

## Do tics ever go away?

Tic intensity and frequency changes over time and with age. They usually start at age 5 and by age 10, the majority of people with TS are symptomatic. Tics are most severe during ages 10 to 14. Many adults experience a decrease in tic symptoms as they mature and in some cases, tics may disappear altogether in adulthood. It is also common for tics to wax and wane, and even disappear for months or weeks at a time. Often a new tic will appear and replace a previous tic. Tic frequency and intensity can be affected by environmental factors as well. For example, they usually worsen with stress, excitement, or sickness and they decrease with relaxation or when a person is focused on an interesting or absorbing task.

## Should people with TS try to suppress their tics?

Suppressing tics is extremely difficult, and even when someone manages to do so, it only lasts for a short time. Like gasping for air after holding your breath, a person with TS must eventually let their tics out. Suppressing one's tics may increase the urge to tic and it can make concentrating on work or school more difficult. It was once thought that suppression caused tics to explode with greater intensity and frequency once they were finally released, however, recent research has disproved the existence of this so-called "rebound effect".

## Are there different kinds of tics?

There are many different types of vocal and motor tics, each are classified according to how simple or complicated they are. Simple tics involve only one muscle group or are sounds, while complex tics involve multiple muscle groups or words or phrases. Common simple motor tics include blinking, twitching, jerking or kicking; common

simple vocal tics include whistling, barking or coughing. Complex motor tics include motions like hopping or twirling, and in rare cases (>10%) they can involve obscene gestures (Copropraxia). Imitation of others' movements, called Echopraxia, is another type of complex motor tic. Complex vocal tics include saying a phrase out of context ("oh boy", "you know") and may sometimes include coprolalia- socially inappropriate words or phrases (>10%). Echolalia, repeating others' sounds or speech and palilalia, repeating one's self, are also examples of complex vocal tics.

## How do I tell the difference between a tic and a chosen behaviour or action?

It can be hard to identify whether a movement or sound is a tic or a chosen, purposeful behaviour. To the casual observer, tics may look like they are intentional, even though they are not. Usually tics appear to be out of context or nonsensical, but not always.

## How do you know if you have TS?

Unlike many other medical conditions, there is no test or scan for detecting TS. Instead, doctors diagnose the condition by observing whether a person's symptoms match a set of characteristics known as diagnostic criteria. These criteria include:

- Presence of at least one vocal tic and at least two motor tics
- Presence of tics for more than one year
- Presence of tics before the person turned 18

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Please, contact us:

Visit Tourette Canada's website:

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# TOURETTE SYNDROME

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Questions & Answers  
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### What Is It?

Tourette Syndrome (TS) is a brain-based condition that causes those who have it to make involuntary sounds and perform involuntary movements called tics. TS is genetic, meaning it passed from parent to child. Though incurable, it is not degenerative and it does not affect life expectancy or intelligence. More often than not, people with TS have one or more other conditions such as Attention Deficit/Hyperactivity Disorder, Obsessive Compulsive Disorder or mood disorders. These other disorders are called co-morbid or associated conditions. TS can also appear on its own. This is commonly called TS-only.

### What are tics?

There are two types of tics: motor tics, which include movements or gestures, and vocal tics, which include words, phrases and sounds. A person must have both motor and vocal tics in order to be diagnosed with TS. While some people manage to suppress their tics for anywhere from seconds to hours at a time, like the urge to sneeze or cough, tics must eventually be performed or “let out”. Even though they may look like they are on purpose, tics are involuntary or unintentional.

### If you have only a few vocal or motor tics, does that mean you have TS?

While everyone with TS has tics, not everyone with tics has TS. There are many types of tic disorders. If a person has tics they might meet the diagnostic criteria for a different tic disorder than TS like Persistent Motor Tic Disorder or Persistent Vocal Tic Disorder. Tic disorders are extremely common; they affect 6-10% of population.

### What is TS+?

Many other conditions, including Obsessive Compulsive Disorder, result from similar genetic factors as TS. As a result, it is extremely common for someone with TS to have one or more other conditions as well. In fact, more people with TS have additional conditions than not. These common co-occurring conditions include Attention Deficit Hyperactivity Disorder, Depression, Sensory Processing Dysfunction, Learning Disabilities, Panic Disorder, and Sleep Disturbances among others. Rather than listing several conditions, many people opt for the shorter name, TS+, although this is not a diagnostic term.

### How many people have TS?

Although it was once considered rare, TS actually is a common medical condition. Approximately 1% of the population has TS; however, depending on the study, the prevalence rate can be as high as 3.8%. Studies also report that up to 24% of pre-school children develop tics during childhood at some point. TS affects all ethnic groups, although it is much less common in Sub-Saharan black Africans and individuals of African descent than it is in other groups. While TS affects three to four times as many boys as girls, both boys and girls can have mild or severe symptoms.

### How does someone get TS?

TS is a genetic condition, meaning it is passed on from parent to child. This does not mean that if someone has TS their child will also be born with condition. Studies indicate that a person with TS has between a 5-15% chance of having either a child, sibling or parent with the condition. Recent research suggests that environmental factors, such as smoking while pregnant or low birth weight, may also contribute to a person being born with TS. However, the results of studies on these factors are not entirely consistent with one another. More research is needed to fully understand how TS is passed on. Scientists originally thought that TS was carried in a single gene, but it is now believed that TS is caused by problems in a few genes or possibly tens of hundreds of genes in combination.

### How is TS treated?

In cases where symptoms are mild, treatment for TS is usually limited to education. Medical treatment is considered when symptoms cause psychological distress or physical pain, or interfere with social, academic or professional functioning. While there is no cure for TS, behavioral therapy or medication can help with symptom management. There are a number of different medications that may be prescribed to an individual with TS. Not every medication is effective for everyone and it may take some time to find the right medication and dosage level.

### Where can I go for help or more information?

Visit Tourette Canada's website:

**[www.tourette.ca](http://www.tourette.ca)**

or call us toll free:

**1-800-361-3120**



Tourette Canada, formerly known as the Tourette Syndrome Foundation of Canada, is a registered (11926 7862 RR0001) charitable organization dedicated to improving the lives of Canadians affected by Tourette Syndrome and associated conditions. We're national in scope and volunteer based. We work to ensure that high-quality, TS-related programs and services are available throughout Canada, and strive to be an outstanding source of support, resources, education and advocacy for the TS community.