TRANSCENDING AUTISM: A Whole-body-brain systems and gene-environment approach

Martha R Herbert PhD, MD Harvard Medical School, Neurology Martinos Center for Biomedical Imaging, TRANSCEND Research Higher Synthesis Health/Foundation/Works www.bodybrainresilience.com www.AutismRevolution.org













Changing Concepts and Findings on Autism

Sir Michael Rutter, JADD, 2012

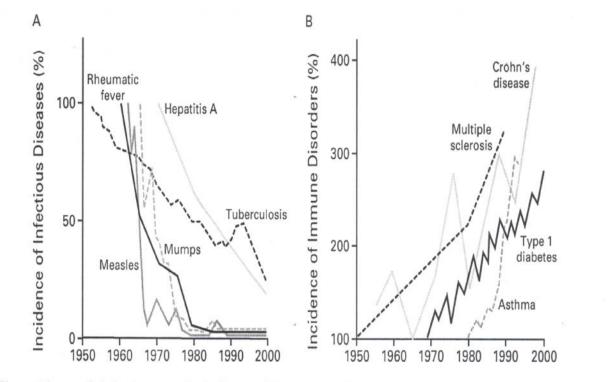
- "New research findings provide major challenges regarding our understanding of the concept of autism. It is concluded that, although there have been major research advances.... there is a need for a reconceptualization and an avoidance of claims that go beyond the evidence."
- In fact, many of the things we have believed about autism have gone beyond the evidence. We were doing the best we could. Now we have a great opportunity to regroup!

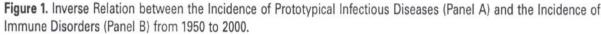
Emerging Science Leading to Major Reconceptualizations of What Autism <u>*Is*</u>

- Not a broken brain
 - Many with autism are highly gifted
 - Issues are often expression and coordination, not capability
 - (more dyspraxia than deficit)
- Not purely genetic
 - Environment plays big role
 - Number actually going up
- Not just brain
 - Whole body, multi-system pathophysiological involvement
 - (brain, gut, immune, endocrine, metabolism, bioenergetics)
- Not life sentence
 - Variable, changeable, treatable, some who lose diagnosis
 - Great potential

ALSO, at levels of mechanism and of time trends, AUTISM IS NOT UNIQUE

Drop in Infectious and Rise in Chronic Immune-related disorders





In Panel A, data concerning infectious diseases are derived from reports of the Centers for Disease Control and Prevention, except for the data on hepatitis A, which are derived from Joussemet et al.¹² In Panel B, data on immune dis-

Rise in Autism Prevalence v. Other Major Chronic Conditions in US

Autism

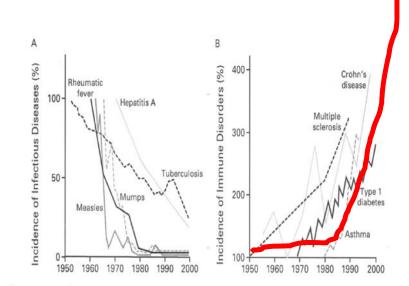


Figure 1. Inverse Relation between the Incidence of Prototypical Infectious Diseases (Panel A) and the Incidence of Immune Disorders (Panel B) from 1950 to 2000.

In Panel A, data concerning infectious diseases are derived from reports of the Centers for Disease Control and Prevention, except for the data on hepatitis A, which are derived from Joussemet et al.¹² In Panel B, data on immune disorders are derived from Swarbrick et al.¹⁹ Dubois et al.,¹³ Tuomilehto et al.,¹⁴ and Pugliatti et al.¹⁵

Many new observations in ASD: Where might they point?

