

MANAGEMENT OF CLASSICAL AUTISM-THE HOLISTIC APPROACH

- Eg of cases
- i) H Tan
- ii) B Lee
- iii) T & T
- iv) A Z son
- v) D T K s son
- vi) Shah
- vii) A. Afn
- viii) Dr S children

- **The intellectually endowed individual and the mentally handicapped can have autistic features – *Hans Asberger***





CORE SYMPTOMS OF AUTISM

KANNER, 1943

- **SOCIAL WITHDRAWAL/ISOLATION**
- **COMMUNICATIVE & LANGUAGE IMPAIRMENT**
- **REPETITIVE BEHAVIOR & RESTRICTED INTEREST**

- HEARING LOSS MUST ALWAYS BE EXCLUDED UNLESS CHILD HAS FLUENT /WELL ARTICULATED LANGUAGE.



- CONSIDER LANGUAGE PROCESSING, COGNITIVE, SOCIAL DEFICITS (AUTISTIC SPECTRUM DISORDER)

PREVALENCE. IS IT INCREASING?

1 per 1,000

now

1 per 250

i)  **Awareness**

ii) **Broader definition**

iii) **Environmental factors**

WHAT IS THE CAUSE OF AUTISM?

- -Physical
- -Emotional-Prenatal stress (or prenatal maternal stress) is exposure of an [expectant mother](#) to [distress](#), which can be caused by stressful life events or by environmental hardships. The resulting changes to the mother's [hormonal](#) and [immune system](#) may harm the fetus's (and after birth, the infant's) immune function and [brain development](#)
- -Genetics
 - ‘Intense world theory’-RADICAL NEW THEORY^{highly}
empathetic, hypersensitive to physical/emotional stimuli .Feel others’ emotions too intensely to cope so autistics withdraw. So not a social deficiency but hypersensitivity to experience→fear response)Henry&KamilaMarkram-Swiss FederalInstituteofTecghnology-Lausanne)
- -Psychospiritual phenomenon?
- -Still unknown

PHYSICAL CAUSES OF AUTISM

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WHAT IS THE CAUSE OF AUTISM?

