



BBB AUTISM SUPPORT NETWORK

<http://www.bbbautism.com>



**BBB AUTISM SUPPORT NETWORK/  
AUTISM SOCIETY ONTARIO  
(YORK REGION CHAPTER)  
Autism Society  
Ontario**

**PRESENT**

**THE E-NEWS**

[http://www.bbbautism.com/about\\_bbb.htm](http://www.bbbautism.com/about_bbb.htm)

**VOLUME 5; ISSUE 2**

**MAY 28, 2002**

**INTERVENTIONS FOR AUTISM/PDD  
PART TWO**

**Hi Everyone**

Welcome to part two of "Interventions for Autism/PDD"! When I started compiling information for an issue on therapies, I quickly realized it would need to be presented in more than one issue of our E-News.

If you have tried any of the therapies mentioned here or in part one (or any *not* mentioned), we'd love to hear from you. A follow-up issue written by *parents\** about their experiences with therapies is in the works and contributions are welcomed!

**NOTE: Some of these treatments are considered controversial. Inclusion in this issue does not constitute endorsement. We do believe you have a right to know what is out there and with that in mind, hope you find this latest issue informative. The contents are not to be taken as medical or professional advice, but to be used as a starting point in your research.**

**Also please note that some of the therapy descriptions have been adapted from websites**

**Do You Have a Group of Parents  
With Newly Diagnosed Children in  
Ontario Affected by Waitlists?**

BBB Autism's newest feature is a workshop for this group entitled "How to Help the Child Newly Diagnosed with ASD/PDD at Home" (Help@Home). After a successful trial run, We are proud to announce that this presentation has been honored with positively encouraging feedback and attendance.

We discuss issues such as:

1. Questions we all have when starting out
2. Parents as case managers and advocates
3. PDD vs. Autism – are they different?
4. Parent stories, advice, experiences
5. Wait lists, places to call
6. Funding, funding and more funding!
7. Creatively funding a Home Program
8. What is IBI?
9. Utilizing behavioral intervention in every day life.
10. Other therapies – an overview designed to introduce families to what's available
11. How to tell if a therapy is working



endorsing said therapy. Please keep this in mind in your quest for information! ☺

**Bee Cool,**



**Liz**

[http://www.bbbautism.com/about\\_bbb.htm](http://www.bbbautism.com/about_bbb.htm)

\* The follow-up issue is limited to parent contributions only.

I would like to credit Autism Network Resources for Physicians Website (<http://home.san.rr.com/autismnet/treatment.html>). This site helped me with descriptions and links to some of the lesser-known interventions and is very helpful!

***Would you like an @bbbautism.com email address? We scan for viruses...ask us how to get yours!***

Contact us by clicking on the BEEmail icon:



**CONTRIBUTE TO AN UPCOMING e-news ISSUE:** We are looking for input on an "all about siblings" issue.

- 12. Why a home program?
- 13. What changes after age six? What remains the same?
- 14. Discussions, role plays

Included is a great handout packed with resources, service, agency and local vendor brochures, ideas, articles and more. This workshop was designed by the parent of a child with ASD; with input from hundreds of other families and addresses what the family needs to know when beginning their journey.

It runs for an entire day or two evening sessions. Please contact us for pricing and more information. Workshop may be customized to suit region and audience. To contact us, click the BEE icon below or email <mailto:liz@deaknet.com>.

**ATTENTION: UPCOMING HELP@HOME WORKSHOPS**

**Monday and Tuesday June 3<sup>rd</sup> and 4<sup>th</sup> from 10:00 am to 2:00 pm at the Loyal True Blue and Orange House, 11181 Yonge Street, Richmond Hill**

**- or -**

**Saturday, June 15<sup>th</sup> from 9:30 to 5:00pm (same location)  
Brought to you by Autism Society Ontario York Region Chapter!**

To register, for pricing or to ask questions, email <mailto:liz@deaknet.com>

Contact us by clicking on the BEEmail icon:



**DISCLAIMER:** May contain links to other sites. We are not responsible for the contents of those sites.



**PART ONE** ([http://www.bbbautism.com/vol\\_5\\_iss\\_1\\_therapies\\_one.htm](http://www.bbbautism.com/vol_5_iss_1_therapies_one.htm)) – Featured the following therapies:

