

Kanner's Syndrome in Children and its Diagnosis: An Autism Spectrum Disorder

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DESCRIPTION

Pervasive developmental disorders, which include Asperger's and Rett's syndromes as well as autism, are a category of neuropsychiatric disorders. Kanner syndrome in infants and children may develop normally until they regress into withdrawal or exhibit a lack of communication and social skills from an early age. Treatment, which typically incorporates strategies to enhance the child's communication and social skills by utilizing the child's particular interests and the application of positive reinforcement, varies from patient to patient. A genetic defect known as Kanner syndrome is inherited to some children. The syndrome could be caused by many factors, like problems with the immune system or metabolism or environmental conditions. Mineral and vitamin deficiencies as well as food allergies, according to science, may also cause symptoms. Other neurological conditions can also cause autistic symptoms.

Kanner syndrome can sometimes manifest itself early in childhood. Infants may not speak, avoid eye contact, or respond to audio or verbal stimulation, leading parents to wonder if their child is deaf. Babies with the syndrome frequently exhibit expressionless and do not respond to others facial expressions. The condition can be diagnosed by professionals in infants as young as 18 months.

Kanner syndrome frequently presents with repetitive behaviours. Children engage in repetitive hand motions, they might also hurt themselves on the head or slap themselves. These youngsters appear uninterested in interacting with other people or things in their environment and frequently keep to themselves. Some people develop hypersensitivities to sound, for example: they hear the phone ring or thunder rumbling, they may cry or become afraid. Other smell, taste, and touch-related sensory sensitivity disorders can also occur in affected children. They might find certain flavours or odours particularly offensive or refuse to wear a particular piece of clothing

because of the way it feels. Learning disabilities and varying degrees of mental retardation may be seen in older Kanner syndrome children. By the age of 3 years, most children with Kanner syndrome are diagnosed.

Characteristics of kanner syndrome

Delays in the development of speech and language: The speech patterns of the majority of children with Kanner syndrome are unusual, and they do not begin to speak until after the age of 4 years old. They might make up words or imitate other people's speech.

Repetitive motions and interests: Head banging, hand flapping, and turn around are common repetitive movements in children with Kanner syndrome. They might also develop a fixation on particular activities, like turning things around or putting toys in a certain order.

Social and emotional problems: Children with Kanner syndrome frequently struggle to connect with others. They may be introverted or reserved, and they may have trouble interpreting nonverbal cues like body language and facial expressions. As a result, they might come across as uncaring about other people's feelings.

The following factors can be used to diagnose Kanner syndrome:

- A comprehensive clinical evaluation and developmental history
- Detailed observation of the child's behaviour
- Reviewing the child's medical records
- Laboratory tests, including genetic testing
- Imaging studies, like an MRI or CT scan, to rule out other possible causes of the child's symptoms
- After completing the evaluation, the doctor will collaborate with the family to create a treatment plan.

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