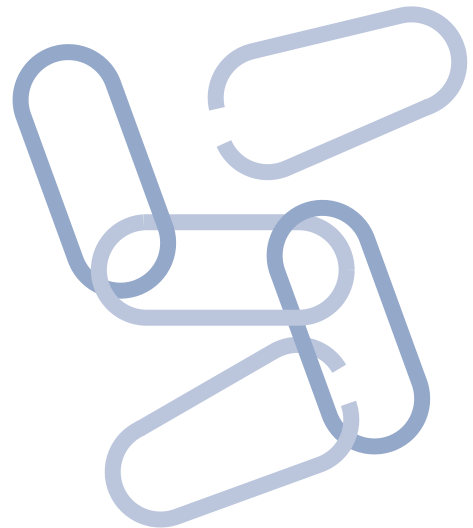




Missing LINKS in the chain



Biochemical intervention as I see it plays a considerable part in the recovery of our children. Autistic children such as Billy clearly express problems with their abnormal gut functions, poor absorption, assimilation and utilisation of nutrients, metabolic disturbances, restricted diet and the presence of secondary implications such as fungal and parasitic disorders through to passive viral implications such as Epstein Barr virus. These children will benefit enormously from bio-chemical intervention. However, bio-chemical intervention is not the whole picture.

If there are disturbances with the immune system, hormonal and enzymatic dysfunction and immune system disorders – what serious affect can nutritional supplementation have on them? Rosemary Waring has found that autistics have problems with:

- The enzyme phenosulphur-transferase and sulphation.
- Acetyl co-enzyme A is defunct in the majority of cases.
- Proteases used in the digestion of proteins such as gluten and casein is impaired.
- Lipases which are responsible for the breakdown of fats are not functioning properly.
- There are low levels of minerals and vitamins, eg Mg, Ca, B Vitamins, Zinc etc.

If the mechanisms for the correct carriage, assimilation and utilisation of such 'products' is impaired are we truly getting the most out of supplementation?

I am concerned about a number of factors that may impair biochemical intervention and the general functioning of the body as a whole.

These factors are clearly expressed by autistics (including Billy) but have not been properly addressed.

- Autoimmunity and immune complexes.
- Heavy metal toxicity namely mercury, aluminium and lead.
- A lack of enzyme activity n PST, acetyl CoA, proteases, pipases etc.

We see that the immune system of autistics in a high number of cases is dysfunctional with low levels of secretory IgA, T-helper cell imbalances, autoimmune antibodies and so on. If an overactivated immune system results through immune overload, then it is possible that autoimmunity develops at the same time. If autoimmunity attacks the host, for example Myelin Basic protein, then what evidence is there to say that it is not attacking enzymes or for that matter hormones? They are proteins too.

If a state of immune 'over sensitisation' is produced due to vaccine or viral overload does this account for the additional food antibodies being produced? If there are immune complexes forming (clumps of antibodies surrounding allergens) could that be the initiation of the leaky gut and cellular membrane porosity? An

obvious area for greater research surely, Drs Gupta and Singh!

Heavy metal toxicity may initially come from the mother especially mercury from amalgam fillings. Vaccines have enormous levels of 'Thimerosal' which is mercury and for the average child vaccines up to the end of the second year provides 237.5 micrograms or 353,000,000,000,000,000 molecules of mercury, most of which is not excreted and goes to the brain. Mercury poisoning can have catastrophic affects on the body. The similarity of symptoms in cases of mercury poisoning and cases of autism is unbelievable. Is this one of the reasons behind the vaccine damaged child? (Read *Austism: a unique type of murcury poisoning* by Sallie Bernard, Albert Enayati, Heidi Roger, Teresa Binstock, Lyn Redwood and Woody McGinnis by ARC Research). We shall aim to publish some of that article with the authors permission in the next issue of *The Autism File*.

Chronic, low level exposure to toxic metals is an increasing global problem. The symptoms associated with the slow accumulation of toxic metals are multiple rather nondescript, and overt effects may not appear until later in life. The sulphurhydryl-reactive metals (mercury, cadmium, lead, arsenic) are particularly insidious and can affect a vast array of biochemical and nutritional processes. The primary mechanisms by which the sulphur-reactive metals elicit their toxic effects are summarised. The pro-oxidative effects of the metals are compounded by the fact that the metals also inhibit antioxidative enzymes and deplete intracellular stores of glutathione. The metals also have the potential to disrupt the metabolism and biological activities of many proteins due to their affinity for free sulphurhydryl groups. Cysteine has a pivotal role in inducible, endogenous detoxification mechanisms in the body, and metal exposure taxes cysteine status ... Early detection and treatment of metal burden is important for successful detoxification, and optimisation of nutritional status is paramount to the prevention and treatment of heavy metal toxicity.

David Quig PhD.

Alternative Medicine Review Vol 3, No 4, 1998.

