

How are tics and Tourette's treated?

The best treatments for tic disorders are a form of therapy called **habit reversal training (HRT)** and a newer extension of HRT called **comprehensive behavioral intervention for tics (CBIT)**.

Here's how HRT works:

- Kids will learn to recognize the feeling that happens right before a tic.
- They then learn to develop a “competing” response — something to do instead that prevents the tic. For example, a child whose tic is clearing their throat might try taking a deep breath instead.

CBIT combines HRT with other tools to help kids understand and reduce tics, including identifying triggers, relaxation training, and rewards for practicing skills. In some cases, your child's doctor may suggest combining therapy with medication.



How parents can help

Parents are often more concerned than their child about tics. If parents draw attention to a tic that a child isn't worrying about, they can inadvertently make the child feel self-conscious and concerned, which in turn can make the tic worse. The best thing parents can do is to avoid drawing attention to the tic if it's not causing the child distress.



For more resources on tics and Tourette's in English and Spanish, visit the Child Mind Institute's Family Resource Center at childmind.org/resources

The Child Mind Institute is dedicated to transforming the lives of children and families struggling with mental health and learning disorders by giving them the help they need to thrive. We've become the leading independent nonprofit in children's mental health by providing gold-standard evidence-based care, delivering educational resources to millions of families each year, training educators in underserved communities, and developing tomorrow's breakthrough treatments.

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Tics and Tourette's Syndrome in Kids: Quick Facts

Symptoms of tics and Tourette's and tips for supporting children and teenagers with tic disorders



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What are tics?

Tics are sudden, rapid, recurring movements or sounds that are unintentional. Most are “simple” tics, meaning one movement or sound, like a squint, a quick nod of the head, or a cough. Some, called “complex” tics, are combinations of movements or sounds, like reaching and grabbing something, repeating words, or a blink followed by throat clearing. The good news is that most tics go away on their own, and those that don’t are usually highly treatable.

Some common simple tics include:

Motor tics (movements)

- Eye blinking
- Lip biting
- Frowning
- Twitching

Vocal tics (sounds)

- Clearing the throat or coughing
- Humming
- Sniffing, snorting, or squealing
- Repeating words
- Barking

Who develops tic disorders?

Tics can occur at any age, but they most commonly emerge during childhood or early adolescence, and they may be hereditary. Tics often appear in children who also have OCD or ADHD. They are also an uncommon but possible side effect of some medications.

What are the types of tic disorders?

There are three kinds of tic disorders:

Provisional tic disorder: This is the diagnosis most children will receive if they have a simple motor or vocal tic that’s lasted more than a month but less than a year. These usually stop on their own, though the longer they persist, the more likely it is they will become chronic.

Chronic motor or vocal tic disorder: This is when a child’s motor or vocal tics have persisted regularly for over a year. Kids who have a chronic tic disorder usually need clinical help.

Tourette’s syndrome: Although it is the best-known tic disorder, Tourette’s is not actually the most common. Kids with Tourette’s have chronic motor and vocal tics and usually need clinical help.



Can tics be controlled?

Tics are what experts call “un-voluntary,” meaning that although kids aren’t controlling the motions or sounds, with help they can learn to control them. Kids may describe feeling what’s called a “premonitory urge” before a tic, which is an uncomfortable sensation that drives, and is relieved by, the tic.

How are tic disorders diagnosed?

If you think your child has developed a tic, a pediatrician can confirm if what you’re seeing is, indeed, a tic. They will ask:

- What do their tics look or sound like?
- How long has this been going on?
- How frequently does the child experience tics?
- Do they cause distress or interfere with the child’s daily life?

If the tics have persisted for less than a year and do not cause problems for the child, they will likely recommend that parents watch and wait before any intervention is considered. It’s only when tics become chronic and impairing that treatment is needed. In that case, your pediatrician can offer a referral to a neurologist or a psychiatrist. These doctors will want to rule out other possible issues that could be causing the tics.