NeuroFX
Changing Minds

AUTISM FOUNDATIONS · 2.4

Sensory Processing in Autism: The Eight Senses, Not Five

Autistic sensory processing covers eight senses, not five. This summary walks through the full picture, including vestibular, proprioception and interoception, and what it means in daily life.

FOR
Adults and parents

AUDIENCE AGE
All ages

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PART OF
The NeuroFX resource library

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IN SUMMARY

Sensory Processing in Autism: The Eight Senses, Not Five

The eight senses

- **The five everyone learned about: sight, hearing, smell, taste, touch.** Autistic processing in these can be hyper-sensitive, hypo-sensitive, or seeking. Fluorescent lights, background noise, perfume, food textures and clothing labels are common difficulties.
- **Vestibular: balance and motion.** Some autistic people seek vestibular input through spinning, rocking or swinging. Others find it intensely uncomfortable, particularly lifts, escalators and sudden direction changes.
- **Proprioception: where the body is in space.** Often less reliable in autistic people. Bumping into furniture, difficulty judging force when handling things, and finding deep pressure regulating are all part of this.
- **Interoception: the internal state of the body.** Hunger, thirst, tiredness, the need for the toilet, and the bodily aspect of emotion. Often hypo-reactive in autism, with wide knock-on effects for self-care and emotional regulation.

What it looks like in real life

- **Sensory load builds up across the day.** What was tolerable in the morning can be unmanageable by the evening. A meeting that went fine at 10am may need an hour of silence afterwards to recover.
- **Missing hunger, thirst and illness signals.** Many autistic adults describe years of physical symptoms that did not have an obvious medical cause. Often the body's signals are not being picked up clearly, rather than there being a hidden illness.
- **Coping at school or work, then collapsing at home.** A common pattern, particularly in children and masked adults. Holding things together in public takes effort, and the recovery often happens in private, sometimes loudly.
- **Sensory differences are part of the neurology.** Strong food preferences, clothing aversions and lighting intolerance are not preferences someone can be talked out of. They reflect how the autistic nervous system processes sensory input.

How we can help

- **Build sensory adjustments in early.** Quiet space, noise-cancelling headphones, comfortable clothing, predictable lighting, and regular eating regardless of perceived hunger. These are among the cheapest and highest-impact interventions in autism.
- **Take interoception seriously.** Eating to a clock rather than to hunger, scheduled water, regular check-ins on body state. Externalised routines help where the internal signals are unreliable.
- **Assessment that maps the sensory profile.** NeuroFX autism assessments include a sensory history and profile because it is one of the most clinically useful pieces of information for planning support.
- **Adjust the environment as much as the person.** Sensory adjustments at home, school and work tend to have a bigger impact than asking the person to tolerate more sensory load. The aim is good day-to-day fit between the person and their environment.

WHEN TO SPEAK TO A PROFESSIONAL

Speak to your GP if sensory differences are meaningfully affecting your daily life or your child's. NeuroFX offers private autism assessment and combined ADHD and autism assessment from our Bedford clinic. Seek same-day help via 111 (or 999 in an emergency) for any mental health crisis.

SOURCES

DSM-5-TR; Dunn 2001; Robertson & Baron-Cohen 2017 (Nat Rev Neurosci); Schauder et al. 2015; DuBois et al. 2016; NICE CG142

NEXT STEPS

Speak to NeuroFX

Private ADHD and autism assessment for adults and children aged 6 and upwards. CQC-registered. Bedford Consulting Rooms, 4 Goldington Road, Bedford MK40 3NF.

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