



ABIQ NEWS

Edition 17 - March 2003

WELCOME FROM OUR PRESIDENT:

Hi everyone! The last few months have been very busy all round, both within our household and with ABIQ matters. The start of a new year always brings lots of change, which of course our kids may not handle well. New teachers for those starting or returning to school can bring challenges, or perhaps it is heading off to child care for the first time. Maybe there are new therapists in the ABA home program. Some changes go smoothly, but often there are very trying times during this period. Interestingly, it is not always the child with autism in the family who has the most stress! It may be the NT (Neuro-typical) sibling or perhaps the parents. It seems to me that we are always having to inform, teach or provide information to the professionals we are dealing with, and to do this, we must be well informed ourselves so that we can act as real advocates for our children. In doing all of this, we often lose sight of having a little bit of time for ourselves, and it is necessary to have some "me" time for sanity sake.

My son is not having a good time at school at the moment. He is in a double classroom, 60 kids, 2 teachers and all the resulting distraction. The school wonders why his behaviours are so bad and disruptive. We are working to find an alternative way for him to be able to achieve academically and learn the social skills he needs, while still taking his place in the class. He is not the only child with ASD at the school, but I hope what they (the school) learn from us, they can apply to their dealings with other families.

Of course, Marcy McCarthy has been here conducting AIT (Auditory Integration Training) and Christopher has been undergoing it. So we have had the full range of emotions during this period. We have had tantrums, very happy times and everything in between. I had realized Christopher experienced sound sensitivities but it wasn't until undergoing AIT that he admitted he wasn't hearing complete words. Rather he has been hearing only parts of words. No wonder he is having problems at school!

He didn't tell me because he thought I would think he was going deaf. We have to be aware that when we ask our kids a question like "Can you hear?" it may really need to be more specific to get the whole answer.

I had asked, "Do you hear words clearly?" He answered, "Good words are clear."

But later he told me, "The words that aren't good words are the ones I don't hear all of..."

In short, Chris can hear but he is not hearing correctly. Hopefully after AIT, it will be much improved.

ABIQ has been busy (thanks to Bianca and Kylie) with organising seminars on various topics. These are proving to be quite popular and are a good way to get information to people. So far this year, there has been Marcy McCarthy speaking about AIT and the Neural Experience, together with Mary Jane Blackman telling about daughter Lucy's personal benefits from doing AIT. Last Saturday, we ran a very successful ABA Information Day and then looking ahead to April, Dr Gary Deed will be speaking on Nutritional Therapy for Autistic Spectrum Disorders, together with Mr Harold Stone, who will be talking about his personal experiences on this topic. Getting the insight of someone who has used these treatments or interventions gives us a greater understanding, from the point of view of the person with ASD, about possible changes and benefits.

The feasibility study into fundraising, being undertaken by Ward and Ward, is now in the next phase where people in business are being contacted and interviewed to give opinions regarding our proposals. We eagerly await their report in another month or so. At the same time, members of the ABIQ Committee are putting together various fundraising ideas to ensure the continued success of our organisation.

Enough from me. Take care of yourselves and your families.

Maria

Report on the Stronger Families and ASD project at the Caroline Chisolm Centre.

This project aims to strengthen the family and community networks of young ASD children, aged 0-4 by increasing knowledge of best -practice, promoting the child's social, communication and behaviour skills, and recognizing that the family is the expert on the child. It provides current information and teaching effective interventions to develop the child's social, communication and behaviour skills through positive behaviour strategies that can be used and integrated into daily family routines.

The project is funded by the Department of Family and Community Services and key researchers involved are from the University of Queensland. Families who participate in this study are involved for a period of 8-10 weeks.

Of the first group of four families, two families completed the program and the other two partially completed it. Those who only partially completed the program still took part in the initial workshop and one family was involved with the group sessions, while the other family had home visits. A second group has now started and again there was an initial workshop, group sessions, home visits and community sessions.

ABIQ, along with other organizations, will continue to be involved as a community group providing information on support available and also take part in discussions and updates with those running the program.

