



# Research and treatment link up with Nutri-Link

**L**ike many parents, I have been faced with the challenge of identifying and treating the many varied and diverse 'biological', pathogenic, metabolic and immunological deficiencies, dysfunctions and abnormalities found within my autistic son, Billy.

We have, in the past, used many laboratory tests and have invested an enormous amount of time, money, dedication and enthusiasm in treating his problems. My personal thanks go to Willis Langford, Dr Emar Vogelaar (biochemist) at the Autism Research and Treatment Centre in The Netherlands, Dr David O'Connell (for secretin infusions), Kenneth Bock MD (DAN practitioner), Ms Vikki Edgson (nutritionist), Mrs Jackie Hales (the BEST system), Mr Max Bingham (microbiologist), Mr Stuart Corth (cranial osteopath), Mr Mark Matthews (kinesiologist) and all of those I have worked so closely with over the past three years. We have come a long way since Billy's initial diagnosis and I am confident we are getting nearer to identifying the final pieces of this gargantuan puzzle.

Parents are constantly calling us here at *The Autism File* for help and direction in treating their children. They require professionals such as doctors, nutritionists, biochemists, alternative therapists and the like, all of which need to be well versed and experienced in treating the abnormalities found within autism. It is very apparent that there are insufficient numbers of these professionals not only within the UK but also around the world. The Autism Research Institute has posted a list of Defeat Autism

Now practitioners who attend workshops and seminars held by the many associated groups in the States. However, when it comes to treating autistic patients outside of the USA we run into problems.

Many tests require samples such as blood, hair, stool and urine. These samples have to be collected by individual practitioners over here. Some samples may need centrifuging, some will need to be packed on dry ice, some will need to reach the labs within two or three days. There are complexities in dealing with these issues. The interpretation of the results is often confusing as is the recommended treatment protocol not to mention problems with time differences and currency exchange. This is the situation as it stands.

So where does this leave us? Who can we turn to for assistance? Who will recommend tests and who will interpret the results and put a treatment protocol together? Who will be able to supply over the telephone consultations and support? Who will supply this needed demand and who will provide the level of service that we deserve?

I would recommend all of the above professionals for contributing to Billy's overall improvement, however I would like to inform you of the very latest developments in bridging this gap, which will come as welcome news for all of you. We have formed an association with Nutri-Link practitioners, a group of post graduate clinical nutritionists who have attended intensive courses on autism. They are well aware of the many 'biological' disturbances and dysfunctions found in autism and

are associated with leading laboratories throughout the world to provide the necessary testing and interpretations on the results found. This will be followed by a treatment protocol that is specific to your child's requirements which will also take into account your parental feedback and completed questionnaires. I have had considerable communication with Mr Michael Ash, Managing Director of Nutri-Link Ltd. We share very similar ideas and concepts as to the aetiology and treatment of autism and I am confident in his direction, focus and the coordination of his associated practitioner listing. We have set up a unique link on our website to enable you to find your nearest Nutri-Link practitioner and a brief on their philosophy and objectives. I do hope you will utilise their services as they have already devoted an enormous amount of time and effort in coordinating this opportunity for you. I am very excited about this revolutionary approach to the treatment of the gut related issues found within autism especially the inflammatory associations and shall look forward to your feedback.

For more info please access: [www.autismfile.com/nutrilink.htm](http://www.autismfile.com/nutrilink.htm)

Mr Mike Ash will be reporting in this and the following issues on the very latest research and concepts on the understanding and treatment of autism from a biochemical perspective. I would personally like to thank Mike for the time and effort he has devoted to this, and his team for their enthusiasm and commitment in helping us give our children the opportunity they deserve.

# Nutri-Link Practitioners' philosophy

**W**e recognise that autism (ASD) is a multi-factorial disorder in which its etio-pathogenesis is still unknown. It is an increasing problem, not only within the UK but across the developed world.

There do appear to be close associations with genetic inherited traits, environmental insults, immunological, digestive and neurological systems.

Our view is that appropriate and considered intervention in areas involving biochemistry and functional disruptions of biochemical pathways represents a safe and progressive route for symptom reduction and condition resolution.