As you may be aware kids with PST problems will not be helped by testing for heavy metals with DMSA or DMPS, so my suggestions are to use Cilantro and Chlorella from Shoko's Natural products as natural mercury chelators (001 800 654 4394). I shall get Willis to write about heavy metal detox in the next issue of *The Autism File*. This matter cannot be ignored! With regard to the enzyme activity it may be of benefit to supplement enzymes but until autoimmunity has been addressed then who knows what response you will get? This is just my theory but it is one that is yet to be answered. I have already addressed Dr Singh on this and will have an answer in the next issue! I cannot tell you how pleased we are with our wonderful son. Billy is simply the best and we are constantly astounded by his abilities and progress. His improvement, albeit slow is still improving and my mother who hadn't seen him for five months commented on how well he was doing. His school have been

wonderfully supportive and he starts full time in September 2000 under the watchful eye of a shadow. However, even though we are seeing progress, it is still not sufficient for the expectations of his rather impatient father. I want to 'cure' him now, and I shall continue to fight this illness with full force – time, money and emotional stability allowing! Personally I feel I have gained a greater understanding of this disorder and time will tell as to what we can achieve with Billy. It is without doubt that new information and research findings may take us all into a new dimension and *The Autism File* is here to help you with all of your endeavours.

2

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Consultation to find THE RIGHT treatment for Billy

Jonathon Tommey
Billy's Father

I was impressed when I first heard Kenneth Bock MD talk at the Defeat Autism Now (DAN) conference in October 1999 at Cherry Hill, New Jersey, USA. He spoke about heavy metals, zinc and vitamin A deficiency, viral infection and autoimmunity.

The reasons for selecting Kenneth Bock as another consultant for Billy was my 'belief' in his understanding of autism and the possible causes and treatments.

I phoned his secretary to book the telephone consultation and

have talked to over here. Bock has compassion for the topic and he has treated many, many children with autism, keeping a data base of results to back up his treatments and successes. He said a phone consultation was not as good as seeing a patient in the flesh but it is, as near as damn it, as good. I can recall taking Billy into a



autism will not be cured overnight by a one-off treatment ...

at \$295.00 for the hour I had to be prepared. A week before the consultation I faxed to him all of Billy's results and a comprehensive list of all of his treatments and supplements (21 pages in all).

After a brief introduction we went straight into Billy's medical and health history from birth right through until the present day. I outlined his inoculations, antibiotic treatment, his decline, his prolonged bowel problems to our use of secretin and his treatment to date.

As usual I did most of the talking, but then I had to paint a clear picture of my son in order for Dr Bock to get a greater understanding of his total history. He did on occasions ask probing questions as to the reasons for doing some tests and utilising some supplements. The one main thought I had at this time into the consultation was that I was actually talking to someone who knew something about the subject which is a lot more than I can say for the doctors who I

number of appointments where his behaviour was so outrageous the doctors could not get near him to even look at his ears. I just wonder what thoughts they may have had when we walked out of that consultation room? I mean what exactly does a doctor do? He examines, looks at results and treats. So we were only missing out the first part of this equation. The results are there for Bock to see and I believe a better treatment protocol will come from it. From the information on the faxes I sent, he explained in depth his thoughts and feelings regarding the direction we should try with Billy. Immunity and autoimmunity play a great role in Billy's disorder so that Dr Bock thought we should address this area first. He suggested we start Billy on Transfer Factor which will remodulate his immune system, ie redirect the immune system into attacking what it should attack and leave alone the harmless things that it shouldn't attack. The dose we were to use

was building to three capsules three times a day and then to see and note improvements after three months. The more I read into this disorder the more I need to know. It is a multi-factorial disorder and one that will not be cured overnight by a one-off treatment, for sure.

We are also modifying his supplementation, increasing some and withdrawing others. We also have to complete a few more tests to see just what vitamins, minerals, essential fatty acids and amino acids are required and at what dose. (Specificity to the child is critical here as deficiencies found should be treated.) Heavy metals should be checked and he suggested that we use DMSA and a six-hour urine collection. I have heard that DMSA may further damage the gut so I am holding off from doing this just at the moment until more information is gathered on the affects of DMSA. I shall let you know what results we have obtained and the progress we have made with Billy in the 5th issue of *The Autism File* in the Autumn.

Meanwhile I wish you all again the very best with all of your endeavours. I believe, if you use two or more consultants and provide each with the same information, it is interesting to see what feedback comes from them. If they are all telling you the same thing then it is probably worth pursuing their treatments. If they differ then it's back to reading more research data and updating them with your newly obtained information.

Not one consultant in the world knows how to cure these children so it is imperative that a select number of the world's leading consultants in the field of autism are providing feedback to you on available treatment and the latest findings.

I still firmly believe there is a multi-factorial cure for this multi-factorial illness and will not give in until I have found a solution.

Kenneth Bock MD can be contacted at:

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108 Montgomery Street,
Rhinebeck, New York 12572
Tel: (914) 876 7082*

Autism?

