difficult to engage in social games
- Does not anticipate social interactions
- Unusual patterns of behavior, interests, and activity
- Lack of or impaired speech
- Rambles when speaking
- Gaze behavior, gaze aversion, or empty starring
- Attachment to select objects
- Restricted food preferences
- Clumsy
- Impulsive
- Hyperactive
- Aggressive, violent or out of control behaviors
- Unexplainable distress
- Sleep problems
- Inability to empathize
COMMONLY USED MEDICATIONS AND THEIR SIDE EFFECTS:

- **Ritalin**
  - used to control impulsiveness and help the child pay attention
  - may cause appetite suppression and insomnia

- **Prozac**
  - used to reduce compulsions associated with anxiety or anger
  - may heighten the effects of haloperidol, carbamazepine, or lithium

- **Haldol, Mellaril, Clozaril, and Risperdal**
  - used to reduce fidgetiness
  - may cause dyskinesia (a condition of slow, rhythmical, automatic stereotyped movements, either general or in single muscle groups)

HELPFUL HINTS AND SUGGESTED ACTIVITIES:

- Create a highly structured environment.
- Use proper safety equipment at all times.
- Teach safety often and be very specific.
- Be sure you get the child’s full attention.
- Describe, discuss, and/or role play difficult situations.
- Only one child with PPD should be placed in each group of students.
- All parents and professionals should have the same rules, expectations, and behavior management systems including positive reinforcement of desired behaviors.
- Use transitions that depict activities between each activity.
- Use vigorous exercise to reduce self-stimulatory and off task behaviors.

*Information on this sheet contains only suggested guidelines. Each student must be considered individually, and in many cases, a physician’s written consent should be obtained.*