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CIP & Dewey Section

To: Melissa Parent, Chair
Decimal Classification Editorial Policy Committee

Cc: Members of the Decimal Classification Editorial Policy Committee
Caroline Saccucci, Chief, U.S. Programs, Law, and Literature Division

From: Kathryn Becker, Editor in Residence
Dewey Decimal Classification
OCLC, Inc.

Re: Autism spectrum disorder; Attention deficit hyperactivity disorder

Relocation

From	To	Topic
[616.85883]	616.85882	Other pervasive development disorders
[616.858832]	616.85882	Asperger syndrome

Background

Autism has had a journey through the DDC. The first appearance was in DDC 16 (1958) at 135.37 as “autistic thinking” and was classed with daydreams and reveries. In DDC 17 (1965), Daydreams, fantasies, and reveries were classed under 154.3 Secondary consciousness, with autistic thinking as an index entry. DDC 18 (1971) moved autism to 616.8982 along with schizophrenia and senile dementias, although it was only indexed there, and would not be added to the schedule until DDC 20 (1989). DDC 22 (2003) separated autism from schizophrenia, with autism being relocated to its current home of 616.85882. DDC 22 is also when Asperger syndrome made its appearance under 616.858 Mental retardation; developmental and learning disorders. DDC 23 (2011) saw several changes. The entry of 616.85882 Autism included a class-here comprehensive works on pervasive development disorders, with a see reference to 616.85883 for pervasive development disorders other than autism. In the same edition, 616.85883 Other pervasive development disorders made a debut with an including note for childhood disintegrative disorder and a see reference to 616.85884 for Rett syndrome. Asperger syndrome was relocated to 616.858832 under the Other pervasive development disorders hierarchy.

Problem

In 1994, Asperger's Syndrome was considered a separate and distinct diagnosis in DSM-4 (Smith, 2020). Pervasive developmental disorders (PDD) in DSM-4 included autism, Asperger's syndrome, Rett's syndrome, childhood disintegrative disorder, and PDD-not otherwise specified (PDD-NOS). However, with more understanding of neurodevelopmental disorders and the publication of DSM-5, Asperger's and PDD were included under the autism spectrum disorder and are no longer considered a separate diagnosis (DSM, 2013). The International Classification of Diseases, 11th edition (ICD-11) has followed DSM-5 and has absorbed Asperger's and PDD into a singular Autism Spectrum Disorders classification. The DDC does not reflect this absorption with "Other pervasive development disorders" classified at 616.85883 and "Asperger syndrome" at 616.858832.

Regarding pervasive development disorders, childhood disintegrative disorder (CDD) was classified as a PDD until DSM-5 when it was absorbed into the autism spectrum disorder as well. CDD is very rare and is described as "a global catastrophe in the brain", presents usually between the ages of 2-10, and results in regression with impairment that is severe. There is current medical debate about this inclusion with ASD as studies show different areas of the brain are affected, as well as differences in clinical history and genetics. However, as one expert noted "The reason we stay with the spectrum is because we haven't found anything better" (Yale Medicine Magazine, 2017).

Relatedly, the term "attention deficit disorder with hyperactivity", currently the heading at 616.8589, has been replaced with "attention deficit hyperactivity disorder" (ADHD). While ADHD is not a part of autism spectrum disorders, it is often a comorbid diagnosis and researchers are starting to look for any possible links between the two (Hours, 2022).

Current coverage

A non-filtered WorldCat search for 616.858832 Asperger syndrome resulted in 409 results, in the last 10 years there are 160 results, and the last 5 years there are 40 results. Searching 616.85883 Other PDD resulted in only 10 works, 3 of which are not pervasive developmental disorders nor autism spectrum disorders. In contrast, a non-filtered search for 616.85882 Autism gives a result of 3,850 works, several of which name Asperger syndrome or other PDD as part of their focus.

Within the DDC, the following notes are included for the three main topics:

616.85882 Autism already includes "class here comprehensive works on pervasive development disorders" and "for pervasive development disorders other than autism, see 616.85883", and "*add as instructed under 616.1-616.9".

616.85883 Other pervasive development disorders include notes of "including childhood disintegrative disorder" and "for Rett syndrome, see 616.85884".