1. Floortime
2. Miller Method
3. Auditory Integration Training (AIT)
4. The Tomatis Method
5. The Berard Method
6. Samonas Sound Therapy
7. Options Institute
8. Irlen Lenses
9. Chelation of Mercury
10. Vitamin B6 and Magnesium
11. Epsom Salts Baths
12. NIDS
13. Secretin
14. Verbal Behavior
15. Social Stories
16. TEACCH
17. Picture Exchange Communication System (PECS)

Although we've provided a short description of some autism/PDD interventions here, it is of utmost importance that you do full research on any therapy you try with your child. Some of these descriptions are from website selling products, so be aware there may be a slant there! Be smart, be cautious, ask for input from doctors, team members, and professionals and be educated. Also, be aware that some of these therapies are costly.

To obtain more information on these interventions and others, search the Internet by inserting "therapy + autism" into your search engine. Even if you don't have Internet access, most public libraries offer this service for free. This list is, by no means exhaustive.

### **Hyperbaric Oxygen**

Patient is in a hyperbaric oxygen chamber. The logic for using hyperbaric oxygen treatment for developmental disorders relates to the autoimmune and/or viral theory of these conditions. Hyperbaric oxygen has been studied for autoimmune disorders and found to be helpful. **Hyperbaric Oxygen:** <http://www.netnet.net/mums/hbolist.htm>

### **Facilitated Communication**

An alternative means of expression for people who cannot speak, or whose speech is highly limited (e.g. echoed, limited to one or a few word utterances), and who cannot point reliably. The method has been used as a means to communicate for individuals with severe disabilities, including persons with labels of autism, Down syndrome and other developmental disabilities. **Facilitated Communication:** [http://www.bbbautism.com/fac\\_comm.htm](http://www.bbbautism.com/fac_comm.htm)

### **Medications**

Medications should not be a stand-alone treatment for autism. If, for example, you are experiencing behaviors that are violent, self injurious, out of control, and have tried a number of other interventions (always call physician first and check out medical, such as physical, dental, sensory, behavioral, communication). It may be time to discuss medications with your doctor.

Co-morbid disorders such as seizures or OCD may require meds of their own. Sometimes, getting another issue taken care of can help diminish some of these challenging behaviors.

**Medications and autism:** <http://www.bbbautism.com/medications.htm>

**Evaluating the Effects of Medication** by Temple Grandin: <http://www.autism.org/temple/meds.html>

### **Cranio-Sacral Therapy**

Involves unlocking certain areas in the body that are blocked in order for the cerebral spinal fluid to flow correctly. Among the practitioners are some chiropractors. A form of myofascial release performed by physical therapists and osteopaths **Cranio-Sacral Therapy:** <http://www.healing-arts.org/children/craniosacral.htm>

### **Melatonin**

A hormone that has a role in the immune system and in controlling ones sleep cycle. It is sometimes given to children who have trouble sleeping at night. For that reason and others, it has been tried on Autistic children.

**Melatonin – The Sleep Master:** <http://www.autism.org/melatonin.html>



### **Holding Therapy**

Martha Welch is the primary proponent who argues that autism results from a failure to bond with the child. The child is forcibly held by the mother. Both Temple Grandin and Bernard Rimland have argued that it provides sensory stimulation and the psychogenic basis is erroneous. Temple Grandin has stated that forced holding is not necessary. Under such a theory, Holding Therapy can be classified as a kind of sensory stimulation. You can read about one mother's experience with Holding Therapy in "Let Me Hear Your Voice".

**Let Me Hear Your Voice: A Family's Triumph over Autism by** Catherine Maurice, Trade Paperback, ISBN: 0449906647, Published by Young Adult Series

### **Play Therapy**

For children, play is a mode of communication and a vehicle for working out ideas about social roles, fears, and relationships. Counselors working with young children often use hand puppets, stuffed animals, dolls, and sand tables with small figurines to encourage them to "talk" about what's on their minds by playing.

