



# Autism Spectrum

The Official Publication of the Autism Society of New Hampshire

Vol. 2 ~ No. 1

P O Box 68, Concord, NH 03302-0068

Winter Issue

## From The President's Desk...

**Happy New Year to you All!!**

**We look forward to the coming months with much anticipation and energy. As with every new beginning there comes change and choices. In this issue of our newsletter we are initiating a series of articles about alternative methods and interventions.**

**The Society is dedicated to providing info about the varied and different approaches that are available in the**

(From The President ~ Page 7)

## New Advancements in Autism Treatments

Natural medicine is showing the furthest advancements in improving the health of people with autism. Identifying and treating the cause of autism is proving much more effective than merely suppressing its symptoms. New research into brain neurochemistry is revealing how we can search for a cure. The way this is done is tri-fold:

- 1) Nourish the nervous system with its particular nutrients.
- 2) Balance brain neurotransmitters.
- 3) Detoxify heavy metals, chemicals, or viruses upsetting brain chemistry.

(See New Advancements ~ Page 2)

## What's Inside ...

<i>Homeopathy And Autism</i>	<i>Page 3</i>
<i>Power Of The Pony</i>	<i>Page 5</i>
<i>In Memory ...</i>	<i>Page 6</i>
<i>From Mailbox</i>	<i>Page 7</i>
<i>The Right Diet</i>	<i>Page 8</i>
<i>PT And Autism</i>	<i>Page 9</i>
<i>Support and Contact</i>	
<i>Groups</i>	<i>Page 10-11</i>
<i>Upcoming SERESC Events</i>	<i>Page 12</i>
<i>The DAN!!</i>	<i>Page 13</i>
<i>Upcoming SERESC Events</i>	<i>Page 14</i>
<i>CBS To Feature Show</i>	<i>Page 14</i>
<i>Summer Institute Schedule</i>	<i>Page 15</i>
<i>Membership Form</i>	<i>Page 16</i>
<i>Wellness Revolution</i>	<i>Page 18</i>
<i>OT Utilizing</i>	<i>Page 19</i>
<i>NBC To Air Series</i>	<i>Page 20</i>
<i>Short Story Nominated</i>	<i>Page 20</i>

**Happy Winter!!**

## Dr. To Donate All Proceeds To ASNH

Western medicine has no cure for autism. Suppression of symptoms is only a lifetime of chasing one's tail.

The true cure to autism is restoring brain function to a healthy level. This is done through a two part process:

- 1) Nourish the body's nervous system and give it the nutrients it needs to create all

(See No Cure ~ Page 6)

**New Advancements ~ From Page 1**

Through these three treatment goals, not only does the health of the child improve, but eventually pharmacotherapies may be removed.

The nourishment of the nervous system has been well proven in scientific studies and many are familiar with EPA, DHA, EPA as healthy fats necessary to neural health. These along with certain vitamins, minerals, and amino acids have proven to alleviate autistic symptoms. However, a Canadian study states that even though all symptoms may be alleviated through vitamin-aminoacid therapy, all improvements reverse after cessation of the treatment. We must keep searching for more!

This leads us to treating the cause of autism and a way to improve health permanently. Heavy metals, chemicals, and viruses lodge in neural tissue and upset brain chemistry. Serotonin, GABA, norepinephrine, epinephrine, glutamate, etc. need to be in a balance or they will express as symptoms of autism, asperger's, AD/HD, and Rett's. Testing of these is easy with a take home urinary collection (all brain neurotransmitters are water soluble and excreted through the urine.) After an individual brain profile is received, individual treatment can begin, focusing on improving each person's unique brain chemistry!

Modulating brain neurotransmitters is only one step and removing the cause of the brain imbalance is the final step to finding a cure to autism. Detoxification of the heavy metals, chemicals, and viruses removes the objects preventing healthy brain communication and can restore health. This detoxification is oral homeopathic drainage and not IV chelation. It is very easy to implement for children and can be given through G-tubes.

Dr. Jared M. Skowron is a naturopathic doctor specializing in pediatrics and neural conditions. He has found great success improving the health of autistic children **and from Jan 1, 2005 to March 31, 2005 is donating all proceeds from autistic visits to the Autism Society of NH.** Every visit will improve the health of your child as well as strive to meet the goal of \$10,000 for the Autism Society.

Dr. Skowron practices in Portsmouth, NH at Whole Life Health Care (431-6677) and in Bedford, NH at New Hampshire Natural Health Clinic (in Bedford Commons 623-6800). He is a member of MENSA, AANP, and NHAND. Dr. Skowron is speaking to support groups across the state; please call to book a time for him to speak to your group. More information at [www.NaturalKidsHealth.com](http://www.NaturalKidsHealth.com)

## *ASNH Officers and Directors*

### **OFFICERS**

Stacey Shannon, President ~ Christopher Jarvis, Vice President  
Joyce Ninness, Executive Assistant; Bruno DelGreco, Treasurer  
Glee Hooper, Past President.

### **BOARD OF DIRECTORS**

Stephen Anderson ~ Dee Belle Isle ~ Tom Benjamin  
Cindy Addario ~ Cory Collier ~ Deb Dalzell ~ Janet Stafford  
Viki Gayhardt ~ Brian Mikol ~ Barbara Peerenboom ~ Sue Scheinman ~ Carolyn Woodman  
Cindy Addario, Editor, *Autism Spectrum*

## Homeopathy and Autism

By Dr. Pamela Herring, ND, DHANP

With the current statistics showing that 1 in 166 children is being diagnosed as autistic in the United States, we are all looking for answers as to why... and what can we do? New research published in the *Annals of Neurology* found the first direct evidence that links brain inflammation to autism. The study, conducted by the Johns Hopkins University School of Medicine, was funded in part by the Cure Autism Now Foundation. This study found strong evidence that certain types of brain cells (neuroglial cells) show signs of inflammation in people with autism. What could cause inflammation of the brain, and how can it be treated? Why is it that some children seem to get improvement with particular treatments and are even "cured" of autism in rare cases? Is our early vaccination program in the U.S. related to the high rate of autism? (In Europe they wait until the child is about a year old before vaccinating, giving the immune system a chance to mature to some extent first).

While these questions loom in our minds, we do know that improvements can be seen in some cases with the use of homeopathy. Though the number of cases that I personally have treated is limited I have seen good results and can say that there is help for maladies such as autism as well as tics, ADD, tourette's syndrome, asbergers, and other symptoms that can accompany autism.

Below are a few of the cases I have worked with:

1. **John, age 4** when he first came in 12 years ago, was high functioning from the beginning. Within a few days after his first dose of the homeopathic remedy he stopped wetting the bed. Then gradually over several months and years he became more able to function socially and academically. His mother also tended to his nutrition and used other natural treatment modalities along the way. Over the years John advanced to the point of "losing" his diagnosis and now has his drivers license, is graduating from high school and going to college.
2. **Tim, age 3** when first treated, had great improvement in his eye contact and became more affectionate. Eventually his mother figured out that he had an allergy to Citric acid (which is in many foods) and when she took him off this food product he calmed down and improved dramatically in other ways.
3. **Mike, 15**, has been diagnosed with autism and tourette's syndrome and was being treated with some potent conventional drugs that couldn't keep his tics from being out of control. After a homeopathic remedy we found that the extreme tics were significantly diminished - nearly absent- within about 8-10 days on the remedy. This case was more recent and we will be observing the more long-term result of the remedy on this boy. With such a promising response we hope that other symptoms will improve.
4. **A 10 year old boy** that I have followed for about 5 years has been on a remedy all this time that keeps his aggressive behavior completely under control. It is wonderful that he does not have to be on strong drugs that are suppressive. With homeopathy his treatment is gentle and safe.