As clinical nutritionists we explore the relationship between various factors including inadequate and sub-optimal food intake, digestion and absorption, intolerances or allergies, imbalanced gut microflora, alterations to the common mucosal immune system, and inadequate toxin neutralisation and elimination, with regard to the effects these have on the functionality and well being of the individual.

Appropriate treatment includes identifying and pursuing problems that are causative rather than looking to suppress symptoms, and we also look for other methods of treatment than the use of psychoactive medications.

We believe that the body has an innate ability to heal. To achieve a state of physical and emotional health there needs to be many components present including emotional support, security and the presence of a healthy environment, absence of physical injuries and the inclusion of nutrient-dense foods. People within the category of ASD would appear to struggle to fulfil the definition of balanced health and well being. Through the use of functional nutrition it is possible to restore and maintain optimal functioning of these many varied and interconnecting areas. Whilst there are areas that greatly assist future development, as clinical nutritionists we believe that this is the key area in which intervention should begin.

We recognise that whilst there are often commonalities in the condition, everyone is a unique individual and we therefore aim to provide a tailored programme for each person we treat.

We also recognise that our current understanding and treatment options represent a 'work in progress' situation and to that end we look at all new ideas and concepts and remain open to others' research and experiences.

We foster and encourage the involvement of the autistic person and the family. The role of the Nutri-Link practitioner is to be a guide and a caring clinician through the often very complex components of treatment.

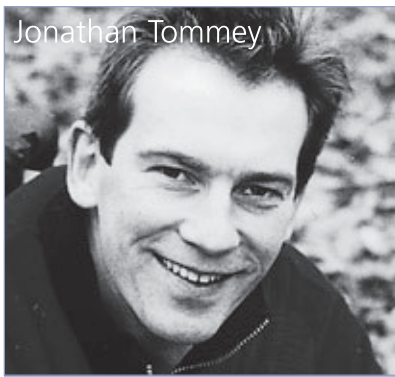
We recognise that the numbers of children being diagnosed as being within the autistic spectrum is increasing, not only within the UK, but in many other areas of the world. As such there are many people and groups investing time and energy to find answers. We encourage all parents to become part of an ongoing research project run in conjunction with *The Autism File* to help uncover these answers. Our current comprehension and interpretation of the biology of autism recognises the following:

- ▶ Digestion, absorption and elimination of foods have many problems.
- ▶ As such there are often specific nutritional deficiencies, including the B vitamins, B6, and B12, the fat soluble Vitamin A, minerals including magnesium, calcium, zinc, and selenium. Essential fats in particular Omega 3 and other micronutrients.
- ▶ Altered and disrupted gut function in particular the efficacy of the Common Mucosal Immune System.
- ▶ Altered ecology and adverse reactions to foods, vaccines, antibiotics, anti-inflammatories, infections and persistent mucosal inflammation.
- ▶ The presence of disorganised microbiota. This includes the presence of persistent viral infections after certain inoculations, as well as:
  - ▶ Yeast overgrowth
  - ▶ Parasites
  - ▶ Pathological overgrowth of bacteria or absence of appropriate commensals.
- ▶ The presence and subsequent immune disruption of contaminating toxins, including heavy metals such as mercury, lead, aluminium and PCBs. These may originate from environmental sources or from some childhood vaccines.
- ▶ Food intolerance, including intolerance of gluten and casein (found in grains and dairy foods), immunoglobulin-mediated food allergy (not always evident on skin-testing), intolerance of so-called Feingold foods and additives (phenolic compounds), and excitotoxins (salicylates and other certain flavour enhancers such as those from the MSG family). Abnormalities in detox chemistry and immune function.

Unique gene expressions including reduction of metallothionein.

Benefits may be derived from various supportive biochemical modulators including secretin, intravenous immunoglobulin (IVIG), transfer factor, colostrums, Probiotics, detoxification nutrients, and special digestive enzymes in many individuals with autistic symptoms.

