Autism Diets: The First Step to Biomedical Intervention and Autism Recovery

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The road to autism recovery begins with diet. That is, choosing foods to add and remove from their diet is the first step to improving the health and well being of children with autism. Certain food substances (most notably gluten and casein) are known to be problematic for the child with autism, and should be avoided - and other foods rich in healing nutrients are beneficial when added to children’s diets. Attention to these factors is intended to help balance biochemistry, affect systemic healing, and provide relief of autism symptoms. In simple terms, these are the underlying tenets of diets for autism.

As a veteran biomedical autism nutrition specialist and Defeat Autism Now! (DAN!) Practitioner, I encourage you to discover the opportunity to help your child heal through diet, and share that even the pickiest eaters can make marked improvements. I work with families around the globe as they apply diets to support their child’s recovery plan as a complement to behavioral therapies and other treatments. Parents, pediatricians, and passionate professionals like myself are observing tremendous results.

By adding an autism diet, supplementation and nutrition to your autism pediatrician’s treatment plan; your child has the opportunity to have better sleep and cognitive ability, less pain and rashes, a positive change in digestion, and improvement in various behaviors. Biomedical intervention starts with diet and it is one of the most promising areas of science that you have access to today to help your child. Note, I do not mean a “cure.” Jenny McCarthy says it best when she uses the analogy of someone getting hit by a bus; they are never cured of getting hit, but they can recover—sometimes to the point that they no longer have any symptoms of having been hit. Other times, they only notice the symptoms when their body has been weakened by another injury or illness.

The choices you make about what to feed your child have profound impact on proper nourishment and health. Nutrient dense foods supply nutrients to support the body and repair the GI tract. A healthy GI tract provides the proper environment for good bacteria, proper enzyme function, and an ability to digest and absorb nutrients. Diet is a powerful tool and presents great opportunity to support improvements and recovery from autism.

Some parents hesitate to try autism diets because they don’t know if (why/how) diet works.
As a Certified Nutrition Consultant with experience supporting hundreds of families with children on the autism spectrum, I will explain to you WHY and HOW diet works. This will remove any mystery about diet and get you on the road to a healthier and happier child.

**Autism: A Whole Body Disorder**

Historically, autism was considered a “mysterious” brain disorder, implying that it begins and ends in the brain. Through the array of common physical symptoms observed and the breakthrough work of the Autism Research Institute, a more appropriate “whole body disorder” (the brain is affected by the biochemistry generated in the body) perspective of autism has emerged. Martha Herbert, M.D., Ph.D. who was one of the first to describe autism this way, refers to the brain as “downstream” from the body’s functioning.

Common physical symptoms of children with autism include diarrhea, constipation, bloating and GI pain, frequent infections, sleeping challenges, and inflammation/pain. Understanding that there are physical as well as behavioral symptoms clarifies that autism is not solely a brain disorder. When we appropriately identify autism as a whole body disorder, we can comprehend how what happens inside the body and cells, affects the brain—and how the food we feed a child affects the body and its biochemistry.

For many children with autism, nutrient deficiencies, imbalanced biochemistry, and digestive problems can play a significant role in these physical conditions. Altering food choices affects these processes and helps improve symptoms—both physical and behavioral.

**How Food Matters**

A healthy diet is essential for good health, and good digestion is critical. For many children, the physiological and behavioral symptoms of autism may stem from, or are exacerbated by, impaired digestion and GI health. One research study concluded that “unrecognized gastrointestinal disorders...may contribute to the behavioral problems of the non-verbal autistic patients”. Food has contact with and immediate affects the gut.

Poor digestion can lead to a condition known as leaky gut, malabsorption of nutrients, inflammatory responses to foods that are not broken down, and a burden to the detoxification system. Nutrients are essential to all biochemical and brain function. Adequate nutritional status requires the consumption of nutrient dense food and proper digestion to breakdown and absorb those foods.

Poor digestion often stems from environmental factors (as well as genetic susceptibility), lack of beneficial bacteria, inflammation, and immune system response to certain foods, and studies have shown leaky gut, low levels of beneficial flora, inflammation and immune response to food in children with autism. Additionally, the response to certain foods such as gluten and casein can create an opiate or inflammatory reaction that can affect the brain.

Referring to the chart, Whole Body Disorder, you can see the complex set of factors that influence autism on the left side: toxins, environmental factors, digestive health, and inflammation. The right side shows the direct effects these factors can have on the brain. The gut is a significant component to what happens in the brain.
The gut is an essential component to understand and address in autism. The gut breaks down our food so we can have the nutrients needed to support biochemistry and allow the brain to function properly. The largest part of the immune system is found in the gut—a system often imbalanced in autism causing an inability to fight viruses, yeast, and other pathogens properly while contributing an overactive inflammatory and allergic response. Toxins in the gut often from bad bacteria and yeast can give off toxins that affect the brain. Foods that are not digested properly can create inflammatory and immune system responses affecting the brain. Ninety percent of the brain chemical serotonin is found in the gut.

