

What do the CDC's ASD Prevalence Studies Really Tell Us: Summary of the recent *Autism* editorial.

What is the editorial about?

In March 2014, the Centers for Disease Control and Prevention (CDC) released their most recent estimate of the prevalence (i.e., the percentage of the affected population at a certain time) of Autism Spectrum Disorder (ASD). They found that 1 in 68 children met criteria for ASD in 2010, which is a dramatic increase from previous years. The editors suggest that this increase in identified cases may be largely related to problems with the CDC's research methods.

In the CDC's prevalence studies, experts looked at the medical and educational files of all 8-year-old children at 11 different sites across the United States. They identified children who already had a diagnosis of ASD, as well as those who had enough "red flags" (e.g., concerns about the child's development) in their files to suggest the child has ASD. It is important to remember that the CDC did not clinically assess any child in-person. Across the different sites studied, the number of children with ASD also varied. Specifically, traditionally underserved minorities were less likely to meet criteria for a diagnosis and the number of children with a documented intellectual disability differed greatly across sites.

Local policies, access to resources and the level of ASD awareness may account, in part, for the differences found across sites. The editors also suggest that the CDC's method of relying solely on educational and medical chart reviews is problematic. For instance, if during an in-person assessment, a clinician made note of behaviors often seen in children with ASD (e.g., poor eye contact) but ultimately decided that the child did not meet diagnostic criteria, the CDC may view these notes as "red flags" and override the clinician's assessment.

Other prevalence studies do not rely on clinical and educational records. Researchers traditionally identify a small sample of people who are thought to be representative of the population and clinically assess them in-person. As the CDC did not do this, the editors suggest that their studies do not represent true prevalence rates but rather measure how often and how comprehensively clinicians and educators document symptoms of ASD.

The CDC studies provide researchers with large amounts of valuable information; however, the editors suggest that methodological problems limit the meaning behind the reported rising prevalence rates of ASD.

What you need to know:

Tracking ASD prevalence rates is a difficult task. The CDC surveillance studies have given researchers large amounts of valuable information, however, the editors suggest that they may not provide meaningful estimates of prevalence, due to methodological limitations. If you would like to know more about these cautions, you can also read this interview with [Dr. Eric Fombonne in 2012](#) regarding the earlier CDC report.



About the Researchers

Dr. David Mandell is a researcher at the University of Pennsylvania and Dr. Luc Lecavalier is a researcher at Ohio State University. This summary is based on their editorial “Should we believe the Centers for Disease Control and Prevention’s autism spectrum disorder prevalence estimates?” It is published in *Autism*, (2014), 18(5), 482-484.

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