

Tourette Syndrome Is More Than Tics

(Excerpt from tsa-usa.org website)

Tourette Syndrome is a complex, neurobiological medical disorder. TS is complicated by symptoms and related difficulties that can significantly impact a student's education performance. Symptoms of TS are inconsistent; they wax and wane and are affected by stress and other environmental factors.

The following is taken from the Comments section of the Federal Regulations published Monday, August 14, 2006 during the reauthorization of the Individuals with Disabilities Education Act in 2004:

“...we do believe that Tourette syndrome is commonly misunderstood to be a behavioral or emotional condition, rather than a neurological condition. Therefore, including Tourette syndrome in the definition of other health impairment may help correct the misperception of Tourette syndrome as a behavioral or conduct disorder and prevent the misdiagnosis of their needs. Changes: We have added Tourette syndrome as an example of an acute or chronic health problem in 300.8(c)(9)(i).”

Attention Difficulties

- Inconsistent or chronic difficulties focusing are common for students with TS. In addition to the symptoms of ADHD, complex tics and/or obsessive-compulsive symptoms can interfere with a student's ability to pay attention. Often times the overwhelming need to “suppress” symptoms in public can impact a child's ability to attend to the learning environment as well as in testing situations.

Executive Dysfunction

- Many people with Tourette Syndrome are chronically disorganized.
- A person may possess extraordinary talents and abilities, but do not consistently possess the organizational capacities necessary to demonstrate these abilities in a manner that is productive.

Handwriting

- Difficulties with writing may include sloppiness, frequent erasing, time consuming effort at perfectionism, difficulty organizing thoughts, reduced output, handwriting difficulties, and writing that is difficult to read.
- Many students with TS are significantly impacted by difficulties with written language.

Dysinhibition

- Dysinhibition is characterized by a difficulty inhibiting thoughts and /or actions consistently.

- Students may be impulsive and experience inconsistent ability to use “mental brakes” appropriately.

Auditory and Visual Processing

- Frequently, students with TS have difficulty processing information and often need more time to answer a question or respond to a directive.

Anxiety

- Anxiety is a common problem for youngsters with TS, particular if they also have OCD symptoms.
- Students appear to be chronically inflexible.
- What appears to be ‘bad choices’ and behaviors may be a desperate attempt on the part of the child to bring a sense of control to a world of inconsistent difficulties.
- Sometimes youngsters will refuse supports/accommodations because they feel it singles them out as being different which is often what they are trying desperately to avoid.

Immature Behaviors

- Frequently students with TS will act in an immature fashion and display behaviors that are typical of a much younger student even though they possess more advanced academic abilities.
- Often students experience difficulties with transitions – one task to another or from one environment to another

Social Skills

- Many children with TS have above average to superior academic abilities, but have social skill deficits.
- Rigidity in their thinking, tendency to interpret things in a very literal fashion, not understanding ‘social cues’ often result in inappropriate social interactions.