

Cure of the Major Autistic Features of Autism: Further Patients

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Abstract

Background: A new therapeutic approach aiming primarily at improving and curing the two major diagnostic features has been recently described. Injectable cerebrospinal was used as the main therapeutic component in this new therapeutic approach. Marked improvement or disappearance of autistic features in these disorders has not been reported with any therapy before. The first book which described the cure of the autistic features was included in Book authority's lists best books of all time. The aim of this paper is to report the cure of further patients with autism.

Materials and methods: We have been using a new therapeutic approach aiming at cure of the two major diagnostic features of autism as the standard approach for the treatment of autism disorders in our clinical practice. Courses of intramuscular cerebrospinal were given in individualized regimen depending on the age and severity of the illness, and with aim of improving social interactions including response to name, looking at faces, and eye contact. Most patients were also receiving neuroleptics to control hyperactivity and other abnormal behaviors. It was not possible to record the treatment and follow up of all patients. However, patients included a boy with regressive autism, and a girl with cerebral palsy and autism.

Results: It was possible to document the cure of the two major diagnostic autistic features in another five patients including one girl and four boys.

Conclusion: Cure of the major diagnostic autistic features have been reported previously in thirteen patients. This paper reports the achievement of autistic features cure in another five patients, thus making the total number of documented cure 18 cases.

Keywords: autism; cerebrolysin; cures

Introduction

Early during the year 2017, we established the first child psychiatry (neuropsychiatry) consultation clinic in Iraq. The clinic was established at the Children Teaching Hospital of Baghdad Medical City with aim of providing evidence-based consultations and evidence-based medical therapies, and also providing a child psychiatry training course. In our work in this pioneering clinic, we were keen in documenting the scientific practices and the patterns of disorders through scientific publishing. The three major neuropsychiatric disorders were autism disorders, mental retardation and cerebral palsy. Autism disorders are lifelong disorders, and for decades no medical treatment has been reported to be curative [1-17].

However, we have recently described a new therapeutic approach aiming primarily at improving and curing the two major diagnostic features of autism which are poor responsiveness to their name and poor eye contact. Injectable cerebrospinal was used as the main therapeutic component in this new therapeutic approach [18].

Courses of intramuscular cerebrospinal were given in individualized regimen depending on the age and severity of the illness, and with aim of improving social interactions including response to name, looking at faces, and eye contact. Most patients also required neuroleptics to control hyperactivity and other abnormal behaviors risperidone including trifluoperazine and prochlorperazine. Some patients also received citicoline as an adjunctive therapy to improve speech development [18].

Marked improvement or disappearance of autistic features in these disorders has not been reported with any therapy before. However, almost all the patients treated with the new therapeutic approach experienced some improvement and lessening of the autistic features during the follow-up period. Treatment was also associated with initiation of speech and improvement of repetitive behaviors. It was initially possible to document complete disappearance of the main autistic features in twelve patients [18].

Therefore, we have been using this new therapeutic approach as the standard approach for the treatment of autism disorders in our clinical practice. We have been trying to document our clinical practice through scientific publications as possible [19, 22]. It was possible to document cure of the major autistic features in the thirteenth patient. He had an autosomal recessive autism with mental retardation, and his younger brother was one of the first 12 documents patients who cured from the major autistic features [23,24].

The first book which described the cure of the autistic features [2] was included in Bookauthority's lists best books of all time [25]. Therefore, we have been consulted about the treatment of autism from many countries in the world including the United Kingdom, Canada, United Arab of Emirate, Tunisia, Palestine, India, and Pakistan, and many of the international cases have been reported [26-30].

The aim of this paper is to report the cure of further patients with autism.

Patients and methods

We have been using a new therapeutic approach aiming at cure of the two major diagnostic features of autism as the standard approach for the treatment of autism disorders in our clinical practice. Courses of intramuscular cerebrolysin were given in individualized regimen depending on the age and severity of the illness, and with aim of improving social interactions including response to name, looking at faces, and eye contact. Most patients were also receiving neuroleptics to control hyperactivity and other abnormal behaviors. Some patients also received citicoline as an adjunctive therapy to improve speech development. It was not possible to record the treatment and follow up of all patients. However, patients included a boy with regressive autism (Figure-1), and a girl with cerebral palsy and autism.



Figure-1: A boy with regressive autism

Results

It was possible to document the cure of the two major diagnostic autistic features in another five patients including a two and half years old girl who received intramuscular cerebrospinal 2.5 ml every third day in the morning (Ten doses monthly) for five months. After cure of major autistic features at about the age of three years, she was saying less 20 words and she was having echolalia sometimes. Therefore, oral piracetam 400 mg once daily in the morning, and oral citicoline 200 mg daily in the morning were prescribed to improve speech development. Cure of the two major diagnostic features of autism was also achieved in four boys including boy with severe atypical genetic autism associated with mental retardation and obesity. The parents

were divorced because their son and daughter were both autistic. The boy was included in a previous publication [18], but cure of the autistic features was not reported during that time. The patients received intramuscular cerebrospinal for about one year (Ten doses monthly) and he was also receiving neuroleptics to control hyperactivity and behavioral abnormalities. We have consistently found that patients with severe autistic disorder behave at the clinic as the treating physician is invisible and they do not look at him or respond to him in any way. Before treatment this boy was behaving like this. Before treatment he was not responding to name and had no eye contact (Figure-2A). However, after treatment he had acceptable eye contact and was responding to name. It was possible to convince him to take a pen to scribble, copy a line or a circle (Figure-2B).

