Glial Cells – “The Other Brain” that the Neurons can’t live without

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It’s not just neurons up there

In order to understand the impact of biomedical approaches on autism, we need to understand the physical and physiological aspects of the brain – and in particular, the roles of glial cells in the brain (and gut too!)
THE OTHER BRAIN
by Douglas Fields, PhD, NIH scientist

ABOUT GLIAL CELLS
WHICH GREATLY
OUTNUMBER NEURONS IN
THE BRAIN AND GUT

A readable book about the
non-neuron cells in the brain
and how they are
revolutionizing medicine

www.theotherbrainbook.com

The Neuron

Dendrites
Cell body
Axon
Synapse
Nucleus
Neuron – Introduction

• Neurons are core component of nervous system
• Electrically excitable:
  – process and transmit information by electrical and chemical signaling
• Types: Sensory Neurons; Motor neurons; Inter-neurons (or association neurons)
• Do not generally undergo cell division or regenerate after injury.

OTHER PARTS OF THE BRAIN THE NEURONS CAN’T LIVE WITHOUT
Brain blood vessels: large, medium and medium-small scales

- [www.jyi.org/research/re.php?id=1607](http://www.jyi.org/research/re.php?id=1607)
- [research.cs.tamu.edu/ier/gallery/Brain.html](http://research.cs.tamu.edu/ier/gallery/Brain.html)

BBB Classic Image

- Astrocyte
- Capillary
- Neuron
Brain “Connective tissue” – Extracellular matrix

- The “stuff” between cells
  - support structure
  - things diffuse through it and it filters (rich and complex activity)
- Previously not given much attention
- Recently getting lots of research attention
- This part of the brain plays critical roles in development and neurodegeneration
- It is also vulnerable with toxicity and with immune activation and inflammation

Cerebrospinal fluid (CSF)

- Fluid around the brain
- Bathes the brain, carries nutrients and other substances
- Carries out waste
- Interacts with the blood stream
- Its chemical composition is influenced by health and disease
Skull and membranes

- The external structures of the brain are vulnerable to strains and torques, especially in childbirth.
- Cranial osteopathy has contributed greatly in understanding this.
Types of Glial Cells

- Astrocytes
- Oligodendrocytes
- Ependymal Cells
- Radial Glia
- Schwann Cells
- Satellite Cells
- Enteric Glial Cells

Astrocytes/Astroglial cells

- Star shaped glial cells in brain and spinal cord. (“Astro” = “star”)

- Their processes envelope neuronal synapses and capillaries in brain.
Astrocytes conspire with neurons during progression of neurological disease

As astrocytes are becoming recognized as important mediators of normal brain function, studies into their roles in neurological disease have gained significance. Across mouse models for neurodevelopmental and neurodegenerative diseases, astrocytes are considered key regulators of disease progression. In Rett syndrome and Parkinson’s disease, astrocytes can even initiate certain disease phenotypes. Numerous potential mechanisms have been offered to explain these results, but research into the functions of astrocytes in disease is just beginning. Crucially, in vivo verification of in vitro data is still necessary, as well as a deeper understanding of the complex and relatively unexplored interactions between astrocytes, oligodendrocytes, microglia, and neurons.

Types of astrocytes/astroglial cells

• Fibrous
  – Within white matter,
    • Few organelles, long un-branched cellular processes
  – Vascular feet connecting to outside of capillary walls
• Protoplasmic
  – Most prevalent, found in gray matter
    • Many organelles
    • Short and highly branched tertiary processes
• Radial
  – Perpendicular to cortex and ventricles
    • Guide-wires for migration of neurons during development
    • Persist in cerebellum
Astrocytes – Structural Contributions

• STRUCTURE
  – Provide *Structural support* to brain.
  – Closely associated with neuronal synapses
  – Cover surfaces of dendrites, cell bodies
  – Contribute to *glia limitans* in outer surface of brain and spinal cord
  – Nervous system repair: ingest damaged neurons, and create scar tissue.
  – Support myelination of oligodendrocytes

Astrocyte modulation of neuronal metabolism

• Modulation of neuronal metabolism: *Neurons are very dependent upon astrocytes.* This kind of collaboration is efficient for the organism.
• Modulation of synaptic transmission and myelination
  – TRIPARTITE synapse (discussed later)
  – A form of “outsourcing” of vital functions
    • Energy
    • Ion regulation
    • Neurotransmitter regulation (especially glutamate)
    • Glutathione production
Cartoon Illustrating the Alterations in Cell Signaling that Mediate MeHg-induced Neurotoxicity