- It is necessary to think really carefully about what we think autism "is" and how autism "works"
- Critical to ask:
 - What is "behavior"?
 - What *generates* behavior?
 - How can we modulate the processes that generate behavior?

www.autismWHYandHOW.org

GENES and ENVIRONMENT are not DIRECT CAUSES OF BEHAVIOR! There are a lot of *in-between steps*

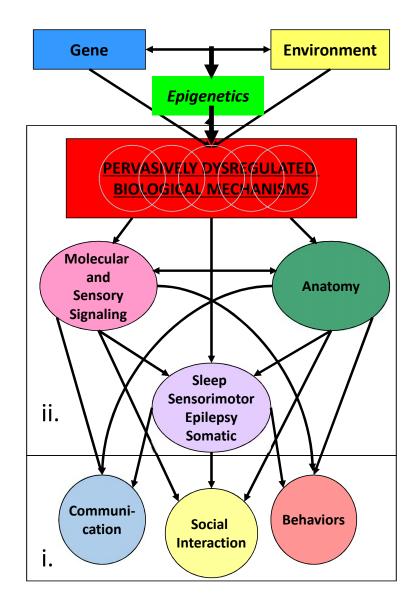




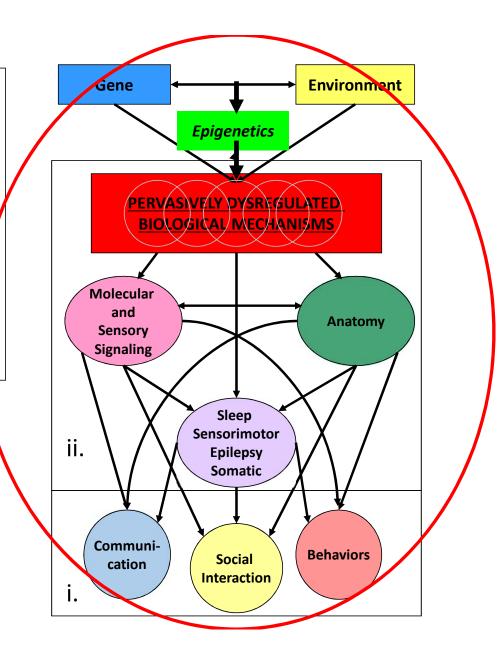


BEHAVIOR

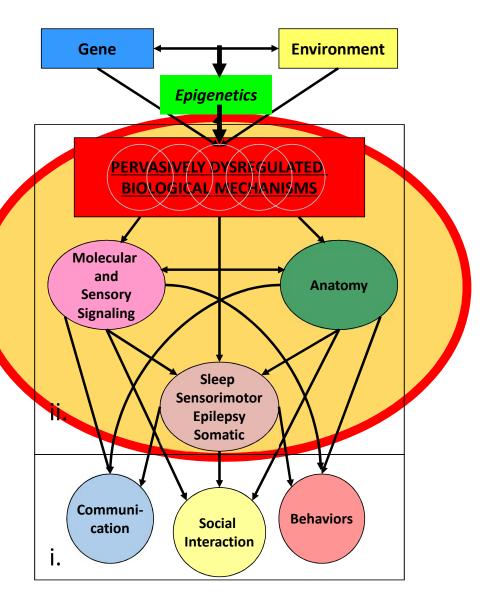
Behaviors are OUTPUTS. What's in the middle is COMPLEX SYSTEMS that are interrelated



THIS gives us a Whole-Body, Whole-Brain, Whole-Person Understanding of Autism



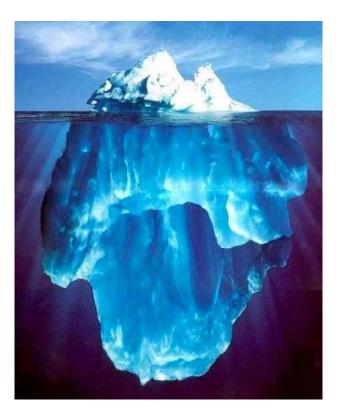
This "COMPLEX STUFF IN THE MIDDLE" is what is DRIVING the autism!



Whole Body-Brain Systems Model: Symptoms Emerge from Problems with Underlying Functions

