AUTISM
THE EPIDEMIC
MAGDALENA CUBALA-KUCHARSKA
M.D.
WWW.DRCUBALA.COM
TWENTY YEARS AGO AUTISM AFFECTED 1:200 CHILDREN

TODAY, IT AFFECTS 1:100 CHILDREN
AUTISM PREVALENCE HAS INCREASED DRAMATICALLY OVER PAST 20 YEARS
IT HAS INCREASED AN ESTIMATED 600%
ASA CALCULATES THAT THE ANNUAL COST OF AUTISM WILL INCREASE TO $200-400 BILLIONS IN 10 YEARS (2003)
Autism has lifetime consequences, with potentially a range of impacts on the health, wellbeing, social integration and quality of life of individuals and families. Many of those impacts are economic. This study estimated the costs of autism spectrum disorders (ASDs) in the UK. Data on prevalence, level of intellectual disability and place of residence were combined with average annual costs of services and support, together with the opportunity costs of lost productivity. The costs of supporting children with ASDs were estimated to be £2.7 billion each year. For adults, these costs amount to £25 billion each year. The lifetime cost, after discounting, for someone with ASD and intellectual disability is estimated at approximately £1.23 million, and for someone with ASD without intellectual disability is approximately £0.80 million.
WHAT IS AUTISM?

DEFINED BY LEO KANNER
IN 1943 AS AN IMPAIRMENT
OF SOCIAL INTERACTION
AND AN EMOTIONAL BOND

Blame it on Mom

The term refrigerator mother was coined around 1950 as a label for mothers of children diagnosed with autism. These mothers were often blamed for their children's atypical behaviors, which included rigid rituals, speech difficulty, and self-isolation.
AUTISM, 3-4x3RD MOST FREQUENTLY OCCURING PSYCHIATRIC DISEASE

10-17% ANNUAL GROWTH

DMS IV IMPAIRMENT OF A SOCIAL INTERACTION

IMPAIRMENT OF COMMUNICATION (LANGUAGE)

REPETITIVE PATTERNS OF BEHAVIOR

www.autreat.com/dsm4-autism.html
MOST CHILDREN WITH AUTISM DEVELOPS NORMALLY, THEN THEY REGRESS AT THE AGE OF 2-3 Y
„I am a mother of a 3 years old little boy who regressed into autism. My child used to be so happy, so caring - now he wouldn’t understand his name, he lost his speech, he screams all the time, he suffers and I do not know how to help him. He does not understand when I talk to him. His life changed to hell and so did mine”
MOST RESEARCHERS AND CLINICIANS DID NOT LOOK FOR "MEDICAL" ANSWERS TO AUTISM BECAUSE THEY BELIEVED IT A MEDICALLY UNTREATABLE BRAIN DISORDER
DEFEAT AUTISM NOW!
DAN!

BERNARD
RIMLAND
THE GREATEST DISCOVERY OF MY GENERATION IS THAT A HUMAN BEING CAN ALTER HIS LIFE BY ALTERING HIS ATTITUDE OF MIND

WILLIAM JAMES (1842-1910)
Interview with Dr. Martha Herbert—
Autism: a brain disorder or a disorder that affects the brain?

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AUTISM IS A BRAIN DEVELOPMENT DISORDER CHARACTERIZED BY IMPAIRED SOCIAL INTERACTION AND REPETITIVE BEHAVIOR

„AUTISM” IS JUST A DESCRIPTION OF SYMPTOMS NOT A MEDICAL DIAGNOSIS
DIAGNOSIS IS THE IDENTIFICATION OF NATURE OF ANYTHING, EITHER BY PROCESS OF ELIMINATION OR OTHER ANALYTICAL METHODS.

DIAGNOSIS IS USED TO DETERMINE THE CAUSES OF SYMPTOMS, MITIGATIONS FOR PROBLEMS OR SOLUTIONS TO ISSUES.
Autism is not a homogenous disease. Autism can be a mask for various genetic and neurological disease. Autism is multifactorial. There is a spectrum - ASD. Autism can be a mask for various genetic and neurological disease.
AUTISM IS MULTIFACTORIAL ENVIRONMENTAL DISEASE WITH STRONG EPIGENETIC INFLUENCE

SO FAR SCIENTISTS FAILED TO FIND A SINGLE „AUTISM GENE”
WHERE IS THE PROBLEM?

