

Evaluation of a Behavior Change

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In people with communication disorders, illness typically presents as a change in behavior or function. Behavior can be a form of communication. People with communication disorders can usually give important information about their health. They may need supports such as visuals, choices, or access to augmentative and alternative communication. Any patient with a change in behavior or function should receive a medical evaluation.

The **HURTS** mnemonic provides a differential diagnosis of the most common medical causes of behavior change in people with developmental disabilities.

Head, including cervical spine: migraines, hearing, vision, dental, and neck injury

Urinary tract: kidney stones, urinary tract infections, and obstruction

Reflux and gastrointestinal problems

Thyroid and trauma

Seizures and side effects of medication: seizures can present as inattention, behavioral tics or emotional lability

Behavior changes can also signal:

- Abuse or other stressors
- Escape or avoidance of demands
- Increase in arousal or self-stimulation
- Means of accessing preferred activity or objects
- Mental illness
- Need for social attention
- Pursuit of power and control
- Reduction of arousal that leads to anxiety
- Sensory problem: vision, hearing or sensory integration
- Substance abuse
- Unrecognized pain or discomfort

References

1. Zelenski, SG. Evaluation for and use of psychopharmacologic treatment in crisis intervention for people with mental retardation and mental illness. In: Hanson R, Wieseler K, Lakin C, Braddock DL, eds. *Crisis: Prevention & Response in the Community*. Washington, DC: American Association on Mental Retardation; 2002:243-256.

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