M. Aschner (see Aschner 1999)

Astrocytes as trash collectors

- Toxicants accumulate in astrocytes until they can’t take any more which contributes to astrocyte dysfunction
- Example: Manganese: - inhibits ability of astrocytes to promote neuronal differentiation
- They also dump garbage into the circulation
  - See next slide
Astrocytes facilitate CSF flow and help clear solutes

In the brain microcirculation, both astrocytes and tanycytes have long processes that run through the brain tissue and connect the cells with other structures. The tanycytes and astrocytes form endfeet (a) that are applied closely to the microvasculature that forms the BBB and express AQP4 adjacent to the endothelial basement membrane (basal lamina). The cells also bear processes that connect the cells with other brain structures. These processes may either interdigitate with the ependymal cells (c) that line the brain ventricles and directly contact the CSF (b) or may abut the ependymal cells and extend to the pial surface of the brain, which faces the subarachnoid CSF space (d). Other processes also terminate at neuronal cell bodies (e). The ependymal epithelium that covers the choroid plexuses across which CSF is secreted has tight junctions between the cells (f), as do the endothelial cells that form the BBB. Possible directions for water flow though the cells are indicated by the arrows.

Begley, DG, Brain Superhighways, Science translational Medicine 4:147


Electron microscopy of therapeutically activated glia turning into “brain garbage collectors and transporters”

Astrocytes: Blood flow and Barrier functions

- Astrocyte activity is linked to blood flow to brain.
  - Contribute to neuronal regulation of blood flow.
  - Activated astrocytes get large and can compress capillaries, reducing blood flow.
  - Contribute to Blood-Brain Barrier

Astrocytes – Energy Metabolism

- METABOLISM
  - Glycogen fuel reserve
  - Provide neurons with nutrients
    - Lactate, Glutathione
  - Help regulate extracellular ion concentrations
Astrocytes and the Extra-Cellular Matrix

• Astrocytes play key role in organizing the extracellular matrix
  – Particularly the “perineuronal nets”, which help regulate the sprouting and pruning of synapses
    • These are important in brain plasticity after early brain development

Astrocytes and Neurotransmission

• NEUROTRANSMISSION
  – Membranes contain neurotransmitter receptors
    • Glutamate receptors on astrocytes and oligodendrocytes inform these cells about rates of firing of glutamate neurons
  – Modulation of synaptic transmission
  – Glial cells can speed up or slow the rate of synaptic transmission in different areas at different rates, contributing to brain integration
Astrocytes and Modulation of Excitation/Inhibition

• MODULATION OF EXCITATION – GLUTAMATE
  – Astrocyte filopodia absorb synaptic glutamate and end neurotransmission
    • glutamate-induced filopodia motility is mediated by mGluRs 3 and 5
    • Under stress these filopodia are withdrawn and excess excitatory firing ensues

• MODULATION OF INHIBITION – GABA
  – Astrocytes can take up GABA, increasing neuronal firing rate
  – Astrocytes can release D-serine, causing GABA release and decrease of neuronal firing rate

Astrocytes and Analogic Communication

• Chemical as well as electrical transmission is important in the brain

• Waves of Calcium
• Waves of ATP
• Gap junctions
• Autocrine and/or paracrine signalling can occur from gloi- or neuro-transmitters in extracellular space
  Verkhatsky, A. et al. (2012)
Astrocytes, Integration, Information


More on Astrocytes and communication through gap junctions

• Large numbers of astrocytes are physically linked to one another through gap junctions,
  – This creates an electrically coupled “syncytium.”
• Increase in intra-cellular calcium levels propagate through this syncytium (gap junctions), using a combination of IP3 and ATP signaling.
• This increase of intra-cellular calcium is a primary mechanism of astrocyte activation.
Gap Junctions

• 1-1.5 nm diameter
• Direct communication between cells
  – Electrical
  – Chemical
  – Small molecules
• Create a tight seal, preventing leaks

