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## Renowned author links diet to autism treatment

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Dr. Lisa Lewis pointed to the slide behind her on the wall. It listed a variety of symptoms, includingcommunication deficiencies, selfabsorption, bizarre preoccupations, rocking or repetitive movements, and laughingor giggling at inappropriate times.

"Does anyone know what these are symptoms of?" she asked her audience.

"Autism!" the audience shouted out. Comprised mainly of relatives and parents of autistic children, the audience was all-too familiar with the behavioralsigns of autism spectrum disorder.

"Actually, I got these symptoms from a book on drug addiction," said Lewis.

According to the opioid excess theory, behaviors manifested in autistic children are not unlike those exhibited by drug addicts, and some researchers like Lewis are interested in finding out why.



Jenna Stephens



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Lewis, who received her doctorate in biological anthropology, came to Wilkes on November 11 to offer a lecture cosponsored by the NeuroSensory Center of Eastern Pennsylvaniaon the effects of diet on autism. She spoke about how the breakdown of certain foods in autistic children can lead to drug-like reactions. Following her lecture, Lewis remained for a question and answer session during which parents with autistic children asked for advice in implementing a changeddiet.

"Parents could take from Dr. Lewis' lecture a sense of hope and a sense of control," said Dr. Robert Bohlander, Wilkes professor of psychology, who is also affiliated with the NeuroSensory Center. "So many times, parents with children on the autism spectrum are told there is no way to recover their children, and certainly no 'cure.' Dietary changes, such as switching to a gluten-free, casein-free diet offer a way to improve the quality of life for some autistic children."

A noted author and lecturer, Lewis has written numerous books on the effects of diet on autism, most recently *Special Diets for Special Kids*.

Lewis questions the relationship between food proteins gluten and casein and the typical manifestations of autism in children. In her work and lectures, she explains the opioid excess theory, which holds that gluten, which is found in wheat, oats, and rye products, and casein, which is found in dairy products, can cause or magnify autistic behaviors when they are not digested properly.

"If we remove the sources of the opiates, the gluten and the casein proteins, we can reduce or eliminate autistic behaviors," she said.

In the early 1990s, Lewis implemented a gluten-free, casein-free diet for her son Sam, who was diagnosed with autism. She was stunned by the noticeable changes in five-year-old Sam after fine-tuning his diet.

"When I took gluten out of his diet, his pronouns got better, he stopped confusing them," she said. "There was a noticeable language increase."

Lewis says that adopting a gluten-free, casein-free diet can reduce many of the typical effects of autism, which include language difficulties, ability to focus, eye contact avoidance, aggression, and sleep issues. Additionally, this type of diet can relieve gastrointestinal problems, which afflict a high percentage of autistic children.

Kerry Sorber, of Shickshinny, attended the lecture with the intention of learning what foods would help her six-year-old son, Mason, with his digestive problems. As a toddler, Mason was diagnosedwith attention deficit hyperactivity disorder (ADHD) and high-functioning Asperger's syndrome, an autism spectrum disorder.

"I knew there was something just not right with him, and I kept telling my pediatricianthat," she said. "I just kept pushing and pushing, and finally he sent Mason to a gastrointestinal specialist."

Mason was given medication to aid his digestive disorders, which Sorber says are "still a big problem." Eager to take her son off the medication, Sorber is now looking to try to offer her son treatment in the form of a gluten-free, casein-free diet. However, she knows the transition won't be easy.

"He's very picky about the food he eats," she said. "It's hard to get him to try different foods."

One of the difficulties of adopting such a strict diet for autistic children is their insistence upon routine. According to Lewis, many autistic children are "self-limiters" regarding the food they will eat. Many will eat foods of only one type, color, or consistency, and are fussy about the smells, temperatures, and textures.

"Many times, it's a short list, sometimes only three to five foods," Lewis said. "And usually, the list is appalling."

According to Lewis, poor food choices include highly processed food, those which are high in sugars and starches, and fried and fatty choices.

Sorber's son Mason eats these kinds of food on a regular basis. He eats only a small variety of food, including fried fish, chicken nuggets, rice soup, and broccoli. He smothers almost all his food in either ketchup or barbeque sauce.

However, Sorber calls Lewis' lecture "very insightful," and intends to adopt the glutenfree, casein-free diet in her own home.

"I'm going to try to use more fresh stuff, like chicken and vegetables," she said. "Mason's picky about the texture of his food, so I'm going to take a look through the cookbook and see what I can make for him."

While Lewis strongly believes in the benefits of a gluten-free, casein-free diet, she warns that it is not a cookie-cutter approach. No therapy will help every child with an autism spectrum disorder in the same way.

"I think this is for everyone," she said. "If you don't do it, you still have to improve the quality of your family's diet, cut out all the junk and sugar."

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