### **Music Therapy**

"Music Therapy is the unique application of music to enhance personal lives by creating positive changes in human behavior. It is an allied health profession utilizing music as a tool to encourage development in social/ emotional, cognitive/learning, and perceptual-motor areas. Music Therapy has a wide variety of functions with the exceptional child, adolescent and adult in medical, institutional and educational settings. Music is effective because it is a nonverbal form of communication, it is a natural reinforcer, it is immediate in time and provides motivation for practicing nonmusical skills. Most importantly, it is a successful medium because almost everyone responds positively to at least some kind of music." Read the rest of this article here: <http://www.autism.org/music.html>

### **Pivotal Response Training (PRT)**

Pivotal Response Training, like ABA, is based on discrete trials. Unlike most traditional ABA programs, these trials take place in a more natural play setting. In this way it has similarities to Dr. Greenspan's floor-time program--one might say that it elements of both of these proven approaches.

PRT was developed by Robert L. Koegel and Laura Schreibman. As of this writing, the efficacy of PRT is still under investigation. Clinicians at the University of California at San Diego's Autism Research Laboratory have received NIMH funding to work with children and their parents using either PRT or an ABA-style discrete trials method.

**Focus on PRT:** <http://www.autism-spectrum.com/archive/prt.htm>

### **Di-methyl-glycine (DMG)**

"DMG is another nutrient that, according to reports from thousands of families, is quite beneficial to many autistic individuals. Similar to vitamin B6 and magnesium, DMG is safe, relatively inexpensive, and helps about half of autistic children and adults.

Research on humans and laboratory animals have shown that DMG strengthens the immune system. The immune system is dysfunctional in many autistic individuals. Some autistic children and adults have seizures, and there are two published reports of decreases in seizure activity as a result of DMG.

Parents have also reported positive results with a similar product, tri-methyl-glycine (TMG). There are, as yet, no published reports on its efficacy for autistic individuals. TMG breaks down into DMG and SAME in the body. SAME is a nutritional supplement and is sometimes used to treat mood disorders such as depression."

<http://www.autism.org/dmg.html>

### **Hippotherapy**

"Hippotherapy, or the practice of using a horse as a therapy tool, was first applied by the Greeks to help rehabilitate war injuries. In recent history, hippotherapy came to the attention of the world in 1952 at the Helsinki Olympics when Liz



Hartel won a silver medal and told the world that horseback riding had helped her recover from polio. In the 1960s, horses were incorporated into physical therapy programs in Germany, Switzerland, and Austria. In the 1970s, a team of American speech, physical, and occupational therapists went to Germany to learn about hippotherapy. This was the very beginning of the American Hippotherapy Association.

Hippotherapy is provided by a licensed physical, occupational, or speech therapist. It is a collaborative learning, healing, and rehabilitative effort by therapist, horse, and client." <http://www.commtx.com/hippo.html>

### **Feingold Diet**

"Food additives, and the products that rely upon them, are big business. In addition, the drugs used to treat symptoms that are triggered by these additives, are also extremely profitable.

Ever since Dr. Feingold first described the harmful effects of these chemicals, this work has been the target of well-funded and intensive distribution of misinformation from the food and chemical lobbies, which continues to this day."

**Feingold Association of the United States:** <http://www.feingold.org/home.html>

### **Fast ForWord**

"The Fast ForWord Family of Programs™ develops the critical thinking, listening, and reading skills that are necessary for success in the classroom, the workplace and in everyday life. Based on over twenty-five years of brain research, Scientific Learning's interactive, adaptive programs use patented technology to target the language and reading skills widely recognized as the keys to all learning.

Scientific Learning programs use neuroscience principles to create an optimal learning environment that enables you to:

- Simultaneously cross-train multiple skill sets to maximize learning.
- Identify reading and language difficulties.
- Attack the underlying causes of these difficulties.

**Scientific Learning** website: <http://www.fastforword.com/>

### **Temple Grandin's "Hug Machine"**

Temple Grandin is an adult with autism who has written two books about her life-*Emergence Labeled Autistic* and her recent book, *Thinking in Pictures*. In her books, she describes her severe anxiety and how her discovery of deep pressure ultimately helped her reduce the anxiety's debilitating effects.

During her childhood years, Temple would crave deep pressure. She would crawl under sofa cushions or wrap herself in blankets to provide pressure. She stated that she could not obtain the 'right' amount of pressure from people because they either gave her too much deep pressure or too little.

