Tourette Syndrome (TS) is an often misunderstood, misdiagnosed and confusing disorder. According to the Center for Disease Control (CDC), 86% of children diagnosed with TS also have at least one mental health, behavioral or developmental disorder. When someone receives a diagnosis of TS they should also be assessed for co-occurring conditions that can frequently be found alongside of TS. Some children carry multiple co-occurring diagnoses. The interplay of symptoms of TS and the co-occurring conditions can complicate diagnosis and treatment of both. Depending on the severity of the TS, the symptoms of the other disorders might be more disruptive or involve greater impairment for the individual.

What are the most common co-occurring conditions?

While there are many neurodevelopmental disorders that can be found in people with TS some of the most common include:

**Attention Deficit Hyperactivity Disorder (ADHD)** - Difficulties with concentration, impulse control and hyperactivity.

**Obsessive Compulsive Disorder (OCD)** – The presence of unwanted, repeated thoughts and behaviors relieved only by rituals.

**Anxiety** – The presence of excessive worry.

**Behavior Problems** - Characterized by aggression, rage, defiance and other inappropriate, disruptive behaviors.

**Learning Disorders** - This can include writing, reading, math and processing difficulties.

**Autism Spectrum Disorder (ASD)** – Characterized by communication, social and behavioral impairments.

Sometimes referred to as the TS triad, TS, ADHD and OCD often occur together.

Can you have a diagnosis of TS alone?

It is possible to have a diagnosis of TS without having other disorders. However, the majority of people diagnosed with TS also have at least one co-occurring disorder. Although it is not always the case, often the symptoms of TS decline in frequency and intensity in late adolescence and early adulthood, however, the co-occurring disorders may continue with little change.

Are there treatments for the co-occurring disorders?

Both evidence based behavioral and pharmacological treatments and strategies are
available for the treatment and management of the co-occurring conditions as well as TS. Depending on the diagnoses, often a combination of these approaches is most effective. When treating TS and its associated conditions it is important to learn from the individual which symptoms are most disruptive and impairing for them and that should be the initial focus of treatment. The focus will be different for everyone.

When there are multiple diagnoses treatment can be more complicated. While the side effects vary, many medications used to treat TS and its co-occurring conditions do have side effects. In addition, on occasion, taking a medication for one disorder may adversely affect another disorder. Medication efficacy as well as side effects vary from person to person and each individual will have to decide the balance between side effects and symptoms that works for them. Due to these potential complications it is crucially important to see a doctor who is versed in TS and the co-occurring conditions.

**What type of doctor should I see to help me manage my co-occurring disorders?**

Typically, a knowledgeable and trained psychologist or social worker can provide behavioral treatment and a psychiatrist will provide medication treatment. It is important to see a practitioner who is knowledgeable about TS as well as the accompanying disorders. Because of the nature of TS alongside of other disorders a comprehensive treatment plan is needed and it is helpful for all treating practitioners to consult with each other and work as part of a treatment team.