- **-Physical**
- **-Genetic**
- **-‘Intense world theory’** -Radical new theory highly empathetic, hypersensitive to physical/emotional stimuli .Feel others’ emotions too intensely to cope so autistics withdraw. So not a social deficiency but hypersensitivity to experience →fear response)Henry&KamilaMarkram-Swiss FederalInstituteofTecghnology-Lausanne)
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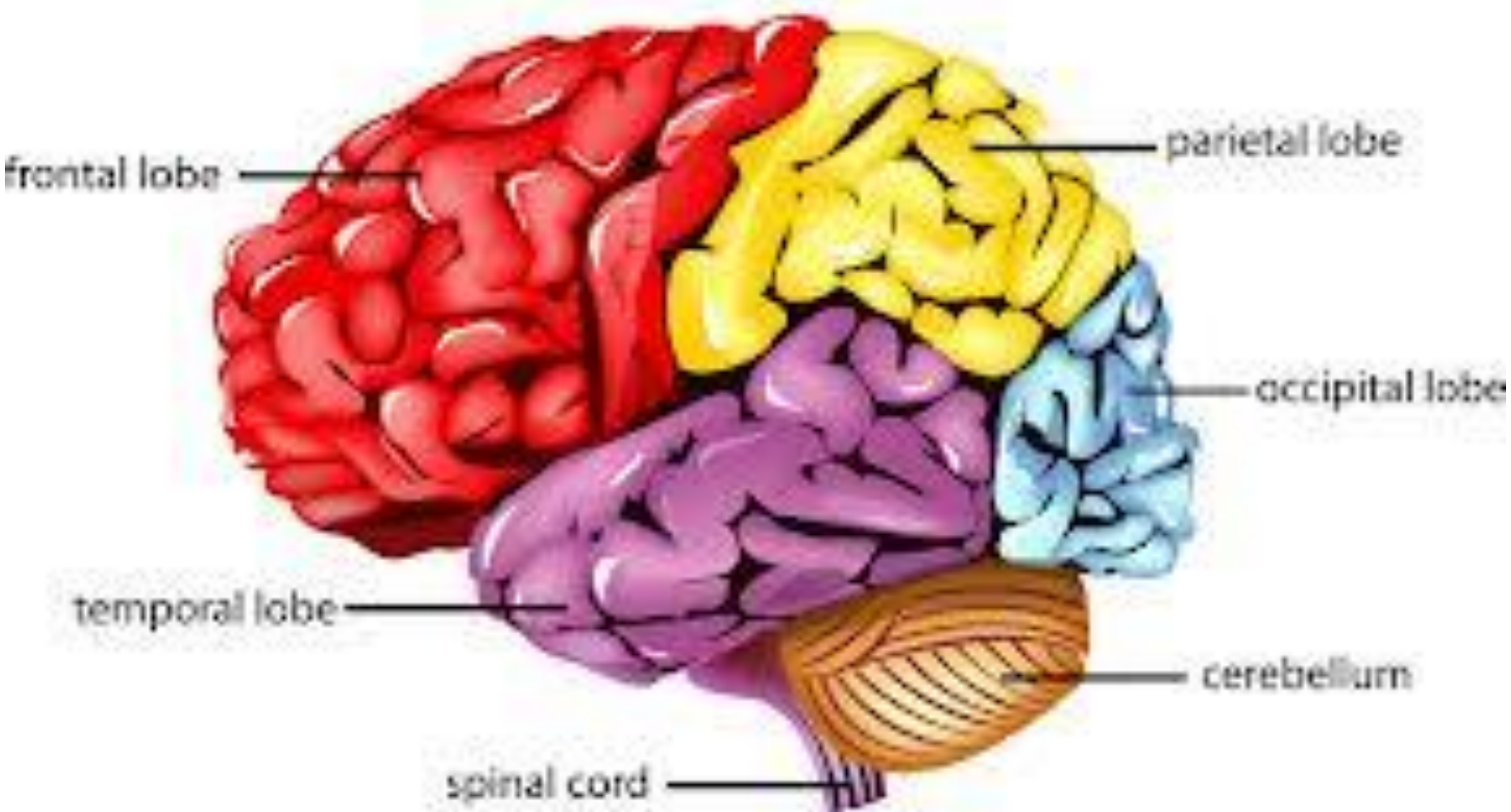
Co- morbidity of ASD

- **-Attention deficit/Hyperactivity**
- **-Dyslexia**
- **-Mental handicap**
- **-Epilepsy**
- **-Deafness**
- **-Brain abnormality** - a stroke acquired in utero or in the first year of life. Gives rise to neurological deficits

NEUROLOGICAL DIAGNOSIS

- **Pediatricians/Pediatric Neurologists need to get**
 - -detailed history
 - -neurodevelopmental examination
 - -laboratory tests as indicated (biochemistry, EEG, MRI etc.)

Parts of the Human Brain



PHYSICAL TREATMENT

-traditional

- -integrative nutraceutical approaches including diet, nutritional supplements and other approaches
- -chelation
- -HBOT
- -antibiotic/antiviral/antifungal therapies for chronic bacterial, viral and fungal infections and dietary supplements
- -

- **Pharmacological treatment should be given by doctors with appropriate training in mental health**

- **Clomipramine** may be considered for reducing irritability and stereotypical behaviour in children with ASD. Monitoring for tolerance and side-effects to clomipramine is recommended (pg 58).
- **Grade B, Level 1+**
- **Fluvoxamine** may be considered for repetitive thought and maladaptive behaviour but should be used with caution in children with ASD because of limited efficacy and poor tolerance (pg 59).
- **Grade D, Level 3**
- **Fluoxetine** may be considered for the reduction of repetitive behaviours in children and adolescents with ASD. Monitoring for the side effects of fluoxetine is recommended (pg 59).
- **Grade B, Level 1+**
- **Haloperidol** may be considered in the management of temper tantrums, aggression, hyperactivity, withdrawal and stereotypical behaviour in children with ASD, but careful monitoring of side effects is required (pg 60).
- **Grade B, Level 1+**

- **Risperidone** is recommended for the management of irritability, hyperactivity and stereotypic behaviour when used as short term treatment for children with ASD

- **Olanzapine** administered to children with ASD may result in significant weight gain and healthcare professionals should monitor the child's weight closely (pg 61).
- **Methylphenidate** may be considered for treating hyperactivity in children with ASD, although the magnitude of response is often less than that seen in typically developing children with attention deficit hyperactivity disorder (pg 62).
- **GPP Pre-school children with ASD receiving methylphenidate should be monitored for adverse effects (pg 63).**
- **Atomoxetine may be considered for managing attention deficit hyperactivity disorder-like symptoms in children with ASD (pg 64).**
- **Melatonin** may be considered in the management of the disturbed sleep patterns of children with ASD (pg 64).