Recruiting of families to the program is being done by word of mouth, referral from other organizations and through notices in publications such as Brisbane's Child. Anyone wanting more information or knowing of a family who may be interested, should contact Dr Deb Keen or Michelle Braithwaite . Ph: (07) 32550651

Noah's Ark Toy Library

The Noah's Ark Toy Library is situated at 20 Norman Street, East Brisbane. To access ABIQ resources as well as the large selection from Noah's Ark, you need to make an appointment (Ph. 3391 2166) or attend on Wednesday and Friday between 1.30pm – 3.30 pm where an appointment is not needed. The library is closed on public and school holidays.

There are a variety of videos and books available for borrowing by ABIQ members who are also members of the Noah's Ark Toy library. A recent addition to our resources is a video of the Marcy McCarthy seminar "The Neural Experience" complete with a booklet of her talk, which was held on the 1 March 2003.

There are a number of reading books for the children which are great for use in the therapy programs. We have a range of Dorling Kindersley (DK) Books containing large colourful pictures, as well as the PB Bear series. These books cover a variety of everyday issues. Another range is the "First Steps to Reading" books specially designed to help children successfully take their final steps in independent reading.

Textbooks are also available, including:

"Making a difference" – Catherine Maurice, Gina Green and Richard M. Fox

"A Work in Progress" – Ron Leaf and John McEachin

"Activity Schedules for children with Autism - Teaching Independent Behaviour"

Lynn E. McClannahan, Patricia J Krantz

(details instructions and examples to help with using activity schedules enabling children with autism to accomplish activities with greatly reduced adult supervision)

"Facing Autism" – Lynn Hamilton

(written by an American parent this book assesses the many treatment options available)

"Unraveling the Mystery of Autism and PDD – A Mother's Story of Research and Recovery" – Karyn Seroussi
(reviewed in this edition of ABIQ News! See page 11)

“RADIANT LIGHT” CD TRIAL

Becoming a parent is an enormous responsibility and gets difficult at times. When you have a disabled child of any kind, the stress associated with parenting increases, triggering strong emotional responses from all family members. Respite for the family is integral in their ability to continue creating a supportive, loving home environment.

Our son was diagnosed early with specific learning difficulties. At 12 years old, the school he was attending asked that he be assessed by a child psychiatrist with the specific query being Asperger’s Syndrome. He was diagnosed with classic ADD. We chose not to use Ritalin. We tried several different ways of coping with his symptoms. There was some success at times, but not consistent. Our son is now 17 years old.

In November 2002, we started a trial with a CD “Radiant Light” from America that was created using the technology of silent sonics. The CD had been developed specifically for the autism spectrum. We started playing the CD (without earphones) every day and noticed a dramatic improvement in our son’s behaviour, the most notable being how calm and pleasant he had become. The incessant tapping, fidgeting, irritating and sometimes dangerous behaviour had dissolved. Encouraged by these results, a further study was undertaken with a 19 year old young man with autism. Again the results were dramatic. He began communicating in sentences, became noticeably and consistently calmer, was happier, and was able to perform his personal hygiene tasks without coaching. With the change in behaviour of both these young men, the stress levels in the homes were relieved enormously.

Further trials are needed with the CD to validate the initial results. Contact Julie Lewin on 3719 5528 or jlewin@wxc.com.au if you are interested in participating in these trials.

Our thanks to

Marcy McCarthy and Mary Jane Blackman for speaking at the AIT Seminar held on March 1st at QUT, Kelvin Grove.

Video and Transcript is available for loan at Noah’s Ark Toy Library or to purchase from ABIQ.

Cost: Members \$15 includes postage
Non-Member \$20 includes postage

SPREADING THE WORD ABOUT ABA

A very successful seminar focusing on Applied Behavioural Analysis was held on Saturday 22 March at our usual location, QUT Kelvin Grove. An audience of 65 people comprised of parents, students and school personnel were presented with a range of informative topics including the nature of autism, ABA theory and practice, the role of the ABA teaching assistant/school shadow, generalisation and integrating ASD students into the classroom. As always, we are deeply grateful to our speakers for their continued support of ABIQ and its aim to raise community awareness about Autism and ABA. Our thanks to Leslie Workmon, Maily Pickering, Chloe Chan, Tracey Grose, Dennis Condon, Michael Chan and Maria Carroll for their time and effort in preparing such worthwhile contributions. Special thanks again to Michael Chan for his superior technology skills, which were on show for much of the day. Putting together these events is a lot of hard work! Our workshop team, led by Bianca and Kylie, and ably supported by Carmel, Dee and Fiona have been extremely busy of late. ***As a result of this initiative, we now have many new students on the ABIQ Therapist Register. Members who are looking to recruit new staff for their home or school programs, please contact ABIQ for details.***