As a teenager, Temple observed cattle being branded in a squeeze chute at a relative's farm and noticed that they immediately calmed down after pressure was administered to them in the chute. Temple reasoned that the deep pressure from the chute led to an overall calming effect and thought it might be able to settle her 'over-stimulated nerves.' She then built her own device which is referred to as the 'Hug Box,' the 'Hug Machine', the 'Squeeze Machine,' or the 'Squeeze Box.' Temple still uses her 'Hug Box' on a regular basis to provide her the necessary deep pressure to cope with her anxiety.

**Thinking in Pictures: And Other Reports from My Life with Autism** by Temple Grandin

Trade Paperback ISBN: 0679772898, Published by Random House

**Emergence: Labeled Autistic** by Temple Grandin, Margaret M. Scariano, ISBN: 0446671827

Published by Warner Books



### **Higashi (Daily Life Therapy)**

Daily Life Therapy, pioneered by Dr Kiyoko Kitahara at the Higashi School in Japan, provides an education and emphasizes vigorous physical education and the arts. The school is open to students 3-22, who are on the autism.

A method is developed in Japan and imported into the USA. It includes elements normally found in the education of autistic children, but places unusual attention to physical exercise. Upon entering high school, all students participate in community work and ultimately employment. Areas of employment opportunities include clerical, custodial, stocking, food service and landscaping. All vocational students are paid employees.

### **Cod Liver Oil**

Cod Liver Oil is being used in autism and ADHD based on the findings of Dr. Mary Megson in Virginia. Dr. Megson has found that many autistic/ADHD children have "G" protein defects, which cause classic symptoms of these disorders. "G" proteins are cellular proteins, which are responsible for sending signals in sensory organs. These sensory organs regulate vision, hearing, smell, taste, and touch and are therefore very involved in awareness and response behavior. "G" proteins stimulate Vitamin A receptors and when these G protein pathways are blocked, Vitamin A absorption is restricted. With Vitamin A stores depleted, behavior, vision and learning are severely affected and the immune system is suppressed.

### **Earobics**

The Earobics Literacy Launch is based on two decades of literacy research, incorporating the techniques proven most effective for developing essential listening and sound awareness skills, vocabulary, alphabet knowledge, decoding and spelling and beginning reading and writing. These include the theories and principles of speech acoustics, speech perception, speech and language development, and literacy learning. Earobics Literacy Launch delivers an optimal blend of sensory and language-based training techniques. **Earobics Website:** <http://www.earobics.com/>

### **Dolphin Therapy**

Proponents believe these highly intelligent creatures have the extraordinary ability to help treat children with autism, Down's Syndrome and other neurological and movement disorders.

Being able to play with the dolphins is the motivator in a behaviour modification procedure used in dolphin therapy. It works like this: the child goes through an intense, one-to-one session with a therapist. Then, the child is rewarded for good responses with a dolphin swim. <http://www.thepeacefamily.force9.co.uk/dolphins.html>

### **EEG Biofeedback**

EEG Biofeedback is a learning strategy that enables persons to alter their brain waves. When information about a person's own brain wave characteristics is made available to him, he can learn to change them. You can think of it as exercise for the brain.

EEG Biofeedback is used for many conditions and disabilities in which the brain is not working as well as it might. These include Attention Deficit Hyperactivity Disorder and more severe conduct problems, specific learning disabilities, and related issues such as sleep problems in children, teeth grinding, and chronic pain such as frequent headaches or stomach pain, or pediatric migraines.

The training is also helpful with the control of mood disorders such as anxiety and depression, as well as for more severe conditions such as medically uncontrolled seizures, minor traumatic brain injury, or cerebral palsy.

### **Enzymes**

Some, not all, children with autism exhibit behavioral problems that are lessened when dairy and wheat products are removed from their diet. There is evidence that certain pancreatic and stomach enzymes (pepsin, trypsin, elastase) cleave casein and gluten in a specific way such that exorphin peptides are produced. These peptides act as opiates, binding to



opiate receptors (proteins on the surface of cells which convey outside signals into the cell) in the gut and brain. In autism, this receptor-peptide interaction causes behavior different from that in neurotypical individuals: stimming, aggression, lack of socialization, etc. have all been attributed to opiate peptides. If an injection of naloxone is given, which temporarily blocks peptides from interacting with opiate receptors, an improvement in the child is noticed. This is evidence that the opiate receptor system is somehow involved.

