

Autism Spectrum Disorder: Hidden Pain and Alternate Therapies

Dr. Pranab Mallik
B.H.M.S, Kolkata, Regn. No.: 27018
Email: drpmallik80@gmail.com

Abstract

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental condition characterized by challenges in social communication, interaction, and behaviour. This article delves into a comprehensive approach to understanding and managing ASD, drawing from a detailed manual that emphasizes a holistic perspective. It highlights the importance of moving beyond diagnostic labels towards fostering a "better life" for individuals with ASD. This article underscores a wide array of observational methods, ranging from sleep patterns and gastrointestinal health to sensory processing and environmental influences. Furthermore, it explores the potential role of alternate therapies, particularly Homeopathy, in managing ASD, emphasizing its perceived advantages of fewer side effects and its potential to address underlying imbalances. This article also stresses the crucial role of parental involvement, individualized care, and the creation of supportive environments in the journey towards improving the quality of life for individuals with ASD.

Keywords: Autism Spectrum Disorder; Observational Methods; Parental Involvement; Supportive Environment; Homeopathy.

Introduction

Autism Spectrum Disorder (ASD) represents a significant public health concern, affecting a growing number of individuals worldwide. Defined by persistent deficits in social communication and social interaction across multiple contexts, alongside restricted, repetitive patterns of behaviour, interests, or activities, ASD is a spectrum that manifests with considerable heterogeneity. The complexity of ASD necessitates a multifaceted approach to assessment and intervention, moving beyond a singular focus on diagnostic criteria to encompass the individual's overall well-being and quality of life.

This article offers a unique perspective on ASD, emphasizing a holistic and observational approach to understanding its manifestations. It frames ASD not merely as a disorder to be "cured" but as a condition for which a "better life" can be cultivated. This perspective encourages a shift in focus from solely diagnostic labels to a more integrated understanding that includes a broad spectrum of observable phenomena and potential contributing factors. This article explores the definition, overview, extensive observational methods, and therapeutic considerations for ASD, with a particular focus on the role of Homeopathy as presented by the author.

Definition and Overview of Autism Spectrum Disorder

Autism Spectrum Disorder (ASD) is defined as a developmental condition that affects brain development, leading to challenges in social communication, interaction, and behaviour. ASD affects an estimated 1 in 59 children. It is a lifelong neurodevelopmental condition characterized by a consistent set of diagnostic criteria across all ages, though the manifestation of symptoms and the individual's ability to manage them can change over time. The term "spectrum" accurately reflects the wide range of abilities and challenges experienced by individuals with ASD, from those with profound intellectual disabilities and minimal verbal communication to those with average or above-average intelligence who may struggle with nuanced social interactions.

This article highlights that many "challenging words" are used to describe ASD, such as "Neuro Developmental Disorder," "Life Long Condition," and "Break Down Condition in Social Communication, Interaction and Behaviour." It posits that these terms can imply a "low understanding" or a singular, fixed condition. It is suggested that instead of focusing on these labels, the emphasis should be on creating a "better life" for individuals with ASD. This perspective aligns with modern approaches that prioritize functional outcomes and quality of life over mere diagnostic categorization.

This article further emphasizes that ASD expresses both common and individual symptoms, suggesting that while diagnostic criteria provide a framework, each individual's journey is unique. The goal, as articulated, is to "become BETTER" and "develop Understanding." This underscores a therapeutic philosophy centered on growth, adaptation, and enhancing the individual's capacity to navigate their world.

The Role of Genetics and Parental Influence

A significant aspect highlighted is the genetic component of ASD, with this article stating that "70% of the genome is responsible." This aligns with extensive research identifying a strong genetic basis for ASD, involving a complex interplay of numerous genes. The involvement of parents and grand-parents is also deemed crucial, suggesting that the child's genome's "true owners" (parents and grand-parents) working "hand-in-hand" to foster betterment is highly satisfying. This underscores the importance of parental support, understanding, and active participation in the child's developmental journey.

The introduction also touches upon parental objections and the "skilful techniques of a doctor with limited knowledge" contributing to a "Better Life." This suggests an acknowledgment that while medical expertise is vital, practical, empathetic approaches informed by parental insights can be equally impactful.

Extensive Observational Methods in ASD Assessment

The core of this article lies in its detailed exploration of various observational methods that can provide crucial insights into an individual with ASD. These methods go beyond standard

clinical assessments and delve into the everyday experiences and physiological indicators of the individual.

1. Sleep Patterns:

Sleep disturbances are widely recognized as a common comorbidity in ASD, affecting a significant percentage of individuals. This article states that sleep is an "active physiological process" and that "Lack/Loss of sleep makes us prone to many mental disorders." It notes that Growth Hormone depends on sleep, and neurogenesis is part of sleep. The author points out that the lack of sleep "delays alertness every moment." While good sleep contributes to cheerfulness, the significance of sleep medication is questioned if the underlying cause of sleep disturbance is not addressed. This article emphasizes identifying the root cause of sleep disruption for natural sleep to occur. It also raises the concern that even if sleep improves, remaining hyperactivity might require further investigation, suggesting that identifying the reason for sleeplessness is paramount to addressing associated difficulties.