See me beautiful, look for the best in me

it's what I really am, and all I want to be
 it may take some time
 it may be hard to find
 but see me beautiful

See me beautiful, each and every day
 could you take a chance?
 could you find a way?
 to see me shining through
 in everything I do
 and see me beautiful

-Red Grammer-
 (from Teaching Peace)

Social Morning Tea

Come and join us for a casual morning tea. We meet at McDonalds McCafe so that we can have a nice coffee and if you have young children they can play in the playground. We will have an ABIQ sign on our table. This is a great opportunity to find out about other families in similar situations and how they're coping. It's a great source for information and an enjoyable morning with others that understand. The next couple of meetings are:

- ☛ **Indoorpilly McCafe 9:30am Wednesday 9th April**
- ☛ **Cooparoo McCafe 9:30am Tuesday 13th May**

See you there

WEBSITES

- www.singlevaccines.com/
www.jabs.org.uk/
www.cdc.gov/nip/vacsafe/concerns/autism/default.htm (This website of the Center for Disease Control in Atlanta, Georgia, provides up to date information about what remains essentially unproven theories about the aetiology of autism and any relationships with vaccinations and bowel disease. There are detailed summaries of many research articles, concluding that there is no evidence proving a link between MMR vaccination, 'leaky intestines' and autism.)
<http://www.allergyfacts.org.au/alert.html>
www.megson.com
<http://www.acnem.org>
www.specialfoods.com
www.gfcfdiet.com
<http://groups.yahoo.com/group/failsafe>
<http://members.ozemail.com.au/~coeliac/index.html>
<http://www.unclericks.com.au/>
<http://members.ozemail.com.au/~sdengate/FAILsaf1.html>
<http://www.geocities.com/gfcfaustralia/>
<http://www.autismchannel.net/dana/index.htm>
www.autismsupport.org
www.autismsupport.org/autlinks.html
www.autismsocietycanada.ca
trainland.tripod.com/pecs.htm (pecs pictures)
www.speechteach.co.uk/
www.pics4learning.com
www.pfot.com (fine motor activities)
www.familyfun.com
members.tripod.com/~imaware/fmotor.html (fine motor activities)
www.ci.shrewsbury.ma.us/sps/schools/beal/readiness/finemotoractivities.html#fine
 (fine motor activities)
www.angelfire.com/ma2/carson/filefolder.html (file folder games)
www.difflearn.com
www.isn.net/~jypsy
www.elija.org
members.tripod.com/RSaffran/
www.behavioranalysts.com
www.cdc.gov/ncbddd/kids/default.html
 (centers for disease control and prevention)
www.aacproducts.org (communication aid manufacturers association)
php.iupui.edu/~rallen/mlfaq.html (me-list)
www.feat.org/FEATorg
www.lovaas.com
melindasmith.home.mindspring.com/ (teaching playskills)
- www.autism-society.org
www.wiautism.com (Wisconsin Early Autism Project)
www.featnt.org/info/links.asp
rsaffran.tripod.com/aba.html
www.fyino.com/threshold/commercial.htm
www.learningpage.com
www.eden2.org
www.abcteach.com
www.eslkidstuff.com
www.kidspirit.com
www.edhelper.com
www.kidaccess.com
www.enchantedlearning.com
www.happychild.org.uk
www.coloring.ws
www.cofeat.org (links)
edchapman.tripod.com
worksheets.teach-nology.com
www.wrightslaw.com (legal webpage)
www.mayerslaw.com (legal webpage)
www.polyxo.com
www.kellymckinnon.com (behaviour consultant)
www.speakingofspeech.com
www.noahsbasement.com
www.babybumblebee.com (educational products)
www.autismcoach.com (specifically for the software)
www.behavior.org
home.gwi.net/goplay/home.htm
www.autism-resources.com
www.autismed.com
store.yahoo.com/conceptionsores/babeinmusvid.htm (baby Einstein video series)
www.bigkidsvideo.com/bigkids/brainybabydvd.html (brainy baby videos)
www.do2learn activities to promote independence in individuals with special learning needs

If anyone has websites that they found useful and would like to share them please email them to enquiries@abiq.org and we will include them in the next newsletter.