Amy Lansky's recent book [Impossible Cure](#) gives us an account of her son's journey toward healing his autism with homeopathy. Amy is a PhD who worked at Stanford University and also worked for NASA as a researcher. Below is an excerpt from an interview with Amy from [Mercola.com](#) (website)

(See [Homeopathy and Autism](#) ~ Page 4)

**(Homeopathy and Autism ~ From Page 3)**

**What do you hope to achieve with its [the book's] message?**

My primary motive for writing this book was to let everyone know about homeopathy--to provide them with enough information so that they too can find a cure. Given my own experiences, I find it completely unacceptable that homeopathy is probably the least-understood form of alternative medicine today.

Of course, I am especially motivated to reach other parents with autistic children. My son's cure was a miracle, and I want other children to be saved as well. It's not simple though. Homeopathic treatment of something as serious as autism (or any other form of chronic disease) cannot be done through self-treatment. People need to learn a lot about homeopathy to find a well-trained practitioner and stick with it. A well-educated patient is crucial in homeopathy because patients must be active participants in their treatment. Happily, I can report that I personally know of several families who have pursued homeopathic treatment of their autistic children because of my book. Many of these children are already showing great improvement.

**What was it that first gave you the idea of using homeopathy to treat your son?**

I read an article about homeopathy in Mothering magazine. It was focused on the treatment of ADHD but also on other kinds of behavioral problems in children. It really struck a chord with me; I found a homeopath the next day. The rest is history!

**What did homeopathy have to offer that traditional medicine did not?**

In our son's case, traditional medicine had nothing to offer. We were using speech and language therapy, but aside from these kinds of behavioral therapies, traditional medicine had nothing to offer us. I already had a leaning toward alternative medicine and was open to new ideas. For example, I was trying various kinds of food elimination with my son. But when I read about homeopathy, I somehow knew it was a dramatically different approach--something that could be truly curative, rather than something that simply "maintained" a person to make things more manageable.

- It is also recommended that parents educate themselves about the dangers of vaccines
- Avoid toxic medical treatments especially with autistic kids as they are super-sensitive.
- Consider food elimination – especially for dairy, gluten, corn, food colorings, sugar, and anything to which the child seems sensitive.

Web site: <http://www.impossiblecure.com>.

To read the rest of the interview see [Mercola.com](http://Mercola.com) and in the "search" put the date of the article (Autism, August 27).

Another good resource is Dr. Paul Herscu's website (below). Dr. Herscu is a Naturopathic doctor and was one of my homeopathic teachers and mentors. He has treated many autistic children and found homeopathy to be very helpful- well beyond the suppressive treatments of conventional medicines. Check out Dr. Herscu's website for more information about how homeopathy can treat autism. <[www.nesh.com/main/courses/classreview/autism.html](http://www.nesh.com/main/courses/classreview/autism.html)>.

Most important in the treatment of Autism is good nutrition and especially essential fatty acids for the nervous system and brain to function normally. In my practice we use a combination of nutrition, naturopathy, and homeopathy for treating autistic children.

*Pamela Herring is a naturopathic doctor in Concord, New Hampshire.  
For more information about her practice, check her website: <[www.naturopathicclinic.com](http://www.naturopathicclinic.com)>*

# The Power of The Pony: How Therapeutic Horse Back Riding Has Helped Our Family:

By Joyce M. Ninness, M.Ed.

## What is Therapeutic Riding?

Therapeutic Riding simply stated is the use of the horse in equine-oriented activities to achieve a variety of therapeutic goals, including cognitive, physical, emotional, social, educational and behavioral goals. It is not therapy unless practiced by a licensed and credentialed therapist and then it is called "Hippo Therapy".

## Why does it work?

Therapeutic riding is recognized as a progressive form of alternative treatments for autism. The ability to control a horse as well as one's own body inspires self-confidence, responsibility and teamwork. Best of all, it is a thoroughly enjoyable experience, which creates a special relationship between rider and horse and promotes personal challenges.

## Our Story:

On August 23, 2001, my daughter, Emma, was diagnosed with Autism. At this point she had lost her ability to speak, her recognition of people, including family members and had slipped away inside herself. I was frozen; I did not know how to reach this child who only screamed to communicate. Immediately I immersed Emma into therapies to help her while I attempted to keep my family together which included my newborn son, Ethan.

Emma made such tiny gains in therapy that my husband and I accepted the fact that Emma may never come out of the isolation of Autism. With acceptance came joy of all the tiny accomplishments that Emma made, including looking at me for a split second.

One day at a hot air balloon festival my mom noticed they had pony rides for three dollars. She put Emma on the pony and they started off, Emma smiled! I was taking pictures and watching my baby when through the viewfinder I noticed that Emma was signing "more". I said "Mom, look she is signing more!" My mom, filled with tears of joy from Emma's attempt to communicate asked "more?" and Emma said and signed "more". It was Emma's first word in over a year; needless to say she rode that pony until we ran out of money.

Through my networking within the disabilities community I was able to find a physical therapist, Colleen Sullivan, who practiced Hippo Therapy (therapy on horse back). Emma's speech, body control, awareness of self and others, and academics exploded all because of Kosmic, Colleen's sweet Welch Pony. Three years later Emma is speaking in complete sentences, grooming Kosmic, picking his hooves, leading him into the ring and even cantering.

Emma has gained so much from her bond with horses including:

- Language
- body control (she no longer "toe walked")
- balance (she used to trip all the time)
- independence
- a sense of accomplishment
- happiness
- bonding with a pony who accepts her
- a sport she can excel at
- a sense of community with those at the barn
- understanding of sequencing
- understanding of acceptable behavior (at the barn)
- understanding of cause-effect
- something to look forward to

Since my journey down this unanticipated path I, too, have grown. I quit my job in corporate recruiting to concentrate on Emma and Ethan. Immediately after Emma's diagnosis I enrolled in graduate program in special education, I attended the prestigious NH Leadership Series, as well as numerous courses on Autism and I am a volunteer advocate, secretary of the Autism Society of NH.

I completed my graduate practicum at Horse Power's instructor training school, elated that I finally found my classroom, the place where I shine. Although I never thought my life would have made such a drastic course change I, along with my husband, parents and in-laws, embrace our new path. Together we are starting our own Therapeutic Riding program, Harmony Acres Therapeutic Riding Center, to help other families succeed like ours has.

*Joyce M. Ninness, M.Ed. is the executive assistant at the Autism Society of NH, as well as a certified therapeutic riding instructor, she and her family reside in Concord and would welcome any questions or comments about Therapeutic Riding please contact her at 228-3771 or [jmninness@comcast.net](mailto:jmninness@comcast.net)*

**Dr. To Donate ~ From Page 1)**

chemical levels are decreased in autism.)

