## Why My Child is on a Special Diet

Of the thousands of parents who filled in the Autism Research Institute's survey concerning dietary intervention, 66% said their child improved on a gluten- and casein-free (GF/CF) diet. Please understand that this diet must be followed carefully, because even a few crumbs of a cookie is a very big deal...

### "Think Molecular!"

There is no vacation from this diet. Please note that the environment must also be gluten and casein-free - Play-Doh and other substances can be disastrous.

Many children who stray from the GF/CF diet have sudden emotional outbursts and experience uncontrollable diarrhea.

Please only give my child food I have explicitly said is acceptable - don't hesitate to contact me if you're unsure about a particular food or item.

You can reach me at 434-528-9075

## There is no vacation from this diet

From

Changing the Course of Autism; A Scientific Approach for Parents and Physicians by Bryan Jepson, MD:

"Over the years many parents have reported that their child's behavior improved measurably after gluten and casein were removed from the diet. Gluten is a protein found in grains and casein is a protein found primarily in cow's milk. These proteins have been shown to be highly immune-reactive in children with autism, particularly those with GI symptoms.

Dr. Goodwin and colleagues were among the first to document an abnormal brain response to gluten from food in autistic children with GI symptoms. Starting in the mid 1980s, several researchers showed that children who maintained a glutenand casein-free diet did much better neurologically (improved cognition, language, etc.) than those who did not.

Research has found evidence of food allergies in autism: Dr. Lucarelli and colleagues detected much higher level of antibodies to case in and other milk proteins in children with autism compared to controls, and saw a marked improvement in behavior after an elimination diet challenge; Dr. Jyonouchi and colleagues showed that when challenged with food proteins from gluten, casein, and soy, children with autism produced a markedly higher amount of proinflammatory cytokines, compared with normal controls."

#### **Supporting Scientific Studies:**

Goodwin MS, et al. "Malabsorption and Cerebral Dysfunction." Journal of Autism & Childhood Schizophrenia. 1971;1:48-62. Reichelt KL, et al. "Childhood Autism: A Complex Disorder." Biological Psychiatry. 1986 Nov;21(13):1279-90. Shattock P, Lowdon G. "Proteins, Peptides and Autism: Part 2: Implications for the Education and Care of People with Autism." Brain Dysfunction. 1991;4: 323-334. Knivsberg AM, et al. "Autistic Syndromes and Diet: A Follow-up Study." Scandinavian Journal of Educational Research 1995; 39: 222-226.

Zao 250. Cade R, et al. "Autism and Schizophrenia: Intestinal Disorders." Nutr Neurosci. 2000; 3, 57–72. Knivsberg AM, et al. "A Randomised, Controlled Study of Dietary Intervention in Autistic Syndromes." Nutritional Neuroscience. 2002

Sep; 3(4):251-61. Lucarelli S, et al. "Food Allergy and Infantile Autism." Panminerva Medica. 1995 Sep;37(3):137-41. Jyonouchi H, et al. "Evaluation of an Association Between Gastrointestinal Symptoms and Cytokine Production Against Common Dietary Proteins in Children with Autism Spectrum Disorders." Journal of Pediatrics. 2005 May;146(5):605-10. Jyonouchi H, et al. "Dysregulated Innate Immune Responses in Young Children with Autism Spectrum Disorders: Their Relationship to Gastrointestinal Symptoms and Dietary Intervention." Neuropsychobiology. 2005;51(2):77-85.

## An unfortunate, but familiar, story:

"Our son was in a typical preschool at three and was GF/CF. I explained that glue could be a problem, but that supervised use of glue sticks was okay. He was averse to using a glue stick so his teacher rubbed it all over his palm so he could get used to the texture.

Within the hour he was screaming violently for the first time all year. I was called to pick him up, and only pieced it together when I asked what was different that day. Besides the screaming and distress, for three days our son had diarrhea that took the skin off his bottom.

Same thing when he got a corner of a saltine cracker at school. This time was not the teacher's fault. Our son dove under the table and grabbed a crumb off the floor.

They told us not to worry because it was only a corner of a cracker. This too caused diarrhea for days, and a diaper rash that made his bottom raw."

--Laura Kay

This is what these foods do to my child's GI tract; this kind of tissue should be smooth and uniformly pink.



This diet is not specific to autism—many families report benefits for the entire range of developmental disorders and learning disabilities.

**Autism Research Institute** 4182 Adams Avenue San Diego, California 92116 www.Autism.com

# Why do I pursue medical treatment for my child's autism?

## Because autism is a medical disorder.

not 'alternative' medicine; it's a science-based, molecular-biological approach to treatment. Everyone agrees that psychotropic drugs do not treat the problem—they simply reduce or eliminate some of the symptoms. Our aim, in contrast, is to address the underlying health problems.