Epsom Salts Spray

If the child starts to have a melt down or get distressed this can be handy to spray on arms and legs.

Boil one cup of pure or filtered water and add ¼ cup Epsom salts. Stir until dissolved. Let it cool and pour into small spray bottle. Spray on skin and rub in as necessary. Handy when away from home and baths are not accessible.

Thanks Heather Jennings for this little beauty!

Autism in Children Breakthrough Downunder

[By Louise Pemble in the Herald Sun, Australia.]

www.heraldsun.news.com.au/common/story_page/0,5478,6021827%255E421,00.html

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> A group of children are baffling medical authorities who say they can't exist - autistic children who are getting better through special diets, nutritional supplements and medicine. They are being treated by a handful of Australian doctors who are defying standard medical practice by approaching autism as a physical disorder, rather than just a behavioural one.

> These treatments don't work for every child - and many are unproven by the gold standard of clinical trials - but some parents claim they are seeing tangible improvements in their children's autistic behaviour. They tell of "awakenings" in their children, such as a non-verbal five-year-old suddenly talking and responding to toilet-training.

> Anecdotes like this sound "interesting", says Dr Lawrence Bartak, president of Autism Victoria and former president of the Autism Council of Australia. But he says this type of treatment is "crying out" for more research, to test if the interventions - or some other factor - are contributing to improvements in the child's behaviour.

> Autism affects one-in-500 to one-in-1000 Australian children. Their parents are told there is no known cause or cure. The only proven treatment is behavioural therapy, but it can take years to train an autistic child to overcome symptoms like rigidity to routines, poor understanding of others and speech delay.

> Research from the US and Britain has recently been hinting at physical links to autism, such as gut disorders. British researcher and gastroenterologist Dr Andrew Wakefield has found such a high rate of intestinal dysfunction in autistic children that he calls this a "unique disease process" of autism. In a colonoscopy study of 110 autistic children he found only three did not show signs of intestinal disorders.

> Now Harvard University is working on a medical protocol for treating autism following its research into the gut.

> Using 500 gastrointestinal endoscopies with biopsies, Harvard researchers found more than half of autistic children studied had treatable gut disorders including from esophagitis, gastritis and enterocolitis (inflamed gut and bowel). These findings have excited scientists and parents, because they suggest that if the gut is healed, the autism may also improve.

> But this gut-brain link has yet to be conclusively proved and, until a causal link is found, debate will continue to rage over whether gut disorders cause autism or whether they are a side effect. Although unfamiliar with the Harvard study, Bartak says any reliable and replicated research showing a higher incidence of gut problems in autistic children would be "very interesting". "It would suggest that there may be some form of congenital abnormality that produces an abnormal gut and is then doing something abnormal to their brain as well," he says.

> Sunderland University in Britain has come up with a detailed protocol for treating autism biomedically (ie, treating symptoms in the body). The Sunderland protocol advocates: Introducing the child to a dairy-free and gluten-free diet; Testing for other food allergies and eliminating offending foods; Testing for vitamin and mineral deficiencies and supplement as needed (commonly zinc, calcium, magnesium, vitamins A, C and some B vitamins); Testing stools for parasitic organisms such as yeasts or bacteria. The child is then given treatments to address deficiencies and heal damage to the gut so they can better absorb nutrients.

> Protocol co-author Paul Shattock admits some of these interventions are untested and anecdotal. But at last year's Autism Congress in Melbourne, he recommended that parents start by introducing the dairy-free diet for three weeks to see if their child's behaviour improved. Sydney pediatrician Dr Antony Underwood has put this form of treatment to the test - with encouraging results.