VISIBLE Social & Behavioral SYMPTOMS are <u>OUTPUT</u>

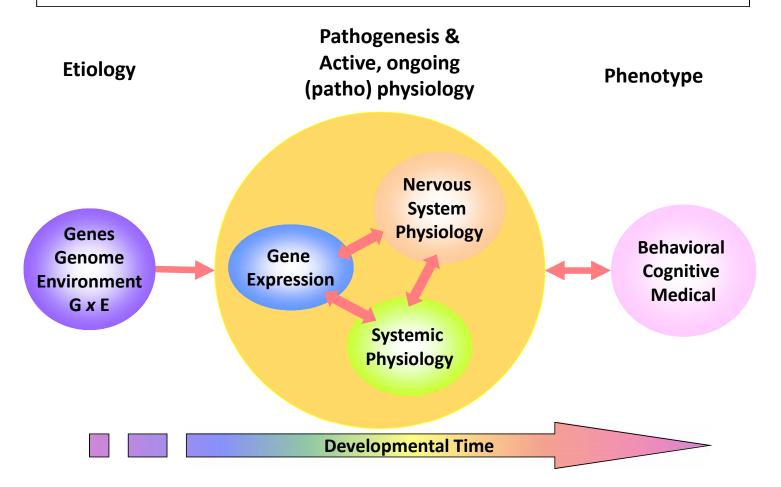
DISTURBANCE OF CORE UNDERLYING BODY and BRAIN FUNCTIONS are GENERATORS



Ziggarut model: http://www.texasautism.com/

A Middle-Out Approach to Autism: Multi-Scale, (Patho)Physiology Centered

(see Denis Noble THE MUSIC OF LIFE)



Environmental influences trigger ENVIRONMENTALLY VULNERABLE PHYSIOLOGY.

The PHYSIOLOGY changes **HOW the BRAIN FUNCTIONS**

These BRAIN FUNCTIONAL CHANGES are the **PROXIMAL CAUSE of Autism** -- not by hardwiring the brain, but by changing function MOMENT BY MOMENT EVERY DAY.

Contributions of the environment and environmentally vulnerable physiology to autism spectrum disorders Martha B. Herbert

Current Opinion in Neurology, April, 2010

M Herbert chapter on TRANSDUCTION in Valerie Hu's 2014 FRONTIERS IN AUTISM..... book

Available on www.marthaherbert.org

HARDWIRED brain issues are in most "idiopathic" cases likely DOWNSTREAM of chronic physiology problems

Herbert, M. R. (2014).

Translational Implications of a Whole-Body Approach to Brain Health in Autism: How Transduction Between Metabolism and Electrophysiology Points to Mechanisms for Neuroplasticity.

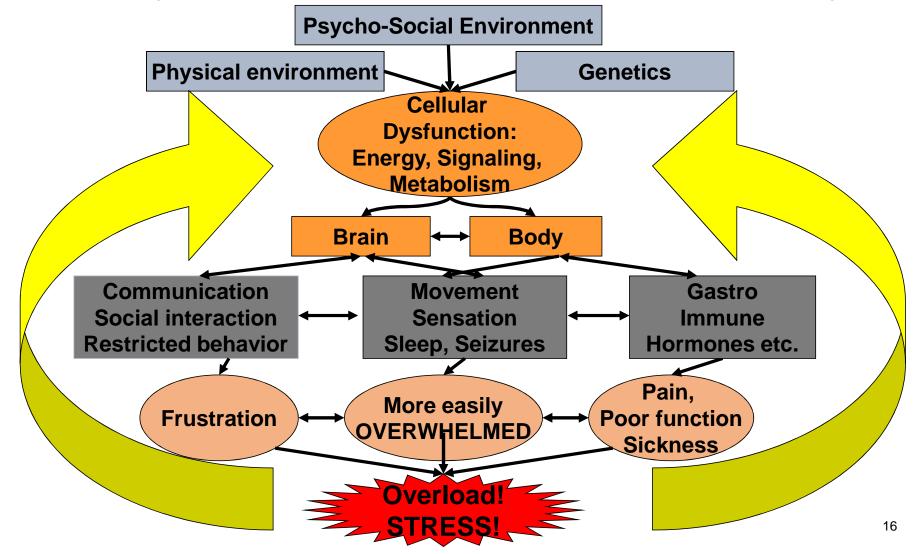
Frontiers in Autism Research: New Horizons for Diagnosis and Treatment.

V. W. Hu. Hackensack, NJ, World scientific.

See also Herbert and Sage, : "Autism and EMF: Plausibility of a Pathophysiological Link"

Pathophysiology 2013 and Bioinitiative 2012

Whole Body-Brain Model: Vicious circles in brain and body



HOW does environmentally vulnerable physiology **BECOME VULNERABLE**??

