Starting the Journey to Treat Your Child

You have arrived at this page because either your child has been diagnosed as being on the autism spectrum or you have a suspicion that they may be on the spectrum. Your child may have been diagnosed some time ago and you have tried early intervention therapies, however feel (or hear from other parents) that there is more that you can do for your child. You have been told by the medical professionals that there is nothing else wrong with your child, "they are just autistic". As a parent you have an instinct that "something is not quite right" with your child. The loose, foul stools or constipation, the mood changes, aggressiveness, lack of attention and so forth seem to be telling you, there must be more. You are not alone. There are countless other parents that have been here where you are now and not given up on their children. Many of these children are now living very full, independent and productive lives. There is not a cure for autism, but the children can be treated effectively.

"There is a golden window of opportunity (to heal your child) that slowly diminishes as the child gets older." Jaqueline McCandless, MD. Autism Specialist and author of "Children With Starving Brains"

Consensus

Raising a child on the autism spectrum places extreme pressures and stress on the whole family. If you, the parents cannot agree on an overall plan of action, the problems will be compounded enormously for the parent trying to recover their child. Also to consider is whether extended family, early intervention, kindergarten, school, etc. be relied on to maintain dietary restrictions? How will the balance be met between the needs of the ASD child / children and other neuro-typical children in the family? Who will decide on the therapies for the autistic child and will both parents agree? Will the whole family join in changing their diet, that is designed for the one sick child?

It is so interesting to have a whole family decide to change their diet, as I so often see the parents return and report improvements not only in their own health, but also in their other neurotypical children as well. "He is so more pleasant to live with now." "My daughter is able to concentrate more and teachers are saying how well she is doing at school."

These are some of the many and difficult issues that must be addressed, preferably at the outset of treatment. One fact is very clear: the sooner an effective and total intervention is established, the better the outcome will be for your child.

Learn As Much As You Can

Your child is unique as to their individual issues and needs, you are in the unique position to determine what works best for your child. It is up to you how much you wish to learn about what can be done for your child. As parents you are probably confused as doctors are telling you that there is no reliable research that diet, supplements, etc., work. This site was compiled so that parents like yourself can quickly access reliable information, resources and research, to give your child the best help that is currently available.



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Helping children achieve their full potential

Choose A Biomedical Practitioner

Choose a Biomedical Practitioner that you are comfortable with and is easily accessible, as there will be plenty of questions that will need to be answered. If a practitioner tells you that they can cure your child, turn around and leave, as your child needs a multimodality approach and no one practitioner can do it all.

Have a Comprehensive Assessment for Underlying Medical Conditions Your Child May Have.

Your child should have, as a minimum, a comprehensive assessment done to determine what their underlying issues or medical co morbidities may be. This should include:

- A full family and medical history
- Current symptoms (ie. aggression, bowel issues, lack of concentration, etc.)
- Sleep assessment; problems falling asleep, night-time waking, sleep apnoea
- A dietary assessment to ensure adequate level of protein, beneficial fats, iron, zinc, fibre, etc., as well as intolerances to chemicals in the diet, such as phenols, salicylates, amines, oxalates, fructose, etc.
- Testing for nutritional deficiencies, gastrointestinal issues, metabolic disorders

Your young child is growing and developing rapidly. There is a window of opportunity to correct underlying weaknesses (whether they be nutritional, biochemical or medical) before they mature, at which point it may take longer correct their unique issues.

Dietary Modification

We hear a lot about dietary modification for ASD children. Before we consider major dietary modification for your child we need to begin with the basics. Does your child's diet contain sufficient:

- ◊ protein
- ♦ fibre
- ⋄ basic nutrients zinc, folate, vitamin B12, C, calcium, iron, iodine, etc

Does your child have sensory issues with food that need to be taken into consideration when trying to introduce new foods? Are they "picky eaters"? Is their appetite poor due to low levels of zinc or iron? Are they craving certain foods only? These issues may need to be addressed first before attempting to make major changes in you child's diet.

Many if not most children respond favourably to:

- removal of artificial colours and preservatives
- a gluten and or a casein free diet this needs to be <u>strict</u>, otherwise you are wasting your time and money, but most importantly, <u>missing the opportunity to see if your child</u> <u>will benefit</u>

Ideally we would prefer to also remove:

- removal of soy and corn
- phenols (salicylates), oxalates, etc., which may be an issue

Many parents transition to a Single Carbohydrate Diet (SCD) or a Gut and Psychology Syndrome (GAPS) diet, however many parents see improvements in their children with just making these initial changes to their child's diet.

