



PARENTS ENDING AMERICA'S CHILDHOOD EPIDEMIC

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Parent Outreach Project: Developing a Good Biomedical Plan for Your Autistic Child

Treatments need to match symptoms. Use this as a symptom checklist to guide treatments, medications, biochemical interventions, therapies and evaluations.

1. Now objectively think about your child and circle the symptoms that apply to him/her.

Symptoms of physical motor impairment (fine and gross):

Falls easily
Poor balance
Difficulty navigating uneven surfaces
Reduced fine motor skills
Abnormal gait
Walking on toes
Poor muscle strength/low tone
Overall muscle weakness
Other _____

Symptoms of oral motor difficulty:

Drooling
Gags when eating
Swallowing issues
Oral motor weakness that results in food aversions (prefers pureed foods)
Poorly chews food/exhibits mouth stuffing
Poor articulation
Expressive language delay
Other _____

Symptoms of digestive system (GI related) issues:

Vomiting
Reflux
Self limiting diet to small number of foods
Fluid refusal
Weight loss (Failure To Thrive- FTT)
Other _____

Symptoms of sensory integration issues:

Sound sensitivity
Touch avoidance/may not want to be cuddled or hugged
Hypersensitive to smells
Distractibility
Proprioceptive seeking behaviors (a desire for deep pressure)
Self limit diet to particular food textures
Apparent insensitivity to pain
No real fear of dangers
Other _____

Symptoms of speech and language problems:

Non-verbal
Delayed speech
Can not communicate ideas/difficulty expressing needs (expressive language delay)
Low oral motor tone (open mouthed, drooling)
Difficulty being understood (poor articulation)
Does not understand what is said (receptive language delay)
Other _____

Symptoms of cognitive pathologies:

Inattentive
Hyperactivity (always in motion)
Poor concentration
Poor/slow processing speed
Difficulty problem solving
Global developmental delay
seizures
Other _____

Symptoms of social-emotional behavioral problems:

Not responsive to verbal cues (acts as if deaf)
Withdrawn, into self
Prefers to be alone
Reduced social skills
Difficulty being with other kids
Inappropriate social response to others
Lack of spontaneous peer interactions
Lack of eye contact
Echolalia (repeating words or phrases heard)
Pedantic areas of interest
Obsessive Compulsive Behaviors (OCD)
Inappropriate attachment to objects

Sustained odd play
Spinning objects obsessively and inappropriately
Oppositional behaviors
Temper tantrums (beyond what is age appropriate)
Outbursts for no apparent reason
Extreme distress for no apparent reason
Resistance to change/rigid/insistence on sameness
Other _____

Symptoms of allergy and food sensitivities:

Red, hot ears after eating a certain food
Red, hot cheeks after eating a certain food
Distended “pot belly”
Re-current (often painful) diaper rashes
Eczema
Hives/dermatitis
Stooling issues (diarrhea or infrequent stools/constipation)
Strong craving for a particular food/food group (dairy, gluten)
Urination accidents in an already potty-trained child
Night time bedwetting/ inability to potty train through night
Oppositional or “off behaviors” after eating certain foods (sugar, highly processed foods, foods with dyes, etc.)
Other _____

Symptoms of immune system dysregulation:

Chronic runny nose
Always sick
Chronic ear infections
Re-current strep infections
Re-current sinus infections
Asthma
Allergies and food sensitivities/intolerances
Eczema/dermatitis
Autoimmune disorders (hypothyroid, etc.)
Family history of autoimmune disorders
History of poor response to vaccines
History of vaginal infections (in girls)
Many courses of antibiotics given close together
History of getting fungal infections and prescribed anti-fungal creams
Known immune dysregulation (low immune test results via blood work IgG, IgM, IgA)
Other _____

Symptoms of GI/bowel problems:

Constipation (slow motility)
Abdominal pain
Infrequent stools
Diarrhea (possible pancreatic enzyme insufficiency)

Mucous in stool
Undigested food in stool
Off-color stools (white, mustard, black colored)
“Sandy” stool
Malodorous stools
Other _____

Symptoms of nutritional deficiencies:

White spots/ridges on finger nails
Peeling feet
Thinning hair/hair loss
Weight loss
PICA (a desire to eat non-food items)
Other _____

Symptoms of energy production/metabolic problems:

Fatigue/lethargy
Child sleeps excessive amount of time per day
Child is difficult to arouse in the morning (takes a long time to get moving once asleep)
Low muscle tone
Motor regressions
Lack of learning (when educational program is appropriate)
Moods or behaviors that wax and wane throughout the day
Child has been diagnosed with bipolar disorder, a mood disorder or schizophrenia
Loss of any developmental skills (language, social connectedness)
Developmental stagnation
Marker early motor delay (delayed motor milestones)
Global muscle weakness-fine and/or gross motor
Presence of seizures
Known hypoglycemia episodes
Presence of food intolerances or avoidance
Two or more children within the family affected with ASD symptoms
Small head circumference (declines over time relative to over-all-size)
Growth retardation or excessive growth
Child has been given a label of “atypical autism”
Irregular biochemical findings in lab work
Has had an adverse reaction to sedation/anesthesia in the past
Other _____

2. Other concerning symptoms your child exhibits:

3. Now that you have thought about individual symptoms your child exhibits, do you think your child has any of these underlying issues? Refer to the above checklists and circle what applies to your child.

Physical motor impairment

Oral motor weakness

Digestive system problems

Sensory related problems

Speech and language

Cognitive pathologies

Social-emotional behavioral problems

Allergies- IgE mediated

Food sensitivities/intolerances- IgG mediated

Weak immune system (dysregulation)

GI/bowel problems

Symptoms of nutritional deficiencies

Energy production/metabolic problems

4. Any child that has been diagnosed ASD and/or has a global developmental delay **DESERVES** a full metabolic screening for disorders of energy metabolism in order to obtain more information about your child's metabolic state and overall health status. You are going to pursue a metabolic screening through: (Circle one.)

pediatrician

a neurologist

a geneticist

a DAN! Pediatrician

I am not going to have a metabolic screening done

I have already had a full metabolic screening done

5. Circle any specialist you may want to visit for further evaluation:

GI	Allergist	nutritionist
Neurologist	Geneticist	A DAN! Pediatrician
Naturopath	Pulmonologist	Endocrinologist
Audiology screening	Ophthalmology screening	Physiatrist

My child does not need any new evaluations at this time

6. What are the *three* most pressing issues to address for your child? Most concerning behaviors/symptoms? What is the developmental area in which he/she is most delayed? This is the “TO DO” list.

1. _____

2. _____

3. _____

7. My first priority is to:

8. Topics I am interested in learning more about:

9. Think about your child. Is he/she currently receiving the right therapies for his/her symptoms:

- | | |
|-------------------------------|-----------------------------|
| Physical therapy | Hippotherapy |
| Aqua therapy (by an OT or PT) | Speech and language therapy |
| Verbal Behavior/SLT | Oral motor therapy |
| Occupational therapy | Behavioral therapy |
| ABA | Floortime |
| Social skills classes | Art therapy |
| Music therapy | |

Resources Used:
Healing the New Childhood Epidemics: Autism, ADHD, Asthma and Allergies by Kenneth Bock, MD

* This is not intended to be a recommendation or endorsement of any specific treatment options. Its sole purpose is to introduce you to possible treatment options outside the main stream medical model for the treatment of autism.