Factors that can open or close gap junctions

• Prolonged increased H+ ions concentration (acidity)
• Prolonged increased exposure to Ca2+ ions
• Closed gap junctions may greatly impede optimal brain connectivity

Astrocytes: Their Plasticity

- Astrocytes in the brain are highly mobile
- They also display structural plasticity
  - Then can undergo morphological changes IN A MATTER OF MINUTES (Theodosis et al., 2008)
  - This alters the extracellular space as well as relations with neurons
- Whey they are mobile, astrocytic-neuronal interactions BECOME HIGHLY DYNAMIC
  - This modifies extracellular homeostasis, neurotransmission, glutransmission and neuronal function at cellular and system levels

Microglial cells

Microglial cells in action – along with Astroglial cells.

Source: [http://www.nature.com/nm/journal/v12/n8/fig_tab/nm0806-885_F1.html](http://www.nature.com/nm/journal/v12/n8/fig_tab/nm0806-885_F1.html)
Microglia – Introduction

- Resident Macrophages of Brain and Spinal Cord
  – First line of immune response in central nervous system.
- 20% of total glial cell population
- ORIGIN: originate in bone marrow from hematopoietic stem cells.

Microglia and immune role

- CNS is “immune privileged”, that is, blood brain barrier and endothelial cells keep out most infections and antibodies
- Microglia are extremely sensitive to even small amount of pathological change – acting through their unique potassium channels.
Types of forms/roles Microglia take

1. Non-activated

- **Ameboid**
  - Allows rapid movement through neural tissue
  - Can phagocytose debris but don’t play antigen-presenting and inflammatory roles

- **Ramified**
  - Found in strategic locations; “resting form” with long branching processes and small cellular body
  - Remains fairly motionless but branches constantly surveying surrounding area
  - Do not phagocytose or play immune roles
  - They are available to detect and fight infection

2. Activated

- **Non-phagocytic**
  - Starting to activate
  - Bushy, rod-like or small ameboid
  - Rapidly proliferating to prepare for battle

- **Phagocytic**
  - Maximally immune responsive
  - Large ameboid
  - Antigen presenting, cytotoxic, inflammatory
  - Interact with astrocytes

- **Gitter cells**
  - Stuffed – canpt engulf more – grainy – can show past infection
Types of forms/roles Microglia take
3. Perivascular, Juxtavascular

- **Perivascular**
  - Mainly within walls of basal lamina
  - Perform normal microglial functions, but replaced by bone marrow derived precursor cells
  - React strongly to macrophage differentiation antigens
  - Essential for repair of vascular walls

- **Juxtavascular**
  - Contact basal lamina of blood vessels but are not within the walls
  - No rapid turnover and not replaced by bone marrow cells

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**Microglial cells**

Microglial cells in action – along with Astroglial cells.

Source: [http://www.nature.com/nm/journal/v12/n8/fig_tab/nm0806-885_F1.html](http://www.nature.com/nm/journal/v12/n8/fig_tab/nm0806-885_F1.html)
Microglial Functions

• **Antigen presentation**
  – Can develop this from MHC class I/II proteins or from IFN-gamma

• **Synaptic stripping from nerves near damaged tissue**
  – Helps promote growth and remapping of damaged circuitry

• **Promotion of repair**
  – Stripping, antiinflammatory cytokines, recruitment of neurons and astrocytes to damaged area, and gitter cells

• **Extracellular signaling**
  – Maintaining homeostasis through complex signaling

Microglia in chronic inflammation

• **Activate proinflammatory cytokines**
• **Contribute inflammatory chemokines**
• **Secrete proteolytic enzymes**
  – Degrade extracellular matrix, nearby neurons
• **Amyloid precursor protein in response to excitotoxic injury**
Microglia and infection

- Microglia fight infection but also release neurotoxic mediators that contribute to disease progression
- Chronic bacterial exposure can produce different microglial changes than acute exposure

“Wild-type microglia arrest pathology in a mouse model of Rett syndrome”

- Rett features had been attributed to neuronal dysfunction
- Astroglial cells now known to contribute
- Now microglia shown to contribute as well: bone marrow transplant of wild type microglia
  - Increased lifespan, normalized breathing, increased body weight, improved locomotor activity
  - Improvement even without direct change to neurons
  - Improvements lost when microglial phagocytic (garbage-collecting) activity inhibited
Oligodendrocytes – they make “white matter” white