- 2) Remove the substances which are impairing brain communication through detoxification of toxins and viruses. (Most heavy metal screens of autistic children are high.)

Naturopathic medicine is a safe, effective, and easy way to improve your child's health far beyond what has been accomplished before. Medicines are chosen based on a child's individual presentation and are selected not to interact with any current medications. These natural therapies are oral and easily taken by children, or fed through G-tubes.

For every autistic child seen from January 2005 – February 2005, all proceeds will be donated to the Autism Society of New Hampshire.

Our goal is to wipe out autism in New Hampshire and raise \$10,000 for the society.

Dr. Jared M. Skowron is a Naturopathic Doctor, specializing in pediatrics and autism, located in Newington, NH and Bedford, NH. Contact information can be found at

[www.NaturalKidsHealth.com](http://www.NaturalKidsHealth.com)

## In Memory of.....

We were saddened to hear of the fatal crash which took the life of Charlene "Cheri" Wood on Jan 6, 2005. Cheri leaves behind her husband Michael and 2 young sons Thomas and Ian. Our hearts and prayers go out to the family in their hour of grief. Out of their sadness they showed incredible generosity by suggesting donations to the Autism Society of NH in lieu of flowers. To date we have been inundated with an outpouring of generosity ( over \$4000) donated in memory of Cheri. Our gratitude to the family and to Charlene's many friends and family who gave so selflessly.

Stacey Shannon, *President*

**Once again we want to thank  
Spectrum Monthly**

for their continued support and generous printing donation of The Spectrum, our official publication.

If you are in need of their services please call them ~ 603-627-0042 and show your appreciation.

**Spectrum Monthly**

97 Eddy Rd., Manchester, NH 03102  
or visit their web at [www.spectrummonthly.com](http://www.spectrummonthly.com)



**BRAND NEW ITEM!!**

Multi-colored Autism Gel Bracelets

**\$5.99 each**

FIRST CLASS POSTAGE PAID WITH IN U.S.



[www.stitches4autism.com](http://www.stitches4autism.com)

Helping Raise Autism Awareness ... One Stitch At A Time  
P O Box 3933, Concord, NH 03302-3933

*From The Mailbag ....*

Dear Colleague, Center Administrator, Parent, or ASA member:

I am writing to tell you about an exciting new research study designed to measure if interactive computer technology can enhance the social skill and pragmatic language abilities of autistic children. My study will begin in late January/February and will end in June. This study is being conducted in partial fulfillment of my doctoral requirements at Shenandoah University in Winchester, Virginia.

For this study, I am required to evaluate between 100 and 200 autistic children. One-half will be exposed to My School Day, the computer interactive program being tested and the other half will continue to receive

traditional methods of instruction. This study will help pave the way for new strategies in the use of computer based instruction as a means of improving the autistic child's ability to recognize and respond appropriately in social situations.

Because my study will be conducted in numerous states across the United States, I have created a website that outlines each detail of this study. I have included my hypothesis, problem statement, research questions, SLP responsibilities, forms and each phase of the study. Please visit this site at <http://www.myschooldaystudy.com>

As an autism resource center administrator, parent, or ASA representative, I hope you will pass this information along to your membership or any Speech Language Pathologists that provide services. Parents will not be allowed to administer the program, however, they may wish to contact the speech language pathologist that provides instruction to their child and that person could indicate his or her interest in participating in this program by emailing me at my web site, <http://www.myschooldaystudy.com> All Speech Language Pathologists participants that complete this study and purchase My School Day after December 1, 2004 will receive complete reimbursement for the cost of this program. For additional information regarding this product, of which I am not affiliated, you may visit <http://www.socialskillbuilder.com>

Clark Bowers  
Primary Investigator ~ Shenandoah University  
[cbowers@myschooldaystudy.com](mailto:cbowers@myschooldaystudy.com)

(From The President ~ From Page 1)

*hopes that it will spark enough interest in the receiver to investigate further to decide if that particular approach is useful for their family or situation.*

*I believe it is important to know your options. Over the years it may become obvious that a particular intervention may work well for one individual while it may not for another. Or something that you tried when your child was young may now be more effective at a later stage in their lives and development. Your child is always changing and growing as is your knowledge and experience.*

*I hope you find the information pertinent and useful. The Autism Society of NH is not endorsing any one method. We simply strive to provide the information to our members.*

*May 2005 be a year of discovery!!*

*Stacey Shannon ~ President*

**WE NEED HELP!!**

**Public Relations**

Someone to contact the media: newspapers, radio and tv stations to help get our name out there!

**Secretary**

Someone to take minutes at our meetings only four (4) a year ... help with mailings and correspondence.

**PLEASE VOLUNTEER TODAY!**

## The Right Diet for Our Child

Over the years we have learned that we can best help our son by working with others who value our input as parents, the ones who know him best. When our son was two months old, his pediatrician said he had an intolerance to milk protein. I had nursed my son for the first month or two but he constantly seemed uncomfortable. We tried many formulas and with his pediatrician's help, found one that he tolerated. I wondered why so many children were unable to digest protein. Why were there so many allergies? I described his constant irritability, arching when feeding and was reassured that things were fine. Finally a specialist suggested that he had reflux. We went to yet another specialist who did a test and determined that he had silent reflux. It was moderate to severe but he didn't spit up often. How was I to know? As soon as we received a diagnosis of reflux the doctor immediately asked us to put cereal in his bottle and prescribed two medicines to control the symptoms. This helped some.

When my son turned 9 months I was told to introduce solid foods and to try a milk-based dietary supplement to help with weight gain. I guess I hoped too that his sensitivities had miraculously disappeared. Unfortunately, they hadn't. His growth began to drop off dramatically. First weight dropped, then height. I became very concerned when his height went from the 50<sup>th</sup> percentile to the 25<sup>th</sup> but again was reassured that as long as he leveled off, things were fine. He suffered from severe constipation. We tried many remedies that the doctors suggested but I wondered, why did he have these issues? With all of the concerns about developmental delays concerning his speech and mobility combined with his recent heart surgery, I had all I could be concerned about, so we continued on with a "normal diet."

At 12 months or so my husband and I became more worried about our son's lack of speech and what seemed to be a loss of some newly acquired words like ma ma and da da. We continued to look for answers. Many answers came with a diagnosis of autism at 2.3 yrs. I began to research extensively. I found comfort in talking with other parents who listened to and supported me. I heard similar stories of reflux, inability to digest proteins and the development of autism. We began to see a specialist who I asked about the gluten/casein free diet and autism. We were told that Justin didn't have celiac disease so the diet most likely wouldn't help him. I shared with his doctors he began

blinking and nodding his head often when he ate. I asked, "Is there a connection with diet? Could a diet help?" There were no answers. I was told that it was a lot of work and if I really, really wanted to try, it wouldn't hurt.