- **following complementary alternative therapies are not recommended for pre-school children with ASD because of insufficient, conflicting or inconclusive evidence:**

- - Amino acid supplementation
- - Animal-assisted therapy
- - Behavioural optometry
- - Expressive psychotherapy
- - Gluten-free and/or casein-free diet
- - Sound therapies (Samonas Sound Therapy and the Listening Programme)
- - Massage and other sensory-based interventions
- - Music therapy
- - Omega-3 fatty acid (O3FA) supplementation
- **High dose amino acid supplementation is not recommended in the routine management of children with ASD because of insufficient evidence for efficacy**
- **Animal-assisted therapy is not recommended in the routine management of children with ASD because of insufficient evidence for efficacy**
- **Behavioural optometry is not recommended in the routine management of children with ASD because of conflicting evidence**
- **Expressive psychotherapy is not recommended in the routine management of children with ASD because of insufficient evidence for efficacy**
- **Gluten-free casein-free diets are not recommended in the routine management of children with ASD because of conflicting evidence**
- **Sound therapies (either as Samonas or the Listening Programme®) are not recommended in the routine management of children with ASD because of insufficient evidence for efficacy**
- **Massage and other sensory-based intervention**

- **Massage and other sensory-based interventions are not recommended in the routine management of children with ASD because of insufficient evidence for efficacy**
- **Music therapy** is not recommended in the routine management of children with ASD because of inconclusive evidence
- **High dose omega-3 fatty acid supplementation** is not recommended in the routine management of children with ASD because of inconclusive evidence for efficacy
- The following complementary alternative therapies are **not recommended** in the routine management of children with ASD because of evidence that they are ineffective:
 - - **Dimethylglycine supplementation**
 - - **Acupuncture**
 - - **Antibiotics and Anti-yeast medication**
 - - **Ascorbic acid (vitamin C) supplementation**
 - - **Auditory Integration Therapy**
 - - **Chelation therapy**
 - - **Chiropractic**
 - - **Cranio-sacral therapy**
 - - **Digestive enzymes**
 - - **Facilitated Communication**

- - **Secretin therapy**
- - **Holding Therapy**
- - **Hyperbaric Oxygen Therapy**
- - **Intravenous Immunoglobulin therapy**
- - **Folate supplementation**
- - **Vitamin B6-Magnesium supplementation**
- - **Zinc supplementation**
- - **Weighted vests**

• General Nutritional Considerations

- Autism and chronic illness patients, in general, are immunosuppressed and susceptible to opportunistic infections, so proper nutrition is important.
- **Fresh fluids** should be consumed, such as fruit juices or pure water.
- **High sugar and high fat foods**, such as fast foods and acid forming, allergen-prone and system stressing foods or high sugar/fat junk foods **should be avoided**.
- **-gluten-free and/or casein-free diets.**
- **-Increase intake of fresh vegetables, fruits and non-wheat grains**, and decrease intake of fats and simple or refined sugars that can suppress your child's immune system. Cruciferous vegetables foods, such as prunes, fish and some whole grains, are useful, and various diets can be found on autism support websites.
- **-Decosohexenoic acid (DHA)** important building blocks for brain
- -In some patients exclusive use of '**organic**' foods has been beneficial, because some children are sensitive to chemicals present in food.
- Diet is also important to control yeast infections.

- **Vitamins and Minerals**
- Chronic illness patients and especially ASD patients are often depleted in certain vitamins
- **(especially B complex, C, E, CoQ-10)** and certain minerals.
- General vitamins plus extra C, E, CoQ-10, betacarotene, folic acid, bioflavoids and biotin are best. Some have suggested extra L-cysteine, L-tyrosine, L-glutamine, L-carnitine, malic acid and flaxseed or fish oils, but the latter lipids should be replaced by NTFfactor, and supplementation with excess amino acids should be overseen by a physician.
- Certain minerals are depleted in essentially all chronic illness patients, such as **zinc, magnesium, calcium, chromium and selenium**, but most vitamin supplements made for children have appropriate amounts of these minerals.