Underwood claims that a few of his patients now appear to have recovered from autism. They are attending standard schools, making friends and communicating at levels typical for their age. And while most don't reach full recovery, he has seen improvements in most of the 80 or so autistic children attending his North Shore surgery. "I see a

small group who are fully recovered from autism, a middle group who are improving and a small group who show no response," he says. Underwood says he cannot tell from the start whether a child will respond to biomedical intervention, but generally younger patients do better, especially if treatment starts between 2½ and 3½ years of age. He says autistic children often have very high copper levels, multiple food allergies and yeast infestations of the gut that respond well to elimination diets and anti-fungal medications. If blood or hair tests reveal mineral deficiencies (zinc is usually low), they also show improvement when given mineral supplements. Add omega 3 and 6 fatty acids and this is enough for some children to lose all signs of autistic behaviour, Underwood says.

Sydney mother Gina Taylor claims her five-year-old son Colin (not his real name) has overcome his autism using these interventions. Taylor says the ages between two and four were "just appalling" for her family, as Colin's development was severely delayed. Colin didn't respond to his name, was non-verbal, a fussy eater and felt no pain. He had also been on several courses of antibiotics and was about to have grommets inserted in his ear to resolve persistent infections. "Within about two months of his treatment starting, he never needed another course of antibiotics, his pain threshold was normal and he ate a wider diet like eggs, vegies and meat."

While these improvements were welcome, Taylor says the big breakthrough happened a few months later. "I was in a shoe shop, carrying him as usual so he wouldn't run away, when he leaned over and pointed to a row of shoes and named eight different colours," she says. After two years of treatment, her son no longer needs speech or occupational therapy, speaks normally for his age and has just started at the local public school.

Brisbane GP Gary Deed also treats autistic patients biomedically. His Carina clinic sees about 250 autistic children and adolescents. He says most show some improvement if given personalised programs. "We see a response to symptoms such as digestive symptoms quite quickly in many cases. I have had success with behavioural changes such as stimming (repetitive movements such as flicking and rocking) and agitated self-harming behaviours as well as withdrawal." Asked if any patient had fully recovered, Deed responded: "I have only truly seen one."

But he says that isn't the goal for most families. "Most parents accept that they are not looking for 100 per cent recovery, but better ability to self-manage and develop independent living skills.

> "To get a child to speak might be as big a milestone for one as it is to finally get toilet-training complete in a seven- to nine-year-old, if you know what I mean."

> In fact, doctors who use this approach do not advocate its use without

> using other treatments such as speech and occupational therapies and > learning programs such as applied behavioural analysis (ABA).

> While this makes it harder to pinpoint which therapy is responsible

> for any sudden breakthrough, Underwood says some parents who had tried many

> therapies without success were turning to chelation.

> Underwood says chelation seems to help children whose hair tests

> indicate high levels of metals such as mercury, lead, aluminium, arsenic,

> and cadmium.

> Chelation is most commonly carried out using agents that bind to the

> metals in the body. The child then excretes the metals through their urine.

> Although chelation has been linked with causing seizures in some > children, Underwood says he had seen no cases of this.

> But he stresses that it needs to be done under close medical

> supervision and only once other therapies have been in place for several

> months.

> The fact that some children seem to benefit from chelation suggests

> they cannot excrete heavy metals or detoxify themselves, he says.

> US researcher Dr William Walsh found that 85 per cent of autistic

> children have a dysfunction in a protein called metallothionein. He believes

> this may lead to an accumulation of heavy metals in the body, resulting in

> autistic behaviour.

> But deputy director of the National Centre for Immunisation Research,

> associate professor Peter McIntyre, says chelation therapy has not been

> thoroughly tested, so its effectiveness has yet to be proven. "I'm aware of

> people who are practising certain chelation therapies in children with various developmental problems," he says.

> "As far as I'm aware, none of them have engaged in any systematic

> evaluation of this treatment and there's certainly no published data to

> confirm that it's effective."

> But one Sydney mother claims chelation was the turning point for her

> son, Lachlan, 5.

> Linda John says Lachlan's development was normal until 12 months.

> By 15 months, she noticed he would no longer look at her and he was

> constantly fighting ear infections.

