More than Words

The 22q11.2 deletion syndrome as a genetic model for understanding variability in neuropsychiatric symptoms of children with developmental language disorder

Developmental Language Disorder (DLD) is a neurodevelopmental disorder affecting approximately 3-7% of children. Children with DLD have persistent difficulties learning language, but many also experience symptoms associated with various neuropsychiatric disorders. This dissertation aims to enhance our understanding of the inter-individual differences in the occurrence of neuropsychiatric symptoms in children with DLD, and the extent to which they are associated with children's language difficulties. This will improve the early identification of those children who are most likely to develop neuropsychiatric symptoms, allowing for the timely start of intervention. To date, research on the relationship between neuropsychiatric symptoms and language difficulties in DLD reported mixed results, possibly due to the etiological heterogeneity that characterizes DLD. The exact cause of DLD remains unknown and varies from child to child. The relationship between language difficulties and neuropsychiatric symptoms is therefore likely to vary between individuals as well. Studying an etiologically homogeneous group of children with language difficulties associated with a shared genetic origin may increase our ability to identify meaningful associations between language difficulties and co-occurring neuropsychiatric symptoms, if these exist. This was the approach central to this dissertation. Children with DLD were compared to children with the 22q11.2 deletion syndrome (22q11DS), who all miss a small part of chromosome 22. Results of this dissertation provide new insights on the impact of language difficulties on the occurrence of neuropsychiatric symptoms in 22q11DS and DLD. Moreover, the findings provide leads for future research on and clinical care for both groups.

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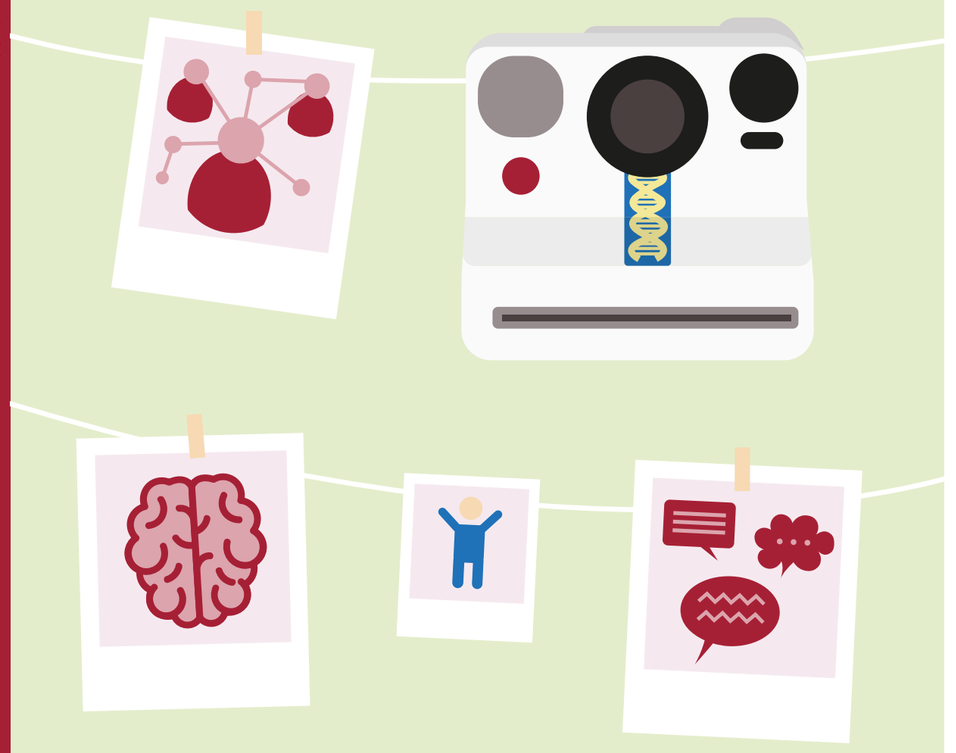

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