Four years ago we began a casein-free, gluten-free diet and immediately his constipation disappeared and his facial tics stopped. He began to make eye contact with groups of people, stopped staring off into space as much, and most importantly, he began to speak more. As time has gone on, we have discovered some foods that are more problematic than others and we specially tailor his diet to his needs. I found that a red fruit punch made him have whole body involuntary movements. We have also found that we need to balance his carbohydrate intake with other foods to keep his energy levels even. We supplement with calcium and a multivitamin and work with a nutritionist to ensure that our son gets everything he needs. Ultimately, we do the best we can and try not to beat ourselves up about doing everything exactly right. It hasn't been easy but a special diet is what our child needs. We don't do it expecting a cure for autism or any disease. Our son has a special diet because it improves our son's quality of life and ours. Our physicians have done extensive testing to understand the reasons behind the need for his diet. Even though the reason is still unclear, they remain fully supportive of us tailoring his diet to his unique needs. We appreciate and need that support. While one of our doctors told me, the mom is always right, I fully believe in a team approach to children's health and diet management. We work with our son's physicians to find the diet that meets his individual needs. Find someone who will listen to you, value your expertise and support you as a parent!

Dawn is a parent of a 6 year old child diagnosed with autism. She started a dietary intervention support group over three years ago to find support and help other parents who have children with special dietary needs. She can be reached at [heartmom2two@yahoo.com](mailto:heartmom2two@yahoo.com)

**Keep Your Eyes Open  
For Upcoming Information  
On Our 2nd Annual  
Walk In The Sun For Autism  
Details To Follow!**

## Physical Therapy and Autism Spectrum Disorders: The Motor Connection

Author: Joni Redlich, DPT ~ Physical Therapist ~ Kidz Play Pediatric Therapy Center

[www.kidzplay.org](http://www.kidzplay.org)

Phone: 603-437-3330 Fax: 603-437-0431 Email: kidzplayptc@msn.com

Movement is an integral part of our social, emotional, and physical lives. A 4-month old excitedly kicks her arms and legs in response to the funny face dad makes, so he does it again. An 8-month old will crawl to retrieve her favorite rattle, shake it to hear the sound it makes, and then look at mom to share the experience with her. An 18 month-old takes moms hand, walks her to the kitchen, and says "juice" while pointing to the refrigerator. As a child grows, the length and complexity of movement sequences become more sophisticated.

Children with autism spectrum disorder (ASD) often cannot coordinate the myriad of movements needed to complete these interactions. Although children with ASD are often not diagnosed until they are far out of infancy, studies of home videos of children later diagnosed with ASD showed motor differences that had been undetected as infants (Teitlebaum 1998, Teitlebaum 2004). Motor differences are often due to motor planning challenges, sensory processing differences, atypical reflex development and underlying decreased tone. Motor planning challenges make it difficult for a child to time, sequence, and execute a movement, such as reaching for an object, crawling towards mom, or activating a toy. Sensory processing differences often cause children with ASD to take in misinformation from the

environment. The child may be over or under sensitive to smell, sight, sound, touch, or movement. Low tone, or decreased stiffness of the muscles, requires the child to use more energy to move, can delay motor development, and further alters the sensory feedback a child receives during movement. The child with ASD will learn to roll, crawl, and walk, but the quality of their movements may be poor. As the child gets older, they may struggle to function at more sophisticated levels when they have not mastered these core skills.

As a result of differences during development, children with ASD often have deficits in equilibrium and righting reactions (moving the body to maintain an upright position), protective reactions (putting a hand out to catch yourself when falling), and movement strategies (persistent w-sitting). These differences may present as clumsiness, lack of coordination, lack of attention, hyperactivity, gross motor skill delay, flat feet, toe-walking, postural instability, poor posture, decreased respiratory control, oral motor difficulty, and flexibility restrictions (Ghaziuddin & Butler, Gillberg, Kohen-Raz et al., Hallet et al., Vilensky et al.).

During a physical therapy evaluation a child's neuromuscular, musculoskeletal, and cardiopulmonary systems are assessed. The therapist will look closely at a child's ability to take in sensory input and control motor output. They will assess the facilitating and limiting factors for different gross motor skills, such as walking, jumping, running, stair climbing, and kicking a ball. Through play, the therapist can observe how a child uses his balance reactions, protective reactions, and motor planning skills, and the strategies that the child implements to move in and out of different positions. The therapist also observes the child's posture in a variety of positions, and how the child's posture affects their breath control, oral motor control, and vocalizations. The therapist will analyze which muscle groups are being overused and which muscle groups are being underused. Joint range of motion, especially for overused muscle groups, such as the calf muscles for children who persistently walk on their toes, is measured. Joint laxity is also assessed, especially for overstretched joints, such as for flat feet or for a child who often locks their knees and elbows.

During a Physical Therapy treatment a child may work to:

(See Physical Therapy ~ Page 17)

### (Short Subject ~ From Page 20)

Rubin and thousands of others, autism is a complicated disorder that causes strange and uncontrollable behaviors. In *Autism Is A World*, Sue takes the audience inside autism to explain what she feels and does. How she relates to others. Why she clutches spoons or finds comfort in falling water. How she navigates college and copes with the tasks of daily living.

In this insightful short film, Sue guides the audience through all that is special, and usual, about her life. From the racetrack, where she goes to unwind, to the classroom, where her intellect shines, from a presentation at an autism conference to the challenges of paying bills or cleaning house or shopping, Sue takes an unflinching look at the world of autism.

Autism is a World combines Sue's courageous writing with a sensitive, dramatic reading by Margulies. Brought to life through Wurzburg's experienced and powerful filmmaking, *Autism Is A World* offers a view of autism as it has rarely been seen--from the inside out.

**HAVE YOU PAID  
YOUR 2005 DUES???**

## *Support Groups And Contacts*

**United Parents for an Inclusive Community** Meets the 3rd Friday of each month at 6:30 PM at the First Congregational Church, Winnacunnet Road, Hampton, NH 03842 Contact: Melanie Muns [Melanie Muns](#) or [Kate Portrie](#). This group is for parents of children with all special needs.

**Parent support group/network in Rockingham County for parents/guardians of children with autism spectrum disorders.** Meetings are planned for the second Wednesday of each month, beginning on October 13, 2004, at the Easter Seals office in the Cozy Corners Shopping Center on Route 27 in Raymond, NH. This location is easily accessible from both the East and West off of Route 101. We will meet from 6:30 to 8:30 PM. These meetings will be for parents and adult family members only. We will not be able to accommodate children at these support group meetings. Questions about the meeting location can be addressed to Donna Descheneaux at Easter Seals: 895-1522. All other questions about meetings should be directed to [Viki Gayhardt](#)

**New Hampshire's NLD/Asperger's Support Group:** Meetings are the last Tuesday of each month at 7:30 at the Rundlett Middle School, Room 503, South St. Concord, N.H. For further information contact Beth at 635-9256 or e-mail to: [nldnh@aol.com](mailto:nldnh@aol.com)

**Keene Area** Asperger Parent Group, third Mondays at 6:30 p.m., Antioch New England, 40 Avon St. Call 357-3122, ext. 267.