Source: http://academic.kellogg.edu/herbrandsonc/bio201_mckinley/f14-6_cellular_organiza_c.jpg

The White in White Matter: Myelin

- Oligodendrocytes are glial cells in the brain that wrap around axons (the “wires” or cell processes that connect neurons with each other)
- The wrapping is “myelin,” a fatty substance that is white—hence “white matter.”
- Myelin insulates axons and speeds nerve conduction.
- Oligos help coordinate signals.
Oligodendrocyte Structure & Function

- Small round body with multiple processes.
- Main function is insulation of axons in CNS.
- Each cell can wrap its processes around 50 separate axons.
- Insulation strongly speeds signal transmission
- Oligodendrocytes contribute to regulation of signal coordination

Fibrous Astrocytes and Myelination

- Fibrous astrocytes in the layers of myelin wrapping axons detect information about the firing rate of the axon
- This modulates the amount of myelination, which in turn impacts the speed of neurotransmission
What is a synapse

- A synapse is a structure that permits a neuron to pass an electrical or chemical signal to another cell (neural or otherwise).

A NEURON connecting to another NEURON through SYNAPSE.
The Tripartite Synapse: Neurons and Astrocytes working together

- Neurons and glial cells are intimately interrelated in the Tripartite Synapse
- Dysfunction in any aspect can cause alteration in function
- This abnormality can have local and widespread consequences
- So it’s not just neurons!

Tetra-partite Synapse: The Extracellular Matrix Too!

Molecular signals of plasticity at the tetrapartite synapse

Alexander Dityatev1,2 and Dmitri A Rusakov3

Neurometabolic regulation: Neuro-glio-vascular Unit

The old model: Neuron as top-dog

The new model: teamwork, and A web with two-way streets

Housekeeping and Higher Function are Profoundly Intertwined

• See my blog about this, on
  – www.autismWHYandHOW.org/blog
Environmental influences on the brain: From subcellular to larger scales

- Environment can influence the brain at many levels:
  - Ion channels
  - Receptors
  - Mitochondria
  - Membranes
  - Immune activation
  - Oxidative stress
  - Blood vessels/BBB
  - Coordination

- All of these can impact the composition and function of
  - Neurons
  - Glial Cells
  - Blood & Blood Vessels
  - Extracellular Matrix

- Which in turn can impact
  - Neuro- and glio-transmission
  - Brain networks and connectivity

NEUROINFLAMMATION
What is neuroinflammation

• Acute neuroinflammation
  – Response to an injury
• Chronic inflammation
  – Failure of acute inflammation to resolve
  – Toxic mediators exert destructive effects, worsening the illness

• Activated glial cells play a critical role

Neuropathological evidence of neuroinflammation in ASD

• Vargas
• Morgan
• Upregulated genes
• GFAP
• Lipofuscin
• Fiber tract abnormalities
• Proinflammatory cytokines
Brain tissue shows signs of immune activation or “neuroinflammation.”

- **Neuroglial activation and neuroinflammation in the brain of patients with autism**
  
  Vargas et al, 2005, Annals of Neurology

- **Oxidative stress in brain tissues from autistic patients**
  
  Vargas et al, 2005, Annals of Neurology

The white matter areas that are larger appear to have more inflammation.

- **Astrogliosis**
  
  Herbert: Large Brains from Radiate White Matter Enlargement

- **Microgliosis**
  
  Pardo
Environment and Brain tissue vulnerability

- Many environmental exposures can contribute to
  - Inflammation
  - Reduction in brain perfusion
  - Compromise of the blood-brain barrier
- These include
  - Poor nutrition, toxis, radiation, trauma, noise, stress

Air pollution and brain inflammation

Air pollution leads to brain inflammation much like what we see in autism.
Air Pollution and Brain Inflammation

Block and Calderon-Gardicuenas, TNS, 2009

- Complex etiology
- This model focuses on synapse destruction as cause of underconnectivity
- There are other possible mechanisms prior to/along with physical loss of connections.

One model of inflammation in ASD

Rodriguez & Kern, 2012
Rapid IMPROVEMENT in brain connectivity suggests autism may be “state,” not “trait”

- Functional connectivity changed rapidly with drug that impacts brain stress level (propranolol)
- Most research assumes it is a fixed trait
- Could other interventions reducing total load also decrease stress and improve brain function?