Brain?

GUTS?

Liver?

Immune system?

Kidneys?
MOST FREQUENTLY OCCURRING MEDICAL PROBLEMS IN ASD

INFLAMMATION OF GI TRACT/
LEAKY GUT

IMPAIRED DETOXIFICATION = INTOXICATION
MOST FREQUENTLY OCCURRING MEDICAL PROBLEMS IN ASD

CHRONIC INFLAMMATION - BACTERIAL, VIRAL, FUNGAL INFECTIONS INCREASED

INCREASED NITROSATIVE/OXYDATIVE STRESS

IMPAIRED IMMUNE SYSTEM
MOST FREQUENTLY OCCURRING MEDICAL PROBLEMS IN ASD

MITOCHONDRIAL DISEASES

DISRUPTED METABOLIC PATHWAYS
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT

DETOXIFICATION
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT

DETOXIFICATION

REPLENISHMENT = SUPPLEMENTATION
INCLUDING METABOLIC BYPASS AND
MITOCHONDRIAL SUPPORT
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT

DETOXIFICATION

REPLENISHMENT = SUPPLEMENTATION including metabolic bypass and mitochondrial support

IMMUNOMODULATION + TREATMENT OF CHRONIC INFECTIONS
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT

DETOXIFICATION

REPLENISHMENT = SUPPLEMENTATION
INCLUDING METABOLIC BYPASS AND MITOCHONDRIAL SUPPORT

IMMUNOMODULATION + TREATMENT OF CHRONIC INFECTIONS

REGENERATION
FIVE LEVELS OF THE TREATMENT OF AUTISTIC PATIENTS

TREATMENT OF THE GUT

DETOXIFICATION

REPLENISHMENT = SUPPLEMENTATION INCLUDING METABOLIC BYPASS AND MITOCHONDRIAL SUPPORT

IMMUNOMODULATION + TREATMENT OF CHRONIC INFECTIONS

REGENERATION
TREATMENT, TO BE EFFECTIVE, MUST BE PARALLEL.
TREATMENT OF THE GUT

INFLAMMATION OF THE GI TRACT

CAN BE A CAUSE OF AGGRESSIVE BEHAVIOR OR AUTOAGGRESSION, DUE TO VISCERAL PAIN
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION

THE WALL OF THE INTESTINE IS LOOSING INTEGRITY
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION

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THE WALL OF THE INTESTINE IS LOOSING INTEGRITY

MORE UNDIGESTED PROTEINS CAN GET TO THE BLOOD
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION

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UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION

THE WALL OF THE INTESTINE IS LOOSING INTEGRITY

MORE UNDIGESTED PROTEINS CAN GET TO THE BLOOD

THESE PROTEINS ARE STIMULATING IMMUNE RESPONSE AND ALLERGY
UNDIGESTED PROTEINS ARE CAUSING GI INFLAMMATION

THE WALL OF THE INTESTINE IS LOOSING INTEGRITY

MORE UNDIGESTED PROTEINS CAN GET TO THE BLOOD

THESE PROTEINS ARE STIMULATING IMMUNE RESPONSE AND ALLERGY
Undigested proteins are causing GI inflammation.

The wall of the intestine is losing integrity.

More undigested proteins can get to the blood.

Allergy and impaired immune system are resulting in a gut wall being more leaky.

These proteins are stimulating immune response and allergy.
Undigested proteins are causing GI inflammation.

The wall of the intestine is losing integrity.

More undigested proteins can get to the blood.

Allergy and impaired immune system are resulting in a gut wall being more leaky.

These proteins are stimulating immune response and allergy.

niedziela, 12 czerwca 2011
Autistic disorder and gastrointestinal disease

Karoly Horvath, MD, PhD,* and Jay A. Perman, MD†

Autistic disorder is a pervasive developmental disorder manifested in the first 3 years of life by dysfunction in social interaction and communication. Many efforts have been made to explore the biologic basis of this disorder, but the etiology remains unknown. Recent publications describing upper gastrointestinal abnormalities and ileocolitis have focused attention on gastrointestinal function and morphology in these children. High prevalence of histologic abnormalities in the esophagus, stomach, small intestine and colon, and dysfunction of liver conjugation capacity and intestinal permeability were reported. Three surveys conducted in the United States described high prevalence of gastrointestinal symptoms in children with autistic disorder. Treatment of the digestive problems may have positive effects on their behavior.

