

Measles virus isolated in autistic children; could mercury in vaccines cause autism?

Two new studies, in two different countries, add to evidence indicating a link between autism and MMR (measles-mumps-rubella) vaccinations.

In Japan, H. Kawashima et al. found evidence of the measles virus in the peripheral mononuclear cells of 3 of 9 autistic patients with inflammatory bowel disease (as well as 1 of 8 patients with Crohn's disease, and one of three patients with ulcerative colitis). In contrast, no healthy controls showed evidence of the virus. The researchers note that while the measles strain isolated in the patient with Crohn's disease appeared to be a wild strain, "the sequences obtained from the patients with ulcerative colitis and children with autism were consistent with being vaccine strains."

In similar research, Andrew Wakefield and colleagues, whose 1998 research pointed to an autism/MMR connection (see ARRI 12/1), reported to the United States Congress in April that they had identified the measles virus in the gut of 24 of 25 autistic children they studied, but in only 1 of 15 control children. Wakefield and colleague John O'Leary say this is "compelling evidence" in support of other research indicating that MMR vaccination can lead to metabolic and brain dysfunction, producing autistic symptoms and bowel problems.

Mercury in vaccines: a cause of autism?

Vaccinations came under fire in another venue, with parent Sallie Bernard and a group of parents, researchers, and physicians testifying before a Food and Drug Administration (FDA) committee in May that the mercury-containing preservative thimerosal used in vaccines may be linked to autism. A scientific review by Bernard and her colleagues noted that "the symptoms and abnormalities which characterize autism are identical to those found in past cases of mercury poisoning."

"These similarities," she testified, "include the defining characteristics of autism—social withdrawal, OCD behaviors, and loss of or impairment in language—and they include traits strongly associated with autism and found in nearly all cases of the disorder—sensory disturbances such as numbness in the extremities and mouth, aversion to touch, and unusual response to noise; movement disorders like toe-walking, hand-flapping, clumsiness, and choreiform movements; and cognitive impairments in specific domains like short term, verbal and auditory memory and in understanding abstract ideas."

In addition, she noted, mercury poisoning can cause many of the same biological abnormalities as are seen in autism, including immune system dysfunction and anomalies in the cerebellum, amygdala, and hippocampus.

Wakefield and O'Leary say their findings offer 'compelling evidence' of a link between autism and MMR vaccinations.

Bernard noted that the growing prevalence rate of autism closely matches the introduction and spread of thimerosal-containing vaccines, and that autistic symptoms generally emerge at approxi-

mately the same time as mercury-containing vaccines are administered. She added, "Our group has also documented a number of cases of autistic children with toxic levels of mercury in hair, urine, and blood." In addition, she noted, mercury is more toxic to males than to females, and the male-to-female ratio in autism is 4 to 1.

Noting that low doses of mercury tend to harm genetically susceptible individuals, Bernard pointed out that "autism has been recognized as one of the most heritable of all neurological disorders and it is strongly associated with familial autoimmune disorders."

Bernard and her colleagues called for an immediate ban on thimerosal-containing childhood vaccines, noting that the cumulative amount of mercury which a six-month-old receives from a full course of vaccinations exceeds the acceptable dose levels set by federal agencies. (See www.autism.com/ari for text of their report.)

"Detection and sequencing of measles virus from peripheral mononuclear cells from patients with inflammatory bowel disease and autism," H. Kawashima, T. Mori, Y. Kashiwagi, K. Takekuma, A. Hoshika, and A. Wakefield, *Digestive Diseases and Sciences*, Vol. 45, No. 4, April 2000, pp. 723-729. Address: H. Kawashima, Department of Paediatrics, Tokyo Medical University, Tokyo, Japan.

Congressional testimony of John O'Leary and Andrew Wakefield available online at <http://www.house.gov/reform/hearings/healthcare/00.06.04>.

ARI maintains a list of nutritionally-oriented physicians who use drugs only as a last resort with their autistic patients, and who are interested in the DAN! approach to diagnosis and treatment. If you are a physician who should be on that list, send a self-addressed, stamped envelope with a request for our "Doctor Referral List Questionnaire."

Crime and the disabled

(continued from page 6)

with their victims through the web of special services provided to people with disabilities."

Petersilia recommends that educators implement personal safety training for individuals with developmental disabilities. "We need to arm these people with some of the skills they need to avoid, recognize, and report crimes when they occur," she says. In addition, she says, teachers and others who work with the developmentally disabled should be trained to recognize signs of possible sexual abuse; people working in the justice system should be educated about the needs of disabled citizens; and courts should provide more advocacy and protection for developmentally disabled individuals who are victims of crimes.

"Invisible victims," Joan Petersilia, *Human Rights*, Vol. 27, No. 1, January 1, 2000, pp. 9-12. Address: Joan Petersilia, School of Social Ecology, University of California Irvine, Irvine, CA 92697.

LETTER TO THE EDITOR

To the Editor:

[Re findings about Vitamin A and autism, ARRI 14/1] I decided to try cod liver oil on my two special needs children. They are four and five years old. One is autistic and the other has Asperger's-like symptoms. I took your advice and gave them each one teaspoon of the oil with their morning juice. There were instant changes. The next day, we felt like we had two new, normal acting children!

Cody, who is autistic, now can speak in full, articulate sentences. Before he had one- to two-word utterances. He initiates play with the neighborhood children. He used to ignore them. He wants to be picked up and hugged, whereas before, he avoided all contact. His teachers are amazed at his progress. At school, he is integrated to the regular classroom for the majority of the day now. He even asks to go play there!

Kyle can answer any question appropriately now. He never hits other children, or has hysterical outbursts at school either. He even sings his made-up song about how he loves school. He volunteers to clean the school and initiates play with the other children. The teachers commented on the fact that he seemed like a new kid!

What pleases me the most is that my children are taking something completely natural and are benefiting greatly from it. Our home is now a peaceful place. We have hope for their futures.

Carrie M. Sherrill
Spring Valley, CA