



WELCOME TO OUR

Monthly Newsletter

ASD or OCD? Or Both?

Identifying individuals presenting with both ASD and OCD poses a significant challenge in primary care. A meta-analysis of data from 31 studies estimated the prevalence of OCD among youth with ASD to be over 17%. The overlapping symptoms, particularly the repetitive behaviors inherent in ASD, may camouflage the signs of OCD, leading to potential diagnostic oversights. As frontline healthcare providers, your clinical judgment and awareness of this intricate interplay are pivotal in ensuring timely recognition and intervention.

Moreover, the convergence of ASD and OCD often exacerbates symptom severity and functional impairment, amplifying the burden on individuals and their families. Heightened levels of anxiety stemming from obsessional thoughts and compulsive rituals further underscore the need for tailored support and intervention strategies.

It is essential to adopt a holistic approach to care that encompasses not only the management of core symptoms but also the mitigation of OCD-specific manifestations. Integrating behavioural interventions, psychoeducation, and, when appropriate, collaboration with mental health specialists can optimize outcomes and enhance the quality of life for individuals navigating this complex intersection.



In this newsletter you will find:

Pitstop Presents, Pitstop Insights and more. Keep Reading!



Nicole Ho

Clinical Psychologist

Qualifications

BPsych (Hons), MPsych (Clin)

Special Interests:

- Intelligence Assessment (IQ, Giftedness)
- Intellectual Disability Assessment
- Autism Assessment (experienced in Female Autism and the internalised presentations)
- ADHD Assessment

Who do you think would benefit from your service?

My service aims to help children, adolescents and adults to understand their neurotype and cognitive profile through psychological assessment, whether they are Autistic, ADHD or both AuDHDer. The assessment process provides a neurodiverse-affirming space to explore and reflect in order to understand yourself and support parents to understand their child.

What do you enjoy most about your job?

I mostly enjoy the opportunity to support clients through the journey of self-reflection, sense of validation and clarity they reach after the psychological assessment, which in turns fosters a new journey to embrace their uniqueness in them.

What are some plans you have for 2024?

My plan for 2024 is to increase skills and knowledge in the area of neurodiversity through latest research and professional training. Another goal is to develop some resources specific for neurodivergent children.

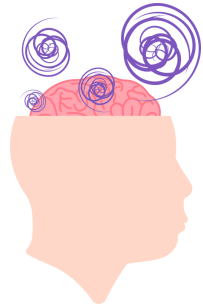
Why do you enjoy working at Pitstop Health?

I enjoy working at Pitstop Health because it works as a team with multiple disciplines. This supports the clinician's work in a collaborative approach and facilitates professional learning and communication.

Pitstop Insights: Differentiating and Managing Co-occurring OCD and ASD

What are the key clinical characteristics that distinguishes young people with OCD and ASD from those with OCD alone?

- Poorer insight into their OCD symptoms
- Greater global functional impairment
- Higher levels of concurrent psychopathology (e.g. depression, ADHD)
- Higher levels of family accommodation
- Higher levels of functional impairment and family accommodation
- Higher levels of comorbidity compared to those with OCD alone
- Higher peer problems and lower prosocial behavior



How about treatment outcome differences?

- Those with comorbid OCD and ASD have significantly poorer treatment outcomes.
- Greater global functional impairment and being on medication are significant mediators between the groups.

What is the recommended management approach co-occurring OCD and ASD?

- **Addressing Functional Impairment:** Targeting functional impairment, such as optimizing educational support and facilitating engagement in leisure/social activities, may provide a helpful platform for enhancing treatment outcomes.
- **Pharmacological Approaches:** Considering the role of medication as a mediator of treatment outcomes, exploring pharmacological approaches alongside behavioural interventions may be beneficial for individuals with OCD and ASD.
- **Family Involvement:** Involving families in treatment and addressing family dynamics is important for overall treatment success.



Meet Our Team



Dr Patrik Ho
Child, Adolescent and Adult
Psychiatrist

Waiting Period: 3 months



Dr Jack Hsu
Child and Adolescent
Psychiatrist

Good availability



Dr Ji Won Seo
Child and Adolescent
Psychiatry Advanced Trainee

Good availability



Alex Catt
Registered Psychologist

Good availability



An Yang
Counsellor / Play Therapist

Good availability



Bonnie Kang
Senior Speech Pathologist

Good availability



Nicole Ho
Clinical Psychologist

Good availability



Shawn Wang
Clinical and Organisational
Psychology Registrar

Good availability

Referral Process

Medical Objects is our preferred referral method.

Alternatively, send the referral to reception@pitstophealth.com.au



reception@pitstophealth.com.au



07 3132 7987



www.pitstophealth.com.au



Suite 108, 1808 Logan Road,
Upper Mt Gravatt, Q 4122