- **Lipid Replacement Therapy for Chronic Infections and Restoring Mitochondrial Function**

- Lipid Replacement Therapy can be useful in providing membrane lipids in unoxidized form to repair nerve membranes and mitochondrial membranes that are damaged by heavy metals, chemicals and infections.

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- **Oxidative Therapy for Chronic Infections and Chemical Exposures**
- Oxidative therapy can be useful in suppressing a variety of anaerobic infections and removing
- certain chemicals. For example, several weeks of Hyperbaric Oxygen (1.5-2 ATM, 60 min)
- treatments, or peroxide baths using 2 cups of Epsom salt in a hot bath or Jacuzzi have been used.
- After 5 min in an Epsom salt bath, add 2-4 bottles (16 oz.) of 3% hydrogen peroxide.
- Most chronic illness patients have periodontal problems, and oral infections and bone cavitation infections are common. These should not be ignored, because these infections can become systemic and spread to other sites.

- **Replacement of Natural Gut Flora and Suppressing Bowel Disorders**
- Patients undergoing treatment with antibiotics and other substances risk destruction of normal gut flora. Antibiotic use that depletes normal gut bacteria and can result in over-growth of less desirable bacteria.
- To supplement bacteria in the gastrointestinal system use **PROBIOTICS** (mixtures of *Lactobacillus acidophilus*, *L. bifidus*, *B. bifidum*, *L. Bulgaricus*) and **PREBIOTICS** (galacto-oligosaccharides, fructo-oligosaccharides) to promote growth of these probiotics

Sources of Prebiotics:

- ✓ fruits, vegetables, honey
- ✓ onions, garlic, whole grains

, to improve
digestion and especially absorption enzyme mixtures have proved useful. The best known of
these is Wobenzym

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• Natural Immunomodulators and Remedies

- A number of natural remedies, such as ginseng root, herbal teas, lemon/olive drink, olive leaf
- extract with antioxidants are sometimes useful, especially during or after antibiotic therapy.
- More important examples are immune modulators, such as bioactive whey protein
- Alternatively, **Transfer factor**. These products have been used to boost immune systems. Although they appear to help many patients, their clinical effectiveness in autism, ADD and other chronic illnesses has not been carefully evaluated. They appear to be useful during therapy to boost the immune system or after antibiotic/antiviral therapy in a maintenance program to prevent relapse and opportunistic secondary infections

- A 2007 clinical report of the [American Academy of Pediatrics](#) concluded that the benefit of **ABA-based interventions in autism spectrum disorders (ASDs)** "has been well documented" and that "children who receive early intensive behavioral treatment have been shown to make substantial, sustained gains in IQ, language, academic performance, and [adaptive behavior](#) as well as some measures of social behavior."[\[95\]](#)

APPLIED BEHAVIORAL ANALYSIS

uses behavioral principles to improve functioning levels of autistic children

- Highly structured
- Aimed at teaching communication, social skills and to reduce ritualistic behaviors
- Parents should ideally be involved

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- **RESPEN-A FOR AUTISM?**

- Reserpine, Rowalfia alkaloids used for depression. a disc patch apply between shoulder blades. Take 2000mg Calcium. See effects by a month. Seems effective. California doctors administering.

- People are always saying "**try this, it worked wonders for us.**" But you can't try everything. We need a proper, scientific evidence base for what works and what does not. Then we can focus our time and our effort, with some confidence that we have a chance of helping our children

LIVE CELL THERAPY

(FETAL PRECURSOR STEM CELL XENOTRANSPLANTATION)

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EVERY CHILD IS DIFFERENT

- AUTISTIC CHILDREN
- SUBSETS WHICH RESPOND TO CERTAIN FORMS OF TREATMENT
- ART and SCIENCE must be called upon.

- **Create a personalized autism treatment plan**

- **A good autism treatment plan will:**
- Provide an individualised biomedical treatment
- Build on your child's interests.
- Offer a predictable schedule.
- Teach tasks as a series of simple steps.
- Actively engage your child's attention in highly structured activities.
- Provide regular reinforcement of behavior.

Involve the parents.

