

Singh: MMR role in autism (continued from page 6)

report, "whereas the antibody levels of [other viruses] did not significantly differ between autistic and normal children." In particular, an unusual MMR antibody was present in 60 percent of autistic children, but none of the non-disabled controls.

Further analysis revealed that the increase of measles or MMR antibodies was related to measles but not to mumps or rubella viral proteins. Moreover, more than 90 percent of autistic subjects positive for MMR antibodies were also positive for MBP autoantibodies, which the researchers say suggests "a causal association between MMR and brain autoimmunity in autism."

The researchers conclude that "an 'atypical' measles infection in the absence of a rash but with neurological symptoms might be etiologically linked to autoimmunity in autism."

"Abnormal measles serology and autoimmunity in autistic children," Vijendra K. Singh and Courtney Nelson, *Journal of Allergy and Clinical Immunology*, Vol. 109, No. 1, January 2002, S232. Address: Vijendra Singh, Utah State University, Logan, UT.

GF/CF DIET SUPPORT AVAILABLE ONLINE

In response to increasing interest in the gluten-free/casein-free diet, and the need for objective, non-commercially-motivated online information about issues including peptide testing and digestive enzymes, a team of parent volunteers has created a new online resource for parents with questions about dietary intervention for the treatment of autism: "The BIG Dietary FAQs Online Database," at www.gfcfdietsupport.com. (For people new to the Internet, "FAQ" stands for "Frequently Asked Questions.") The database, edited by Karyn Seroussi, Jorgen Klaveness, Judy DeHart, Cara Lewis, Lisa S. Lewis, Jay Bigam, and Jay Berger, allows you to search the database by keyword for answers to questions about dietary and biological treatments for autism.

FILM TO AIR ON PBS

The documentary *Refrigerator Mothers*, which took top honors at the recent Sedona International Film Festival, will premiere on national PBS TV (on the public television program P.O.V.) on the evening of Tuesday, July 16. *Refrigerator Mothers*, directed by J. J. Hanley (the mother of an autistic child), describes the "mother blaming" theory of autism prevalent in the middle to late 20th century, and the devastating effects of this belief.

COMMENTARY: Enzymes, amino acids and phenol in autism

The following article was prepared by Dr. Jon Pangborn to accompany our editorial on page 3.

One purpose for providing special digestive enzymes is to aid the complete breakdown of dietary proteins and peptides into single, free-form amino acids. An objective is to reduce or nearly eliminate harmful peptides that can act as false neurotransmitters and disruptors of immune response. For this objective, both dietary restrictions and enzyme supplementation are advisable.

Free-form amino acids can be easily absorbed and utilized in body tissues. Each then has work to do in the body. The amino acid tyrosine is needed for formation of thyroglobulin, catecholamines hormones (dopamine, noradrenalin), melanin pigment molecules, and other essential metabolites. When tyrosine is deficient, thyroid functions, mood, behavior and attitude can be affected as can rest and sleep patterns and cognitive abilities.

Tyrosine is a phenol; simply stated, it is phenol-alanine (4-hydroxyphenylalanine).

While some phenols, such as pentachlorophenol, can inhibit sulfation, other phenol molecules, especially tyrosine, are essential to human life. In this author's opinion, it is absolutely wrong to provide an enzyme supplement that destroys all dietary phenols. A "no-phenol regimen" invites metabolic disorder, especially for individuals who may have problems with tyrosine adequacy. Many autistics do seem to have a problem in this area. They do not make enough tyrosine from its essential precursor, phenylalanine, and they then depend much more heavily on dietary tyrosine. In fact, individuals with disordered phenylalanine metabolism and deficient tyrosine were among the first to have a metabolic explanation for their autism. A product that destroys the phenol tyrosine is certain to be harmful or dangerous to such individuals. I emphatically urge that any such product not be used for human consumption.

—Jon Pangborn, Ph.D., F.A.I.C.

LETTERS TO THE EDITOR

Doctors' wives wanted!

To the Editor:

Last October my husband and I attended our first DAN! Conference. Our 2-1/2-year-old son is clearly improving greatly with dietary intervention, ABA, and the biomedical interventions we learned at the DAN! Conference. As the wife of a pediatrician, I have learned that it is quite a process for an allopathically trained physician to research, reason, and affirm the benefits of biomedical therapies.

While my husband continues in private practice and learns more about the biomedical approach to autism, I have been actively spreading the word in our community. I am a parent support contact for PDD and autism in our state parenting organization and was interviewed by them on TV; have started a gluten-free/casein-free support group; and with my husband have been building bridges with nutritionists, speech pathologists, and others to facilitate comprehensive care for autistic children in our community. By working together and sharing ideas, we can be the driving force that brings to reality the greater acceptance and more common practice of biomedical interventions for autism.

Please email me at carolynlewis@mac.com if you have the energy, enthusiasm, and time to make this a reality. By sharing ideas we can make great things happen!

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Help for sound sensitivity

To the Editor:

Thanks to a gluten-free diet, vitamins, and other effective interventions, my formerly autistic son is now successfully mainstreamed. In his younger, autistic years he was highly sound sensitive, covering his ears often to what were to him painful sounds.

During a recent flight I found an ad in the airline magazine for an "acoustic noise-cancelling headset," produced by the Bose Company. This device consists of earphones that electronically offer "dramatic relief from the noise of aircraft engines, trains, city streets, leaf blowers, and the office," to quote the ad. The headset is designed to actively monitor and counteract unwanted noise before it reaches the ears.

My son no longer is a candidate for this device, but other parents may find it useful. The ad does not list a price, but it offers a no-risk 30-day trial. Contact information: 1-800-474-2673, ext. Q1479, www.bose.com/q1479.

Name Withheld
Los Angeles, CA

Editor's note: ARI has not received any reports from parents who have tried this approach. We are interested in hearing from anyone who has used this device, or similar products manufactured by other companies, as an aid for children with sound sensitivity.

Letters to the Editor are welcome. We reserve the right to edit letters for length and clarity. Letters should not exceed two pages in length, including references.