The guiding principle is simple: remove what is causing harm, and add what is missing. Affected children often have an exaggerated response to toxins, foods, and airborne allergens. It is well documented that they often lack various nutrients, enzymes, antioxidants, and essential fatty acids, and that they require methylation support. (Less commonly, these health problems also occur in the non-autistic population; the medical approaches that are typically used are the same.)



AUTISM RESEARCH INSTITUTE

Autism is Treatable

4182 Adams Avenue San Diego, California 92116 www.Autism.com "Before we tried 'biomed,' our daughter was a mess: wakeful nights, self-limited diet, sensory sensitivities, loss of some words, inability to be with other children, lack of appropriate play, loss of eye contact, little to no conversation. She hit, kicked, spit, and screamed at her preschool classmates, and had to be withdrawn two years in a row. I could not fathom how in the world she was going to navigate elementary school, never mind her own life. Once diagnosed, I started her on occupational and speech therapy, but after six months of little improvement, I thought I'd try the GF/CF diet. During this trial we saw a doctor who uses the Defeat Autism Now! approach, and I read Dr. Jepson's book. Suddenly, the borders of the puzzle started to come together; I finally understood how and why she had become who she was.

Suddenly, the borders of the puzzle started to come together...

"Over the past 18 months we've removed other foods, added and subtracted supplements, added enzymes and essential fatty acids, identified a genetic mutation, and are now battling pathogenic gut bacteria. We still have work to do, but her continued progress keeps me going. Two weeks into kindergarten this past year, the school wanted to put her in the mainstream classroom full time. Based on past experience, I was dubious, and went in to observe. Standing in the regular classroom, watching her still-quirky manner, I fought back the tears of realization; I could hear the screeching of the autistic children behind the door of her old Special Ed. classroom, and I grasped just how far she had come. Her recovery was made tangible. Hers has been a hard-won victory, and it's been worth every worry, tear, frustration, and lost hour of sleep to watch her participate in our lives, and in her own."

-Anna Letaw

### For additional information:

Edelson, Stephen M PhD and Bernard Rimland PhD, eds. Recovering Autistic Children. 2nd ed. San Diego: Autism Research Institute, 2006.

**Jepson, Bryan MD and Jane Johnson.** Changing the Course of Autism: A Scientific Approach for Parents and Physicians. Boulder, CO: Sentient Publications, 2007.

Kirk, Sally. The Autism Spectrum and Biomedical Interventions: A Mother and Son Journey of Insight and Hope. United Kingdom: Jessica Kingsley Publishers, 2008.

McCandless, Jaquelyn MD. Children with Starving Brains: A Medical Treatment Guide for Autism Spectrum Disorder. 3rd ed. Putney, VT: Bramble Books, 2007.

Pangborn, Jon PhD, and Sidney Baker MD. Autism: Effective Biomedical Treatments (Have We Done Everything We Can For This Child? Individuality In An Epidemic) San Diego: Autism Research Institute, 2005.

Bock, Kenneth and Cameron Stauth. Healing the New Childhood Epidemics: Autism, ADHD, Asthma, and Allergies. New York: Ballantine Books, 2008

#### A few of the hundreds of supporting articles published in the medical literature:

Chauhan A, Chauhan V., Oxidative stress in autism. Pathophysiology 2006; 13(3):171-81.

Herbert M., Autism: A Brain disorder, or disorder that affects the brain? *Clinical Neuropsychiatry* 2006; 2:354-79. Vargas, D.L., et al., Neuroglial activation and neuroinflammation in the brain of patients with autism. *Ann Neurol* 2005;57:67-81.

**Jyonouchi, H., et al.,** Dysregulated innate immune responses in young children with autism spectrum disorders: their relationship to gastrointestinal symptoms and dietary intervention. *Neuropsychobiology* 2005. 51(2): p. 77-85. **James S.J., et al.,** Metabolic biomarkers of increased oxidative stress and impaired methylation capacity in children with

James S.J., et al., Metabolic biomarkers of increased oxidative stress and impaired methylation capacity in children with autism. *Am J Clin Nutr* 2004; 80: 1611-7.

Horvath K, Perman JA., Autistic disorder and gastrointestinal disease. *Curr Opin Pediatr.* 2002 Oct;14(5):583-7. Ashwood P, Van de Water J., A review of autism and the immune response. *Clin Dev Immunol.* 2004 Jun;11(2):165-74.