Now, if we can subvert the cleavage of casein/gluten such that the peptides are not produced, then casein and gluten ingestion should not have an effect. Supplementation with proteases having different specificities of cutting the protein can alter the ultimate production of exorphins. It is similar to adding additional scissors to the cutting of a ribbon, it gets cut faster and in different spots, so different (smaller) lengths of ribbon are produced. What if, on top of this feature of additional cutting, we added a peptidase, which could specifically destroy casomorphin? We would then be assured of not only stopping production of exorphins from the diet, but also have a means of eradicating casomorphin produced from gut bacteria, yeast or as a by-product of cellular metabolism. This is the advantage of having DPP IV peptidase in the formula. Casomorphin is highly resistant to proteolytic cleavage; DPP IV is one of two enzymes that can produce this effect. (**From the Houston Nutroceuticals Website**): <http://www.houstonni.com/index.html>



### Ambient Lenses

Melvin Kaplan, O.D., of the Center for Visual Management, explains that children with autism or PDD frequently display abnormalities due to visual distortions in the way they perceive their environment. The aspect of vision involved in spatial organization — related to body posture, locomotion, and the perception of self-motion — is referred to as ambient vision. The public is more familiar with a separate visual system, known as focal or acuity vision. Ambient lenses, often referred to in the literature as conjugate prisms, yoked prisms, or performance or transitional lenses, can be used to help modify ambient vision. They are distinct from “prism glasses,” which are also recommended for autistic children by some professionals. [http://www.latitudes.org/amb\\_lens.html](http://www.latitudes.org/amb_lens.html)



### Essential Fatty Acids

Essential fatty acids (EFAs) are a vital part of the biology of autism. EFAs are important for maintaining cell membrane structure, forming hormones, creating and controlling inflammation and in making memory and neurotransmitters. Imbalances can contribute to allergies, asthma, eczema and digestive problems. It seems likely therefore given the histories of people with autism, that they may have EFA deficiencies.

(**From the website**: <http://server37.hypermart.net/autismunravelled/Fatty%20acids%20autism.htm>)



### Ojibwa Tea of Life

Ojibwa Tea [www.ojibwatea.com](http://www.ojibwatea.com) Ojibwa Tea of Life is a four herb, organic/ethically wild-crafted blend. When considering using Ojibwa Tea of Life for Autistic children, please consider the following information. This is not medical advice. This tea is traditionally used for detoxification. This may be just one of the many reasons why the tea has been shown to be beneficial for some of the conditions associated with Autism.

**GFCF Diet (Tea)**: <http://www.gfcfdiet.com/Beverages.htm#Tea>

## LINKS

### The Edelson Center for Environmental and Preventative Medicine:

<http://65.108.253.183/Merchant2/merchant.mv>

**Autism Treatments**: <http://www.healing-arts.org/children/autism-treatments.htm>

**Autism Resources: Methods, Treatments, Programs**: <http://www.vaporio.com/autism/links-methods.html>

**Treatments and Therapies**: <http://www.business.gatech.edu/users/bmiddlebrook/therapies.html>

**Quackwatch – Questionable Treatments**: <http://www.quackwatch.com/01QuackeryRelatedTopics/treatmentindex.html>



## How to Determine If a Treatment Really Helped

Written by **Stephen M. Edelson, Ph.D.**  
**Center for the Study of Autism, Salem, Oregon**

There are many types of interventions available today for autistic individuals, including nutritional, biomedical, educational, sensory, and behavioral. When beginning a new intervention, it is important to be as objective as possible to determine whether the treatment truly helped the person. If the treatment is not helping, then it does not make sense to continue it especially if it involves a great deal of time, money, or effort.

