Autism is a disorder that has affected many people worldwide characterized by distinctive behavior characteristics, adversities in social interaction, and difficulties with verbal and non-verbal communication.

**Spectrums**
The spectrums of Autism are divided into categories based on the neurological functioning of the brain after birth. It has been presented that synapses in the brain of an autistic patient have weaker transfers when trying to relay messages to other cells. The individual is placed on either the high or low functioning end of Autism, based upon the severity and characteristics they display.

**Theoretical Etiologies**
Although there have been many theories for the cause of Autism, the exact etiology remains unknown. Some implications for the cause of Autism include genetics, vaccines, environmental agents, diet, and the events that occur pre-natal, peri-natal, and post-natal. Chronic inflammation, oxidative stress, and toxicity affect autistic individuals on all spectrums.

**Mitochondrial Dysfunction and General Anesthesia**
Mitochondrial dysfunction and defects in oxidative metabolism are known characteristic features in Autism. This dysfunction is not acquired from genetics, but from internal and external irritants. Mitochondria are the main source of cellular energy metabolism for the central nervous and muscular systems. Since general anesthesia targets the nervous and muscular systems, and mitochondrial dysfunction causes decreased metabolic activity in both systems; the autistic patient with this dysfunction may have serious disturbances metabolizing general anesthesia.

**Dental Care for the Autistic Patient**
Obsessive routines, repetitive behaviors, unpredictable body movements and self-injurious behavior are all characteristics that the dental staff must be aware of in order to treat the autistic patient effectively. The early age introduction to the dental office and dental personnel has encouraged the autistic patient to be more accepting to dental care because patients with Autism have a variety of sensory processing difficulties. Grittiness of prophylaxis paste, x-ray materials, gloved hands, touching the inside of the mouth and face are a few examples of dental stimuli that can cause negative and heightened reactions for the autistic patient.

**TEACCH Method**
With the increased behavioral disruptions that an autistic patient may exhibit, dental personnel have used restraints, sedation, and general anesthesia to complete the patients dental procedures. The TEACCH method is a professional teaching method for dental personnel and a clinical service for patients and parents of a child with Autism. The goal of the TEACCH method is to improve the quality of life for the autistic patient and their families by having them introduced to the dental office while using a non-invasive method. Temporal and spatial organization through visual pedagogy is the way this method is structured.

**Conclusion**
Because autistic patients have inclined and sensory processing difficulties, it is imperative that all dental personnel be educated on the characteristics and features of the autistic patient. By using the TEACCH method, dental staff will be able to use a non-invasive approach to treat the autistic patient using visual pedagogy.