- **THERAPEUTIC ALLIANCE WITH PARENTS ###**

- **Parents must communicate these to trainers:**
- What are my child's strengths?
- What are my child's weaknesses?
- What behaviors are causing the most problems?
- What important skills is my child lacking?
- How does my child learn best (through seeing, listening, or doing)?
- What does my child enjoy and how can those activities be used in treatment?

- **PARENTING AN AUTISTIC CHILD IS NOT EASY**

Professionals must be sensitive to the psychospiritual state of parents as they may be highly stressed, feeling overwhelmed or discouraged

- They have to look after themselves and they may need support. NGO's, parents group, counselling services can help.

HUMAN BEHAVIOR IS COMPLEX

MAY HAVE

i) A PHYSICAL BASIS



II) AN EMOTIONAL BASIS

III) A PSYCHOSPIRITUAL BASIS

OR COMBINATION OF ALL

- **HOLISTIC APPROACH TO TREATMENT
MUST TAKE INTO CONSIDERATION**
- 1) PHYSICAL DIMENSION
- 2) THE EMOTIONAL DIMENSION
- 3) THE PSYCHOSPIRITUAL DIMENSION

LIVE CELL THERAPY

- -Classical stem cell transplantation
- -fetal precursor stem cell xenotransplants
- -sources
- -mode of implantation (without immunosuppression)
- -preparatory phase  Implantation 
continue nutritionals and developmental therapy

- **FOR LIVE CELL THERAPY THE PHYSICIAN HAS TO ESTABLISH A PATHOPHYSIOLOGICAL DIAGNOSIS**
- *? Which organs or in cases of the autistic which of his brain functions are dysfunctional (from the neurological symptoms and signs)*



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- ***STEM CELL PRESCRIPTION***