When deciding to try a new treatment, whether 'proven' or not, here are a few tips to help determine whether the person may have improved from the specific treatment:

1. When a parent begins to learn about all of the various treatments given to autistic children, he/she sometimes tries many at once in order to see improvement as soon as possible. However, if the child improves after receiving several treatments, it will be impossible to determine which one(s) really made a difference. A general rule is to try a treatment for about two months before beginning a new one, to determine whether or not the treatment was helpful. However, if it is quite clear that the child improved from a treatment, even after a week or two, then another treatment can be started.
2. Parents should consider completing the Autism Treatment Evaluation Checklist (ATEC) monthly for a few months prior to the intervention and then monthly following the intervention. The ATEC was designed specially to evaluate treatment effectiveness. If improvement occurs due to maturation, then one typically sees gradual improvement over time. However, if there is a sharp improvement after the intervention is started, then the treatment may be helping. There is no charge for use of the ATEC. You can complete the checklist on the Internet at: [www.autism.com/atec](http://www.autism.com/atec) or obtain a hardcopy of the checklist by writing to the Autism Research Institute (4182 Adams Ave., San Diego, CA 92116; fax: 619-563-6840).
3. If at all possible, tell no one when a child starts a new treatment. This includes teachers, friends, neighbors, and relatives. If there is a noteworthy change in the child, it is likely that the people who come in contact with the child will say something about the improvement. It is also a good idea not to ask "Have you noticed any changes in my child?" In this way, any spontaneous statements regarding the child's improvement will be credible.
4. People who do know that the child received a specific treatment can, independently, compile a list of what changes they have noticed in the child. After a month or two, you can compare their observations. If similar changes are observed by different people, then there is a reasonable chance that these changes are real. It is important they these observations be written down; otherwise, when appropriate behaviors replace inappropriate ones, you may not remember what the child's behavior was like before the treatment, especially if the behavior was an undesirable one.
5. Parents and others should note in writing when the child's behavior 'surprises' them. Basically, parents usually know how their child will respond in various situations; and once in a while, their child may do something that is unexpected. If a child improves soon after an intervention is begun, one can assume that the child will act differently than before; and his/her behavior will likely lead to more 'surprises' than usual-hopefully good ones!

Some people suggest that parents should give their children only treatments for which there is ample research evidence to support their effectiveness. However, when a relatively new treatment is introduced, there will likely be a limited amount of research, if any, on its effectiveness. It takes, on average, 5 to 10 years to complete enough research to





support or refute an intervention's efficacy. Additionally, chances are fairly good that even after 10 years, the results will be mixed, because researchers often use different populations and assess changes using different measures. Be leery of any treatment if it has been around for ten or more years, and there are no research studies to support its effectiveness. For example, Ritalin is one of the most frequently prescribed treatments for autism, but we are not aware of any published studies supporting its effectiveness with this population.

Before trying a new treatment, learn as much as possible about the treatment. Rather than just focusing on positive reports, it is also important to seek out criticisms of the treatment. When evaluating conflicting claims, look to the nature of the studies and their methodologies--poorly conducted studies should not be given the same credence as methodologically sound research.

It is important to keep in mind that no treatment will help everyone with autism. Although one child may have improved dramatically from a certain treatment, another child, even with similar characteristics, may not benefit from the same treatment. Careful observation along with a critical perspective will allow parents and others to decide whether or not a treatment is truly beneficial.

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*I would like to thank Dr. Bernard Rimland for his constructive comments on an earlier draft of this article.*

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## NEWS AND REMINDERS FROM ASO YORK

### SUMMER POT LUCK SOCIAL

Monday June 10th, 7:00 p.m.

Thank you to hosts Paul and Janet Kalmykow for offering their home again this year. RSVP to Janet at home, 905-473-7648 or <[janetkalmykow@hotmail.com](mailto:janetkalmykow@hotmail.com)>

PLEASE CALL FOR DIRECTIONS AND TO LET JANET KNOW WHAT FOOD YOU ARE BRINGING!

### BEHAVIOR MANAGEMENT COURSE

Presented by Behaviour Management Services, Mental Health Program of York Central Hospital & Kerry's Place  
Community Services Autism Consultants

June 4, 11, 18 & 25, 2002 4-consecutive Tuesday evenings from 7:00-9:00 pm at Loyal True Blue & Orange Home building, 11181 Yonge Street, Richmond Hill, ON

Please Register early as space is limited to a first come first serve basis. Cost is \$15 per person.

Register by voicemail: (905) 780-1590 or return e-mail



The Parent Education Course is geared to parents whose children are under 12 years of age.