**Asperger's/NLD Support Group** Parents and families dealing with Asperger's/NLD. First Tuesday of the month, 7:00-9:00pm Congregational Church, 11 Church St. Amherst, NH Call Susan 603-672-4719 or email [susanpatt@adelphia.net](mailto:susanpatt@adelphia.net) for more information. On the web, go to [www.AANE.org](http://www.AANE.org)

**Adult Autism Social Group** This is geared for folks approx 20-30 years old with Autism /Aspergers. Jocelyn Lister will be the facilitator. Jocelyn is an experienced speech pathologist and former Spec. Ed. director. Meetings are on Thursdays 6:30-8:30pm at the Full Spectrum Wellness Center on 55 So. Commercial Street in Manchester, NH. Contact Jocelyn Lister @ 206-6866 or e.mail for more info. [jlist@comcast.net](mailto:jlist@comcast.net)

**Milford Caregiver Support Group For parents of Special Needs Children** 2nd and 4th Thursdays 9:30-10:30 am Call 673-3460 for more information Free Child care is available.

**Laconia:** Lynn Carlson, Lakes Region Community Services Council, Streetcar Place, 63 Beacon St. West Laconia, NH 03246; tel. 524-7755. Call for meeting schedule and location.

**Manchester Area:** Manchester Regional Autism Support Group, meetings are held the first Monday of the month from 7-9pm in the Board Room of the Moore Center, Region V11 Area Agency, 132 Titus Ave., Manchester, NH. 03103. Contact Margie Louney at the Moore Center 206-2745 or co-leaders Josephine Fraser 627-7027, Dawn Rivard 647-6497 or Steve Hambleton 647-9567 for further information.

**IF YOU PREFER TO RECEIVE THIS NEWSLETTER  
VIA E-MAIL ~ PLEASE CONTACT US AT [nhautism@yahoo.com](mailto:nhautism@yahoo.com)  
TO ADD YOUR NAME TO THE LIST TODAY!**

## Support Groups And Contacts

**Manchester Developmental Pre-School:** Contact Karen Davis at the Manchester Developmental Pre-School, 555 Auburn Street, Manchester, tel. 624-6340 for further information.

**Parents of children with a developmental disability**

A place for parents who face the challenges and joys of raising a child with a developmental disability to meet, talk and support each other. Tentative Meeting schedule: Tuesdays, 6:00-8:00 9/14 At RSEC Academy, Old Nashua Rd. (off 101A) Call Dave (459-2751) or email [daveh@region6.com](mailto:daveh@region6.com) to register, for directions.

**AUTISM/PDD GROUP** Parents and families dealing with PDD, Asperger's syndrome and other autism spectrum disorders meet to share information and experiences. Region VI Area Agency for Developmental Services of Greater Nashua 144 Canal St., Nashua, NH. Thursdays 6:30-8:30 pm Call Dave Hackett, Parent to Parent Coordinator at 459-2751 or or [daveh@region6.com](mailto:daveh@region6.com) if you plan on attending.

**Broad Street School:** Nashua, NH 03063. Simonne Perry, tel. 594-4404 this group is held during the morning at the school while the children are in class. It is geared to all developmentally disabled in pre-school.

**North Country:** James and Tracy Ross, PO Box 822, Littleton, NH 03561: Tel 444-3302. Call for meeting schedule and location.

**Region 10 Area:**Region 10 Autism Support Group meeting will be held on the first Monday of the month from 7-9 p.m. at the Kelley Library in Salem, NH. The library is located at 234 Main Street, Salem. This is the corner of Rt. 97 and Gerromity Rd. Their phone number is 898-7064 for anyone needing further directions. The contact person is Kathy Waterson from Region 10, 893-1299.

**Upper Valley:** Facilitated Support Group sponsored by ARCH First Monday of the Month, 6:30-8:30 at ARCH #80 Route 5 South, Norwich, VT Please contact Kirsten Murphy at ARCH for directions (802) 649-2720 or [ARCH@valley.net](mailto:ARCH@valley.net)

**Upper Valley:** Weekly coffee hour sponsored by ARCH Thursday's 9:00 a.m. to 10:30 a.m. at the ARCH office #80 Route 5 South, Norwich, VT Please contact Kirsten Murphy at ARCH for directions (802) 649-2720 or [ARCH@valley.net](mailto:ARCH@valley.net)

**NH Dietary Intervention for Autism and Related Disorders:** Meeting times, dates and location variable. Please call or email Dawn Marquis for current schedule at 435-5313 or [heartmom2two@yahoo.com](mailto:heartmom2two@yahoo.com) Sign up for the online discussion group at <http://p2pnh.org/nhdi/>

**PLEASE VISIT OUR WEB SITE AT:**

*<http://www.autism-society-nh.org>*

For any changes and/or additions please contact:

**Steve Anderson at ~~ [sv2833@charter.net](mailto:sv2833@charter.net)**

SERESC (Southeastern Regional Education Service Center, Inc.) Presents

**From IEP to Classroom and Community:**

**Using Modifications, Accommodations and Direct Intervention to Maximize Strengths and Minimize Challenges for Elementary Grades**

**with Teresa Bolick, Ph.D.**

***Tuesday, April 12, 2005, 8:30 am– 3:30 pm***

**at SERESC, 29 Commerce Drive, Bedford, NH**

This will be an interactive workshop, with a continued listserv support until September 30, 2005. Teresa will demonstrate modifications, accommodations and interventions to help use a child's strengths to accomplish an IEP or academic objective.

**Who should attend? Elementary grades** Special Education Teachers, Classroom teachers, clinicians and parents who are looking for practical ideas for modifications. To use interventions by incorporating a child's strengths to help minimize their challenges.

**Teresa Bolick, Ph.D.**, author of Asperger Syndrome and Adolescence: Helping Preteens and Teens Get Ready for the Real World and Asperger Syndrome and Young Children: Building Skills for the Real World. Dr. Bolick consults to schools, agencies and families in New Hampshire regarding the education of children with Autism Spectrum Disorders.

---

***Sensory Processing Disorders:***

**Adding additional ideas to your bag of tricks**

**With Traci Gilman, OTR/L**

***Wednesday, March 16, 2005 9 am– 2:45 pm***

**at SERESC, 29 Commerce Drive, Bedford, NH**

The Sensory Processing Disorders workshop will provide information about sensory processing disorders, and a framework to view the needs and behaviors of clients with sensory processing dysfunction. It will address direct treatment options, sensory diet ideas, and methods for documenting progress. Participants will be introduced to a variety of strategies, tools, and resources for developing effective intervention.

**Who should attend?** OTs, COTAs, clinicians, special educators, and parents who have a working knowledge of sensory processing disorders, including terms and concepts that relate to sensory processing. This is an intermediate level course.

**Traci Gilman, OTR/L.** Traci is a Licensed Occupational Therapist who provides consultation to schools and individuals in Southern New Hampshire, and maintains a private practice for the treatment of individuals with sensory processing difficulties. Her workshops draw on her fifteen years of education and experience, working with children with sensory processing difficulties and autism spectrum disorders.