Recent epidemiologic data indicate that autistic disorder (AD), as defined by the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV) criteria, affects as many as 1 of 250 children [•1]. This represents significant change since the early 1990s when autism was diagnosed in 1 of 1000 to 2000 children. A gender difference is seen in AD; approximately 80% of the children are boys. Most of the recently diagnosed cases belong to the “late onset” group: normal development in the first year of life followed by regression in social and communication skills.

The focus in autism research has expanded from psychological studies to exploration of the biologic basis of this pervasive developmental disorder. Although the number of published metabolic, genetic, immunologic, and neuroimaging studies has significantly increased, we are still
Autism spectrum disorders (ASDs) are a group of developmental disorders characterized by impairments in social interaction; varying degrees of verbal and nonverbal communication deficits; and restricted, repetitive, and stereotyped patterns of behavior and interests. The term includes autistic disorder, Asperger disorder, and pervasive developmental disorder, not otherwise specified (PDD-NOS). Approximately 1 of every 150 children in the United States has an ASD. In these children, a variety of gastrointestinal dysfunctions and associated symptoms have been reported frequently.

Gastrointestinal problems in individuals with ASDs can be challenging to evaluate. Clinical practice guidelines exist for the evaluation and management of ASDs by primary care and other physicians responsible for the care of individuals with ASDs but do not include routine consideration of potential gastrointestinal and other medical problems. Many individuals with ASDs are nonverbal or minimally verbal and cannot express pain or discomfort through speech. As a result, they may not communicate information about their symptoms as clearly as their typically developing peers. Even individuals with ASDs who acquire verbal communication skills may have difficulty describing subjective experiences or symptoms.
DYSBIOSIS
DYSBIOSIS

SYMBIOTIC (BENEFICIAL) MICROORGANISMS ARE REPLACED BY INFECTIOUS AGENTS - BACTERIA, YEASTS, PARASITES
DYSBIOSIS

SYMBIOTIC (BENEFICIAL) MICROORGANISMS ARE REPLACED BY INFECTIOUS AGENTS - BACTERIA, YEASTS, PARASITES

OPPORTUNISTIC MICROORGANISMS SEEMS TO BE A KEY ISSUE
GUT TREATMENT

- ERADICATE MICROORGANISMS
- FIGHT WITH CONSTIPATION
- NORMALIZE BOWEL MOVEMENTS
- SEAL THE LEAKY GUT
- REPLENISH

SUPPLEMENTS

- CAPRYLIC ACID, BERBERINE, UVA URSI
  - NO GRAPEFRUIT!!
- CASCARA SAGRADA
- SLIPPERY ELM
- TRIPHALA
- INTESTAMINE
- PROBIOTIC BACTERIA ENZYMES
DIET

CASEIN FREE
GLUTEN FREE?
INDIVIDUAL!

REMEMBER
ALWAYS!!!
CHECK FOR CELIAC ANTIBODIES
PRIOR TO REMOVING GLUTEN FROM
A DIET
LIVER DETOXIFICATION

IMPAIRED LIVER DETOXIFICATION LEADING TO ACCUMULATION OF EXO AND ENDOGENOUS TOXINS
WPŁYW ZABURZEŃ DETOKSYFIKACJI WĄTROBOWEJ NA FUNKCJE MÓZGU
IMPAIRED DETOXIFICATION OF THE LIVER
IMPAIRED DETOXIFICATION OF THE LIVER

INTOXICATION WITH ENDOTOXINS - ENDOGENOUS ALCOHOLS, AMMONIA ETC
IMPAIRED DETOXIFICATION OF THE LIVER

INTOXICATION WITH ENDOTOXINS - ENDOGENOUS ALCOHOLS, AMMONIA ETC

EXCESSIVE REACTION TO DRUGS, FOOD ADDITIVES, ETC

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IMPAIRED DETOXIFICATION OF THE LIVER

