



CLINGING AND LETTING GO

A case of Autism Spectrum Disorder

This is the case of Johnny (not his real name), a three-year-old boy recently diagnosed with Autism Spectrum Disorder. He has been my patient since he was two months old, but I've only seen him once in person as he lives a long distance from my practice. Otherwise, all interviews with his mother have been conducted by phone.

Born seven weeks premature, Johnny was hospitalized for three weeks, of which the first week was in intensive care. Shortly after leaving hospital, he returned for another 4 weeks after contracting a respiratory infection. He needed to be sedated with morphine as he was intubated and on an oscillating ventilator with nitrous oxide used to help expand his alveoli and facilitate gas exchange. During his coughing episodes he would at times stop breathing, his lips turning blue.

Due to the sedation he developed severe constipation, going as many as 7 days without a BM unless a suppository was used. His belly distended, and he cried if it was touched even gently. His pale face would turn beet red when straining for BMs, and he would bend over double. He also developed severe acne all over his head and face. He was bottle-fed his mother's milk, had no problems with nursing, and his weight gain was normal.

Opium 30c/d did not help with his constipation, although the acne improved. *Op* 200c/d did help temporarily; he didn't need a suppository for 9 days, but then the constipation resumed and he was back on suppositories. He would become irritable from the painful bloating, which would improve once he'd had a BM. *Nux-v* was prescribed, which relieved the constipation, but then he started having colds and croupy coughs, which recurred frequently and required epinephrine masks and oral steroids. When he began teething, the pain was relieved by *Cham*, yet this did not help him with the recurring colds.

Overall, Johnny maintained good spirits throughout these health crises, though he seemed happier when he was held. His colds typically manifested themselves in a croupy, dry, non-productive cough. Falling asleep was also a problem. He wanted to be walked and rocked, and cried when put down.



Puls, *Acon*, *Sil*, *Calc*, *Calc-p*, *Phos*, *Ip*, *Coc-c*, *Tub* all offered some relief over the next few years, but the respiratory crises kept coming back, often landing him in the emergency room. Recurring ear infections led to tubes being placed in his ears.

At the age of 18 months, his behavior and social skills became a concern. Until then, his development had seemed normal, but then he stopped talking and began behaving strangely, as if in his own world. He would play with one object for hours, and stopped interacting with anyone other than his mother. Affection was only with her, and only she received any eye contact. He cried if anyone else touched him, even his father, pushing him away, wriggling and screaming.

His parents' biggest fear was confirmed in January 2012, when he was diagnosed with Autism. At the same time, another cold developed, and he was also diagnosed with systemic Candida. Another visit to the emergency room seemed imminent.

Analysis:

As I re-evaluated, I realized that Johnny's clinginess stood out as unusual. Autism is typically associated with the absence of physical and social contact with anyone. In Johnny's case there was an excess of contact, albeit with just one person. This, coupled with his screaming when being put down to sleep, and his fear of heights, helped me to perceive a pattern. In my analysis, I added his traumatic birth history, along with the new diagnosis of Candida. On repertorization, the following rubrics were chosen:

GENERALS - HISTORY; personal - birth trauma; of
GENERALS - CHILDREN; complaints in - nurslings
MIND - CLINGING - children; in - mother; child clings to the - frightened; as if
GENERALS - CYANOSIS - children; in - birth; from
GENERALS - DEVELOPMENT - arrested
MIND - FEAR - downward motion, of
MIND - TALKING - slow learning to talk
GENERALS - COLD; TAKING A - tendency
MOUTH - THRUSH

P: Borax 200c/d for 3 days



Results:

Johnny's cough improved within a few days of the prescription. He became even clingier in the first few weeks, but then slowly improved with time. His parents noticed his increased playfulness, and that he no longer feared being put on the counter to get his shoes tied. Going to nursery school became easier, leaving his mother without looking back. He became more interactive with teachers and with other children at the school.

He began going to bed without a fuss, and sleeping through the night. He let his father hug him on occasion, and became very affectionate with his brother, initiating hugs and being more playful.

Then in March, a month after the Rx was prescribed, he relapsed when his mother gave birth to a baby brother. He suddenly stopped sleeping through the night, started climbing out of his bed and screaming when being put back in, and refusing to fall asleep if not allowed to sleep in his parents' bed. He would hold onto his mother even after falling asleep, waking if she attempted to extricate herself.

A 1M of Borax was prescribed, but with minimal effect. The family's sleep continued to suffer. He then developed another severe cough.

Here I decided that the solution might lie in the choice of potency, and prescribed Borax in LM 3 three times/day, a gentler potency format for cases that are highly fragile with serious pathology, which allows for more frequent repetitions of the Rx.

Results:

His cough improved within 24 hours;

He started sleeping up to 10 hours/day and taking 2-hour naps;

He became happier both at home and at school;

His clinginess lessened;

His ability to focus improved;

He began hugging and playing with other children;

He developed greater eye contact;

He began communicating more, with gestures and even with words; and

He began allowing his father to approach and lift him.



Conclusion

This case is a work in progress, but the preliminary results look promising. Noteworthy is the fact that Borax has also proved useful for other members of Johnny's family. My hope is that with time his neurological and spiritual systems can integrate and mature more gracefully, promoting a healthier and happier future.