

## Pediatric Neuropsychiatric Disorders

Neuropsychiatry is the study of psychiatric and behavioral conditions that are likely due to organic abnormalities in higher brain function. Pediatric neuropsychiatric disorders are caused by chromosome disorders, congenital anomalies, prenatal exposure to infection, toxins, trauma, or others. The disorder might affect the intellect (intellectual disability), motor movement (cerebral palsy), psychological (obsessive compulsive behavior), or social function (Asperger's syndrome). Some of the common syndromes have specific diagnostic criteria and names (e.g. autism). An entity may have one known cause, multiple causes, or the cause may be unknown. There is a wide spectrum of severity for each condition, and an affected child often has more than one condition. Co-morbid physical or psychological conditions may add mortality risk. Adolescence is a particularly turbulent time due to physical, hormonal, and social changes. These changes may exacerbate the underlying condition. Intellectual disability (formerly called mental retardation) and impaired mobility are common manifestations of neuropsychiatric conditions. Both are strong markers of prognosis. Those with severe intellectual disability are not insurable. In recent decades, there has been an increase in life expectancy due to improved living situations and to better treatment for common causes of death (e.g. congenital heart disease, respiratory disease). Underwriting bullets:

- Conditions that have a deteriorating course have a poor prognosis.
- Co-morbid conditions (physical, medical, psychiatric) are often present. Individuals with a heavy burden of co-morbid conditions have a poor prognosis.
- Additional ratings are applied (or declined) for other co-existing medical conditions, including seizures, cerebral palsy, congenital anomalies, hydrocephaly, swallowing impairment, and complications of birth/prematurity.
- Level of function and severity of developmental delay are important to assessing risk. In general, clients with stable condition and little disability are considered. They are alert, interactive, ambulatory as expected for age, and continent of urine and feces as expected for age.

If your client has a pediatric neuropsychiatric disorder, please answer the following:

1. What is the condition? \_\_\_\_\_

## 2. Are any of the following present?

, , , , , , , , , , , , , , , , , , , ,	
Intellectual disability	Yes or No
Gait problems	Yes or No
Use wheelchair	Yes or No
Social disability	Yes or No
Incontinence of urine or feces	Yes or No
Difficulty swallowing	Yes or No
Hydrocephaly	Yes or No

## 3. Is there a history of other psychiatric disorders present?

Yes (Please give details)

## 4. Does your client have any other major health problems (ex: heart disorder, epilepsy, etc.)?Yes (Please give details)

res (riedse give details)

5. Is your client on any medications?

Yes (Please give details)

6. Has your client smoked cigarettes or any other tobacco products in the last 5 years? Yes \_\_\_\_\_\_ No \_\_\_\_