Sessions include:

- Effective communication
- Motivating your child
- Setting up situations for success
- Effect of your behaviour on your child's behaviour
- Teaching new skills

### **NUTRITIONAL AND METABOLIC CONSULTANTS - DAN PROTOCOL**

Dr. Cynthia Heavener D.C. and Dr. Frank Janowicz D.C., Nutritional and Metabolic Consultants For Autism Spectrum Disorders, Aurora Family Health Clinic  
13 Church St., Aurora, ON (905) 727-0119

As parents of a child with a diagnosis in the autistic spectrum of disorders (ASD), it can be overwhelming trying to decipher all the therapies and options that are out there. We know because, as well as being Chiropractors and DAN! practitioners, we are also the parents of two ASD children.

When our first child, now 11 years old, was about a year old, we noticed that certain foods exacerbated his symptoms. There our quest began. For the past decade we have been researching the relationships between diet, biochemistry, and autism. We have also done laboratory testing in Canada, the U.S. and Europe and, based on that testing, have implemented dietary changes and supplement regimes. We have found this approach to be very fruitful with our own sons and with the children we have worked with. We would like to present this as a pathway you may wish to pursue.

In 1995, Dr. Bernard Rimland, director of the Autism Research Institute, brought together about 30 clinicians and researchers, all of whom had a special interest in autism spectrum disorders. Their goal was "to accelerate the development and dissemination of information that will be helpful to many families of autistic children". The conference was called Defeat Autism Now!, or DAN! From that meeting, a consensus was formed and the DAN! Protocol was published. The report outlines several laboratory tests and corresponding treatment options that have been found to be helpful for children with autism. The report is updated as new information is discovered. The latest version, entitled, Biochemical Assessment Options For Children With Autism, is the guide we use in assessing and treating ASD children.

The key point here is that we are treating children, not autism. All children are different and the approach will vary from child to child. Many of our children are not healthy. They may be pale, have eczema, chronic ear infections, gastrointestinal disturbances, mercury toxicity, or any number of health problems. Some of them may have genetically induced biochemical or metabolic abnormalities. Others may have nutritional deficiencies due to a restricted diet, or an inability to absorb some nutrients. Identifying the cause of these problems and correcting them, can often lead to dramatic changes in the symptoms of autism. One simple example is seen in serum ferritin. Serum ferritin, or blood iron levels, are often found to be low in children in the autistic spectrum. A recent study showed that low serum ferritin levels adversely affects neurological development, even in the absence of anaemia. Any child with developmental issues should have their serum ferritin checked, and iron supplements should be given if indicated.

Essential fatty acids are called essential because they are. They are especially critical in building brain tissue. In the past several years numerous studies have linked fatty acid deficiencies or impaired fatty acid metabolism with learning difficulties, including ADD and autism. This is not surprising because the brain is composed primarily of lipids (fats). An



essential fatty acid test can reveal if your child is lacking the fatty acids required to build a healthy brain or if there are problems in how his or her body is metabolising their fats. Supplementation can greatly improve fatty acid biochemistry.

Allergies are a huge problem for many children in the autistic spectrum. While some people's allergic responses are restricted to hives, others may exhibit behavioural responses. A family history of allergies, or symptoms such as red ears, chronic ear infections, gastrointestinal disturbances, dark circles under the eyes or eczema are some of the findings that would prompt us to explore the possibility of an allergic connection in your child.

In the past few years a connection has been made between heavy metal toxicity and autism. Symptoms of mercury toxicity can mimic the symptoms of autism. It is important to test each child's heavy metal levels. If the levels are high, we need to look at possible sources of contamination, as well as any impairment the child may have in his own detoxification systems. A process called chelation is effective in removing the metals, although it can take some time.

There are many other assessments, and treatment protocols in the DAN! Protocol. My goal here is to give you a sampling of what could be happening with your child. I don't mean to give the impression that there is usually a 'magic bullet' that will cure your child's autism. Most often it is a long and arduous task of determining which foods and/or supplements will bring optimum health to your child. Obviously a child will have the best chance of achieving their potential if they are healthy.

The DAN! approach to autism is an adjunct to other therapies, not a replacement. It addresses the metabolic and physiological needs of the child. In our experience, it has been exceptionally worthwhile.



**GENEVA CENTRE MOVIE NIGHT**

[Geneva Centre for Autism](#) will host our next movie night for individuals with Asperger Syndrome, and their guests, on Monday evening, May 27th, 2002. The feature film will be The Lord of the Rings. The Regent Theatre is located at 551 Mount Pleasant, south of Eglinton and north of Davisville Ave. Doors open at 6:30 p.m. and the movie will begin at 7:00. The movie and snack are complimentary.