• PARTLY from genetic weak spots

• To a MAJOR DEGREE from environmental INTERFERENCE with OPTIMAL FUNCTION

Where do these problems come from? For most of us, probably environment

- We all have genetic vulnerabilities but they are usually not that serious
- Most strongly influential mutations in autism are rare
- Environment brings them to the surface
 - The heavier the environmental load, the less genetic vulnerability you need to get sick
 - The physiological problems DRIVE the symptoms; the genes and/or environment are INFLUENCES

Autism comorbidities

Rzhetsky, 2007, PNAS

Pervasive Developmental Disorders

• PDD, Fragile X

Neurological disorders

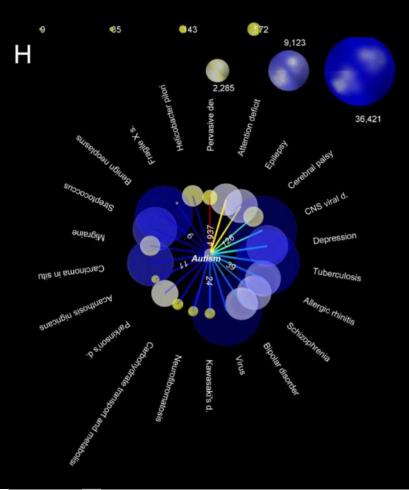
 Attention deficit, epilepsy, cerebral palsy, schizophrenia, bipolar disorder, neurofibromatosis, Parkinson's Disease, Migraine

Bacterial, viral, protozoan

 Viral infections of CNS, tuberculosis, viral infections of other systems, staphylococcal and *Helicobacter* pylori infections

Allergies, Autoimmune disorders

- Allergic rhinitis, eczema, psoriasis
 Benign and Malignant Neoplasms
 Other
- Kawasaki's disease, acanthosis nigricans, aberrations of carbohydrate metabolism



Genes that had biggest impact and/or occurred most commonly across 9 comorbid conditions largely had *immune function*

ADHD cerebral palsy depression schizophrenia tuberculosis allergic rhinitis bipolar disorder Parkinson's

NR4A2	DRD2
TNF	CD14
IL6	SLC11A1
IL4	GAD1
SLC6A4	HLA-DRB1
DRD4	NOS2A
SLC6A3	IL1B
ACE	IL18
IFNA1	CYP2D6
COMT	MAOA
IL10	LTA
MBL2	TPH1
ADRB2	PTGS2
BDNF	TLR4
APOE	IFNG
HTR2A	HLA-DQB1
IL13	VDR
NOS3	

- Substantial overlap in genes implicated in multiple comorbid conditions
- Many of the genes highly ranked in multiple conditions have immune relevance

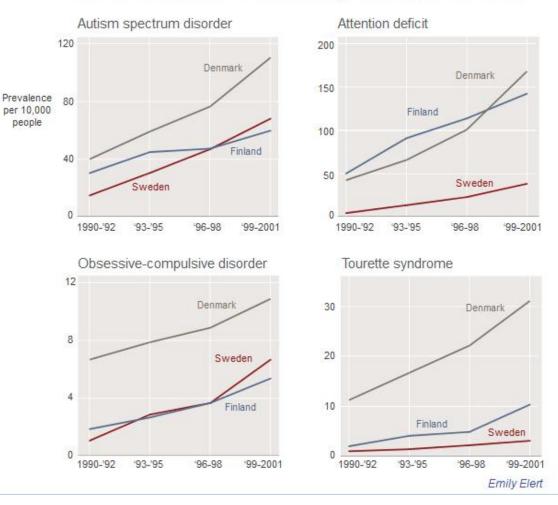
Method: GeneSelectAssist service in CDC's HuGE website

Scandinavian study:

ASD, ADD, OCD, TOURETTE'S – ALL GOING UP

Can this be dismissed as "due to greater awareness" since "these are all distinct conditions"?

