FACTS for FAMILIES

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TIC DISORDERS

A tic is a problem in which a part of the body moves repeatedly, quickly, suddenly and uncontrollably. Tics can occur in any body part, such as the face, shoulders, hands or legs. They can be stopped voluntarily for brief periods. Sounds that are made involuntarily (such as throat clearing) are called vocal tics. Most tics are mild and hardly noticeable. However, in some cases they are frequent and severe, and can affect many areas of a child's life.

The most common tic disorder is called "transient tic disorder" and may affect up to 10 percent of children during the early school years. Teachers or others may notice the tics and wonder if the child is under stress or "nervous." Transient tics go away by themselves. Some may get worse with anxiety, tiredness, and some medications.

Some tics do not go away. Tics which last one year or more are called "chronic tics." Chronic tics affect less than one percent of children and may be related to a special, more unusual tic disorder called Tourette's Disorder.

Children with Tourette's Disorder have both body and vocal tics (throat clearing). Some tics disappear by early adulthood, and some continue. Children with Tourette's Disorder may also have problems with attention, and learning disabilities. They may act impulsively, and/or develop obsessions and compulsions.

Sometimes people with Tourette's Disorder may blurt out obscene words, insult others, or make obscene gestures or movements. They cannot control these sounds and movements and should not be blamed for them. Punishment by parents, teasing by classmates, and scolding by teachers will not help the child to control the tics but will hurt the child's self-esteem and increase their distress.

Through a comprehensive evaluation, often involving pediatric and/or neurologic consultation, a child and adolescent psychiatrist can determine whether a youngster has Tourette's Disorder or another tic disorder. Treatment for the child with a tic disorder may include medication to help control the symptoms. The child and adolescent psychiatrist can also advise the family about how to provide emotional support and the appropriate educational environment for the youngster.

Further information about Tourette's Disorder is available from

The Tourette Syndrome Association, Inc.

For additional information see Facts for Families:

#6 Children Who Can't Pay Attention

#21 Psychiatric Medication for Children

#52 Comprehensive Psychiatric Evaluation

#47 The Anxious Child

#60 Obsessive Compulsive Disorder in Children and Adolescents

#66 Helping Teenagers With Stress

See also: Your Child (1998 Harper Collins)/Your Adolescent (1999 Harper Collins).

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The American Academy of Child and Adolescent Psychiatry (AACAP) represents over 7,000 child and adolescent psychiatrists who are physicians with at least five years of additional training beyond medical school in general (adult) and child and adolescent psychiatry.

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