

Executive Director's Column

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Early Autism Screenings: A Blessing or a Curse?

In her new book, *The Secret History of the War on Cancer*, Professor Devra Davis, Ph.D., Director of the Center for Environmental Oncology at the University of Pittsburgh Cancer Institute, states, “The war on cancer has been fighting many of the wrong battles with the wrong weapons and the wrong leaders... targeting the illness and leaving its myriad causes untouched.” Dr. Davis could very easily have been speaking about autism.

The Wrong Leaders

At their annual meeting in October, the American Academy of Pediatrics (AAP) directed physicians to screen young children for autism and related disorders at age 18 and 24 months, as part of well baby checkups. No one denies that early diagnosis is crucial. Are we wise, however, to entrust screening to them? Are they also fighting the wrong battles with the wrong weapons? I think, “yes.” One study showed that fewer than 3% of pediatricians make a correct diagnosis of autism, and that 58% saw no developmental delays in those later diagnosed.

Recognizing the Right Leaders

Parents and professionals from grassroots autism organizations are the right leaders. THEY recognize signs first. I join Barbara Loe Fisher of the National Vaccine Information Center (NVIC) in her concern about the timing of these screenings, just when vaccine boosters are due. If the doctor still vaccinates, even though he suspects autism, immunological problems could get worse.

The Wrong Battles

Poor socialization and delayed language are the wrong battlefronts! Many signs of stress such as chronic strep, ear, or other infections, skipped steps in motor development, and picky eating due to intolerance of tastes, textures, and smells, precede loss of eye contact and language. As symptoms accumulate and exhaust the immune and nervous systems, little energy is left for development. Fortunately, the AAP is now urging members to “partner” and “listen to” parents, rather than “wait-and-see,” AND to “pay special attention” to sleep and gastro-intestinal disturbances.

The Wrong Weapons

Early interventions usually involve medication to address symptoms. At the AAP conference, one doctor reported that drugs are doctors’ preferred weapons for children diagnosed with autism or Asperger syndrome. Physicians treat about 80% with at least one psychiatric drug. Almost half get antipsychotic drugs, antidepressants, and stimulants. Some take mood stabilizers and anticonvulsants; many are on several medications. Side effects of these pharmaceutical treatments include nutritional deficiencies, sleep, and loss of appetite.

Fighting the Right Battles

Doctors should be battling the underlying causes of eczema, food allergies, sleep disturbances, picky eating, and temper tantrums. Parents are demanding to know WHY their kids have sleep, digestive, and language issues, and especially why they regressed following vaccination.

The Right Weapons

Diets and sensory therapies are the right weapons. Gluten-, casein-, soy-, yeast-, and additive-free diets take a burden off the digestive system and free up energy for development. Occupational, speech-language, and play therapists, optometrists and chiropractors are all imperative for alleviating sensory and motor issues. These are not standard components of most early intervention programs.

What to Screen and When

The AAP told doctors to look for the following red flags: not turning to “Look!” or his/her name smiling late and poor eye contact.

Is this screening too little too late? Based upon almost 40 years working with children with special needs, I would like to propose an alternative screening that combines sound developmental practice with what we know about immunological and nervous system markers. Vaccine reactions at ANY age are serious risk factors for everyone to consider.

By age six months, baby

- sits without support
- turns toward sudden noises
- smiles in recognition of primary caregivers
- eyes follow objects, moving together
- has no skin irritations
- shows interest in eating; stools are formed

By one year, baby

- crawls with alternate arm and leg movements
- eyes work well with hands
- makes sounds, some of which are meaningful
- reciprocates socially
- eats a variety of foods with regular digestion
- takes a nap each day

By age 18 months, toddler

- walks independently
- uses both eyes to search, and eyes and hands to inspect
- sleeps 11-12 hours at a time
- chews foods
- plays alone purposefully for five to 10 minutes
- follows verbal direction and has 10 word vocabulary

By age 24 months

- can run and climb
- turns pages of book as if “reading”
- plays purposefully for at least 15 minutes
- notices other children and interacts
- puts two words together

Prevention not Identification

A physician’s credo is “Do No Harm.” I fear that the mandated early autism screenings, although a step in the right direction, could lead to harm. Let’s truly partner with doctors to teach them to recognize the right signs of possible autism and to prescribe the right interventions. Only then can we reduce the numbers of children being diagnosed.