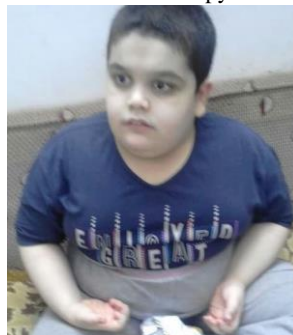


Figure-2A: Before treatment he was not responding to name and had no eye contact



Figure-2B: After treatment, it was possible to convince boy to take a pen to scribble, copy a line or a circle

Obviously, at the age of about ten years, he still had significant mental retardation and was not saying any word, and needed more therapies to improve his cognition and speech. Cure of the two major diagnostic features of autism was also achieved in another boy who was included in a previous publication [18], but cure of the autistic features was not reported during that

time. After treatment, the boy had normal eye contact, responding to name and normal interaction with the doctor as he was shaking hands with the doctor, and accepted to take a pen to try to copy a line and a circle (Figure-3A). He also accepted to take a photo with the doctor (Figure-4B).

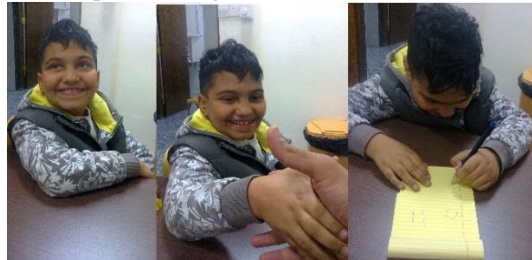


Figure-3A: After treatment, the boy had normal eye contact, responding to name and normal interaction with the doctor as he was shaking hands with the doctor, and accepted to take a pen to try to copy a line and a circle



Figure-4B: The boy was happy to take a photo with the doctor

A third boy started treatment at about the age of three years. He was not saying any word and had no eye contact and was not responding to name (Figure-4A). He received intramuscular cerebrollysin 3 ml every third day in the morning (Ten doses monthly) for four months. He also received oral

risperidone 1mg daily at night to control hyperactivity. After four months of treatment (Figure-4B), the boy was responding to name and had normal eye contact. However, he did not understand when the doctor was asking him to take the pen to scribble, and that was attributed to cognitive impairment. Therefore, he needed more treatments.



Figure-4A: Before treatment, he was very irritable had no eye contact and was not responding to name



Figure-4B: After four months of treatment, the boy was responding to name and had normal eye contact. However, he did not understand when the doctor was asking him to take the pen to scribble

A fourth boy with autism was also cured. He was not saying any word and had no eye contact and was not responding to name. After treatment (Figure-5), the boy was responding to name and had normal eye contact.



Figure-5: After treatment, the boy was responding to name and had normal eye contact

Discussion

Autism disorders have become increasingly known as pervasive developmental disorders especially in the United Kingdom since the 1980s. They are very complicated and multifarious group of chronic disorders that are characteristically marked by early impairment in social interaction and communication. Poor speech development, and repetitive body movements or behavior patterns are important associated features of autism disorders. The diagnosis of autism is clinical, and is based on the presence of the characteristic diagnostic manifestations which result from impaired social

interaction and communication which cause the two major diagnostic features of autism which are the lack of appropriate responsiveness to own name, and the lack of eye contact. The variation in speech and cognitive development result in the subtypes of autism. The mildest type of autism was the first to be reported in the medical literature and is associated with acceptable speech and cognitive developments. This type was first described by Grunya Efimovna Sukhareva (Figure-6A), a Soviet pediatric psychiatrist in 1925, and she called the disorder autistic psychopathy.



Figure-6A: Grunya Efimovna Sukhareva, a Soviet pediatric psychiatrist

In 1944, Hans Asperger (Figure-6B), an Austrian physician reported children having the mildest type of autism which was first described by Grunya Efimovna Sukhareva in 1925. However, in 1981, Lorna Wing (Figure-6C) called the mildest type of autism Asperger syndrome. The type of autism that

is generally considered the classic type is Kanner syndrome which was named after Leo Kanner (Figure-6D) who described this type in 1943. Despite this type is associated with a normal or high intelligence, it is associated with significant delay in speech development.

**Figure-6B:** Hans Asperger, an Austrian physician**Figure-6C:** Lorna Gladys Wing, an English psychiatrist**Figure-6D:** Leo Kanner, an Austrian American psychiatrist

Autism disorders that are associated with subnormal intelligence but without significant cognitive impairment are generally associated with delayed speech, and are generally called typical autism rather than classical autism. For decades, autism disorders have been considered life-long disorders without curative therapies. Recently a new therapeutic approach aiming primarily at improving and curing the two major diagnostic features of autism which are poor responsiveness to their name and poor eye contact was described. Injectable cerebrospinal was used as the main therapeutic component in this new therapeutic approach. Marked improvement or disappearance of autistic features in these disorders has not been reported

with any therapy before. However, almost all the patients treated with the new therapeutic approach experienced some improvement and lessening of the autistic features during the follow-up period [1-10]. Cerebrospinal is a mixture of free amino acids (85%) and 15% biologically active low molecular weight amino acid sequences which include low molecular weight neuro-peptides (Brain-derived neurotrophic factor, glial cell line-derived neurotrophic factor, nerve growth factor, ciliary neurotrophic factor. Cerebrospinal has been used safely with benefit in a variety of neuro-psychiatric disorders including idiopathic mental retardation, cerebral palsy, brain atrophy, myelomeningocele, pediatric juvenile spinal muscular

atrophy, pediatric Charcot Marie Tooth disease, kernicterus, and agenesis of corpus callosum with Holocephali [31-41].

Conclusion

Cure of the major diagnostic autistic features have been reported previously in thirteen patients. This paper reports the achievement of autistic features cure in an other five patients, thus making the total number of documented cure 18 cases.

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2-Some figures were previously published, and the author has their copyright.

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