616.858832 Asperger syndrome includes a note to "*add as instructed under 616.1-616.9".

Other classification systems

As stated earlier, both DSM-5 and ICD-11 have absorbed Asperger's syndrome and PDD into Autism Spectrum Disorder. MeSH (Medical Subject Headings used by the National Institute of Health) last revised Asperger Syndrome in June of 2017. Though it is still a discrete heading, it is in the Autism Spectrum Disorder hierarchy revised in May of 2021. Library of Congress Subject Headings (LCSH) has Asperger's syndrome as a valid subject heading, but they also list Asperger's syndrome, autism, pathological demand avoidance syndrome (not currently in DSM or ICD), and Rett syndrome as NT for Autism spectrum disorders.

Regarding attention-deficit hyperactivity disorder, there is not a consensus between systems. DSM-5 uses "Attention Deficit/Hyperactivity Disorder", while ICD-11 uses "Attention deficit hyperactivity disorder". MeSH keeps "Attention Deficit Disorder with Hyperactivity", but includes "ADDH", "ADHD", and "Attention Deficit Hyperactivity Disorders" under the entry terms. LCSH lists "ADD" and "ADHD" as UF terms under Attention-deficit hyperactivity disorder.

Proposed actions

I propose changing the topic term "autism" to the more accurate "autism spectrum disorder". I do not propose to move autism spectrum disorder from the current location at 616.85882.

Secondly, I propose to relocate 616.85883 Other pervasive development disorders and 616.858832 Asperger syndrome to 616.85882 Autism spectrum disorder, deprecating both 616.85883 and 616.858832.

The notes at 616.85883 remain valuable, and I propose to move them to 616.85882 as well. However, the see reference for Rett syndrome should be a see-also; while Rett syndrome and autism often are comorbid, they are separate diagnoses.

An addition of the RI term "Autism spectrum disorder" will also be added to the autism spectrum disorder entry.

Finally, I suggest we take the opportunity to update "Attention deficit disorder with hyperactivity" to "Attention deficit hyperactivity disorder" in the heading, and by adding "Attention deficit hyperactivity disorder" as index term.

Recognizing that there are no longer separate diagnoses, we can take this opportunity to tidy the index. The following entries will have a see-also for autism spectrum disorder: Asperger's disorder--medicine, Autistic disorder--medicine, Pervasive child development disorders--medicine, Pervasive development disorders--medicine. Due to a glitch, they are not appearing properly in this printout.

In the schedule, 371.9 is given for context.

References

“A Catastrophe in the Brain.” *Yale School of Medicine*, 2017, medicine.yale.edu/news/yale-medicine-magazine/article/a-catastrophe-in-the-brain/.

Hours, Camille et al. “ASD and ADHD Comorbidity: What Are We Talking About?.” *Frontiers in psychiatry* vol. 13 837424. 28 Feb. 2022, doi:10.3389/fpsy.2022.837424

“6A02 Autism Spectrum Disorder.” *World Health Organization*, 1 Jan. 2022, icd.who.int/browse11/l-m/en#/http%253a%252f%252fid.who.int%252fid%252fentity%252f437815624.

Smith, Olivia, and Sandra C Jones. “‘Coming out’ with Autism: Identity in People with an Asperger’s Diagnosis after DSM-5.” *Journal of Autism and Developmental Disorders*, Feb. 2020, pubmed.ncbi.nlm.nih.gov/31713072/.

.9 Special education

Class here exceptional students, learning disabilities, underachievers in special education; schools and school activities pertaining to special education

Except for modifications shown under specific entries, add to each subdivision identified by * as follows:

Unless other instructions are given, observe the following table of preference, e.g., emotionally disturbed gifted students 371.95 (*not* 371.94):

Gifted students	371.95
Students with mental disabilities	371.92
Students with emotional disturbances	371.94
Students with physical disabilities	371.91
Delinquent and problem students	371.93

Class comprehensive works on underachievers in 371.28

.94 *Students with emotional disturbances

Including students with attention deficit hyperactivity disorder, students with autism spectrum disorder, hyperactive students

Class here students with mental illness

For delinquent and problem students not suffering severe emotional disturbances, see 371.93

*Add as instructed under 371.9

- .858 8 *Intellectual disabilities; developmental and learning disorders
Class here mental disorders usually first diagnosed in infancy, childhood, adolescence
Subdivisions are added for intellectual disabilities, developmental and learning disorders together; for intellectual disabilities alone; for developmental disorders alone
For attention deficit hyperactivity disorder, see 616.8589
- .858 82 *Autism spectrum disorder
Including childhood disintegrative disorder
Class here Asperger's syndrome, pervasive development disorders
See also 616.85884 for Rett syndrome
- .858 9 *Attention deficit hyperactivity disorder
Class here hyperkinesia, minimal brain dysfunction

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