---

**questions?** Call Robin Knight at SERESC (603) 206-6816 or email  
**rknight@seresc.net**

# The DAN! Treatment of Autism Spectrum Disorders

By Lynn A. Durand, MD

As a DAN! Doctor, I am continually amazed at the stories I hear from parents of children “on the spectrum” when they describe what they have been told by their children’s physicians about their disease. Things like “it’s a genetic disease,” “there’s no real treatment for this,” “we can’t explain the cause,” or “diet makes no difference.” I know that this erroneous information is not intentional, but it is none the less very frustrating to me to realize how the treatment of this child has been delayed due to this lack of knowledge.

After studying the metabolic and nutritional basis of diseases in general, and of autism in particular, I know that there are many ways that illnesses like autism can be treated, if only the mind can be opened to newer ways of thinking.

The first part of autism that must be understood if we are to treat it effectively is the cause. Ah, here’s the rub! If we really start to look at causes we may not like what we find. Sometimes ignorance is safer than knowledge!

If you look at the frequency of occurrence of autism, you see a *tremendous* increase in the autism rates in the 1980s and particularly in the 1990’s. What can account for this increase? Certainly not genetics. If in fact autism was just genetic then there is no rational way to explain a sudden marked change of incidence. Our gene pool simple does not mutate at such a rate. Certainly there are *genetic factors* which come into play in the cause of autism, but genetic alone cannot explain this shift in incidence.

There are those in the medical and the public health communities who will explain the increase rates of autism as simply an error of diagnosis. They state that we just diagnose the ASD disorders more frequently lately. From a common sense point of view all you need to do is talk to a school nurse and you will be assured that, yes there has been a tremendous increase in the actual numbers of autistic children in the schools. The diagnostic criteria have not changed significantly in the last many decades. Nor has the reporting. Autism in fact has increased many fold in the last twenty years and no amount of political white-washing can hide this. So when we try to understand the true causes of autism and Autism Spectrum Disorder, we must find explanations which could account for the increase of frequency of these diseases in the last twenty-five years.

One of the obvious changes during this period of time was the tremendous increase of the use of mercury laden vaccines. Most of the childhood vaccinations prior to the year 2000 contained thimerisol; a mercury compound put in the vaccine to kill any bacteria in the vaccine bottle to keep the vaccination sterile. Unfortunately, mercury is not only toxic to bacteria but also to our nervous systems! The EPA states that it is unsafe for a person to be exposed to more than 0.1 microgram (mcg) of mercury per kilogram (kg) of body weight. A typical newborn weighs about 3 kg. On the day of birth in the 1990’s a newborn received a hepatitis B shot which contained 25 mcg of mercury. Since the EPA’s safe limit would be 0.3 mcg, the baby received 80 times that amount by the time it was one day old.

To add insult to injury, multiple vaccinations were administered at 2, 4, and 6 months. The total amount of mercury administered at these visits would usually range from 37.5 to 62.5 mcg for the three shots. This works out to be over 100 times the EPA’s limit.

I know that there have been several articles in major medical journals claiming to disprove any relationship between mercury exposure in young children and the incidence of autism. I could write an article in rebuttal for each one of these. However I fear you would find this very tedious and excessive! Rather I will point out a few major loopholes. First of all, these articles all have been authored by doctors who have connection to or vested interest in the companies who manufactures the vaccines. For instance, Dr. Vanstrousen, who authored the article in \_\_\_\_\_, stated in the paper that he worked for the FDA. While it is in fact true that when he started the research he was working for the FDA, he does not disclose that during the work on the project he changed to employment at \_\_\_\_\_. The article also does not state that the first time the data was analyzed, there was in fact shown to be an association between thimerisol exposure and learning disabilities. Vanstrussen reworked the data 4 times and eventually was able to come to the conclusion that was published: that there was no association between thimerisol exposure and learning disabilities. Similar problems occur in the other articles.

On the other hand there are in fact demographic studies which have demonstrated this thimersol/ autism relationship. These articles tend to be published in less major, less prestigious medical journals. No surprise considering that the major journals are invested in continuing the “party line:” protecting the history and practice of the conventional medical community.

## Without A Trace TV Show Features Boy with Autism

"The CBS TV hit series "Without A Trace" will feature a boy with autism on their Thursday night, February 3rd episode entitled "Volcano."

The young boy bolts and runs while on a field trip from school and is lost in a New York City museum. The

boy's father is called in to locate his son with tracking equipment provided by Project Lifesaver."

Project Lifesaver Executive Director Chief Gene Saunders said, "The show was an opportunity to demonstrate to parents who have special needs kids how the home tracking system works. The show will also bring awareness to the general public of the growing epidemic of Autism."

---

**SERESC** (Southeastern Regional Education Service Center, Inc.)

*Presents*

## **AIDEing Young Children with Autism Spectrum Disorders**

*With*

*Teresa Bolick, Ph.D. ~ Traci Gilman, OTR/L*

*Abby Collins and Thomas Benjamin, M.S., BCBA*

Tuesday and Wednesday, August 16 and 17, 2005

SERESC Bedford, NH and by *Videoconference* to

North Country Education Services, (NCES), Gorham, NH

**Teresa Bolick, Ph.D.**, author of Asperger Syndrome and Young Children: Building Skills for the Real World and Asperger Syndrome and Adolescence: Helping Preteens and Teens Get Ready for the Real World. Dr. Bolick consults to schools, agencies and families in New Hampshire regarding the education of children with Autism Spectrum Disorders.

**Traci Gilman, OTR/L**, works in the Nashua School District and lectures from experience working with children with Autism Spectrum Disorders.

**Abby Collins**, Abby is a parent of a son with high functioning autism. She has written two books about autism.

**Tom Benjamin, M.S., BCBA**, is a behavior specialist who consults to schools, agencies and families in NH and MA.

## Summer Institute Schedules Date

The UNH Institute on Disability/UCED in collaboration with NH LEND program and others are featuring their 7<sup>th</sup> annual autism summer institute on Aug., 15-19 daily at \*:30 to 4, at the UNH Memorial Union Building, Holloway Commons in Durham.

Educating Students with Autism Spectrum Disorders in General Education Classrooms: Focus on Participation and Learning

This five-day summer institute will provide participants with state-of-the-art information and strategies in the area of educating students with ASD in general education classes. Each morning, partici-

pants will hear a keynote presentation from a national leader in the field of autism.

In the afternoon, working in small groups, participants will synthesize this new information and develop strategies for supporting students with autism spectrum disorders in their schools and families.

Costs for enrollment are: Individual Early Bird \$600 ~ registering before April 30; Individual after April 30<sup>th</sup> will be \$650; Member of 5-person team: \$600. The fees include 5 days of conference, lunch, snacks, on-campus parking. Lodging on your own (list available).

For additional information or to request a registration brochure, please contact The Institute on Disability 603-228-2084 or visit them on the web at [www.iod.unh.edu](http://www.iod.unh.edu)

### AUTISM SOCIETY OF NEW HAMPSHIRE OFFERS

## TOTE BAGS

They are heavy duty canvas with zipper top (natural color w/red trim) I Love Someone With Autism is stenciled on the outside pocket. They are great as gifts for teachers, paras, grandmothers and yourself!!