INTOXICATION WITH ENDOTOXINS - ENDOGENOUS ALCOHOLS, AMMONIA ETC

EXCESSIVE REACTION TO DRUGS, FOOD ADDITIVES, ETC

IMPAIRED DETOXIFICATION OF XENOTOXINS, PESTICIDES, DIOXINS
IMPAIRED DETOXIFICATION OF THE LIVER

INTOXICATION WITH ENDOTOXINS - ENDODIONOUS ALCOHOLS, AMMONIA ETC

EXCESSIVE REACTION TO DRUGS, FOOD ADDITIVES, ETC

IMPAIRED DETOXIFICATION OF XENOTOXINS, PESTICIDES, DIOXINS

ACCUMULATION OF HEAVY METALS IN THE SYSTEM
THE BRAIN OF AUTISTIC CHILDREN IS CONSTANTLY ATTACKED BY NEUROTOXINS LIKE AMMONIA, ENDOMORPHINES AND FALSE NEUROTRANSMITTERS
Ammonia (NH3), Nitric Oxide (NO) and Nitrous Oxide (N2O) – The connection with Infantile Autism

Cohen (2004) has illustrated that extremely high gamma-aminobutyric acid (GABA) levels in the urine and blood and high plasma ammonia (NH3) were observed for an autistic male child diagnosed with infantile autism. Gamma-aminobutyric acid (GABA) is involved in an array of neurological disorders. Cohen (2004) also theorized that high plasma and urine GABA levels is possibly the root cause for the developmental disorder of autism. **Genes for at least three of the gamma-aminobutyric acid GABA-Receptor subunits (Beta 3, Alpha 5 and Gamma 3) lie in the chromosome 15q11-q13 region.** Recently, Shao et al. (2003) using fine mapping to chromosome 15q11-q13 confirmed that the surrounding area of the gamma-aminobutyric acid (GABA)-Receptor Beta 3 subunit gene (GABRB3) is implicated with autistic disorders. Their results, along with the results from Cohen (2004), strengthen the evidence for a link between autism and GABA. **Gamma-aminobutyric acid (GABA)** is a major inhibitory neurotransmitter of the mammalian brain and serves about one-third of the brain neurons (Belmonte et al., 1995; Cohen, 2004; Piven et al., 1997). The enzyme responsible for GABA’s catabolism (breakdown in the liver during regulation) is GABA-Transaminase. Overall brain size with significantly smaller corpus callosum for autistic patients through MRI (Magnetic Resonance Imaging) has been described by Cohen (2004). It has been suggested that the narrowing or thinning of the corpus callosum is due to the absence of axons rather than the absence of myelin (Belamone et al., 1995; Piven et al., 1997). This is because normal myelination is observed. Cohen (2004) illustrated that the corpus callosum in the brain is responsible for intelligence, language and speech and that GABA is responsible for axon(s)-to-oligodendrocyte signalling in the corpus callosum. When this area of the brain is damaged cognitive disorders and language delays are usually found. **The finding that elevated levels of GABA are present could explain why autistic features (such as self-stimulatory behavior and language delays, etc.) are present. This is possibly due to abnormal development of the axon(s) in the corpus callosum.**
KUBA

HIGH AMMONIA 218 ug/l

(confirm)

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CONFIRMED
An elevated blood ammonia level, although it may be secondary, must never be ignored. Moreover, since the normal ureagenic capacity of the liver is so great in relation to physiologic load, such a finding points directly to an impairment of the urea cycle in the liver.

Clinical signs of hyperammonamemia occur at a concentration >60 micromol/l.

Cohn RM, Roth KS, "Hyperammonemia, bane of the brain" Department of Pediatrics, Children's Hospital of Philadelphia and University of Pennsylvania School of Medicine, Philadelphia, PA, USA
DYSBIOTIC BACTERIA

CITROBACTER
KLEBSIELLA OXYTOCA

STREPS
STHAPHYLOCOCCI

CLOSTRIDIUM
PSEUDOMONAS AERUGINOSA
Research report

Neurobiological effects of intraventricular propionic acid in rats: Possible role of short chain fatty acids on the pathogenesis and characteristics of autism spectrum disorders

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Neuroglial Activation and Neuroinflammation in the Brain of Patients with Autism