> And so began the vicious cycle that many parents of autistic children

> describe.

> Repeated courses of antibiotics to clear up the ear infections or wipe

> out the micro-flora in the bowel, leading to other health problems.

> Her son went from having a healthy complexion and stools, to

> diarrhoea, night sweats, red cheeks and glazed eyes.

> Not even the 18 months he spent at a Sydney school specialising in

> teaching autistic children could help Lachlan - in fact, his autism

> worsened.

> Lachlan started seeing Underwood, who assessed his gut disorder and

> started treating him with probiotics, vitamins and minerals.

> "I did the gluten-free/dairy-free diet, but I never noticed it made a

> huge difference."

> Lachlan's ear infections cleared up and his complexion improved, but

> his mind "still wasn't there", she says.

> Although she had dismissed chelation before - "it sounded like too

> much trouble" - she had reached a plateau with his treatment and decided

> to

> try it.

> "The first few rounds I did, I thought he was getting a little bit

> more aware, that he'd look at me more, but he still wasn't toileting, he

> just didn't get it.

> "The only way I could describe it was as if I was speaking a different

> language to him."

> Two months into the chelation, Lachlan came home with a note

from

> school to say that for the first time he had completed all the actions to an

> interactive activity in class.

> "Out of the blue they said 'pat your head' and he did it, 'rub your

> tummy' and he did it, 'touch your toes' and he did it - all with no

> prompting from anybody.

> "It was just unbelievable, that first feeling of 'Oh my God, something

> has happened here'. From then on he just started using more and more words."

> The changes in Lachlan were also noticed by a student speech therapist

> who teaches Lachlan at home two or three nights a week.

> "She couldn't keep up the program quick enough with him," says John.

> "I've seen her come out of the room with tears in her eyes saying, 'You

> wouldn't believe how great he went tonight'."

> The next big breakthrough was toilet training.

> "It took me about two weeks - the connection just happened - he was

> suddenly aware that that's what mummy wants me to do."

> Just when she started to wonder if Lachlan had simply reached an age

> when he would have improved anyway, she was invited to the school's award

> night.

> Out of 60 pupils, Lachlan won the Encouragement Award for the child

> who showed the best single improvement over the school year.

> "The school could see that his gains were above and beyond what would

> be expected of a child with his delays, so that was incredible."

> John now believes her son was highly reactive to heavy-metal exposure,

> which is why he didn't show much improvement until the chelation therapy.

> "The biggest breakthrough has been watching the chelation because I

> felt like perhaps all the other stuff I did was groundwork and the chelation

> was the icing on the cake.

> "I'll never know what Lachlan would have been like had I not done

> everything, but I don't believe I would have the good little boy I've got

> now."

OPTIONS Communication Therapy Centre

Most important ...a social story is NOT a "What to do" story.

A social story is a short story, written from the child's perspective. The story has to describe social situations and cues, which will help understanding and responses to situations that are challenging.

When you write a social story, keep it short and positive. Always look at reviewing and re-writing it as the situation changes. A social story does not state what the child has and has not to do. The social story does state what the child might *try* to do, how people *may* feel and what may *sometimes* occur.

Here is some example of social stories about "Turn taking" that you can use with your child or the children you work with:

What is taking turns?.....

Sometimes, children want to play with the same toy. They may need to take turns with the toy. A "turn" is a chance to play with the toy. Each child has a turn playing with the toy. Usually I will have a turn to play with the toy.

When is it my turn?.....

Sometimes it may be difficult to know when it is my turn. Adults can help. An adult may ask me to wait for my turn, saying, "_____, please wait." "Wait" means my turn is coming. "Wait" may also mean it's a good time to play with another toy. Adults will try to show me what "wait" means. When it's my turn, someone may say, "_____", it's your turn!" That means other children will wait.

Is it easy to take turns?.....

Sometimes children take turns easily, and sometimes it is more difficult. This is okay. It is usually easier for children to take turns when there is an adult to help them. Sometimes children make mistakes as they learn to take turns. Taking a toy from a child without asking is a mistake. An adult can help. Little by little, children learn what to do when someone makes a mistake taking turns.

