We will finish our year’s column on Sensory Processing Disorder (SPD) with the sixth subtype, Sensory Discrimination Disorder (SDD). First, a quick reminder: children do not fall neatly into only one of the six subtypes of Sensory Processing Disorder; most of the time children have multiple symptoms and fit into more than one subtype of SPD.

Sensory Discrimination Disorder is the last and most difficult category to describe in 1,200 words! It is really eight separate subtypes if you consider that SDD can occur in any combination of sensory domains: visual, auditory, proprioceptive, vestibular, tactile (touch), olfactory (smell), gustatory (taste), and/or interoceptive (sensations from internal organs such as the stomach).

Discrimination is the ability to interpret information. It allows you to compare various details, disregarding irrelevant information. A disorder of discrimination means that you have difficulty interpreting information (i.e., differentiating stimuli in the affected sensory systems). For example:

**Auditory:** Did she say *cat, cap, or pack?*

**Tactile:** Is that a quarter or a nickel in my pocket?

**Visual:** Where is the key that looks like this?

**Proprioceptive:** How hard should I push this forward to move it, but not break the glass?

**Vestibular:** Which way am I turning?

This discussion highlights how discrimination challenges in each sensory domain might affect a child.
Take out your science books and turn page 103.” Symptoms may include the following:

- talks too loudly or softly
- experiences confusion when given directions
- appears to ignore others

Visual Domain

Children with poor visual discrimination tend to have trouble in school. It may be difficult for them to “read” emotions or to recognize letters and symbols. This causes problems such as letter reversals, problems finding pictures in a busy background, or difficulty reading. Other symptoms may include difficulty with the following:

- lining up numbers in a math problem
- scanning a page to find the keywords in a story
- judging the distance between oneself and an object or person

Olfactory/Gustatory Domain

Smell and taste discrimination do not cause as severe a social problem, so they are usually only treated when they occur with another sensory discrimination issue. For example:

- difficulty telling the difference between things that are somewhat sweet and those that are too sweet
- cannot tell if bread is burning, but has general sense something is wrong
- does not know familiar smells (e.g., grandma’s perfume, coffee shop you frequent)

Interoceptive Domain

Many functions of daily life depend on sensory messages from our body organs. Some examples include the following:

- soreness you feel after a good abdominal workout
- sensation of being hungry or too full
- sensation of an upset stomach
- sensation of a full bladder

Ways to Help a Child with SDD

It is important to make sure that a child is regulated before intervening with discrimination issues. You will know when a child’s overresponsivity causes a meltdown. You will know if he is a sensory craver and runs around trying to get more, more, more! But discrimination challenges are harder to see. Often discrimination issues, which are frequently missed by diagnosticians, are the cause of school problems.

Children who have poor discrimination need sensory-rich activities in the domain in which they have issues.

Visual: category games (e.g., find everything in the room that’s a circle, while driving point to all food-related signs)

Auditory: Play the same-and-different game, “I’m going to say two words, and you tell me if they are the same or different. Then it will be your turn to try to trick me.”

Proprioceptive: Play Simon Says or Mother May I? performing unusual, novel body movements.

While we have enjoyed presenting this series of six Sensory Solutions columns, we are also painfully aware of all that remains unsaid, especially in this last column on SDD. The take-home message is this: If you have or work with a child who you suspect has Sensory Processing Disorder, seek out a multidisciplinary evaluation that includes occupational therapy. Don’t settle for “Don’t worry, he’ll grow out of it” or “Here’s a brochure on parenting classes.” Follow your instincts and find answers. Remember, there is help and hope!

Reference