**\$20.00 each plus \$4.00 shipping/handling**

## AUTISM RIBBON PINS

Colorful metal pins w/metal clasp **\$5.00 each plus 10% shipping**

## CROSSING BRIDGES BOOK

Great first read for those with children newly diagnosed or to introduce someone to what Autism means.

**\$6.00/ each plus 10% shipping** Quantity Discounts Available

Call 603-679-2424 or email us at [nhautism@yahoo.com](mailto:nhautism@yahoo.com) today!!!

**HELP SUPPORT AUTISM TODAY!**



**Autism Awareness  
Magnet Ribbons**

**\$5**

# Membership Form

Mail this form along with your check to:  
Autism Society of N.H. PO Box 68, Concord, NH 03302-0068

**Please remember the ASNH receives NO  
state or federal funding. Your membership dues  
and donations support ASNH. Please give if you can.**



Membership (Individual or Family) w/FREE Autism Awareness Ribbon Car Magnet	\$15.00
Hardship Wavier Option	FREE
Donation (Tax Deductible)	\$ _____
Extra Autism Awareness Car Magnets @\$5 each	_____
Total check Payable To: ASNH Autism Society of N.H.	_____

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_

Email Address: \_\_\_\_\_

**(Occupational Therapy ~ From Page 19)**

utilizing a sensory based approach has neither been proven nor disproven. "The knowledge base from research in this field is in its infancy and substantial work is needed before enough rigorous empirical data are available to proffer valid conclusions about the effectiveness of this intervention approach (Miller, Sensory Processing Disorder Network, 2004)". Continued research in this area will expand our understanding of the most effective means for planning interventions for children with Autistic Disorders. To learn more about Sensory Processing Disorders and the research that is presently being conducted please check out The *Sensory processing Disorders Network* at [www.spdnetwork.org](http://www.spdnetwork.org)

**References:**

Bundy, A., Lane, S., & Murray, E. (Eds.). (2002). *Sensory integration theory and practice* (2nd ed.). Philadelphia: F. A. Davis.

Mailloux, Z. (2001). Sensory integrative principles in intervention with children with autistic disorder. In Roley, S., Blanch, E., & Schaaf, R. (Eds.), *Understanding the nature of sensory integration with diverse populations* (pp. 365-384). USA: Therapy Skill Builders.

Miller, L., Cermak, S., Lane, S., Anzalone, M., & Koomar, J. (2004, Summer). *Defining SPD and its subtypes; position statement on terminology related to sensory integration dysfunction*. Retrieved January 23, 2005, from Sensory Processing Disorder Network Web Site: <http://www.spdnetwork.org>

Yack, E., Aquilla, P., & Sutton, S. (2002). *Building bridges through sensory integration*. Las Vegas: Sensory Re-

**((Physical Therapy ~ From Page 9)**

■

Improve postural control to increase stability during fine motor, gross motor, and self-care activities.

- Improve static balance to decrease impulsivity, improve motor control and attention.
- Lay down the foundations of gross motor skills and support participation in community and peer activities.
- Motor planning skill training aimed at breaking down the process between acquiring a new skill and having it become automatic.

In addition, Physical Therapists will work with children and their parents to help the child to develop an active lifestyle. Exercise is important both for health and for self-image, such as keeping up with peers in gym class or in sports activities. In addition, aerobic exercise can decrease behavior problems and an active lifestyle will naturally give a child more sensory input.

To conclude, children of all ages learn through movement and need to master core motor skills in order to maximize their overall potential. Beginning as infants we develop stability so that we can learn to use our hands and feet independently from the rest of the body. We also learn how to manipulate the environment and how to move our bodies within it. We use movement to bond with others and to explore the world. Limitations in motor skills can lead to increased difficulty with all areas of development. Physical

Therapy can be a beneficial part of a team approach to help children with ASD to be as successful and independent as possible in school, home, and in the community.

**References:**

Ghaziuddin, M. and E. Butler (1998). "Clumsiness in autism and Asperger syndrome: a further report." *J Intellect Disabil Res* 42 (Pt1): 43-8.

Gillberg, C. (1998). "Hyperactivity, inattention and motor control problems: prevalence, comorbidity and background factors." *Folia Phoniatr Logop* 50(3): 107-17.

Hallet, M., M.K. Lebedowski, et al. (1993). "Locomotion of autistic adults." *Arch Neurol* 50(2): 1304-8.

Kohen-Raz, R., F. R. Volkmar, et al. (1992). "Postural control in children with autism." *J Autism Dev Disord* 22(3): 419-32.

Teitelbaum, O., Benton, T., Shah P.K., Prine, A., Kelly, J.L., Teitelbaum, P. (2004). "Eshkol-Wachman movement notation in diagnosis: The early detection of Asperger's syndrome." *PNAS*; 101(32): 11909-11914.

Teitelbaum, P., Teitlebaum, O., Nye J., Fryman, J., & Maurer, R.G. (1998). "Movement analysis in infancy may be useful for early diagnosis of autism." *PNAS*; 95: 13982-13987.

Vilensky, J.A., A.R. Damasio, et al. (1981). "Gait disturbances in patients with autistic behavior: a preliminary study." *Arch Neurol* 38(10): 646-9.

# Wellness Revolution Gains Momentum

by Dr Dan Parent, Chiropractor

As the Wellness Revolution gains momentum more and more people are searching for ways to improve the health and well-being of their families. With chronic illness and disease increasing at an alarming rate it is paramount that we change our viewpoints on health and wellness.

Chiropractors have been educating their patients about wellness for over 100 years. Although, until just recently, the message is finally starting to resonate.

The mass media and medical professionals have persuaded the public into thinking that the human body must rely on pharmaceuticals in order to adapt and survive. Vaccinations, over the counter and prescription medication usage is a multi-billion dollar business. The question we need to ask ourselves is "Are we more or less healthy as the result?"

The incidence of neurological disorders is sky rocketing at an alarming rate, especially among our children. Approximately 74 doses of vaccines are injected into our children prior to first grade, with more to come. The fastest growing population of Ritalin users are between the ages of two and four. Many do not realize that Ritalin is a Schedule II narcotic and classified in the same category as heroin and methadone.

At the same time we tell our children to "Say No to Drugs!", we provide them with medications from the day they are born. Medications such as vaccines to prevent relatively harmless diseases, antibiotics to treat their ear infections, psychotropic drugs to alter their behavior, and over the counter medications to manage their pain and fever. All of which can have adverse effects on our family's health.

Contradicting messages we send to our children are everywhere we turn. In one moment they see the "Drug Free School Zone" signs and information about the "DARE" program throughout their schools, and at the same time many of these children maintain regular visits to the school nurse to receive their medication.

Are we truly dependent on pharmaceuticals to survive or are we born with an innate intelligence that has been provided to us for optimum well-being and adaptation for not just surviving but thriving.

The philosophy of Chiropractic is founded on the basic premise that the human body is self-healing and self-regulating and that it is the responsibility of the nerve system to maintain what is referred to as homeostasis.

With this stated, the common misconception of Chiropractic is that it is primarily utilized for treatment of low back pain and headaches. This couldn't be farther from the truth. Although millions of people have benefited from chiropractic care for the aforementioned, the outcome was the result of taking the

pressure off the nerve system via the adjustment of the vertebral column. This is referred to as subluxation correction. Chiropractors are the only healthcare professionals who are trained in the detection and correction of vertebral subluxations.