PRESENTING

NUTRITIONAL THERAPY FOR AUTISTIC SPECTRUM DISORDERS

SATURDAY 12TH APRIL 2003

QUT KELVIN GROVE

N519

1.30PM – 4.00PM

SPEAKERS:

DR GARY DEED AND MR HAROLD STONE

Registration forms can be downloaded from our website www.abiq.org or ph 3264 2582

**GLUTEN AND CASEIN FREE
COOKING CORNER**



Carob Spread

½ cup carob buttons (beware: some contain milk or soy)
 2 tablespoons pure cornflour
 8 tablespoons water
 2 tablespoons oil

1. Place carob in heatproof basin over hot water. Stir until carob has melted.
2. Put cornflour into a small bowl, add water and blend well. Stir in carob and oil.
3. Place in glass jar and store in the refrigerator. Stand at room temperature to soften before using.

Variation: For a crunchy texture, add ¼ cup chopped hazelnuts

Hidden Jewels Fritters – by Gabrielle Bell

2 eggs separated

1/2 tsp curry powder

1 clove garlic crushed

approx 1 cup frozen mixed vegetables

approx 1/2 cup arrowroot flour

small amt of water

Place the egg whites in a bowl and beat until white and stiff

Add the rest of the ingredients and mix to a smooth batter

(adjust water or flour amounts to get consistency right if need be).

Jarod eats these no worries and still wants more. The vegie mix I use includes celery, capsicum, peas and corn which (apart from corn) he doesn't usually eat. They can be eaten cold for school lunches.

Brisbane Autism Conference 2003
Date: 18 May 2003

Venue: Clear Mountain Hotel and Conference Centre
 Clear Mountain Rd, Clear Mountain Q 4500

Cost: \$45.00 – Includes lunch and morning/afternoon tea
 (please advise of special dietary requirements)

Bookings: Ph 3298 5100 Fax 3298 5435
Contact: Jeanie Ryan ph 0408 006544
Email: conferences@clearmt.com.au

Program

- 9.00 am** **Dr Gary Deed**
 Characteristics, Theories of Causation, Tests and Treatments
 Useful Supplements and Medications
- 10.15am** **Dr Barry Ryan**
 Brain Function and Toxicity - Heavy Metals and Gut Infections
 Useful Tests, Chelation and Dietary Management
- 11.15 am** *Morning Tea*
- 11.40pm** **Jeanie Ryan (Dietitian)**
 Looking at Gluten and Dairy – some of the pitfalls
 How Long Should you Test?
 What is a “Good Diet?”
- 12.45pm** **Questions for the morning speakers**
- 1pm** *Lunch*
- 1.30pm** **Tracy Bester – Mother of Children with Autism**
 Identifying and overcoming communication deficit
 Insight and management of sensory impairment
- 2.30pm** **Jane Remington-Gurney**
 Speech Therapy in Autistic Disorders
- 3.30pm** *Afternoon tea*
- 3.45pm** **Lesley Workmon (B. Psych)**
 Behaviour Analyst – Programs for parents and children
 Discrete Trial Training –hands-on training for home
- 4.45pm** **Questions and Close**

Available for Loan to ABIQ members

Video Cameras

Northside : contact Kylie Graham : 3300 2850
 Southside : contact Carmel Grasso : 3219 2080



Unraveling The Mystery Of Autism And Pervasive Developmental Disorder
= A Mother's Story of Research and Recovery by Karyn Seroussi

=

A member reviews this book which is available for borrowing from the ABIQ Collection at Noah's Ark.

Karyn Seroussi's son, Miles, was diagnosed with Autism at 19 months of age. She and her husband, Alan, traced the onset of Miles's problems to an immune system breakdown that coincided with the vaccinations he received.

Miles's decline began with symptoms which sound hauntingly familiar to many of us including spaced out behaviour, loss of speech, increased appetite for milk, ear infections, loose stools and social withdrawal.

The Seroussi family began their fight against autism with the removal of dairy foods from Miles's diet, antifungal medication and ABA. They were rewarded with immediate improvements.