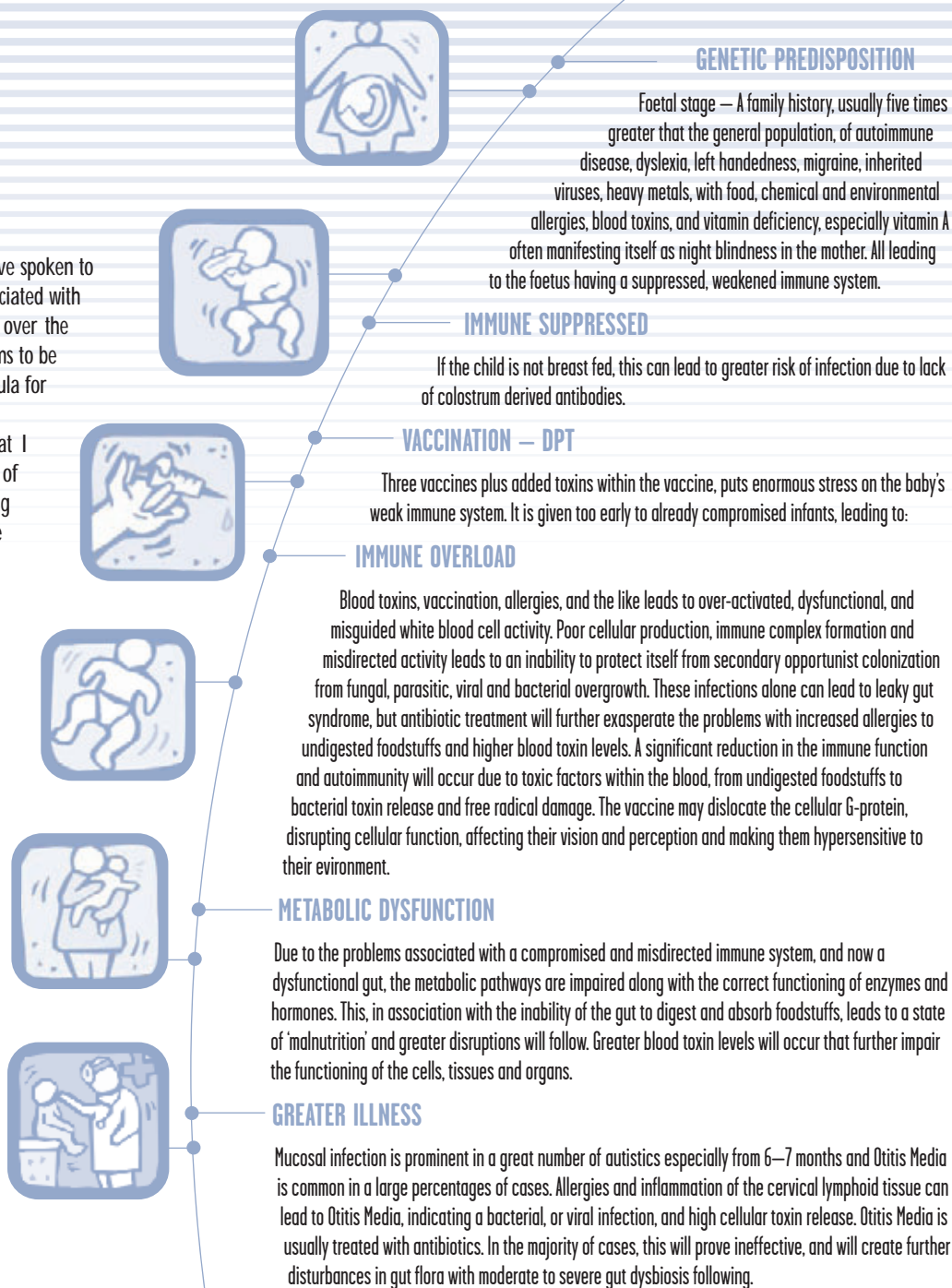
THE CAUSES BEFORE MMR

Jonathon Tommey

I have read, observed and have spoken to hundreds of individuals associated with autism and what I have learned over the past two years is that no one seems to be coming forward with a basic formula for the possible causes of autism.

So I have outlined opposite what I believe to be the root causes of autism prior to children receiving the MMR vaccination. I would like to urge all researchers and doctors in this field who receive this publication to give me their feedback on the issues I have raised. I feel that this paints a pretty clear picture of what is a very complex disorder. As one can see it is very easy for the susceptible child to become autistic and I urge the health authorities to take note if they wish to see this epidemic subside. The evidence for autism being a genetic disorder is, to me, far from proven.

Autism is an acquired state and is, as Dr Robyn Cosford puts it, a neuro-immune gastrointestinal dysfunction syndrome (NIGDS).



Is this the child that is now open to the insult from the MMR, or is it the damage already done by the DPT vaccine given too early to susceptible children? — Both! If DPT hasn't induced autism then the MMR, by magnifying all the above, will!