When subluxations are present, this can result in interference of the spinal nerves that are located in that region of the spine. As we are well aware, interference of nerve flow can result in malfunctioning organs or organ systems as well as lowered immunity. This is best described as having dial-up Internet, which is slow and less efficient in comparison to DSL or cable connections.

There are four categories of things that can cause subluxations which can result in a sub-optimal nerve flow.

**EMOTIONAL** stress can cause irritation of the nerve system resulting in headaches, inability to focus, digestive and reproductive dysfunction just to name a few.

**PHYSICAL** stress can be as the result of birth trauma, slips, fall, and poor posture. (*Improperly fitting pillows and backpacks.*)

**CHEMICAL** stress can come from medications (over the counter and prescription), vaccinations, artificial sweeteners, polluted air and water.

The fourth is **ELECTROMAGNETIC** fields. These too can effect the function of our own innate energy pathways. Common culprits can be high-voltage power lines, clock radios, and cell phones.

As you can see stressors to our nerve system are ever present. But what most do not realize is that many of them can either be eliminated, reduced, or avoided.

We have been provided the greatest gift ever created, but we weren't given an owner's manual to help us figure out how to use and preserve it.

*What if* we started teaching our children that true health comes from the inside and is expressed outward, instead of teaching them that health comes from the outside - in, by way of ingesting or injecting pharmaceuticals.

*What if* we incorporated healthy, unprocessed food and supplements into their diet instead of feeding them dead food that has no nutritional value.

*What if* we put an end to injecting our children with toxins from the day they were born and regarded the health and well-being of our children over profit for companies and stockholders.

*What if* we began teaching our children about emotional stress and educated them about stress relieving techniques such as breathing and regular exercise to help them manage.

*What if* every man, woman, and child had their nerve system checked by a chiropractor on a regular basis to restore and maintain health to prevent disease, just as they visit their dentist for the same reason.

## **Occupational Therapy Utilizing a Sensory Integrative Frame of Reference To Treat Children with Autistic Disorder.**

Author: Janet E. Stafford, MS, OTR/L ~ Kidz Play Pediatric Therapy Center

[www.kidzplay.org](http://www.kidzplay.org) Phone: 603-437-3330 Fax: 603-437-0431 Email: kidzplayptc@msn.com

Children with Autistic disorders are frequently thought to have issues sensory processing. Sensory issues have been discussed in the literature since Kanner (1943) first described Autism, yet sensory processing deficits have yet to be included into the diagnostic criteria. Both early and contemporary researchers such as Ayers, Baranek, and Kemper have suggested that children with Autistic Disorders have atypical sensory processing (Mailloux, 2001). Others have examined the effectiveness of sensory stimulation or sensory integration procedures on function in children with autism. In general most studies conducted reflected single case research or case reports and therefore have limited general ability, however the findings have been relatively positive (Mailloux, 2001). Adults with Autistic Disorders, such as Temple Grandin (1995) and Donna Williams (1994) have both described the difficulties and frustrations that accompany the inability to process sensory information adequately. The guiding principles of sensory integration theory utilized within a comprehensive occupational therapy program can be an important feature of planning intervention for the child with Autistic Disorder.

### **What is Sensory Integration Theory?**

Sensory integration is a frame of reference utilized in occupational therapy. It is a theory of brain based relationships based on assumptions. Sensory integration theory is comprised of three assumptions (Bundy, Lane, & Murray, 2002). The first assumption that the theory makes is that learning is dependent upon our ability to take in and process sensations from movement and the environment and utilize this information to learn and organize behavior. The second component makes the assumptions that individuals who have a decreased ability to process sensation may also have difficulty producing appropriate actions which may interfere with learning and behavior. The final component involves the premise that enhanced sensation as part of meaningful activity yields adaptive interactions, and improves the ability to process sensation, thereby enhancing learning and behaviors.

When we speak of sensory integration we refer to the theory, evaluation methods, and a specific approach to intervention, three interrelated elements of practice. Occupational Therapy utilizing intervention based on the principles of sensory integration theory involves providing enhanced sensation, with the emphasis on integration of vestibular, proprioceptive, and tactile sensations (Bundy, Lane, & Murray, 2002). These enhanced sensory experiences must be in the context of self directed, meaningful, and adaptive interactions. The hallmark of this treatment approach is the availability of "suspended" equipment (Bundy et al. 2002). There are interventions that are being referred to as "sensory integration therapy" that do not utilize suspended equipment. These types of programs are more appropriately referred to as sensory motor or sensory stimulation programs.

When occupational therapy services incorporate a Sensory integration frame of reference it can help and individual regulate or change their arousal level, diminish anxiety, promote communication, increase their comfort in their environment, diminish distractibility, decrease self stimulatory behaviors, develop internal motivation, facilitate positive interactive with peers, and increase performance in a variety of skills therefore increasing independence (Yack, Aquilla, & Sutton, 2002).

Sensory integration theory can offer another perspective for looking at and understanding behavior, provide environmental adaptations and sensory based strategies aimed at increasing attention, motivation, communication, and interactions. Sensory integration therapy does provide all the answers nor provide a cure and as a profession we acknowledge that the effectiveness of Occupational Therapy



*Autism Society of NH*

*Stacey Shannon, President*  
*P. O. Box 68*  
*Concord, N.H. 03302-0068*

NON-PROFIT ORG.  
US POSTAGE  
PAID  
CONCORD, NH  
PERMIT 12

---

---

## Short Subject Documentary Nominated For An Oscar

(Sue Rubin uses Alternative Augmentative Communication/  
FC)

For 26 years, Sue Rubin has been on an extraordinary journey. Her unusual behavior led to a diagnosis of autism when she was four. She was believed to be re-tarded until age 13. But then a new communication technique gave Sue the ability to connect with the world. Now, she is a junior in college with a top IQ, a tireless disabled-rights activist, and an articulate guide into a complex disorder. Written by Sue Rubin, narrated by Julianna Margulies, produced and directed by Oscar-winning filmmaker Gerardine Wurzburg, *Autism Is A World* is a rare and compelling journey into Sue's mind, her daily world, and her struggle with autism.

Sue says she is her own worst nightmare. When you meet Sue, she does not make eye contact. She does not offer to shake your hand. She may fixate on the buttons of your shirt, but cannot say your name. For Sue

(Short Subject ~ See Page 9)

## NBC To Air 10-Part Series On Autism Beginning Feb. 21

### SAVE THE DATE!

Beginning Monday, February 21st, NBC will air a ten-part, week-long series on autism spectrum disorders on the "Today Show". Two segments will be aired each morning at approximately 8:10 EST and 9:10 EST. Wednesday's segments will focus on intervention approaches, and will include Dr. Stanley Greenspan and parents whose children have benefited from the DIR/Floortime Approach. Other DIR/Floortime advocates, both clinicians and parents, will be featured as well in other segments. Later each day, MSNBC will feature live interviews.

## IN MEMORY ....

Charlene "Cheri" Wood

Jan. 6, 2005

Please See Page 6