

Self-Talk in People with Down Syndrome

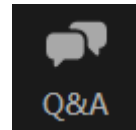
Adult Down Syndrome Center

November 10, 2021 | Brian Chicoine, MD



Reminders

- This webinar is being recorded.
 - Available within two weeks in our Resource Library (and emailed to attendees).
 - <https://adsresources.advocatehealth.com>
- Q&A
 - Please submit questions using the Q&A option.



Adult Down Syndrome Center

Park Ridge, IL



Our mission is to enhance the well-being of people with Down syndrome who are 12 and older by using a team approach to provide comprehensive, holistic, community-based health care services.

Disclaimer

This information is provided for educational purposes only and is not intended to serve as a substitute for a medical, psychiatric, mental health, or behavioral evaluation, diagnosis, or treatment plan by a qualified professional.

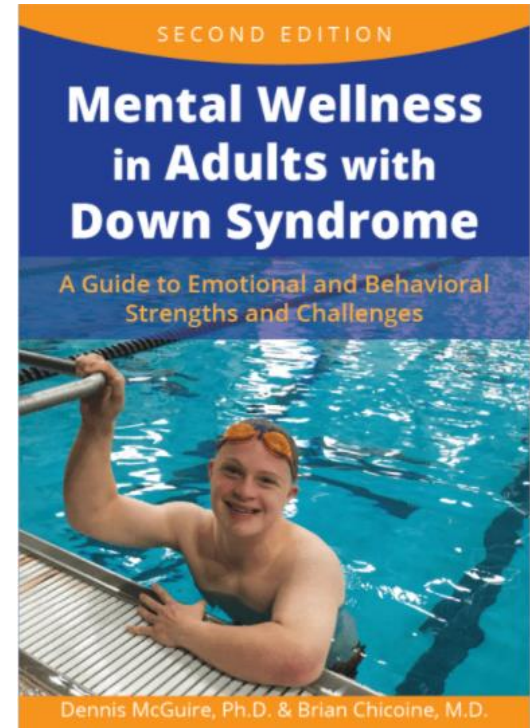
Objectives

- Define self-talk
- Describe the benefit and function
- Discuss what a change in self-talk may indicate
- Explain ways to address changes in self-talk
- Share case examples

What is self-talk?

Definition

- Talking aloud to oneself or an imaginary friend
- Not abnormal
- Not unique to people with Down syndrome



Functions

- Process information
- Learn new skills
- Problem solve
- Cope with challenging situations
- Direct behavior
- Counter boredom

Managing self-talk

Managing self-talk

- Reassure the individual that self-talk is ok
- Explain that talking out loud can be disruptive
- Provide guidance on appropriate self-talk
 - Identify places where the individual can self-talk.
 - Public vs private (e.g., bedroom at home, designated places at school or work)
 - Visuals can be used to remind the individual
 - Practice and reinforce
 - “Secret sign”

Educate others

- Sometimes it is not about changing the person, but instead, informing others
- Educate those who interact with the person with Down syndrome

Changes in self-talk

When there is a change

- Self-talk becomes angry, self-flagellating
- Maladaptive daydreaming – entire fantasy world the person would prefer to be in
- Less ability to discriminate appropriate places
- Potential causes
 - Stress
 - Pain or physical ailment
 - Mental illness
 - Dementia
 - Communication
 - Sensory
 - Environment

Case 1

- 25-year-old woman self-talks in her room every day after work.
- Self-talk is similar each day.
- Occasionally, self-talk is more animated, and the parents listen at the door on those days.

Case 2

- 33-year-old man self-talks in his room every day after work.
- Self-talk is similar each day.
- In the last 6 months, self-talk has become much more agitated.
- Less appreciation for socially appropriate places for self-talk.
- Began to sound hallucinatory or psychotic.
- Evaluated and treated for sleep apnea.

Case 3

- 17-year-old girl with Down syndrome
- During COVID-19, staying at home and going to school virtually
- Progressively talking to herself more
- More agitation
- Not sleeping well, decreased appetite
- Loss of interest in previously enjoyed activity
- No physical conditions found
- Depression

Case 4

- 36-year-old man
- Not able to work due to COVID-19
- Over the course of several months
 - Severe withdrawal
 - Marked increase in self-talk
- Diagnosed with and treated for hypothyroidism
- Progression of symptoms
 - Diagnosed with depression
 - Treated with sertraline

Case 4 continued

- Further worsening of symptoms
 - Not able to be redirected
 - “Lost in his own world”
 - Intense agitated self-talk with expression of lots of anger
 - Intense conversations with imaginary friends
- Diagnosed with depression with psychotic features
- Risperidone (anti-psychotic) added
- Reduction in symptoms
- Symptoms did not resolve until he could return to work

Case 5

- 29-year-old man
- Concern regarding psychotic disorder
- Increased self-talk
- Isolating himself
- Refusing to collect carts at grocery store where he worked
- Diagnosed with psychoses
- Came for second opinion

Case 5, continued

- Recommended Mom listen outside the door
- “No one is helping me up”
- Counseling
- Reviewed with store manager
- Not psychotic
- Fear of parking lot despite counseling
- Job modification

Take away points

- Self-talk is...
 - Usually normal and functional.
 - May be disruptive and require social skills training (e.g., private vs public spaces)
 - May need to be explained to others
 - Can change for a variety of reasons or stressors
 - Treatment depends on a variety of factors:
 - severity
 - diagnosis
 - response to other treatments

Resources

- [Article on Self-Talk](#)
- [Mental Health Resources](#)
- [Social Skills Resources](#)

Resources Library:

adscresources.advocatehealth.com

Facebook:

facebook.com/adultdownsyndromecenter

Email Newsletter:

eepurl.com/c7uV1v

Q & A