OASIS · AT A GLANCE

Aging with Autism: What Happens in the 40s, 50s, and Beyond

The first generation diagnosed with autism in childhood is now reaching middle age, and almost no one can tell you what to expect. You're not behind on research everyone else has read. It barely exists yet.

BY JIM PALASTY · 11 MIN READ · ALMOST NO RESEARCH EXISTS ON WHAT COMES NEXT

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EMERGING HEALTH CONCERNS AS AUTISTIC ADULTS ENTER THEIR 40S AND 50S

Early-onset dementia risk, cumulative antipsychotic effects, osteoporosis, changing seizure patterns, mobility decline, dental deterioration, and vision or hearing changes that go undetected in nonverbal adults.

How it works

THREE STEPS

STEP 1

A generation reaches uncharted territory

Adults diagnosed with autism in childhood decades ago are now aging into their 40s and 50s with little research to guide their care.

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STEP 2

Parents are aging in parallel

As the autistic adult reaches midlife, their parent caregivers are often already in their 70s or 80s, facing their own health decline simultaneously.

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STEP 3

Screening has to happen deliberately

Nonverbal or minimally verbal adults are at real risk of undetected vision, hearing, or cognitive decline unless someone screens for it proactively.

Health screening priorities for aging autistic adults

Cognitive and dementia screening	Baseline assessment, then periodic reassessment over time
Medication review	Cumulative effects of long-term antipsychotic use
Bone density	Osteoporosis risk screening, especially with limited mobility
Vision and hearing	Deliberate screening, since self-report often isn't possible
Dental health	Deterioration that can go unnoticed without regular exams

THE HEARING LOSS NOBODY NOTICED FOR TWO YEARS

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Roger's brother had grown quieter and more withdrawn over roughly two years, a change everyone attributed to normal aging and a stable, if declining, temperament. A comprehensive screening, prompted mostly because Roger wanted a baseline on file, found significant hearing loss that had likely been developing the entire time. Hearing aids didn't reverse two years of isolation, but they changed what the next chapter looked like.

TWO YEARS OF QUIET HAD A CAUSE THE WHOLE TIME. NOBODY THOUGHT TO CHECK UNTIL A BASELINE SCREENING FINALLY ASKED THE QUESTION.

What matters, at a glance

Early-onset dementia risk

Some research suggests elevated dementia risk in aging autistic adults, though the evidence base remains genuinely limited.

Cumulative medication effects

Decades of antipsychotic use can carry long-term physical costs that deserve regular, deliberate review, not just symptom management.

The double aging problem

As the autistic adult enters midlife, primary caregivers are often already elderly, facing their own health decline at the same time.

Vision and hearing changes go undetected

A nonverbal adult can't report gradual sensory decline. Only deliberate screening catches it before it significantly affects quality of life.

Mobility and bone health

Osteoporosis risk and declining mobility both deserve proactive attention well before a fall or fracture forces the issue.

Seizure patterns can change with age

Adults with a seizure history may see their pattern shift in midlife, requiring reassessment rather than assuming stability.

BRING THESE · CHECK AS YOU GO

- [ ] A scheduled comprehensive baseline health screening
- [ ] A current medication list for cumulative-effect review
- [ ] A successor caregiver plan, even a preliminary one
- [ ] Specific requests for vision and hearing evaluation
- [ ] Notes on any subtle changes in mobility, behavior, or engagement

YOUR MOVE

When you're planning for your family member's aging years, here is where to start

1. Schedule a comprehensive baseline health screening this year.
2. Ask specifically about vision and hearing screening, not just general checkups.
3. Request a medication review focused on long-term cumulative effects.
4. Ask about bone density screening if mobility has declined at all.
5. Plan for your own aging in parallel, not as a separate, later problem.
6. Build a successor caregiver plan now, while you have the capacity to shape it.

Nobody wrote the guide for this generation yet. That doesn't mean you're behind. It means you're early, and early means asking the questions before symptoms force the answer.

AGING AND HEALTH SCREENING RESOURCES

The National Institute on Aging (nia.nih.gov) funds and publishes research on aging with intellectual and developmental disabilities, an emerging but growing area of study.

AASPIRE (aaspire.org) conducts autism-specific health research, including work relevant to aging autistic adults and their long-term care needs.

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ABOUT THE AUTHOR

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Jim Palasty is the founder of OASIS for Autism and a single father of an adult autistic daughter in Michigan.