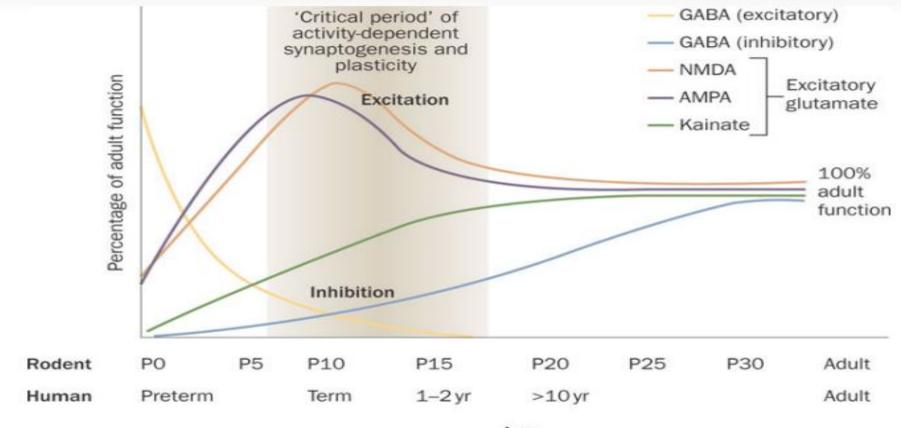
The increasing prevalence of reported diagnoses of childhood psychiatric disorders : a descriptive multinational comparison. Atladottir, European Child & Adolescent Psychiatry, 06.05.2014. Prevalence of mental disorders at age 10 in four birth cohorts



OKAY, so if the underlying triggers are similar, why isn't everybody autistic?

AT LEAST IN PART, BECAUSE OF THE TIME OF ONSET Along with the

severity of vulnerability and genetic weak spots



Maturational changes in Glutamate and GABA receptor function in the developing brain

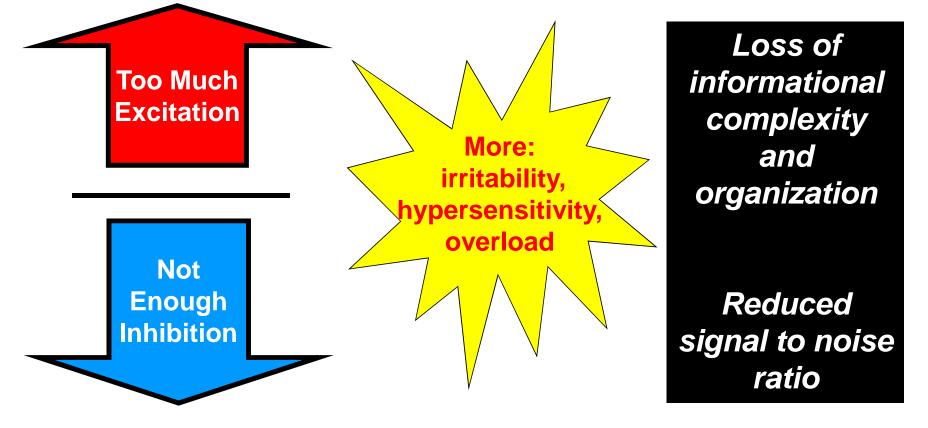
Age

Rakhade, S. N. and Jensen, F. E. (2009), Nat. Rev. Neurol. Talos et al J. Comp Neurol, 2006; Dzhala V et.al. Nature Medicine, 2005



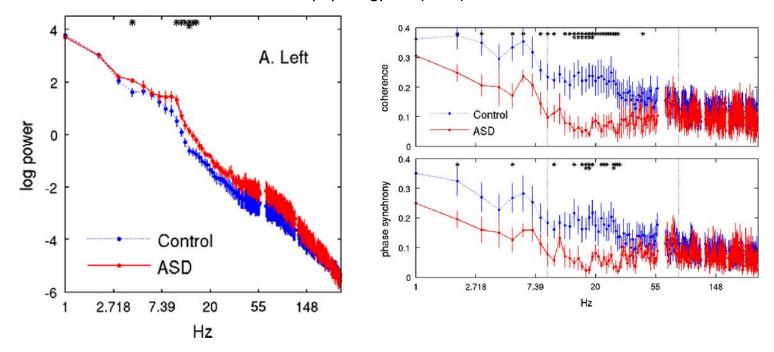
A FINAL COMMON PATHWAY Model of autism: Increased ratio of excitation / inhibition in key neural systems

Rubenstein & Merzenich, Genes, Brain and Behavior (2003) 2: 255-267



"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 <u>more power</u> than controls... but <u>less coherence</u> <u>POOR SNR – Sound and Fury, signifying nothing</u>

25

ARE AUTISM BEHAVIORS REALLY "SPECIFIC"? OR THEY THE OUTPUTS OF A CHALLENGED BRAIN?!?

