LETTER TO THE EDITOR

Success story

To the Editor:

Reading about the use of vitamin B6, magnesium, and DMG in the treatment of children with autism, we decided to give it a try: first DMG for one week, then the vitamins.

The results were amazing. Within six days our son's vocabulary began to snowball. He became more curious about the world around him and finally began to show some affection toward me. It was if a major neural circuit had been switched on.

For the first month to six weeks, we noticed an increase in activity level and our son became very "froggy." So we redirected his energy into useful channels; we took him out of public school and implemented a home-based program. He's not completely recovered yet, but he's well on his way. Medical "experts" are already doubting that he ever was autistic.

I sincerely believe that it was the combination of B6, magnesium, and DMG that sparked our son's great leap forward.

> Evelyn Athanas-Brayton Hope, Rhode Island

Editor's note: Delighted! One of many such letters.

Letters to the editor are welcome. Letters intended for publication must be signed and should not exceed two pages. Letters may be edited.

In Memoriam Reed P. Warren, Ph.D. 1942-1998

The world of autism research lost one of its leading scientists, Reed P. Warren, Ph.D., of Utah State University, to cancer on January 26th, 1998. Reed Warren's work, unraveling the roles of immunology and genetics in the causation of autism, won him world-wide recognition and respect. He was one of the 30 leading autism researchers selected from the U.S. and Europe by the Autism Research Institute to present their ideas at the first Defeat Autism Now! (DAN!) Conference in Dallas in January 1995.

Reed Warren was not only a brilliant researcher, but a kind and compassionate person. He will be missed.

His research at Utah State University is being carried on by his colleagues, Drs. Dennis Odell, Ron Torres, and Roger Burger.

HELP!

The Autism Research Institute receives many inquiries from parents dealing with the unique problems of teenage autistic girls. Unfortunately, because most cases of autism occur in boys, we have found very little information on topics including:

- -- training autistic girls in menstrual hygiene.
- --dealing with autistic girls either obsessed with, or afraid of, menstruation.
- --dealing with autistic girls or women who are obsessive about having babies, or having sexual relationships.

Because these matters can be very difficult to handle, and because so little has been written about them, we are asking anyone who has conducted research on these issues to send us copies of their findings. In addition, we would very much appreciate hearing from both parents and professionals who can offer practical solutions for any problems related to adolescent autistic girls' menstrual care, or issues concerning sexuality.

SSRIs: Cautions about dental disease

Boyd et al. cite the case of

one woman who had only

three teeth with fillings before

she began taking Prozac. Within

a year, they say, "the patient

had been diagnosed with

caries in 26 of her 28 teeth."

"Cotton mouth" is a common side effect of many drugs, but until recently the problem primarily affected older individuals taking multiple drugs. A new study, however, warns that the increasing use of Prozac and other selective serotonin reuptake inhibitors (SSRIs) "raises great concern over [younger] patients' oral health."

Xerostomia, the medical term for dry mouth caused by decreased saliva secretions,

can cause the rapid development of multiple cavities. Linda Boyd and colleagues cite the example of a woman who began taking Prozac in January of 1995 and later took serotonin-altering diet drugs. Before the woman began using these medications,

only three of her teeth had developed cavities. "By December 1995," the researchers report, "the patient had been diagnosed with caries in 26 of her 28 teeth." Other side effects of xerostomia, the researchers say, include:

- speech difficulties
- -changes in taste
- -difficulty swallowing
- -burning or sore gums
- susceptibility to oral Candida infection
- -difficulty with dentures.

Drugs linked to xerostomia include antidepressants such as fluoxetine (Prozac), amitriptyline (Elavil), and sertraline (Zoloft); the anticonvulsant carbamazepine (Tegretol), the antianxiety drugs diazepam (Valium) and lorezepam (Ativan), and the antipsychotic drugs haloperidol (Haldol) and chlorpromazine (Thorazine). In all, Boyd and colleagues say, more than 400 medications list xerostomia as a possible side effect.

The researchers say patients taking any drugs that promote "cotton mouth" need to

use careful dental hygiene measures such as frequent brushing, flossing, and cleanings. Additional tips they offer for preventing cavities and other "cotton mouth" side effects:

- —Apples, sugarless chewing gum, and sugar-free candies promote the production of saliva.
- —Cheese and dairy foods help prevent cavities. If an individual taking SSRIs or other drugs that cause dry mouth cannot brush im-

mediately after eating, dairy snacks are better than sugary or highcarbohydrate snacks. Acidic sodas should be avoided.

- -Frequent snacking promotes cavities and should be avoided.
- —Some individuals may need to use saliva substitutes or sa-

liva stimulants., available from physicians or dentists.

Boyd et al. stress the importance of diagnosing and treating xerostomia, saying that the condition "can have a major impact on a patient's oral health, nutritional status, and overall quality of life."

"Nutritional implications of xerostomia and rampant caries caused by serotonin reuptake inhibitors: a case study," Linda D. Boyd, Johanna T. Dwyer, and Athena Papas, Nutrition Reviews, Vol. 55, No. 10, October 1997, pp. 362-368. Address: Linda Boyd, Tufts University School of Nutrition Science and Policy, Frances Stern Nutrition Center, New England Medical Center, Boston, MA 02111.

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