

GUEST EDITORIAL

Autism and Allergies: To the Parents of Kids Like Tony

Editor's Note:

"Are you the Dr. Rimland who does research on autism?" "Yes," I admitted. "Do you believe some cases of autism are caused by a food allergy?" "Certainly!" was my reply. "Thank heaven!" the woman on the phone said with obvious relief. "There IS someone who doesn't think I'm crazy!"

The caller then went on to introduce herself as Mary Callahan, a nurse, the mother of an autistic (or formerly autistic) five year old, and the author of a book, *Fighting for Tony*, that was nearing completion.

I told Mary I shared her frustration. The evidence had been accumulating for several decades—from conversations with and letters from many hundreds of parents throughout the world, and from discussions with dozens of advanced pediatricians, allergists and other physicians. There is in fact a very strong link between food allergies and behavior, including the behavior of autistic children. I told Mary about the Air Force family we had corresponded with in the late '60s. Their autistic child had recovered when the family was transferred to a remote base in the Alaskan wilderness. The child became autistic again when the family returned to civilization. Careful experimentation showed why: there was no cow's milk to be had in the wilderness!

I mentioned to her the autistic child who went completely wild for four days after eating cracker crumbs that had accidentally fallen to the floor. As long as he was on a totally wheat-free diet, his behavior was under control.

For too long physicians have been taught that allergies can affect only the mucous membranes (hay fever), the lungs (asthma), and the skin (hives). The idea that an allergy could affect that most sensitive organ, the brain, and thus affect behavior, has been flatly rejected by traditional physicians.

Long a taboo subject—the effect of food allergies (or perhaps more accurately, food intolerances) on the brain—the word is finally getting out. Many books on the topic have been published,* and even the very conservative Pediatrics has recently (January 1989) published a very positive report.

Fighting for Tony has had a significant impact. Mary Callahan has been on the Today Show, the Oprah Winfrey Show, the Donahue Show, and innumerable local talk shows. She and her book are helping get the word out. Wonderful!

By Mary Callahan, R.N.

It has been just over a year since I flew to New York to appear on the *Today Show*. It was an exciting time, but a very scary one, too. I sat on that 747 contemplating all the possibilities. The plane could crash. I could get lost in New York City. I could freeze up on the *Today Show*. Then another thought occurred to me: I could get no response to my appearance on TV and my book *Fighting for Tony*. Then I would have to accept that Tony really was the only child who ever had allergies manifest themselves in autistic-like behavior and that I had gone to all this effort for nothing.

By nine o'clock the next morning most of my fears were over. I had arrived safely

at NBC and the interview went well. But it was a full two months before I got rid of my last nagging doubt. I almost cried when the mom at the other end of the phone told me her story. She had taken her autistic three-year-old daughter off cow's milk after reading my book. Cow's milk had been the culprit in my son's allergy-induced autism. Six days later little Heidi spoke for the first time.

Heidi's mother was not the first person to respond to our story. No, the calls and letters began almost immediately. But most of the parents who called to say that they also had a child with behavior allergies had discovered it on their own, just as I did. I heard stories of college graduate sons who had been diagnosed as retarded until they were taken off wheat. I listened to one mother, a special education teacher, tell me of her daughter Caroline who was taken off cow's milk, not because of her severe developmental delay, but because of chronic ear infections. The child immediately brightened up, becoming more animated and sociable. By her second birthday, Caroline was a different child. By her third, she was completely caught up with her peers. Caroline's mother appreciated *Fighting for Tony* not because it taught her anything she didn't already know, but because it validated her own story. It was a pleasure to talk to her and every other parent who called, but it was immensely satisfying to talk to Heidi's mom. Even Tony danced with delight when I told him his story helped someone.

Now, a year later, I have a drawer full of letters. Seventy parents have told me that their children also have cerebral allergies, and twelve of them didn't know it until they heard about us and decided to test for allergies with an elimination diet. Seventy may not seem like much compared to the thousands of families struggling with a handicapped child. But then, I never thought we had discovered "the cure" for autism, just the solution for a small number of children mistakenly diagnosed as autistic. In fact, we didn't even discover it.

Cerebral allergies have been mentioned in medical literature for more than twenty years. As far back as 1968, Dr. Marshall Mandell, author of *The 5 Day Allergy Relief System*, was talking about allergic pseudo-retardation. The editor of the ARRI, Dr. Bernard Rimland, predicted in 1972 in a talk at the annual meeting of the National Society for Autistic Children, that "in ten or fifteen years the average physician will think of allergies as an immediate possibility when he sees an autistic-type child." Unfortunately, his prediction did not come true. While doctors were busy arguing over the existence or non-existence of cerebral allergies, parents were hearing about it from each other, and testing for it at home without the physician support that would have been so comforting. *Fighting for Tony*

is just this parent's attempt to fill the educational gap left by the medical profession.

By this time you are probably asking, "Could my child be suffering from a brain allergy?" As I read or listened to many parents' stories, I was struck by certain similarities, common threads that seem to run through most or all of them. Readers of this publication know that two children diagnosed as autistic can have vastly different characteristics. But the parents who contacted me were describing the same child over and over again. Some carried the diagnosis of autism, others retardation, hyperactivity or pervasive developmental disorder. But whatever the diagnosis, the symptoms were the same and it is those symptoms, those common threads, that can lead to diagnosis of future cases of cerebral allergy by increasing the index of suspicion when they occur. I think a list of those common threads is in order:

1. Family history of allergy. Child may have allergic eczema from infancy.

2. Prolonged crying spells as infants, not relieved by usual methods like rocking or walking. Crying spells do not go away like colic would, but turn into temper tantrums as the child gets older.

3. Severe spitting up, even to the point of projectile vomiting. Two children vomited so much that they ended up diagnosed as Failure to Thrive.

4. All but two of the children had chronic ear infections. I think this is important because only 20% of the general population of children has chronic ear infections. More than half of the parents remember an incident of thrush or yeast diaper rash.

5. Super-sensitive hearing. Child wakes up at the sound of a car driving by.

6. Occasional periods of normalcy that disappear as mysteriously as they appear.

7. Self-stimulating behaviors may be there, but are a very small component of the child's problem. I heard no stories of children who put blocks in symmetrical formations or were obsessive about neatness.

The next obvious question is, "What should I do if my child fits that description?" The answer to that is simple. Pick up Dr. William Crook's book *Solving the Puzzle of Your Hard-to-Raise Child**. Read it from cover to cover and then formulate a plan. It is natural to want to try everything at once and hopefully solve the child's problem sooner. But if the child does get better, or even if he gets worse, you will not know what to keep doing and what to stop. So be systematic and keep a diary of results.

If the child does improve after a certain food or foods are removed, it may be subtle at first. More than one parent said that the only immediate change was that the child slept better. That is exactly what happened with Tony. I was more convinced of the

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