Kathy Deschenes, Director of Fundraising, [kdeschenes@autism.net](mailto:kdeschenes@autism.net), [Geneva Centre for Autism](#)



**NEW SOCIAL SKILLS GROUP ORGANIZING FOR 5 - 7 YR. OLDS.**

A new Social Skills group for 5 - 7 year olds being developed, with a planned start in September 2002. We are collecting the names of families interested in planning, participation and further details.



**CONFERENCE IDEAS REQUESTED.**

An autism conference is in the planning stages. Please suggest topics and speakers that are of interest to you.



**Ontario Adult Autism Resource & Support Network**



BBB AUTISM SUPPORT NETWORK

<http://www.bbbautism.com>

[ONTARIO ADULT AUTISM NETWORK](#) OAARSN offers a rich and expanding collection of up-to-date information and communication tools that can put you in touch with others. We can all benefit from the opportunities for mutual support, encouragement and information sharing. We especially hope that OAARSN's efforts to draw attention to positive approaches and best practices in supporting adults with autism can help all who live and work on the front lines. [Click here](#)



### [GENEVA CENTRE](#) SUMMER TRAINING INSTITUTE, [GENEVA CENTRE](#) INTERNATIONAL SYMPOSIUM

The Summer Training Institute is scheduled for August 19-23, 2002 in Toronto. Brochure may be viewed in PDF format [here](#).

[The Geneva Centre](#) International Symposium is scheduled for October 23, 24, 25, 2002 at the Metro Toronto Convention Centre. The Symposium 2002 brochure has been mailed out and is available at [here](#) This year you have the option to register on-line; major discounts for early bird registrations. Also, for the first time, delegates from around the world can access 8 presentations of the International Symposium 2002 live through the Internet.

### TEACHING VERBAL BEHAVIOUR - WORKSHOP

The following workshop is being offered by the [Child Development Centre of Oakville](#):

Teaching Verbal Behavior: Hands-on Training for Tutors & Therapists

**Presenters:** Cherish Richards, BCABA and Holly Smith, BCABA (from Dr. Vincent J. Carbone, Ed.D., Florida, USA)

**Dates:** June 4 & 5, 2002 or June 6 & 7, 2002

**Location:** Hilton Garden Inn, 2774 South Sheridan Way, Oakville, Ontario

**Prerequisites:** Workshop #1 by Dr. Vincent J. Carbone (or equivalent)

**Cost:** \$630.00 Canadian

Participants Limited to 20 participants per session (As May 3, 2002 - only 2 spots available for June 4/5th and approximately 6 spots available for June 6/7th, 2002)

**Contact Information:** Tracie Lindblad (905) 849-7993 e-mail: [tracie@cdco.com](mailto:tracie@cdco.com), Director, [Child Development Centre of Oakville](#), President, [Four Points Inc.](#)

*The Autism Society Ontario York Region Chapter would like to thank IBM Canada Limited for their generous donation of a computer. IBM (<http://www.can.ibm.com/>) is a corporate supporter of the ASO York Region*

### SUBSCRIPTION INFORMATION

To subscribe, e-mail [bbbautism@deaknet.com](mailto:bbbautism@deaknet.com) please provide your name and location. To unsubscribe, e-mail [bbbautism@deaknet.com](mailto:bbbautism@deaknet.com) please write 'unsubscribe' in subject line. If you think you know someone who might enjoy or benefit from these newsletters, kindly forward us their email address at [bbbautism@deaknet.com](mailto:bbbautism@deaknet.com)  
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## Past Issues

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## BBB PARENT GUIDES

CONTAINS PRACTICAL INFORMATION BY PARENTS FOR PARENTS Available on request, e-mail <mailto:liz@deaknet.com> and ask for: (now available in PDF format)

1. Halloween
2. Epsom Salts
3. Pros and Cons of telling your ASD child his/her diagnosis
4. How we advocate for our children

A notice to our readers...

The founders of this newsletter and the BBB Autism support club are not physicians.



BBB AUTISM SUPPORT NETWORK

<http://www.bbbautism.com>

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