Developmental Pediatricians: Who we are and how we can help

Kruti Acharya, MD, FAAP
Director, Illinois LEND
Leadership Education in Neurodevelopmental & Related Disabilities

Primary Objective: To support interdisciplinary training on disability to graduate and post-graduate level fellows from diverse healthcare disciplines
<table>
<thead>
<tr>
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<th>Our 14 Disciplines</th>
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<tbody>
<tr>
<td>1</td>
<td>Behavior Analysis and Therapy</td>
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<td>2</td>
<td>Pediatrics</td>
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<td>3</td>
<td>Disability Studies</td>
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<td>4</td>
<td>Family</td>
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<td>5</td>
<td>Self-Advocacy</td>
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<td>6</td>
<td>Nursing</td>
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<td>7</td>
<td>Nutrition</td>
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<td>8</td>
<td>Occupational Therapy</td>
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<td>9</td>
<td>Physical Therapy</td>
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<td>10</td>
<td>Psychology</td>
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<td>11</td>
<td>Public Health</td>
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<td>12</td>
<td>Social Work</td>
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<td>Special Education</td>
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<td>14</td>
<td>Speech-Language Pathology</td>
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</table>
- Current policies in health and education promote **collaboration and partnership** between professionals, families, and self-advocates
- Family and Self-Advocate discipline trainees provide interdisciplinary teams with an **invaluable perspective**
- The experience of being a family member or self-advocate **cannot be learned in any university course**
- **Applications available Nov 2023**
Today’s Objectives

• The role of a developmental pediatrician
• Evaluations and what they may involve
• How a diagnosis could be helpful
• Types of therapies and ages served
Who cares for children with disabilities in healthcare?

• Variety of providers make up health care team
• Physicians- neurologist, developmental pediatrician (DBP), general pediatrician, neurodevelopmental pediatrician, physiatrist, psychiatrist
• Nurse, Psychologist, Speech language therapist, Physical therapist, Occupational Therapist, Dentist, Social worker
Who is a Developmental Pediatrician

- Developmental Behavioral Pediatrician (DBP)
- Physician (DO/MD)
- Specialty training
- Board certification in Developmental and Behavioral Pediatrics
- Do not provide family or individual counseling/therapy
Conditions Cared for

- Attention and behavioral disorders (ADHD, ODD, anxiety, depression)
- Regulatory disorders [sleep disorders, feeding problems, enuresis (bedwetting)]
- Developmental disabilities (cerebral palsy, spina bifida, intellectual disability, autism spectrum disorders)
- Tics and Tourette syndrome
- Learning disorders
- Delayed development in speech, language, motor skills, and thinking ability
- Behavioral and developmental problems complicating the full range of pediatric chronic illnesses (i.e. genetic disorders, epilepsy, prematurity, diabetes, asthma, cancer)
### Other providers that share the space

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<tr>
<th>Neurodevelopmental Pediatricians</th>
<th>Child Psychiatrist</th>
<th>Psychologist</th>
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<tbody>
<tr>
<td>Training in Neurology</td>
<td>Psychopharmacology experts</td>
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<tr>
<td></td>
<td>Some may not diagnose Autism</td>
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<td></td>
<td>Can diagnose Autism</td>
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<td>Provide therapy</td>
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ICF Model

World Health Organization
Systems differ based on age

0-3yo

- Early Intervention- IFSP
- Healthcare

School-aged

- School- IEP
- Health care
Systems differ based on age

0-3yo
- Early Intervention
  - IFSP
- Clinic
  - Medical diagnostic

School-aged
- School
  - IEP
- Clinic
  - DBP
  - Psychologist
DBP Evaluations

0-3yo
- Developmental domains
- Medical diagnostic

School-aged
- Learning
- IQ
- Autism
- Self-care
- Attention
If more testing needed

- Psychologist
- Neuropsychologist
- Schools- psychoeducational testing
School-Aged Children

Health Care Team

Education Team

Illinois LEND/ illinoislend.org
Who cares for children with disabilities in schools?

• Variety of providers make up education team
• Teachers- special education teachers, teaching aides, general education teachers, transition specialists
• Nurse, School psychologist, Speech language therapist, Physical therapist, Occupational Therapist, Social Worker
Your Team: Partnering Providers

- Primary care providers - pediatricians, family doctors, nurse practitioners, nurses
- Social workers
- Psychiatrists / Psychologists
- Neuropsychologist
- Counselors
- Therapists - Occupational, Speech, Physical, Developmental, Behavioral
- School personnel
- Care coordinators
How diagnoses can help?

1. Clarification of etiology
2. Prognosis/Expected clinical course
3. Refined treatment options
4. Avoidance of unnecessary or redundant tests
5. Information about symptom management and surveillance for known problems
6. Condition-specific family support
Treatment Options

- Behavioral management- Positive reinforcement, Consistency
- Therapy – school and outside of school
- Medication
- Counseling
- School advocacy
- Parental education
Who should see a DBP?

0-3 → start with PCP and Early Intervention

School-aged → start with PCP

Not every child with IEP needs to see DBP

Refer:
- Concern for Autism, Complicated ADHD, Learning issues with unexpected outcomes
- Condition with known developmental sequelae (ie. Stroke, genetic syndrome)
- Follow up varies
QUESTIONS