

# Interview with Dr. Arthur Krigsman: evaluation and treatment of gastrointestinal pathology, common in children with autistic spectrum disorder

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## Abstract

The majority of children with autism spectrum disorders have gastrointestinal symptoms, the most common of which is diarrhea. Other symptoms include abdominal pain, constipation, growth failure, vomiting, and chronic gastroesophageal reflux. It is believed that the bowel disease present in children with autism contributes to many of the cognitive problems that these children experience, at the very least impeding their ability to maximally benefit from the many behavioral interventions available. When endoscopy is performed in ASD children with unexplained chronic gastrointestinal symptoms, a pattern of diffuse lymphonodular hyperplasia and multifocal non-specific acute and chronic enterocolitis emerges. These findings have been noted in the entire course of the gastrointestinal tract, from the esophagus to the anus. Potential consequences of this gastrointestinal pathology include brush border enzyme deficiency and malabsorption. Dietary components can exacerbate the inflammation. Treatments aimed at reducing the degree of inflammation in the GI tract is often successful in reducing the amount of abdominal pain experienced by the child which translates into more normal sleep patterns and improved in the educational environment and during therapies. Common treatments broadly include restrictive diets, anti-inflammatory medications, digestive enzyme supplementation, antibiotics, and probiotics. Individual patients may additionally benefit from anti-reflux therapy and conventional treatments to treat ongoing constipation.

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