Effect of Propranolol on Functional Connectivity in Autism Spectrum Disorder—A Pilot Study
Narayanan et al. (Beversdorf lab)
Brain Imaging and Behavior, 2010

Reversal in Mouse Models

Inhibition of p21-activated kinase rescues symptoms of fragile X syndrome in mice

Reversal of Neurological Defects in a Mouse Model of Rett Syndrome

Reversal of learning deficits in a Tsc2+/− mouse model of tuberous sclerosis
“Wild-type microglia arrest pathology in a mouse model of Rett syndrome”

- Rett features had been attributed to neuronal dysfunction
- Astroglial cells now known to contribute
- Now microglia shown to contribute as well: bone marrow transplant of wild type microglia
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Brain cells in inflammation

- Excitatory chemicals created by activated glial cells
- Normal housekeeping functions of glial cells get neglected
- Chronic inflammation can cause damage
- Chronic inflammation is irritating and promotes excitotoxicity

Inflammation and Its Discontents: The Role of Cytokines in the Pathophysiology of Major Depression.
Miller et al., BIOL PSYCHIATRY 2009;65:732–741
Excitotoxicity

Excitotoxicity is a PROCESS before it becomes a trigger of more rapid decline

Consequences:
Functional and Anatomical

• Functional consequences
  – Alteration of cell health
  – Alteration of regulation and communication
  – Altered blood flow and supply of cells

• Anatomical/Structural
  – Altered cell size
  – Altered cell number

• IMPORTANT NOT TO BLUR THESE TOGETHER
Major example of functional impact:
Peripheral Inflammation and Neuronal Excitability

Lower perfusion in ASD brains could impact brain function. It could be maintained by active pathophysiology.

- 17 of 19 PET and SPECT studies showed low perfusion
- Those that showed areas of high perfusion still showed lower perfusion more than higher
- Possible pathophysiology
  - Vasoconstriction
    - Oxidative stress acting on endovasculature
    - Astroglia swell when activated constricting capillary lumen
  - Blood viscosity
    - RBC lipid peroxidation (stiffer membranes \(\rightarrow\) poor RBC deformability)
    - platelet activation (increased thromboxane)
    - increased nitric oxide (oxidative stress marker),
    - depressed glutathione peroxidase
    - depressed SOD
    - depressed catalase
What are brain oscillations (or, “brain waves”)

- Electrical activity in brain
- Occurs at different rates
- Different frequencies related to different levels of consciousness
- Rates relate to different kinds of neurons and other things that affect how neurons function

Delta, theta, alpha, beta
Gamma is even faster

Autism Electrophysiological Abnormalities:
Seizures and much more

15 of these patients had no seizure history.

Increased VEP amplitude standard deviation was 2.42-8.92 SD (average 5.4 SD)

Martien & Duffy
Reduced functional connectivity in visual evoked potentials in children with autism spectrum disorder

J.R. Isler, K.M. Martien, P.G. Grieve, R.I. Stark, M.R. Herbert

Clinical Neurophysiology 121 (2010) 2035–2043

EEG power and coherence within and between two homologous regions of the occipital cortex were measured during long latency flash visual evoked potentials.

Measures were compared between two groups of children (5.5–8.5 years), one with autism spectrum disorders and the other with typical development.

“Inefficiency” in brain signaling in autism

J.R. Isler, K.M. Martien, P.G. Grieve, R.I. Stark, M.R. Herbert

Clinical Neurophysiology 121 (2010) 2035–2043

ASD has more power than controls... but less coherence

Too much noise, not enough signal

BETTER BANDWIDTH SHOULD IMPROVE THIS
Are seizures on a continuum with sensory hypersensitivity?

- Does excitotoxicity drive sensory intolerance?
- This is poorly understood at present from a neurobiological point of view.
- But biomedical treatment anecdotally appears to reduce sensory issues in at least some cases.

Healthier Brains have more “Bandwidth”

<table>
<thead>
<tr>
<th>Poor Bandwidth: Limited Reception</th>
<th>Lots of Bandwidth: Good Reception</th>
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Good Reception Allows Learning
Better Reception Allows More Spontaneous Learning

**Functional problems in the brain**

- Connectivity
- Sensory processing

- Are these caused by the large-scale structural problems?
- Or are they caused by cell metabolism problems?
- Most research has assumed the former, but not tested it as a hypothesis
Common explanation of brain enlargement in ASD: Failure of “pruning”

• Testable through imaging: Failure of pruning implies
  – More fibers and fiber density
  – More cells

• Is this what we find?