Recovery came within 4 months for Miles as a strict gluten and casein diet was implemented, which later necessitated the removal of soy, corn and other offending foods. To keep her son from developing intolerance to the few foods remaining in his diet, Karyn Seroussi began to rotate them, ensuring he had three rice-free days and one potato-free day each week.

This book presents an enormous amount of information about dietary and nutritional intervention. For instance, did you know that in addition to gluten and dairy, some children with autism do not tolerate corn, soy, egg yolk, tomato, oranges, red grapes, beef or coloured fruits and vegetables? Have you heard about the problems our children may experience with foods high in phenols? You will also find practical steps on how to get started with dietary intervention, information about foods, preparation, shopping and supplementation. Your frequently asked questions about diet will most likely be answered in this book!

In addition to her own child's experiences, Karyn Seroussi details the experiences of other children with whom she became involved. All responded differently to foods and dietary interventions. She also teamed up with Lisa Lewis ("Special Diets For Special Kids") to present workshops all over the U.S. It was totally compelling reading about the determination of this family to heal not only their own child, but many others in the process.

A thoroughly recommended read for anyone out there interested in starting dietary intervention or for those who may need help to implement their child's GFCF diet more successfully.

[Read a good book lately that other ABIQ members would be interested in? Tell us about it and we would be happy to print your review ...](#)

“Early Days with Autism” Workshops Presented by Tracy Bester

Specializing in Autism Spectrum Disorder and behaviour modification, having gained the recognition of leading professionals, her work is currently in use in 9 countries and four languages. A mother of four children (two presenting with Autism, her oldest a recipient of the Temple Grandin award for outstanding achievement with Autism), Tracy offers a unique insight into the Autistic world. Since presenting her work at the Inaugural World Congress for Autism in Melbourne 2002, Tracy has been training parents and professionals Australia wide, providing practical strategies for successfully improving the outcome of many social disorders whilst providing parents and aides with something they can actively do to improve their situation. Tracy speaks for organizations including The Department of Family Services, QUASP, SDS, Education Department, AAS, and ASSN. Attend one of her workshops designed for parents and professionals interested in learning practical and effective ways to offset anti-social behaviour, overcome speech and communication difficulties, work successfully with sensory impairment and improve the overall outcome of Autism Spectrum Disorder.

For more information on the resources in the Learning Curve range, contact staff at jesse.ka on 07 3889 8572 or log onto our the web site www.jesseka.com

Date Claimers			
DATE	TIME	EVENT	CONTACT
28 th March	7.30pm	Support Group Meeting 24 Currajon Street Brendale	Bianca 3264 3995
28 th March		“Early Days with Autism” Workshop	Tracy Bester 3889 8572 www.jesseka.com
2 nd April		“Early Days with Autism” Workshop	Tracy Bester 3889 8572 www.jesseka.com
12 th April	1.30- 4.00pm	Nutritional Therapy for Autistic Spectrum Disorders With Dr Deed and Mr Harold Stone	enquiries@abiq.org or 3264 2582
26 th and 27 th April	9.30am – 3.00pm	Advancing Skills in Facilitated Communication QUT Carseldine E122	Jane Remington-Gurney 3285 5522 optionsctc@iprimus.com.au
25 th April	7.30pm	Support Group Meeting 1 Albin Court Rochedale South	Maria 3341 8973
27 th April		Behaviour Management in ADD/ADHA Disorders Conference	Jeanie Ryan 0408 006544
11-17 th May		Autism Awareness Week	
18 th May		Autism Conference Clear Mountain	Jeanie Ryan 0408 006544
26-27 May		Two Day - PECS Training Workshop	AQ Therapy Centre Sunnybank Hills Ph 08 8331 7727 (PECS Australia)

DISCLAIMER: This newsletter is intended to provide basic information on Autistic Disorder and Applied Behavioural Analysis. It is not intended to, nor does it, constitute medical or other advice. Readers are warned not to take any action with regard to medical treatment or otherwise based on the information in this newsletter without first consulting a physician. ABIQ does not necessarily endorse any of the information contained in this newsletter. The information contained in this newsletter is intended to be for your general education and information only and not for the use in pursuing any treatment or course of action. Ultimately, the course of action in treating a given patient must be individualised after a discussion with the patient's physician(s) and family.