THE EFFECTS OF LIVE CELL THERAPY

- REVITALISATION OF CORRESPONDING TISSUES/ORGANS

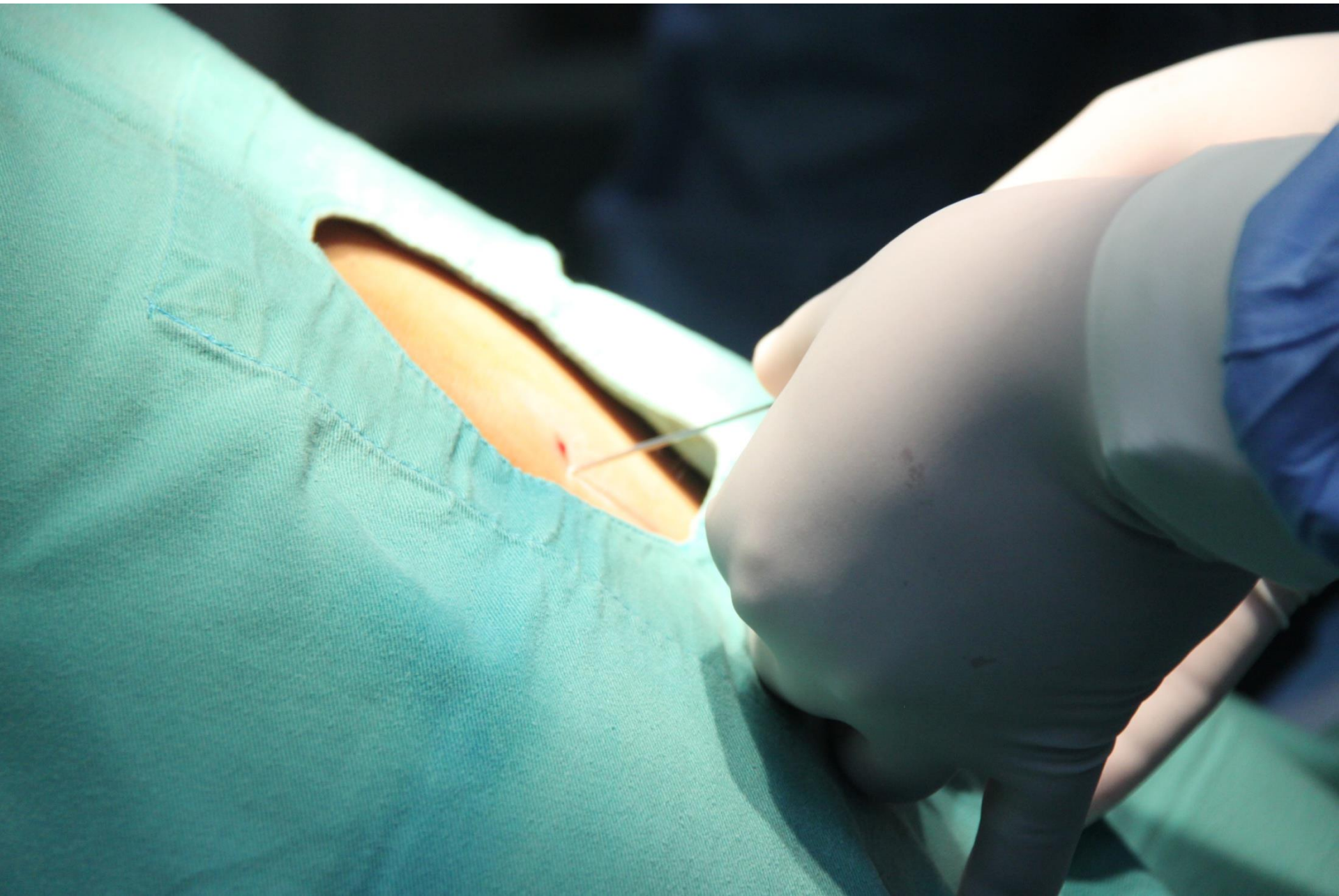


- CALMER, MORE ACTIVE, MORE FOCUS, MORE VOCAL, SHOWS MORE INTEREST OF PEOPLE AND ENVIRONMENT,

ADVERSE EFFECTS OF LIVE CELL THERAPY

- RARE
- < 5 % (fever, rash)
- < 0.6 % Requiring observation in hospital)







PREVENTION?

- **-Recognition of risk factors (prepregnancy and pregnancy) and treat holistically**
- **-Prenatal counselling and supplementation**

- DO CHILDREN WITH AUTISM EVER MOVE
“OFF THE SPECTRUM”

- **AUTISTIC CHILDREN NEED LOVE,
TRUST AND SENSE OF SECURITY**

- **WITH PROPER LOVE AND UNDERSTANDING AN AUTISTIC CHILD CAN FIND HIS TRUE PLACE IN SOCIETY**
- ***-Hans Asberger***

RUH (SOUL)



BRAIN



BODY

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- **BRAIN FUNCTION IS OPTIMUM WHEN ONE IS IN THE STATE OF CALMNESS, TRANQUILITY AND REASSURANCE**

TO THE PARENTS

- **-START TREATMENT RIGHT AWAY IF SUSPECT SOMETHING WRONG. GET PROFESSIONAL HELP (REMEMBER CONCEPT OF NEUROPLASTICITY)**
- **-PARENTS NEED TRAINING AND EMOTIONAL SUPPORT**
- **-PARENTS NEED SUPPORT FOR SERVICES- PROFESSIONAL, NGO's, GOVERNMENTAL AND COMMUNITY**
-

HOLISTIC APPROACH

- **INDIVIDUALISED TREATMENT**
- **TREATMENT PROGRAM MUST TAKE INTO ACCOUNT AND FULFILL THE PHYSICAL. EMOTIONAL AND PSYCHOSPIRITUAL NEEDS OF THE CHILD**
- **THE PARENTS ARE GENETIC ENGINEERS-MUST BE PARTNERS TO THE PROFESSIONAL TEAM**
- **CONTINUOUS REAPPRAISAL AND REFORMULATION OF PROGRAM AS NEEDED**

SUMMARY

- i) Autism is due to a abnormal systems biology affecting brain function. Not Poor motherhood. Not solely genetic but genetic expression of the genome.
- ii) Take away what hurts the body and give what the body needs (remove allergy gluten casein, yeast,Nystatin, hostile bacteria Azithromycin vitamins, minerals,Zn Mg antibiotics, chelation, chlorella, DMSA pro and prebiotics, phospholipids, DHA).digestive enzymes)
- iii) ADA and other special training programs
- Iv) Parents are a part of the therapeutic program
- *DO YOU SEE WHAT YOU BELIEVE OR DO YOU BELIEVE WHAT YOU SEE*

THANK YOU

POINTS TO REFLECT