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Autism is a neurodevelopmental disorder characterized by impaired communication and social interaction and may be accompanied by mental retardation and epilepsy. Its cause remains unknown, despite evidence that genetic, environmental, and immunological factors may play a role in its pathogenesis. To investigate whether immune-mediated mechanisms are involved in the pathogenesis of autism, we used immunocytochemistry, cytokine protein arrays, and enzyme-linked immunosorbent assays to study brain tissues and cerebrospinal fluid (CSF) from autistic patients and determined the magnitude of neuroglial and inflammatory reactions and their cytokine expression profiles. Brain tissues from cerebellum, midfrontal, and cingulate gyrus obtained at autopsy from 11 patients with autism were used for morphological studies. Fresh-frozen tissues available from seven patients and CSF from six living autistic patients were used for cytokine protein profiling. We demonstrate an active neuroinflammatory process in the cerebral cortex, white matter, and notably in cerebellum of autistic patients. Immunocytochemical studies showed marked activation of microglia and astroglia, and cytokine profiling indicated that macrophage chemoattractant protein (MCP)–1 and tumor growth factor–β1, derived from neuroglia, were the most prevalent cytokines in brain tissues. CSF showed a unique proinflammatory profile of cytokines, including a marked increase in MCP-1. Our findings indicate that innate neuroimmune reactions play a pathogenic role in an undefined proportion of autistic patients, suggesting that future therapies might involve modifying neuroglial responses in the brain.

TREATMENT OF THE LIVER

AT FIRST: STOP THE INFLUX OF TOXINS

PHOSPHOLIPIDS
B-VITAMINS
BCA VITAMIN A
ACETYL-CARNITINE
MILK THISTLE
DMG COENZYMB 10
GLYCINE OMEGA 3
ZINC
N-ACETYLCYSTEINE
GLUTATHIONE
REGENERATION OF A LIVER

REGENERATION OF A BRAIN

PHOSPHOLIPIDS, COQ10, OMEGA3, ACETYL-CARNITINE, B-VITAMINS, DMG
REGENERATION OF A LIVER

PHOSPHOLIPIDS,
COQ10
OMEGA3,
ACETYL-CARNITINE
B-VITAMINS
DMG

REGENERATION OF A BRAIN
MITOCHONDRIAL DISEASE

MITOCHONDRIAL COCTAIL

NAC, D-RIBOSE, VITAMIN C, ACETYL-L-CARNITINE, VITAMINS B, KOENZYM Q10, ATP (CORVALEN)
MITOCHONDRIAL DISEASE

MITOCHONDRIAL COCTAIL

NAC, D-RIBOSE, VITAMIN C, ACETYL-L-CARNITINE, VITAMINS B, KOENZYM Q10, ATP (CORVALEN)
Children with autism have often impaired methylation

Supplementation with tetrahydrofollic acid and methyl-B12 is necessary.
IMMUNOLOGICAL FINDINGS IN AUTISM
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A. Involvement of Neuronal Major Histocompatibility Complex (MHC) in Autism
B. Impaired Cell-Mediated Immunity
C. T-Cell Polarity in Autism
D. Impaired Humoral Immunity
E. Brain-Specific Antibodies

III. Role of Viral Infections in Autistic Development
A. Association of Measles Virus with Inflammatory Process in Autism

IV. Role of Environmental Factors in Autistic Development
A. Mercury Link with Autism

V. Inflammatory Mediators in Autism
A. Proinflammatory Cytokines and Chemokines in Autism

VI. Involvement of Toll-Like Receptors (TLRs) in Autism

VII. Autoimmunity in Autism
A. Maternal Antibodies Can Trigger the Attack in Autism
B. MMR Vaccination May Increase Risk Via an Autoimmune Mechanism
C. Potential Linkage of Environmental Factors with Autoimmune Events in Autism

VIII. Summary

Autism is a disorder of neurobiological origin characterized by impairment of contact and communications. Typical symptoms of autism include extreme withdrawal and an abnormal absorption in fantasy, accompanied by delusion, hallucination, and an inability to communicate verbally or to otherwise relate to people. The cause of autism remains unknown. However, there are several factors including infectious, neurological, metabolic, environmental, and immunologic origin that have been thought to be involved in the disease development process of autism. The cellular entities playing a role in the pathologic processes in the autistic brain are the neurons, glial cells, endothelial cells, microglial cells, and astrocytes with blood brain barrier permeability playing an important role for the trafficking of the immune cells and mediators. In this chapter

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THYMUS EXTRACT ENHANCE THE IMMUNE SYSTEM