The core defining behaviors all involve a challenge to the brain's ability to coordinate complex information

- In order to speak, communicate, be flexible rather than repetitive, there needs to be a fluidity, an ability to pull in vastly distributed bits of information and coordinate them elegantly in real time
- A brain with inflammation, mitochondrial dysfunction and a shortage of ingredients (nutrients) to drive brain functions WILL HAVE A HARDER TIME DOING COMPLICATED THINGS.
- This is not specific, not "caused" by specific genes or brain lesions.

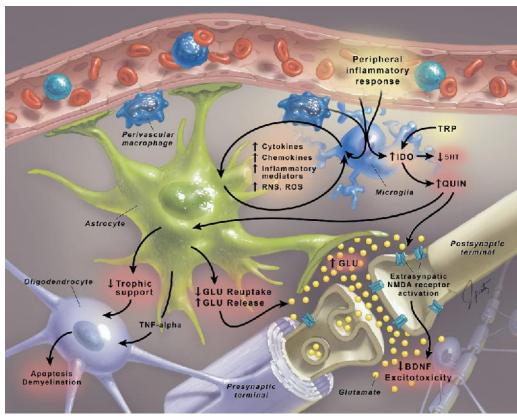
Everything I found in brain anatomy of ASD was similar – only milder – in developmental language disorder (DLD)

- LARGER
 - Brains
 - White matter
 - Prefrontal white matter
- GREATER
 - Asymmetries in regions associated with complex integrative brain function

BUT LESS SO in DLD

BUT LESS SO in DLD

Inflammation in the brain creates cellular noise that interferes with information processing



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

Inflammation and Its Discontents: The Role of Cytokines in the Pathophysiology of Major Depression.

Miller et al., BIOL PSYCHIATRY 2009;65:732-741



Tissue pathophysiology creates NOISE that REDUCES BRAIN BANDWIDTH Too much noise/static; not enough SIGNAL **Poor Bandwidth:** Lots of Bandwidth: **Limited Reception Good Reception**

Better Reception Allows Better Discernment of Differences and More Spontaneous Learning

AUTISM: NOT BORN BUT MADE

Problems that often precede the autism diagnosis (plenty of data on this)

- Parents with health problems
 - Health issues, particularly Metabolic Syndrome (diabesity, hypertension, etc)
 - Exposures (toxins, EMF/radiation, stress) leading to genotoxicity and metabolic dysfunction
- Pregnancy issues
 - Inadequate nutrition
 - Exposures (toxics, medications, EMF, stress, infections, allergens)
- Infancy issues
 - Infections, antibiotics that injure microbiome
 - Allergens, lack of microbiome support
 - Insufficiency of various nutrients for handling load of stressors

The ALLOSTATIC LOAD (or Total Load) Theory of Autism

• TOO MANY NOXIOUS EXPOSURES -> INCREASED FRAGILITY

- Toxicants, Radiation, Noise
- Infections
- Stress

POOR DEFENSES → NOT ENOUGH RESILIENCE

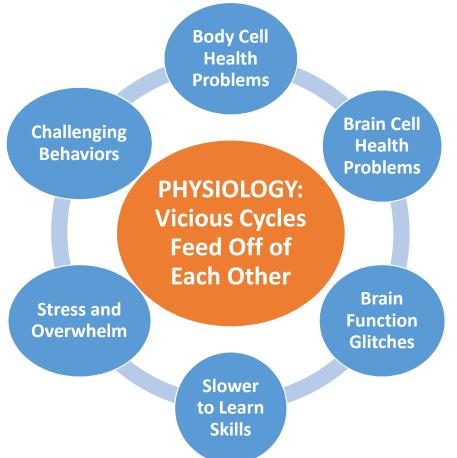
- Dietary insufficiencies
- Weak social supports
- Poor lifestyle
- Damaged microbiome
- Genetic weak spots