2. Gastrointestinal (GI) Health:

GI issues, including constipation, diarrhoea, abdominal pain, and irregular bowel movements, are highly prevalent in individuals with ASD, often exceeding rates in the neuro-typical population. This article describes parental complaints of sticky stool, inconsistent consistency (neither liquid nor solid), and repetitive behaviours associated with IBS, such as smelling food, excessive hand-washing, or fidgeting. It also notes instances of alternating soft and hard stools, and the presence of blood in the stool, highlighting that conditions like fissures and piles should not be overlooked. This article suggests that addressing constipation with remedies like Iodine can help improve gut health, immunological function, and cognitive abilities. The Bristol Stool Chart is mentioned as a tool to correlate stool characteristics with the child's condition.

3. Urinary Tract Issues:

Urinary tract infections (UTIs) and cystitis are also noted as potential concerns. This article mentions congenital abnormalities of the male reproductive system and bladder/bowel syndrome dysfunctions as having a link to ASD, suggesting a need for further investigation through resources like Google. Parents may report frequent urination, dribbling, or an inability to urinate, with some finding relief in running water. This article also draws connections between hand flapping, urinary problems, and sleeplessness.

4. Recurrent Infections:

This article suggests that by identifying and avoiding certain foods, particularly those with indigestible peels, the incidence of recurrent infections like UTIs and gut problems might decrease. It implies that these infections could be linked to underlying issues in ASD.

5. Migraine:

Migraine is identified as a significant comorbidity with ASD. The author emphasizes that understanding migraine treatment is crucial for the betterment of individuals with ASD. Migraine can manifest with self-injurious behaviours, such as tapping fingers, and can profoundly impact an individual's state. This article suggests that observation is the key, as Migraine can "turn any person upside down." It also links migraines with sleeplessness and hand flapping. Diagnostic tools like Brainstem Evoked Response Audiometry and BERA TEST are mentioned in the context of assessing neurological function, though this article notes that abnormalities are not always found in every test. An often-underrecognized comorbidity in ASD is migraine and headache. Despite migraine being one of the most prevalent neurological diseases globally, its association with autism has been surprisingly understudied. However, existing research suggests a high rate of migrainous symptomatology in individuals with autism.

The connection between autism and migraine is thought to stem from shared pathophysiological mechanisms, including:

- Dysregulation in neurotransmission, particularly involving the serotonergic system.
- Altered immune responses leading to neurogenic neuroinflammation.
- Abnormal findings in cortical minicolumn organization.
- Dysfunction within the gut-brain axis.
- Both conditions also appear to share susceptibility genes.

A significant challenge in diagnosing and managing headaches and migraines in individuals with ASD is their altered pain sensitivity. Some studies indicate hyposensitivity to pain, while others suggest a hypersensitivity to pain and other sensory stimuli, a characteristic shared with migraineurs. Sensory anomalies are a hallmark of autism, and heightened reactions to stimuli like light, sound, or touch can be linked to migraine headaches. Furthermore, anxiety, which is strongly connected to migraine and frequently coexists with autism, can increase the likelihood of migraine attacks. Due to difficulties in communicating feelings and emotions, migraine and headache symptoms in individuals with ASD are often underdiagnosed. Further epidemiological studies are crucial to fully understand the true scale and nature of this association.

6. Toe Walking:

Toe walking, a gait abnormality, is mentioned with a speculative link to mercury poisoning, though the author acknowledges this as controversial. Other potential contributing factors like painful corns and uricimia are also listed.

7. Immune Deficiency and Thyroid Function:

This article touches upon immune deficiency, referencing TSH and FT4 levels. It also highlights the critical importance of thyroid profiles in ASD assessment. The connection between REELIN gene expression, thyroid hormones, and brain development is noted, suggesting a potential, albeit not fully understood, link between ASD and thyroid function. The importance of Iodine for thyroid gland function and overall health is also emphasized.

8. Environmental Factors (EMF):

The influence of electromagnetic fields (EMF), including microwaves and room heaters, is briefly mentioned as potentially affecting genes. This points towards an awareness of environmental influences, though this area is less extensively explored in mainstream ASD research compared to other factors.

9. Understanding and Developmental Milestones:

A key observation relates to the "understanding level development." This article describes how children with ASD might not follow adults and may engage in repetitive or unusual behaviours. It posits a "missing connection" within the brain cortex and atmosphere, linking it to factors like climate change, vitamin D deficiency, and anaemia as potential contributors to ASD in some cases.

In this context the **Landau Kleffner Syndrome** (LKS) may be referred, which is a rare childhood neurological disorder. It is sometimes associated with mutations of **RELN** gene, which encodes a protein called **reelin**. LKS is an epileptic encephalopathy characterised by the sudden or gradual loss of language comprehension and expression (aphasia) in children who have previously developed normal language skills. The syndrome occurs to children typically between the ages of 3 and 7.

10. Hand Flapping and Repetitive Behaviours:

Hand flapping is presented as an observable behaviour that can be associated with various other issues, including urinary problems, sleeplessness, migraines, gut disturbances, and other chronic conditions. This article suggests that these behaviours can be indicators of underlying issues.

