

Natural Therapies for Autism

By: Dr. Ted Suzelis, N.D.

Autism is a developmental disorder that affects over 500,000 people in the United States. In the late 1980's, 4.5 new cases were diagnosed for every 10,000 live births and in 2001 the number jumped to 45-68 new cases for every 10,000 live births. This is an increase of 1000% to 1500% in only 15 years.

Autism interferes with a person's ability to communicate with and relate to others. What is commonly called autism is actually a group of disorders that are categorized as Autistic Spectrum Disorders (ASD). The main characteristics of ASD are a profound failure to develop social relationships, language disorder with impaired understanding, repeating of words, phrases or sounds, and talking about oneself in the third person, rituals and compulsive phenomena, and a general retardation in intellectual development in most cases.

To date, there is no clear cut cause of autism, but there seems to be a genetic predisposition coupled with different environmental factors that causes a child to develop autism. The rest of this article will be devoted to discussing some of the most prominent potential factors involved with developing autism.

Many researchers are starting to view autism as a digestive disorder that is causing the brain to develop abnormally. One of the main issues is known as intestinal hyperpermeability or "leaky gut." This is when the large intestine allows larger than normal, potentially toxic molecules into the bloodstream. In autism there seems to be a wide variety of factors that may play into developing intestinal hyperpermeability. These factors include repeated use of antibiotics, food sensitivities, a possible reaction to childhood vaccinations, and many other factors.

Sensitivities to certain foods may trigger autistic symptoms in some children. These food sensitivities may vary in different children, but sensitivities to wheat and dairy are widely seen in autistic children. It is common in many other neurodevelopmental disorders, such as attention deficit disorder, for children to be sensitive to a wide variety of common foods. Many of the common allergy symptoms such as stuffiness, eczema, wheezing, and itching may not be present, yet cognition and behavior remain affected.

Along the same line as food sensitivities is a proposed theory that has proven to be a monumental breakthrough in the treatment of autism. The "Opioid Excess Theory" links autistic symptoms to the improper breakdown of gluten (from wheat and other grains) and casein (from dairy products). When gluten and casein are not properly broken down and the child has intestinal hyperpermeability, this allows for opium-like molecules called glutemorphins and casomorphins to enter the bloodstream and reach the brain. These molecules can cause effects similar to opium on the brain, causing the child to have symptoms similar to a "drug trip" if gluten and casein are eaten. Some of these symptoms are extreme self-absorbency, insecurity, staring at an object at length, paranoia, and sensory overstimulation. The elimination of gluten and casein from the diet of autistic children has shown to improve the symptoms in much as 80% of these children, if the diet is followed strictly.

As many as 45% of autistic children have minor physical anomalies of the ear which could predispose them to developing chronic ear infections. Many parents of autistic children admit to their child having chronic ear infections and using multiple courses of antibiotics to treat the infection. During the same time the antibiotic is treating an ear infection, it is also killing beneficial bacteria in the intestines, such as *Lactobacillus acidophilus* and *Bifidobacterium lactis*. These bacteria are needed to

assist in digesting food and keeping fungus, such as *Candida albicans* from overgrowing in the intestines. When *Candida albicans* overgrowth is present, it can lead to intestinal hyperpermeability.

There is some evidence that the measles, mumps and rubella (MMR) vaccination may be linked to some children developing autism. The debate on this issue started after some parents noticed that their children were developing autism soon after their 12 to 18 month MMR vaccination. Some also site that the sharp increase in the number of cases of autism in the USA closely correlates with the introduction of the MMR vaccination in the early 1980's. This is all circumstantial evidence, but has led to recent research that may show a stronger link to the vaccination. Dr. Wakefield, a British gastroenterologist, found that a percentage of autistic children have an active subclinical measles infection in their small intestine. Of those that have this infection, DNA testing shows that it is of the same measles strain as is used in the MMR vaccination.

Another major issue in the search for causes of autism is mercury toxicity. Current knowledge on mercury poisoning and the symptoms that manifest from it could cause a child to exhibit signs of autism. When looking for the cause of mercury toxicity in children, one needs to revisit the vaccination issue. Many vaccinations contain a preservative called thimerosal, which is 50% mercury by weight and is high enough in concentration to cause problems with small children. Thimerosal was introduced into vaccinations in the 1930's, which was the same time that the first cases of autism were identified. The rapid increase in the number of cases of autism also coincides with the rise in use of the DPT vaccination, which contains thimerosal. There are at least 4 different times in the first 15 months of life that a child, following the recommended vaccination schedules, could receive mercury at 30-78 times higher than the EPA recommended safe level. In July 1999, drug manufacturers were asked to remove thimerosal from vaccinations by the CDC and FDA. Drug manufacturers have been slow to make this change and children are still receiving most of their vaccinations with this preservative.

The search for a cause to autism has led researchers down many varied paths. It is likely that more than one of the causes listed in this article are responsible for a genetically susceptible child to develop autism. In Part II, many of the natural therapies commonly used to treat autism will be discussed.

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