Aim

To describe the most frequent differential diagnoses of autism-spectrum disorder (ASD) in a "real world data set".

To determine what disorder patients who present for diagnosis but do not have an ASD are suffering from.

Method

We filtered the data bank for F84.x for the year 2017-2022

357 subjects were found

Inclusion criterion was, presenting for diagnosing of ASD

29 subjects did not meet the inclusion criterion

335 were analyzed \(\text{Fig}\ 1\)

Results

305 of the 335 patients (91%, (95% confidence interval (CI) 88-94.1%) did not meet DSM-V criteria for ASD (ASDno). ASD was confirmed in 26 individuals (7.8%, 95% CI 4.9-10.6%) (ASDyes). In four individuals, the diagnosis could not be excluded with certainty (1.2%). \(\text{Fig}\ 2\)

The cohort included 201 males (60.0%) and 134 females (40.0%). \(\text{Fig}\ 2\)

The gender distribution among ASD patients was \(m:f = 2:3:1\) (male 69.2%, 95% CI 51.5-86.9, female 30.8, 95% CI 13.0-48.5%). \(\text{Fig}\ 2\)

Cohort’s mean age was 31.3 years (SD=11.2 years, range 16-65). The age group 16 to 29 years was overrepresented (54.3%), resulting in a left-skewed age distribution. \(\text{Fig}\ 3\)

The probability of ASD found was lower the older the patients were. \(\text{Fig}\ 4\)

The top 6 most frequently found differential diagnoses are

- Affective disorder
- AD(H)D
- Social Phobia
- Anxious Avoidant PD
- Panic Disorder with/without Agoraphobia
- Obsessive-Compulsive PD

Conclusion

We conclude that ASD in adults is suspected considerably too frequent.

ADHD, Personality disorders, and conditions from the group of phobic and anxiety disorders are more often differential diagnosis than comorbidities.

These data might be particularly relevant from a patient management perspective.