

# Towards a better relationship with patients on the Autism spectrum

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**Abstract:** It can be difficult to commence a clinical conversation with a presenting patient who sits somewhere on the Autism Spectrum. Usually, as such patients grow older, they come to form a healthy understanding of their condition and are able to communicate in a way with which they are comfortable.

During my field-work placement in my Master of Clinical Chiropractic I worked with a Principal Chiropractor who was himself on the spectrum and with a strong understanding of his condition, especially from his perspective as a chiropractor.

I summarise my key learnings from these encounters in the form of a narrative which touches on some little things a chiropractor may be able to include in their clinical conversations with such patients.

**Indexing Terms:** Chiropractic; autism; Autism spectrum Disorder; clinical conversations.

## Introduction

Chiropractic interns are required to demonstrate competence with managing a range of musculoskeletal disorders and their preferred treatment protocols. However, I found in my time at student clinic that I was not able to gain as much experience in treating these conditions as I intended and turned to external placement to broaden my skills.

At my field placement I was introduced to a 43y male patient who presented for general maintenance as a transfer from another clinic. He expressed very clearly on his intake form and through the initial consultation that he identifies with high functioning *Autism Spectrum Disorder* (ASD). He also has the sub-diagnoses of *Alexithymia* (1) and *Prosopagnosia*. (2)

... the Chiropractic Board of Australia has become relaxed with its concept of CPD and in place of 'hours attained' in something, the process of self-reflection now plays a significant role. Here, the senior student initiated this behaviour during field placement.'

1. Alexithymia is a neuropsychological phenomenon expressing important difficulties in identifying and describing the experienced emotions by oneself or others.
2. Prosopagnosia is more commonly known as face blindness, is a cognitive disorder of face perception in which the ability to recognise familiar faces, including one's own face (self-recognition), is impaired, while other aspects of visual processing (e.g., object discrimination) and intellectual functioning (e.g., decision-making) remain intact.

## Autism Spectrum Disorder

*Autism Spectrum Disorder* is a neurodevelopmental disorder characterised by difficulties in social interactions, communication, and repetitive behaviours. (3)

The principal chiropractor of my practice of placement is also on this spectrum and his practice was to follow up routine history questions with further questions relating specifically to patients with ASD where indicated. I found this to be very important process to fill a gap in my current skill set. It has prompted further investigations into additional questions and cues that would be beneficial when treating patients with ASD.



These include:

- ▶ Do you have any sensory concerns? Such as touch, words, triggers, smells, face paper, lighting.
- ▶ What is the easiest way for you to communicate?
- ▶ How do you see your body? Do you have any barriers recognising movements etc?
- ▶ Did you have any issues with development when you were younger? If a child, what is their development level?
- ▶ Do you use any augmentative or assistive devices?
- ▶ How are you with following directions?
- ▶ How are you with recognising faces, expressions, and body language?
- ▶ What are your coping mechanisms (mental & physical)?
- ▶ What chiropractic techniques have been successful for you in the past? (4)

I can recognise that in an allied health practice it is important to understand and apply the principles of ASD to provide better support and care to individuals with the condition.

My key points for reflection have been:

1. Understanding the symptoms
2. Having an individualised approach to customise treatment and clinical setting considerations
3. Collaborating with an interdisciplinary team such as exercise physiologists and psychologists to provide a comprehensive approach to care
4. Sensitivity to communication and social challenges. Having patience for my patients and incorporating alternative methods of communication, such as visual aids, to ensure effective understanding. (5)

Once establishing these tailored needs for a patient with ASD, I would then document and communicate the necessary information with the practice staff so that the clinic is aware and able to facilitate neurodevelopmental patients. (6)

For further upskilling in this arena, I have registered with *Autism Queensland* to take part in their monthly virtual workshops. These will include discussions on evidence-informed practice, understanding, and supporting patients of all ages with ASD.

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3. Lord C, Brugha TS, Charman T, et al. Autism spectrum disorder. *Nature reviews. Disease primers*. [Internet] England: Nature Publishing Group; 2020 [cited 2023 Feb 09];6(1):5–5. <https://doi.org/10.1038/s41572-019-0138-4>,
  4. Brown AB, Elder JH. Communication in autism spectrum disorder: a guide for pediatric nurses. *Pediatric nursing*. United States: Jannetti Publications, Inc; 2014;40(5):219–25. <https://www.proquest.com/scholarly-journals/communication-autism-spectrum-disorder-guide/docview/1617311598/se-2>.
  5. Cooper M, Gale K, Langley K, et al. Neurological consultation with an autistic patient. *Practical neurology*. [Internet] England: BMJ Publishing Group Ltd; 2021 [cited 2023 Feb 02];22(2):120–5. <https://doi.org/10.1136/practneurol-2020-002856>.
  6. Gow, L. (2019). Preparation and adaptation: making your practice ASD-friendly: This article outlines the steps that practitioners can take to make the consultation and environment suitable for patients with an autistic spectrum disorder. *Optometry Today (London)*, 59(4), 67–71.

This will also contribute towards my continued professional development. By reflecting on these key points, and incorporating them into practice, I can be sure to fulfil my duty of care to all patients, including those with ASD and other neurodevelopmental characteristics.

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### **Disclaimer**

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