Susan E. Levy, M.D.
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Biographical Information
Dr. Levy is a Clinical Professor of Pediatrics at the University of Pennsylvania School of Medicine and Associate Division Chief for the Division of Child Development, Rehabilitation and Metabolic Disease of The Children's Hospital of Philadelphia. Her research interests include early identification, epidemiology, complementary and alternative medical treatments and electrophysiological signatures of children with ASD. She is Co-principal Investigator (with Dr. Pinto-Martin, UPENN-School of Nursing) of the Pennsylvania CADDRE (Center for Autism and Developmental Disabilities Research and Epidemiology), which is funded by the CDC. Dr. Levy has served on numerous important regional task forces and workgroups regionally, including the Pennsylvania Department of Public Welfare Autism Task force and workgroup to standardize evaluations. She was a member of the Autism Expert Panel for the AAP, which collaborated on the recent clinical report and developed the Autism Tool Kit. She was also a member of the ASD Service Guideline Workgroup (including ASC members), formed by the Maternal and Child Health Bureau in 2007, which developed Service System Guidelines for Medical Home Primary Care Practices which were recently published.

Presentation Abstracts
Are Complimentary and alternative medical treatments for children with autism evidence-based? (4 pm)
Few treatments for autism generate as much controversy and consternation among families and caregivers than treatments considered as Complementary and Alternative Medical (CAM) treatments. As with many other medically based treatments in children, evidence based practice is the exception, not the rule. The use of CAM is increasing for adults and children. The National Center for Complementary and Alternative Medicine (NCCAM) reports that over 75% of American adults and 50% of children use some type of CAM for treatment of disease or to maintain health. This is likely to be an underestimate. Children with chronic illness and neurodevelopmental disorders such as autism have higher rates of treatment, estimated at 50 to 75%. The most commonly used CAM treatments for autism are biological or manipulation based practices. The hierarchy of evidence to support CAM treatment is greatly variable, with most studies providing low quality evidence, and weak recommendations for use of these treatments. This talk will review quality of evidence for many commonly used CAM treatments and highlight lessons learned from studies of two commonly used CAM treatments.

How should parents and caregivers choose treatments for children with autism? (6 pm)
Treatment of children with autism is complex, time intensive and expensive. Treatments must address core deficits (i.e., impairment in socialization, communication and behavior) and/or co-occurring symptoms or conditions (e.g., hyperactivity, aggression, others). One treatment modality cannot treat all symptoms. Progress may be slow, in part due to the pervasive nature of the core deficits and comorbid features. Research has shown that the most effective treatment is a combination of specialized and supportive educational programming, communication training (such as speech/language therapy), social skills support, behavioral intervention and intensive parent support and training. This talk will describe standard and novel treatments, report rationales for treatment selection by families and caregivers, and discuss the evidence based support for selected treatments and lessons learned.