Addressing Specific issues

There are specific issues that parents consider a priority (sleep disturbances, aggression, eye contact, etc) and if possible this will be assessed and addressed when beginning a treatment plan.

Basic Nutritional Supplementation

Basic supplements are to support your child as they are growing and developing so quickly, to ensure they have the nutrients to support the brain, immune system, deal with oxidative stress, detoxification and repair. It is pivotal to support your child's gut as research is confirming a strong link between the gut and brain, as well as the gut and the immune system.

<u>Multivitamin Mineral Formula</u> - a good quality multivitamin mineral formula, preferably with the active forms of the B group vitamins (some children have a problem with conversion of vitamins B6 and folate into their active forms). If your child's copper levels are high, the supplement should **not contain copper**. If the child reacts to the supplement, individual vitamins, minerals may need to be supplemented.

<u>Essential Fatty Acids</u> - usually supplied as a good quality cod liver oil for the additional benefits of vitamin A and D that is in cod liver oil but not in fish oils.

<u>Gastrointestinal Support</u> - with probiotics and prebiotics, as well as gastrointestinal herbs to help with healing the gut.

<u>Vitamin C</u> - I routinely supplement with vitamin C as I see so many children that are low on Organic Acid Test results.

<u>Zinc</u> - is such a vital mineral as children are growing and developing, and may be low due to high copper levels.

<u>Additional supplements</u> such as calcium, magnesium, or herbs to support the immune or nervous system.

Specific Nutrients

Specific nutrients can be prescribed individually for specific symptoms or behaviours or can be guided by the results of an Organic Acid Test. Individual supplements may be required depending on the results of initial testing. For example, if a mitochondrial issue is confirmed, then carnitine and CoQ10 may be required. If there is an undermethylation issue, then vitamins B6, B12 and folinic acid may be required.

Initial Test Considerations

Initial testing is guided by the Biomedical practitioner treating your child. I work with parents according to what they are able to afford. Some parents do want to do some initial testing. In that case we are guided by the child's symptom picture as to which test or tests may be most useful.

Basic testing may include any of the following:

Organic Acid Testing - to check for biochemical abnormalities

Stool Analysis - to check for an imbalance of gut flora, pathogenic bacteria, fungi or parasites

Hair Analysis - for heavy metal toxicity and imbalances of essential minerals

<u>Blood Tests</u> - FBE (Full Blood Examination), LFT (Liver Function Test), iron studies, TSH (thyroid), vitamin B12, folate, zinc, copper, ceruloplasmin, histamine and homocysteine.

Even if finances are limited, there are alternative options that can be considered. For example, if constipation is an issue an abdominal X-ray can be done to check for the degree of faecal impaction in the bowel. If loose stools are an issue, then a PCR parasitology test can be ordered through routine pathology laboratories. Basic blood work can also be ordered if required. These tests can be ordered by your family doctor and are covered by Medicare.

Additional Testing

Additional testing that a Biomedical practitioner may consider, depending on your child's clinical history. The tests listed below may only be ordered once treatment has been initiated to help refine the treatment protocol:

<u>Allergy Testing</u> - to see which foods your child may have allergies to. Often useful for those children that don't appear to benefit from the GF/CF diet, or who responded to at first but then regressed. Testing may include IgG or IgE allergy testing.

<u>KUB X-ray</u> – an abdominal X-ray can be very useful to rule out faecal impaction in the bowel if there is constipation or alternating constipation and diarrhoea..

<u>Kryptopyrrole</u> - A test for pyroluria which is often found in people with ADHD, schizophrenia, ASD, bipolar disorder and depression

<u>Methylation</u> - many ASD children are undermethylated and benefit by supporting their methylation pathways

Blood Testing - as mentioned in Initial Tests

Final Words of Advice

I encourage you to learn as much as you can, only by doing so can <u>you</u> help your child. By being informed can you make the right decisions to heal your child. Medical professionals, who are totally out of touch with current research, continuously tell parents that other treatments are unproven and may be "dangerous". I am personally grateful to the parents that refused to give up on their children and have done the groundbreaking work, from which our children have all benefited from. My son would not be where he is today if I had listened to the medical professionals or waited for the research studies that, no one wants to fund let alone publish. I only have one regret, that I didn't start sooner. I hope you don't have the same regret.