*Practitioners will be glad to offer a short period of discussion with you to help you to decide if you would like to undertake treatment and investigation.*



## TESTS

**Saliva** test for Secretory IgA. (Individual Wellbeing Diagnostic Laboratory, 0207 730 7010). Co-ordinated by Mike Ash at Nutri-Link Practitioners. The result was elevated which for Billy indicated inflammation of the Common Mucosa (gut lining).

The following tests were done through the ARTC in The Netherlands. (Contact Dr Emar Vogelaar, 0031 30 287 1492).

**Stool** analysis. Showed increased bacteroides species (anaerobic bacteria), yeast overgrowth, deficiencies in lactobacillus and bifidus. pH of 7.5 which is too alkaline and suggests insufficient lactic acid produced by a deficiency of the beneficial bacteria such as lactobacillus and bifidus.

**Krebs** cycle, which is the energy producing pathway in the cellular mitochondria. The elevated succinic acid, citric acid and fumaric acid suggests a deficiency in B1, B2, B3, B5, Co-enzyme Q10, magnesium, manganese, lipoic acid, iron and glutathione. Mitochondrial disease has already been noted in autistics and hypercitraemia could be a problem as many children have abnormally high readings of citric acid. There is clearly a dysfunction here.

**Sulphite/sulphate** in urine. High sulphite readings suggesting PST problems and deficiency in molybdenum.

**Yeast** overgrowth due to a number of markers elevated.

It is important for us to report on how Billy is doing and what we are doing for him. Since I last wrote about Billy's treatment protocol we have completed more tests and have altered his treatment protocol once again to meet with his needs. This is an integral and important process as we all constantly need to refocus on what we are doing and when to change the programme. We have identified that with this new protocol the treatment of nutritional deficiencies, improving the integrity and functionality of the gut, has led to a tremendous surge in the use of language and social interactive skills. Immune enhancement of the gut is also evidently of great importance and I shall summarise the test that he has had and his new treatment protocol including the range of supplements he is on along with the manufacturers.

## TREATMENT PROTOCOL

The test revealed that many of Billy's problems are initiated through poor gut function. Since starting a new protocol we have seen tremendous improvements.

One of the changes we introduced was a wonderful product from Biocare (0121 433 3727) called IMM KINE. It is a broken cell wall probiotic. The bacteria in the gut occupies a specific area dependent on the integrity of the gut, its immune status, pH and other residing colonies of bacteria, yeasts, parasites etc. The contents of the broken cells of the beneficial strain of lactobacillus gently push out the pathogens living in their chosen domain. I suppose its similar to a cat marking its territory in the back garden. The area is cleared then ready to be re-established by its own kind. We introduced this as the first phase of the change as it produced great results within a week. I thought then it would be important to introduce whole cell probiotics with fructooligosaccharides to help recolonise the deserted area. (Bifidobiotics from Nutri-Link). We have noticed a significant drop in mucus produced with his stools. We had not taken this route before.

We then introduced molybdenum (4 drops per day) and Saccharomyces Boulardi (2 caps per day) from Nutri-Link. Saccharomyces is a fungi derived from lychee nuts and stimulates Secretory IgA production of the common mucosa and therefore helps restore gut immunity. It also acts as an antifungal and we clearly saw Billy's behaviour going out of control some seven to eight days after starting with this supplement. This was the resulting die off reaction, we have persevered and all is now calm again.

He is also taking a multi-digestive enzyme called Kristazyme with each complex meal (Nutri-Link). To help with digestion of foodstuffs, I am also considering the specific carbohydrate diet. We have also introduced from Biocare Co-enzyme Q10, Vitasorb B Complex, V500 Vitamin C, Calcium and Magnesium 2-1.

He is using NDF as a heavy metal chelator from Higher Nature (01435 882964).

He is still maintaining the following:  
Maximol by Neways with added fulvic acid which helps absorption across the inflamed gut. (Contact Rod Catherall 0115 930 9959.)  
Ambrotose by Mannatech. Udos Choice Oil.  
Cod liver oil with vitamin A cis, not palmitate.

So as one can see his treatment protocol has changed significantly. We are making wonderful progress and I am confident that one day I shall be able to report on his full recovery. I wish you all the very best with your endeavours.

