

# Tourette Syndrome: Multi-Informant Ratings on Behaviour

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## Abstract

There are a wide variety of behavioural and socio-emotional problems associated with Tourette syndrome (TS). However, the use of multiple informants when assessing TS has rarely been addressed in the literature. The differential presentation of symptomatology, depending on context and informant, can have a significant impact on the treatment approach and psychotropic regime. Yet, rarely has the relationship between parent and teacher ratings been compared within the paediatric TS population. This study intended to examine the consistency of teacher and parental report across home and school contexts.

## Introduction

TS is a condition characterized by phonic and motor tics [18]. Typically diagnosed well before the age of 18, symptoms of TS are debilitating to the child/youth and distressing to caregivers, family members and teachers. Children and youth with TS have been reported to have significantly lower grades, more behavioural problems, fewer friends, and more impaired parent-child relations, compared to controls. Research suggests that when comparing parent and teacher reports of symptoms, teachers report fewer internalizing behaviours and fewer problems than parents [18].

## Method

Participants included 54 males and 12 females (M = 11.5) and their families referred to the "Brake Shop" service for TS+, a highly specialized, outpatient clinic for clients with extreme needs at the Child & Parent Resource Institute in London, Ontario, Canada. At the time of referral, parents and teachers completed a battery of questionnaires including the Conners' Parent Rating Scale—Revised (L) [19] and the Conners' Teacher Rating Scale—Revised (L) [20].

## Table 1 Measures

### Conners' Parent Rating Scale - Revised (L) (CPRS-R-L)

The CPRS-R-L [19] is an 80 item checklist that yields the following 14 subscales: Oppositional, Cognitive Problems/inattention; Hyperactivity; Anxious/shy; Perfectionism; Social Problems; Psychosomatic; ADHD index; Restless/Impulsiveness; Emotional Lability; Conners' Global Index Total; DSM-IV: Inattentive; DSM-IV: Hyperactive-Impulsive; DSM-IV: Total.

### Conners' Teacher Rating Scale - Revised (L) (CTRS-R-L)

The CTRS-R-L [20] is a 59 item checklist that yields the following scales: Oppositional, Cognitive Problems/inattention; Hyperactivity; Anxious/shy; Perfectionism; Social Problems; Psychosomatic; ADHD index; Restless/Impulsiveness; Emotional Lability; Conners' Global Index total; DSM-IV: Inattentive; DSM-IV: Hyperactive-Impulsive; DSM-IV: Total.

## Results

Parent and teacher ratings were highly correlated on the following subscales: Cognitive Problems  $r(66) = .44, p < .001$ , Hyperactivity,  $r(66) = .43, p < .0001$ , Social Problems,  $r(66) = .47, p < .001$ , ADHD Index,  $r(66) = .38, p < .01$ , Restless/Impulsive  $r(66) = .44, p < .001$ , Conners' Global Index,  $r(66) = .36, p < .001$ , Inattentive,  $r(66) = .37, p < .01$ , Hyperactive/Impulsive,  $r(66) = .51, p < .001$ , and DSM-IV Total  $r(66) = .47, p < .001$  (see Figure 1). No significant relationship was found between anxiety, shyness or perfectionism. Results suggest consistent agreement on issues related to restlessness, attention problems, impulsivity, hyperactivity, and cognitive problems.

## Discussion

These findings suggest consistency across multiple informants for behaviors indicative of hyperactivity, distractibility, restlessness, impulsivity and cognitive issues. However, with respect to internalizing issues, no significant relationship was found across informants. Internalizing issues are less disruptive and overt in the school milieu which may contribute to the under-reporting of anxiety-based symptoms. The need for sensitive measures utilized to identify specific anxiety based symptoms is recommended.

Figure 1: Conners' Parent versus Conners' Teacher Rating Scales

