Leo Kanner published "Autistic Disturbances of Affective Contact" in 1943 in the journal *Nervous Child*. This article described the cases of eleven children with autism. Kanner described the behavior and upbringing of each child, aged two to eight, as well as the educational backgrounds of the children's parents. Though Eugen Bleuler, a professor at the University of Zürich and director of the Burghölzli Asylum in Zürich in Zürich, Switzerland in the early twentieth century, first used the term autism to describe a symptom of schizophrenia, scientists cite Kanner's article as the first description of autism as a unique disease concept distinct from schizophrenia. One of the most cited articles about autism in the twentieth century, this article was the first to demarcate Kanner syndrome, which later called childhood autism. Researchers, including Kanner, eventually treated early infantile autism as a disorder resulting from abnormal development of the autistic children's brains.

In 1938, Kanner began studying a small cohort of eleven children with similar behaviors in the Johns Hopkins clinic in Baltimore, Maryland. Donald, Frederick, Richard, Paul, Barbara, Virginia, Herbert, Alfred, Charles, John, and Elaine became the first children described with Kanner Syndrome, later called early infantile autism. In "Autistic Disturbances of Affective Contact," Kanner describes each child's preoccupation with objects, monotonous repetitions, insistence on consistency, and deficiencies of language, among other behaviors. He also described the child's home life, socioeconomic and educational background of the parents, and the parents' chief complaints about their children's behaviors. Many child psychologists used Kanner's observations to help them with their diagnoses.

The article has four main parts. It has a single-paragraph introduction that contextualizes when and why the case studies were conducted. After the introduction, Kanner details each case, one after the other. The discussion section compiles the common features and differences between the cases. Finally, the comment section attempts to describe the impact these eleven case studies have on the field of child psychiatry and suggests directions for further research.

Each case study follows a common pattern. First, the full first name and last initial of the child are given. The initials are followed by the date each child was observed at the clinic, and the child's age. Most cases then describe the parents' chief complaint, for example in Richard M.'s case, the parents' chief complaint was that Richard did not talk or respond to questions. For this reason, Richard's parents claimed that he was deaf. Next, Kanner provides the parents' description of the problem and, if he had it, the case history. Kanner then specifies the children's dates of birth followed by their weight and condition at birth, along with any complications during delivery. Kanner then lists parental descriptions of the child's early speech and motor development, followed by descriptions of what Kanner called strange or noteworthy behavior by the child while in the clinic. Finally, in each case Kanner includes
written correspondence from the parents regarding any changes in the child's condition over time.

In the discussion section, Kanner interprets the common characteristics unique to autism such as self-sufficiency, being oblivious to surroundings, and acting as if hypnotized. He says that many of the children in the study were considered idiots, imbeciles, feebleminded, or schizophrenic. Kanner explains the disorder as the child's inability to relate themselves to others and as extreme aloneness. Autism can be observed in several ways, such as by the child's failure to recognize and react when he or she is being picked up, or by the inability of the child to use language to communicate. Autistic children react to loud noises and moving objects with horror, and often with repetitious utterances. Kanner interpreted these reactions to indicate that the autistic child had an obsessive desire to maintain sameness in his environment. The autistic children in Kanner's study seemed to him to relate much better to inanimate objects than to people. In the final two paragraphs of the discussion section, Kanner said that all of the children studied come from highly intelligent families and that all of the children studied were either Jewish or Anglo-Saxon.

In the comment section, Kanner argues that the characteristics of autism, though similar to schizophrenia, differ in many ways. First, the children Kanner described behaved in the way they did from birth and not from a gradual change in behavior, while in schizophrenic children. Second, he says that autistic children cannot interact with objects with a high level of intelligence. Third, Kanner said that the autistic child's behaviors were governed by a powerful desire to maintain sameness and aloneness. Ranging anywhere from two to five years, depending on the specific behavior in question, the autistic children under Kanner's observation started to show some improvement in their interactions with others. In the final three paragraphs, Kanner notes that obsessiveness and intelligence seemed to be in the family backgrounds of the children. At the end of this section, Kanner implicated parents as a potential cause for autism, claiming that most parents of the children studied did not seem exceptionally warm to their children.

Though Kanner largely abstained from commenting on what factors might be cause, his descriptions opened the possibility for many interpretations of its etiology. Kanner's observations about race, class, and intellectual ability shaped the concept of autism into a condition that excluded many on the basis of race, class, and intellectual grounds. His final comment about the emotional warmth of parents distressed many parents of autistic children for decades afterwards. Kanner later retracted his position on the causal relationship between parents' emotional warmth and autism in a foreword for Bernard Rimland's 1964 book *Infantile Autism: The Syndrome and Its Implications for a Neural Theory of Behavior*.

Scientists treat "Autistic Disturbances of Affective Contact" as the first article to codify the concept of autism as a disease, and not as a symptom. After this article was published, children who exhibited signs similar to those of these first eleven cases could be described as something other than feebleminded or schizophrenic. Researchers later in the twentieth and twenty-first centuries tested the theory that autism has its origin during early human development.

Sources
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