



"Sensory Processing Disorder as a Diagnosis" © by Planet Autism

What's in a Name?

Sensory Processing Disorder is also known as Sensory Integration Disorder and sometimes referred to more loosely as "sensory difficulties" or "sensory issues". It is often abbreviated to SPD.

Who has Sensory Processing Disorder?

Anyone can have SPD, autistics and non-autistics alike, although the rates of occurrence are higher in autistics. It is a condition in its own right and not a mere part of the autism.

(*"Rates of sensory processing dysfunction may be as high as 90% in individuals with Autism Spectrum Disorder (ASD) (Baranek et al., 2006; Leekam et al., 2007; Tomchek and Dunn, 2007; Baker et al., 2008) and are estimated to be between 5% and 16% in the general population (Ahn et al., 2004; Ben-Sasson et al., 2009)." <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC276488/pdf/fnint-03-029.pdf>*)

Which sensory difficulties form part of SPD?

Difficulties in the following sensory areas can be present in various combinations:

Interoception – the perception of internal bodily sensations, awareness of organs;

Exteroception – tactile hypersensitivity (touch)

Proprioception – sense of body awareness in space

Vestibular – sense of balance

Olfactory – sense of smell

Gustatory – sense of taste

Auditory – hearing hypersensitivity

Optical – sight, someone can be sensitive to light and bright colours or colour contrasts

(There are further types described here: <https://en.wikipedia.org/wiki/Sense>)

Someone can be undersensitive (hyposensitive) or oversensitive (hypersensitive) or a combination. Someone who is hyposensitive is likely to undertake sensory-seeking behaviours and someone who is hypersensitive is likely to undertake sensory avoidance behaviours.

Evidence for a diagnosis

The ICD10 diagnostic manual has a diagnostic code (F88):

<http://www.icd10data.com/ICD10CM/Codes/F01-F99/F80-F89/F88-/F88> even if it is worded very slightly differently as Sensory **Integration** Disorder, although the American DSM-V manual does not (however it does list sensory difficulties as a recognised potential part of the autism profile).

There is a significant amount of research data out there about sensory processing disorder, and specific brain differences have been found:

1. <https://www.ucsf.edu/news/2013/07/107316/breakthrough-study-reveals-biological-basis-sensory-processing-disorders-kids>
2. <https://www.ucsf.edu/news/2016/01/401461/brains-wiring-connected-sensory-processing-disorder>
3. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2759332/>

NHS NICE also has various documentation relating to sensory processing disorder here:

[https://www.evidence.nhs.uk/Search?
q=sensory+processing+disorder](https://www.evidence.nhs.uk/Search?q=sensory+processing+disorder)
[https://www.evidence.nhs.uk/Search?
q=sensory+processing+disorder](https://www.evidence.nhs.uk/Search?q=sensory+processing+disorder)

The NHS diagnosing SPD

As with autism, there can sometimes be a postcode lottery regarding recognition and diagnosis. NHS NICE guidance for assessing and diagnosing children with autism states that OT assessment should be part of the assessment process (<https://www.cot.co.uk/areas-practice/nice-autism-guidelines-guarantees-ot-input-assessment-and-diagnosis-pathways>). In theory, this means SPD would be diagnosed at that stage, however in practice, parents are finding that this is often not happening and it may take persistence and chasing to obtain a subsequent OT assessment and diagnosis of sensory difficulties. Request a referral via your GP if this has happened to you.

It is also not unheard of for parents to be told that SPD does not exist as a condition. Don't take this lying down, because clearly as you can see from the information above, it very much does!

What treatment or therapy can help SPD?

Your child may be recommended sensory integration therapy, including a sensory diet. For more information on what that entails, read here: <https://www.royalfree.nhs.uk/services/services-a-z/occupational-therapy-services-for-children-and-young-people/specialist-services/sensory-integration-therapy/>

Some schools, more likely special schools, will have access to an onsite OT therapist and/or sensory rooms. Otherwise, an OT may occasionally visit your child's school if they are in mainstream or an ASC unit attached to mainstream, to recommend a programme the school can follow. However, this is generic advice, not tailored specifically to your child's needs and places too much responsibility on the school. The school are not trained in sensory difficulties and will likely not know whether your child is hyposensitive or hypersensitive, or which combination of the two and in which areas! They may not bother incorporating the programme into your child's day!

If your child has an EHCP, you could look into a personal budget (<https://www.ipsea.org.uk/what-you-need-to-know/personal-budgets-and-direct-payments>) to source your own OT therapist but your local Child Development Centre or relevant NHS department which diagnosed your child's SPD should provide the therapy or refer onwards for the therapy, they may also recommend certain beneficial activities you can incorporate at home. Your CCG may also be able to advise on a personal budget.