Example of structural + functional impact
Lower FA in key regions
Linked to higher (worse) diagnostic scores

• White matter FA was significantly lower in key regions of prefrontal lobe and right ventral temporal lobe.
• Lower FA linked to higher (worse) diagnostic symptom scores
• Author interpretation:
  In light of spectroscopy showing lower NAA ➔ less neuronal integrity or number, lower structural integrity may be consistent with neuroinflammation

Cheung et al., 2009
The “Fluid Theory” of Connectivity Alterations in ASD

- Water, not fiber changes in brain tissue
  Hendry 2005
- Less white matter integrity
- Less restriction of water flow
- More diffusivity
  Sundaram 2008
- Lower perfusion in ASD brains (by many PET or SPECT studies) could impact brain function.

How might this affect brain electrophysiology?

Brain magnetic resonance spectroscopy summary of findings in literature to date: Mostly lower density of metabolites

- Metabolites
  - Mostly reduced or no change; few reports of increase
  - Most studies done on 1.5T which has poor signal to noise ratio (only 1 of 22 done on 3T) and could miss differences

Shetty, Ratai, Ringer, Herbert, 2009
Dager review chapter 2008 and many papers
Metabolite level correlating with brain activation

- More NAA in controls than in autism
- Linear correlation of amount of functional activation to amount of NAA
  - NAA = N-acetylaspartate

Kleinhans et al, 2007

Reversibility of reduced NAA after epilepsy surgery

- NAA (marker of neuronal density or function) reduced on the side opposite of a seizure focus
- After surgical resection of seizure focus, NAA on the other side returns to normal

IMPLICATION: The persistent aberrant electrical charges afflicting the opposite side appear to have stunned those cells and taken them off line, but not “taken them out” since they came back online after the seizure electrical activity stopped.

Pan, 2008
Neurometabolism in Human Epilepsy

NAA = n-acetylaspartate
Active tissue pathophysiology undermines the idea that brain structure changes cause abnormal function

• What if brain abnormal function led to abnormal structure?
• Or maybe they reinforce each other?
Environmental Stressors are contributing to an **ONGOING, CHRONIC** DEGRADATION OF BRAIN AND BODY FUNCTION and increase in ENTROPY

Model of autism: Increased ratio of excitation / inhibition in key neural systems


This excitation/inhibition ratio can be increased by inflammation, oxidative stress and toxicants, as well as genetic dysfunction

A model of possible role of glial cells in autistic regression

- Degradation of metabolic supports for healthy glial function through chronically poor food, toxins, allergens and stress
- Degradation of blood supply - narrow small vessel lumen, stickier blood
- Reaching a tipping point possibly through acute stressors
- Change of system “attractor state” into autism
- Lots of coordinated work needs to be done to change “attractor state” back to better connectivity and greater options

- See chapter 5 of THE AUTISM REVOLUTION for more details
- Also see Herbert chapter in Chauhan 2009 book AUTISM: OXIDATIVE STRESS, INFLAMMATION AND IMMUNE ABNORMALITIES
Environment can also improve brain tissue health

- Nutrition
- Sleep
- Exercise
- Potentially careful detox

Improvement in brain function after treatment

Example:
- Depakote was given for spike-waves during sleep that did not meet criteria for CSWS (continuous spike-wave during sleep)
- Substantial improvement resulted in speech and cognition
- Treatment of subclinical seizures is not standard practice
- Standard brain tests don’t track change like this

Before treatment

After treatment
Electron microscopy of therapeutically activated glia turning into “brain garbage collectors and transporters”

Possible implications of the ability of glial cells to clear out “brain trash”

• Neurodegeneration might be at least somewhat reversed
• The limits to this reparative process may be pushed back substantially by biologically informed interventions
Chapter 5 of *The Autism Revolution* lays out what is in this talk.

See also: [www.autismWHYandHOW.org](http://www.autismWHYandHOW.org) and references listed on [www.marthaherbert.org](http://www.marthaherbert.org).