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## Autism: A Missed Medical Pandemic **Michael J Goldberg\***

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### Phenotype

A collection of symptoms that reflects how a disease or illness presents, yet does not tell you the cause of the disease.

### Epidemic

The outbreak of a disease, that spreads quickly and affects many individuals at the same time.

### Autism Spectrum Disorder (ASD)

The expanding psychological label assigned to a collection of behaviors and/or mannerisms exhibited in more than 2% (1:48) of children. Tens of thousands families now have children psychiatrically "labeled" as Autistic / PDD, ADD, ADHD, OCD and now even CDD (Childhood Disintegrative Disorder). Psychiatric and Developmental disorders like this have reached epidemic levels in children: Autism alone is now 1:48 (2.1%) and rising... polio at its worse was 1:1500 (0.07%) children. Basic medical science teaches there cannot be an epidemic of a developmental or genetic disorder.

The assumption that ASD behaviors and mannerisms of 2.1% of our children (and climbing) is the result of a mental condition is scientifically untenable. When analyzed from a medical perspective, the presenting dysfunctions/symptoms of most of these children can be explained far more appropriately by the concept of a '**Phenotype**', that is part of a complex immune, complex viral disease presenting with secondary "Autistic, ADHD, OCD, Anxiety or ODD" symptoms.

As a practicing pediatrician I have devoted the last 25 years working with ASD labeled children. I have identified through years of observation, blood tests and brain scans, an understandable **Phenotype** of a medical disease process (complex immune, complex viral), that logically and scientifically explains the mixed **collection of symptoms** manifested in ASD children including: Chronic "ill" appearance, abnormal sleep patterns, chronic allergies, fine motor issues, coordination issues, hypo/hyper profusion in the temporal and frontal lobes of the brain, and abnormally elevated viral titers including HHV6, Epstein Barr, and CMV. These and other markers, in my professional opinion, are indicative of a medically treatable disease process and not a psychological and/or developmental dysfunction.

When this disease and it's secondary **symptoms** identified above are medically treated with FDA approved meds and diet modifications, approximately 75% of my parents report the behaviors and mannerisms of the **ASD labeled Phenotype** either

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disappear or significantly abate. The parents and therapists report "it is as though a fog has lifted" or "this is not the same child". These children are placed in a position to be taught, not trained. They can and do learn; they progress, complete their education (some through college) and become productive members of society. A sense of "Normalcy" is returned to the family. Two different retrospective reviews have confirmed an over 75% clinical success rate with medical treatment!! This success rate is possible and expected because these children suffer from an underlying medical disease and not a mental or developmental disorder. A developmental disorder would not respond, could not respond to antiviral and other medical therapies.

Talking recently with an ex L.A. County public health official, he was completely baffled, floored when asked had he ever studied ANYTHING 1:50 (not 1:1000, 1:5000, or less), anything 2% of the population, and there was NO answer. The silence was deafening. Nothing of this magnitude had been looked at in any past training, because it was beyond comprehension. We have 2% of children being affected, and it is NOT a public health crisis – IMPOSSIBLE.

To the reader I ask, "If an ASD rate 1:48 (2.1%) is not alarming today, how about 1:20 (5%) in five years or 1:5(20%) in 10 years or 1:1 (100%) in 20 years"? To deny that we are in the midst of a true medical worldwide pandemic is unconscionable. Science does not change; it can be ignored, or twisted to fit a popular mindset, but science does not change...You cannot have an epidemic without an underlying disease process.

The current diagnostic mistakes are so obvious and go against basic medical and psychiatric principals. In a recent interview [1] I emphasized that, historically, "autism" was a diagnosis of exclusion. If there was NO medical or organic explanation for the child's problem then a psychiatric referral was appropriate.

Children today are labeled “Autistic” or “GDD” (Global Developmental Delay) without an appropriate FULL medical work up to discover any underlying etiologies/medical causation related to the symptoms described above. In the past, (40-70 years ago) this would have been impossible and scientifically incompatible. GDD used to imply an organic underlying medical issue with a child. Today, when an\GDD/ ASD labeled child is overcome by “sensory” issues, that child’s obvious medical and physical suffering is currently ignored and left medically untreated. That our present system fails to medically investigate the reasons for that suffering (i.e. complex immune-complex viral) does not give them the right to abandon the child and condemn them to a life of no hope with a psychiatric label of Autism.

In my professional and clinically observed opinion, ideas of "Autism" as a permanent, unfixable mental condition/disorder is mistaken. IF ASD were approached as the epidemic/pandemic that it is (much like Polio 1:1500 (0.07%) of the 1950s) THEN medical pediatricians and specialists can AND would begin to treat this disease. Medical treatment would help mitigate or even eliminate ASD symptoms/behaviors, and provide real relief for children and their families. We would begin talking about treatment, potential recovery, NOT long term care; an impossible burden for families, the medical system, our society.

## References

- 1 [www.losaltv.org/?p=134](http://www.losaltv.org/?p=134)