

Tourette Quick Assessment and Referral Guide

Diagnosis & Assessment Criteria

Diagnostic criteria:

<https://icd.who.int/browse10/2010/en#/F95.2>

Assessment framework:

www.ncbi.nlm.nih.gov/pmc/articles/PMC3065640/

Assessment Questions to ask

?Confirmatory tic semiology– urge to perform, increasing with repression

Generic question (**impairment?**):

How is day to day life (apart from tics)

Happy at home/school?

How they feel about attendance?

Social relationships/friendships?

Best outcomes come from treating comorbidities confidently and early

Co-Morbidities to be assessed

ADHD

Ask about inattention, restlessness, hyperactivity, impulsivity. Is there impairment? Getting into trouble with peers or teachers? Risk?

Anger

(outbursts or chronic)
?out of proportion for their age/provocation
?severity/impairment
?trouble/relationships

Anxiety/worries

?specific or generalised
?severity/ impairment – attendance, bed wetting, not going out/seeing friends

OCD

Is a form of anxiety.
?checking
?has to be a certain way
?compulsions
?severity/ impairment – ?late to school, xs time in the bathroom

Social communication

Non-autism -diagnostic social communication difficulties frequent
NOSI
Non-offensive socially inappropriate – ‘he’s got a big nose!’

Depression/Bipolar

?severity/ impairment - attendance, energy, friendships, appetite, sleep, self-harming, ?suicide risk (if primarily fx of tics, ?treat them first)

Learning difficulties

?Specific/global IQ
How is their learning, are they on target

Treatment

Support advice/guidance and leaflets to share...

www.gosh.nhs.uk/medicalinformation/search-medical-conditions/tourette-syndrome/tourette-syndrome-information-pack

<https://www.tourettesaction.org.uk/>

Voluntary sector support:

www.tourettesaction.org.uk

Intervention

- Individualised package of care, aware of the impact of tics and comorbidity on self-esteem, identity and participation. Reassurance is key.
- Initial approach primarily psychoeducation– home, school and primary care (i.e. Tourettes Action and GOS websites)– Leaflet for school is key.
- Information about national support organisations (TSA).
- Signpost if needed to school counsellor/Off the Record; potential for evidence-based specific psychological behavioural approaches

When/How to refer on:

- **Refer to Community Paediatrics** if significant/impairing comorbidity as above – ADHD most common (or you have an incomplete assessment). Please also refer if at risk of school exclusion and they can also be signposted to SENCO/Educational Psychology support in meantime
- **Refer to CAMHS** if concerns about OCD/anxiety/depression severe mental disorder. In the mean time can seek support from “Off the Record”/Happymaps app