.....AND REGENERATE THE LIVER
THYMUS EXTRACT ENHANCE THE IMMUNE SYSTEM

.....AND REGENERATE THE LIVER
FREE RADICALS

PEROXYNITRITE

NEURONS
LOW URIC ACID MIGHT BE A RISK FACTOR OF THE BRAIN DAMAGE
URIC ACID CRYSTALS

THERE IS A LINK BETWEEN URINE ACID LEVELS AND IMMUNE SYSTEM

URIC ACID MOLECULE
REGENERATION OF MYELINE

ANTIOXIDANTS
QUERCETIN-BROMELAIN
COMPLEX
METHYLCOBALAMIN
PHOSPHOLIPIDS
ACETYL-L-CARNITYNA
INOSITOL

MYELINE SHIELD

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REGENERATION OF MYELINE

ANTIOXIDANTS
QUERCETIN-BROMELAIN COMPLEX
METHYLCOBALAMIN
PHOSPHOLIPIDS
ACETYL-L-CARNITINA
INOSITOL

MYELINE SHIELD
„MAGDA, THIS PICTURE SAYS MORE THAN A THOUSAND WORDS- THIS CHILD IS RECOVERING!

LOVE
KATIA”
LET ME DROP YOU A FEW LINES ABOUT KAMIL. ONE YEAR AGO WHEN I CAME TO SEE YOU FOR THE FIRST TIME, KAMIL WAS 3 YEARS AND 2 MONTHS OLD AND WOULD NOT SPEAK AT ALL, WOULD NOT INITIATE AN EYE CONTACT, WOULD NOT OBEY COMMANDS, WOULD NOT UNDERSTAND COMMANDS, WOULD NOT IMITATE, WOULD NOT POINT WITH HIS FINGER, HE COULD NOT RECOGNIZE PARTS OF HIS BODY, WOULD NOT REACT TO HIS NAME, IT WAS DIFFICULT TO OBTAIN AN EYE CONTACT. HE WAS NOT POTTY TRAINED, SO HE HAD TO WEAR PAMPERS. HE WAS DIAGNOSED AS A SEVERELY DISORDERED AUTISTIC CHILD.

TODAY, AFTER A YEAR OF TREATMENT PRECEDED BY CLINICAL INVESTIGATIONS MY CHILD IS BACK.

TODAY HE RESPONDS TO HIS NAME, CAN ESTABLISH AND EVEN INITIATE AN EYE CONTACT, CAN POINT WITH HIS FINGER CAN SPEAK, BUILDING SIMPLE PHRASES, COMMUNICATING HIS NEEDS, HE IS FULLY POTTY-TRAINED - NO PAMPERS! HE CAN IMITATE BEAUTIFULLY, NAME PARTS OF HIS BODY, CAN TELL THE WHOLE ALPHABET, CAN COUNT TO 30. HE CAN WRITE HIS NAME, MAMA, TATA, BABA.

THERE ARE THE THEME PLAYS: HE PLAYS THE DOCTOR EXAMINING HIS TEDDY BEAR, HE CAN PLAY WITH ELECTRIC TRAINS, THESE TRAINS ARE COVERING THE DISTANCE, TALKING TO EACH OTHER. AS FAR AS EDUCATION IS CONCERNED, HE IS NOT MUCH BEHIND FROM HIS PEER GROUP. AT THIS PACE WITHIN A YEAR I WILL HAVE A TOTALLY HEALTHY CHILD! AND NOBODY CAN TELL ME THAT IT MAKES NO SENSE TO TREAT AN AUTISTIC CHILD MEDICALLY. MY KID SHOWS IT WORKS.

P.S. I THANK YOU VERY, VERY, VERY MUCH DOCTOR FOR BRINGING MY CHLD BACK TO ME.
The Real World of autism.

Do you know the real world of autism
Do you know how it feels to be autistic
Do you know what it means to be autistic

Go to my world, you will see
Go to my world, you will know
Go to my world, you will hear
Go to my world, you will feel it

Go to my world, you will detect
Go to my world, you will find out
Go to my world, you will discover

Did you know that I wish to be normal
To feel like you
To think like you
Feel my head’s pain
Feel my heart’s pain

Jeff was autistic and once said
Feeling great about yourself is when you tantrum.

You blow off the roof
You try your best to hurt people
You go to the top
Hoping to scare off people

Nothing can get rid of the urge
Not medication
Not therapy
Just my willpower