Autism REGRESSION as a TIPPING POINT

- The system's ability to regulate itself deteriorates and you see problems with:
 - Sleep, sensory perception, digestion, hormones, coordination
- Depending on how far this deterioration goes, and which systems are more vulnerable, you may get
 - Sensory processing and motor coordination disorders
 - ADHD
 - Allergies, asthma, diabetes
 - Language delays and/or social awkwardness
 - Autism

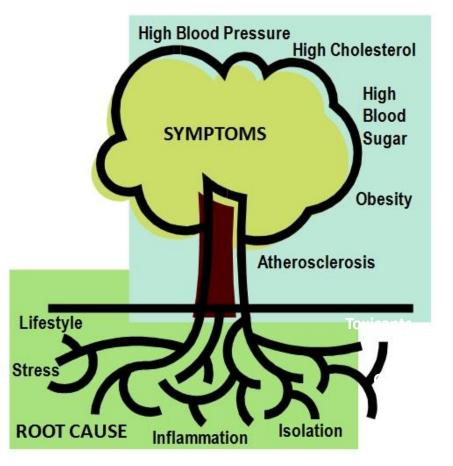
Problems in each area make trouble for the other areas

This is consistent with emerging SYSTEMS BIOLOGY



PROPOSITION / ASSERTION: We know enough <u>now</u> to promote health and hunt for and remove contributors to harm

The most effective treatments will deal with the root causes.



WHAT DO WE NEED TO DO?



MORE SIGNAL, LESS NOISE

MORE SIGNAL

- Slow things down
- Mindful variety
- Rejoice in your child right now
- Find ways that your child succeeds and build from there
- Read Anat Baniel's book KIDS BEYOND LIMITS

LESS NOISE

- Remove physiological interference from poor nutrition, inflammation, toxicity
- Minimize sleep deprivation
- Minimize stress

Build Resiliency and Reduce Allostatic or "Total Load"

RESILIENCY

- High nutrient density food
- Vigorous Activity
- Skilled individualized teaching
- Enhance BRAIN FUNCTION through SMART, SENSITIVE movement
- Family and social supports

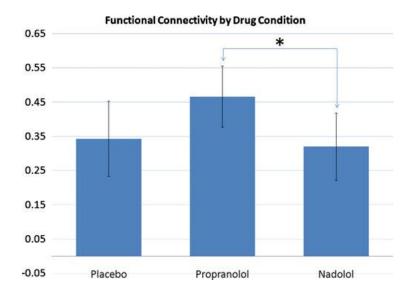
"TOTAL LOAD"

- Avoid unnecessary exposures to chemicals, radiation, infection
- Reduce stress/time management
- Support the body's immune and detox biochemistry

Building RESILIENCY protects brain and body from being degraded by NOXIOUS LOAD.



Rapid IMPROVEMENT in brain connectivity access to more parts of brain networks when stress is reduced



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

- This was interpreted by the authors as an **IMPROVEMENT IN THE SIGNAL TO NOISE RATIO**
- There are many other ways we could do that using everyday epigenetics.

EVERYDAY EPIGENETICS: Doing the SMART THINGS we can ALREADY do IN OUR DAILY LIVES to help epigenetics and support healthy physiology

North American Journal of Medicine and Science

www.najms.net 2013; 6(3) 167

Commentary

Everyday Epigenetics: From Molecular Intervention to Public Health and Lifestyle Medicine

Martha R. Herbert, MD, PhD*

Department of Neurology, Massachusetts General Hospital, Charlestown, MA

Epigenetics, which refers to changes in which genes are turned on or off rather than to the genetic code itself, helps us understand that we have much more power over our health and well-being than we could

Autism Revolution: Ten Tips

- 1. Go for the extraordinary.
- 2. Know what you can't control and what you can.
- 3. Repair and support cells and cycles.
- 4. Get gut and immune systems on your side.
- 5. Build better brain health.
- 6. Calm brain chaos
- 7. Join your child's world.
- 8. Love, rejoice, and make breakthroughs.
- 9. Lead the revolution!
- 10. Do it for yourself, your next baby, your family, and your world.

www.AutismRevolution.org



WHOLE-BODY STRATEGIES FOR making life all it can be