11. Physical Observations and Sensory Processing:

This article notes a physical observation where the lower part of a child's body feels heavy when picked up. It also mentions potential links to anxiety and body aches, as well as a fear of downward motion. The tendency for repetitive sensory-seeking behaviours like spinning is also highlighted.

12. Neurotransmitters and Gut-Brain Axis:

The role of neurotransmitters like Serotonin and Melatonin, particularly in relation to sleep, is acknowledged as a "well-established theory." However, This article cautions against oversimplifying this by assuming that serotonin-rich foods alone will resolve issues. It distinguishes between neurochemical messengers and the broader neurodevelopmental disorder, mentioning theories of demyelination and mitochondrial dysfunction as currently accepted concepts. The strong connection between the gut and the brain (gut-brain axis) is implicitly supported by the emphasis on GI health and its link to cognitive function and immunological health.

13. Parental Role and Family Environment:

The importance of parental observation and involvement is repeatedly stressed. This article suggests that parents should be empowered to manage "child health management functions." A calm and supportive family environment is deemed beneficial for an ASD child's cognition and mental health, whereas chaotic or unrestful environments can be detrimental.

14. Diagnostic Criteria and Therapeutic Goals:

While acknowledging the necessity of diagnostic criteria, This article argues that common symptoms alone do not necessarily lead to a "better life." The focus should be on observation, understanding the individual, and selecting appropriate remedies. The goal is not just to meet criteria but to actively improve the child's quality of life.

Therapeutic Considerations and the Role of Homeopathy

This article presents a strong advocacy for Homeopathy as a complementary therapy for ASD. It posits that Homeopathic drugs have "many advantages" and are "much safer for children," with fewer side effects compared to other treatments. The author suggests that Homeopathy does not significantly impact the microbiome, which is often a concern with other interventions.

This article acknowledges that all therapeutic approaches have limitations. However, it argues that the time is ripe for Homeopathy to be considered more seriously, especially for addressing the mental and emotional aspects of ASD, given the increasing prevalence of the condition. The author believes that a pathology-based approach, incorporating genetic sequence studies, hair metal analysis, lithium level estimation, and thyroid profiles, would further enhance the efficacy of Homeopathy.

The language used in this article is intentionally simplified for broader understanding by the general public, while still being comprehensible to medical experts. This reflects a desire to make information accessible and actionable. This article suggests that for ASD betterment, doctor-created schools that allow for extensive daily observation and interaction are crucial for

maintaining diagnostic criteria and supporting the child. The importance of tailoring the environment and approach to the child's needs is emphasized.

Discussion

The comprehensive list of observational methods presented in this article highlights a deep commitment to understanding ASD from a holistic perspective. By examining a wide range of physiological and behavioural indicators, practitioners can gain a more nuanced picture of an individual's unique challenges and strengths. The emphasis on sleep, gastrointestinal health, and sensory processing aligns with established research on common comorbidities in ASD. This article's assertion that "70% of the genome is responsible" underscores the significant genetic underpinnings, while the focus on parental observation and family environment points to the critical role of nurture and support systems.

The advocacy for Homeopathy as a complementary therapy, particularly for its perceived safety and fewer side effects, presents an interesting perspective. While mainstream scientific consensus on the efficacy of Homeopathy for ASD is varied and often debated, This article's emphasis on its potential benefits, especially in conjunction with detailed observation and a focus on improving quality of life, warrants consideration within a personalized treatment framework. It is important to note that the scientific evidence supporting Homeopathy for ASD is not robustly established in modern medical literature, and its use should be carefully considered alongside evidence-based interventions.

This article's critique of solely relying on diagnostic labels and its call to focus on creating a "better life" resonates with modern therapeutic paradigms that prioritize functional outcomes. The integration of various investigative methods, including genetic and thyroid profiling, suggests a forward-thinking approach that seeks to understand the underlying biological mechanisms.

The deliberate use of accessible language in this article indicates a desire to empower parents and caregivers with knowledge, enabling them to actively participate in the child's care and to advocate for their needs. It is proposed to establish doctor-created schools with therapeutic clinic that prioritize observation and individualized attention and further reinforces this commitment to a supportive and tailored educational environment for the children suffering from ASD.

Conclusion

This article provides a rich tapestry of insights into Autism Spectrum Disorder, advocating for a comprehensive, observational, and individualized approach to assessment and care. By meticulously detailing a wide array of observational methods, it encourages practitioners and parents to look beyond superficial symptoms and delve into the intricate physiological and behavioural manifestations of ASD. The emphasis on fostering a "better life" rather than merely labelling a disorder, coupled with the exploration of complementary therapies like Homeopathy, underscores a holistic philosophy of care. While the scientific validation of all

proposed methods and therapies may vary, the underlying principles of detailed observation, personalized intervention, and a strong focus on the individual's overall well-being remain central to effectively supporting individuals with Autism Spectrum Disorder. The integration of genetics, environmental factors, and robust parental involvement forms a critical triad in navigating the complexities of ASD and ultimately enhancing the quality of life for those on the spectrum.

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