



Free informational handouts for educators, parents, and students

Asperger Syndrome: Differential Diagnosis

by Megan-Lynette Richmond, M.S., CCC-SLP and Susie S. Loraine, M.A., CCC-SLP

PLEASE NOTE: The information in this Handy Handout was derived from the DSM-4-TR, which was released in 2000. The autism diagnostic criteria has changed significantly per the DSM-5, released in 2013. Please see Handy Handout #420 for more information regarding these important changes, including the official elimination of Asperger Syndrome and PDD-NOS as formal diagnoses.

Asperger syndrome (AS) is a disorder in development characterized by social interaction difficulties and repetitive patterns of behavior and activities. Although AS is on the autism spectrum, it is different from other autism spectrum disorders (ASD)—autism, Rett syndrome, childhood disintegrative disorder, and pervasive development disorder-not otherwise specified (PDDNOS; “DSM-IV-TR”, 2000, p. 74). As well, AS is often mistaken for other language and learning disabilities that do not fall under the autism spectrum.

AS shares many traits with other childhood disorders which makes it challenging to identify. This is why professionals use *differential diagnosis*—comparing signs and symptoms of different disorders to distinguish between them. The following chart pinpoints the differences that you may notice between AS and other (childhood) disorders.

Asperger Syndrome	Autism
No significant language delay	Significant language delay—difficulty understanding and using language
No significant delay in cognition—no mental retardation	May or may not have cognitive delays— problems with thinking or mental retardation
Asperger Syndrome	Speech/Language Disorders
Difficulty with social language and interaction	Problems with understanding and using the structures of language, such as grammar, and/or sound production issues
More frequently occurs in males	Not gender specific
IQ may be normal to above average	Students may present with a wide range of IQ scores from low average to above average
Difficulty with motor (movement) planning; issues sequencing motor movements both gross—large muscles groups (running) and fine—small muscles groups (writing)	No major motor movement issues
Unimaginative speech—speaking extensively on a favorite topic, such as a TV show	Difficulty putting parts of sentences together for extensive discussion or writing

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(cont.)

Asperger Syndrome	Attention Deficit Hyperactivity Disorder (ADHD)
Attention problems may be because of social communication difficulty	Attention problems due to lack of impulse control
Difficulty reading and interpreting body language and facial expressions	Normal ability to read and interpret body language and facial expressions
Asperger Syndrome	Obsessive-Compulsive Disorder (OCD)
Repetitive and limited interests	Variety of interests and flexibility/shifts in focus
Significant social-interaction difficulties	May have social-interaction difficulties
Often identified by the age of three	Often identified at five years or older
Asperger Syndrome	PDD-NOS
Language develops normally	Delayed onset of language skills
Interest but difficulty with social communication	Lack of or limited interest in social communication
Asperger Syndrome	Schizophrenia
Often identified by the age of three	Not identified until late teens to mid-30s
Poor coordination can persist throughout life	Poor coordination may occur secondary to medication
Often normal verbal skills	Disorganized speech and inconsistent language use ("DSM-IV-TR", 2000)

Resource:

"DSM-IV-TR" American Psychiatric Association. (1994). Diagnostic and statistical manual of mental disorders (4th ed.) Washington, DC: Author.



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