

Contents lists available at ScienceDirect

Research in Autism Spectrum Disorders

Journal homepage: http://ees.elsevier.com/RASD/default.asp



Review

Comorbidity among persons with intellectual disabilities



Johnny L. Matson, Paige E. Cervantes*

Louisiana State University, United States

ARTICLE INFO

Article history: Received 13 July 2013 Accepted 30 July 2013

Keywords: Comorbid Intellectual disabilities Challenging behaviors Health problems Psychopathology

ABSTRACT

Within the last three decades, the study of conditions that co-occur with intellectual disabilities has flourished. The present paper provides an analysis of the content of 405 papers that were reviewed on the topic. From these papers, trends emerged. The papers fell into one of three broad categories; comorbid psychopathology, comorbid medical problems, and comorbid challenging behaviors. Also, the volume of studies has been increasing rapidly. Implications of these and related issues are discussed.

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1. Introduction

Intellectual disabilities (ID) are a group of conditions, many with known genetic causes (Didden, Korzilius, Smits, & Curfs, 2004; Einspieler, Kerr, & Prechtl, 2005; Lin & Wuang, 2012; Menkes & Falk, 2005; Nomura & Segawa, 1990). Delayed development and long term marked deficits in intellectual functioning characterized by impaired communication, social skills and motor impairments are among the problems posed by the disorder (Matson, Carlisle, & Bamburg, 1998; Matson, LeBlanc, Weinheimer, & Cherry, 1999; Matson, Smiroldo, & Bamburg, 1998; Matson & Wilkins, 2009; Paclawskyj, Rush, Matson, & Cherry, 1999). The lifelong nature of ID makes this one of the highest priorities for mental health/health professionals in society.

Comorbid problems also occur at high rates within this group of people. These difficulties include mental health problems (Carraro & Gobbi, 2012; Matson & Smiroldo, 1997; Matson, Smiroldo, Hamilton, & Baglio, 1997; Matson, Rush, et al., 1999; Smith & Matson, 2010a, 2010b, 2010c; van de Wouw, Evenhuis, & Echteld, 2012), challenging behaviors (Chapman & Wu, 2012; Duncan, Matson, Bamburg, Cherry, & Buckley, 1999; Matson, Hamilton, et al., 1997; Matson, Kiely, & Bamburg, 1997; Rojahn, Aman, Matson, & Mayville, 2003; Vrijmoeth, Monbaliu, Lagast, & Prinzie, 2012), health conditions (Hilgenkamp, van Wijck, & Evenhuis, 2012; Matson & Kuhn, 2001) and other developmental disabilities (Edwards, Perlman, & Reed, 2012;

^{*} Corresponding author at: Department of Psychology, Louisiana State University, Baton Rouge, LA 70803, United States. Tel.: +1 225 578 1494. E-mail address: pcerva2@tigers.lsu.edu (P.E. Cervantes).

Matson, Dempsey, LoVullo, & Wilkins, 2008; Matson & LoVullo, 2008; Matson, Matson, & Rivet, 2007; Matson, Wilkins, & González. 2008).

Because of this considerable overlap with ID, many of these persons are severely debilitated. As a result, a vast array of interventions is often employed. These services often include extensive medical care. In addition, psychological services and psychotropic medications are frequently used (Matson, Mayville, et al., 1998; Shih, Wang, Chang, & Kung, 2012). In fact, the mental health problems and challenging behaviors these persons display make them one of the most heavily medicated groups in society (Matson & Neal, 2009; Matson & Wilkins, 2008; Singh, Matson, Cooper, Dixon, & Sturmey, 2005).

For all the reasons noted above, the study of comorbid conditions among persons with ID has been a priority for some time. The purpose of the present paper was to review some of the most common trends and themes in this field. Current strengths and weaknesses in the research are discussed. Also covered are areas where additional research is needed. Potential trends in research going forward are also reviewed.

2. Method

SCOPUS, the largest search engine in the world for scientific journals, was accessed for this project. The terms employed to identify articles for the current paper included "comorbid" and "intellectual disabilities." A total of 675 articles were identified using this methodology. From this group of papers, a large number were not associated with comorbidity of ID. Some studies involved comorbidity of other conditions. Similarly, many of the papers on ID were not associated with a comorbid condition at all. Rather, they dealt with some other facet of ID. Once these papers were removed, a total of 405 studies dealing with conditions that are comorbid with ID remained. These papers were divided into three broad categories. These categories were comorbid psychopathology, comorbid medical problems and comorbid challenging behaviors. An analysis and discussion of these topics follow.

3. Results and discussion

Of the three topics noted above, comorbid psychopathology received the most attention. There were 225 papers which met the search criteria. Of these papers, 182 reported on one particular topic while 43 papers described multiple comorbidities. By far, the most studied topic involved general mental health. Other topics frequently studied, in order, were autism, attention deficit hyperactivity disorder (ADHD), offenders, schizophrenia, and depression. Less frequently studied topics, from most to least frequently studied, included personality disorder, psychosis, anxiety, post-traumatic stress disorder (PTSD), bipolar disorder, Tourette syndrome, mania, phobias, obsessive compulsive disorder (OCD), factitious disorder, and oppositional defiant disorder (ODD) (Table 1).

The more frequently studied areas are not particularly surprising. Autism is an extremely popular topic of research at the time of this writing. Similarly, ADHD, schizophrenia, and depression are very well established and highly studied topics in the field of mental health. Additionally, with the large scale move toward community integration of persons with ID, an increase in run-ins with legal entities is inevitable. Thus, studying offenders in the population of persons with ID would seem to be a logical step.

The topics in the infrequently studied group are all worthy topics as well. The disappointment is that so little attention has been given to these particular maladies. Hopefully though, as this already growing field continues to develop, more focus and attention will be devoted to these issues.

Table 1	
Comorbid psychopathology.	

Topic	Total	One comorbidity	Multiple comorbidities
General mental health	118	95	23
Autism	25	18	7
ADHD	16	15	1
Offenders	14	11	3
Schizophrenia	12	11	1
Depression	11	8	3
Personality disorders	6	5	1
Psychosis	5	4	1
Anxiety	4	2	2
PTSD	3	3	0
Bipolar disorder	3	3	0
Tourette syndrome	2	2	0
Mania	2	1	1
Phobia	1	1	0
OCD	1	1	0
Factitious disorder	1	1	0
ODD	1	1	0

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