Understanding that gut and brain are connected helps explain WHY autism and overall health are improved through a diet that supports digestion/GI health. According to Hippocrates, “All disease begins in the gut,” and this certainly proves true with autism. As you can see, digestion and gut health affect the brain and autism’s physical symptoms in the Whole Body Disorder chart. In fact, the gut was coined “the second brain” by Michael Gershon, who spent many years studying the gut-brain connection. Derrick MacFabe identified this gut-brain connection in autism with his recent study on propionic acid.

Here are more details on how imbalanced digestion and biochemistry affect the brain and the symptoms of autism:

- **Yeast.** When there is yeast overgrowth in the GI tract, toxins enter the bloodstream and make their way to the brain where they can cause symptoms ranging from spaciness, foggy thinking, and drunken behavior.

- When the **biochemistry of methylation** is not working properly, neurotransmitters cannot be methylated (functioning) as they need to be, increasing the likelihood of anxiety, depression, ADHD, and sleeping issues.

- **Inflammation in the gut and brain** can be caused by toxins, food sensitivities, or bad bacteria or yeast in the gut. This can cause pain that affects behavior—such as self-injurious behavior; leaning over furniture, eye poking, and head banging can all be signs of pain.

- When **detoxification is poor** as is common with autism, toxins from food and the environment can build up and act like drugs on the brain, (causing irritability, aggression, brain/cellular damage) as with salicylates, artificial ingredients, MSG, mercury and aluminum.

- **Opiates can be created** from inadequate breakdown of gluten, casein, and soy leading to symptoms of opiate excess – foggy thinking, insensitivity to pain, opiate addiction and withdrawal, and irritability.
Removing the offending foods that contribute to inflammation, trigger immune response (food sensitivities), create opiates, and increase toxicity is crucial; and adding foods that can support a healthy ecosystem and provide needed nutrients is essential.

HOW DIET CAN HELP AUTISM

By supporting digestion and biochemistry through diet, one can help improve autism symptoms. Here are several examples of how good food and nutrients can improve the health of the gut, the whole body’s biochemistry, and positively affect the conditions and symptoms of autism – and, empowering actions that you can take when applying diet.

Nutrient Deficiencies. Nutrient deficiencies are common among children with autism. Poor quality and limited diets exacerbate this problem. Additionally, supplementation has shown to be supportive and a nutrient dense diet can supply needed nutrients. Specific nutrients are required for complex biochemical processes, and nutrients can only be digested and absorbed through food and supplementation when the GI tract is functioning well. In addition to getting a wide variety of nutrients through foods, supporting digestion is important.

- Increase the quality and digestibility of food
- Sneak in vegetables for picky eaters
- Juice vegetables and consuming homemade bone broths
- Add supplementation

Leaky Gut and Gut Inflammation. Improving digestion, reducing inflammation, and healing the gut are important steps in overall health and healing. Commonly reported benefits include: reduced diarrhea and constipation, improved behavior, greater language, and less skin rashes.

- Remove foods that inflame the gut such as gluten, casein, and soy
- Add foods that heal the gut and are anti-inflammatory such as antioxidant and probiotic-rich foods
- Add foods that supply beneficial bacteria (probiotics) such as non-dairy yogurt and raw sauerkraut
- Add foods that support beneficial bacteria growth (probiotics)

Yeast Overgrowth. Yeast is a harmful organism that can affect energy level, clarity of thought, and intestinal health. Yeast overgrowth is often triggered by heavy antibiotic use—common in children with autism with poor bacteria-fighting ability. Yeast overgrowth creates gut inflammation and decreases gut function.

- Remove sugars
- Remove yeast-containing foods
- Reduce refined starches and, in some cases, remove them.
- Add probiotic-rich foods

Toxicity and Poor Detoxification When children’s detoxification systems are not working optimally or are overburdened by pre-existing toxins, avoiding additional toxins from food is important. Food
based chemicals can cross the blood brain barrier and affect the brain, creating hyperactivity, aggression, irritability, and self-injurious behavior.

- **Avoid food additives**
- **Avoid toxins in food supply and meal preparation**
- **Eat organically**
- **Add foods that support the liver**

**Poor Methylation and Sulfation Biochemistry.** Methylation, transsulfuration, and sulfation are just one set of biochemical pathways that do not function optimally for many children with autism. These pathways can be supported by avoiding certain substances that are processed (and overburden) by those pathways, and supplying nutrients that are needed (and often in low supply). For those with decreased methylation and sulfation:

- **Remove phenolic foods—artificial ingredients, and foods high in natural salicylates, amines and glutamates.**
- **Improve methylation and sulfation through supplementation**

I hope that parents and practitioners can see the possibilities for positive influence and realize that diet can help autism. Diet is a powerful personal tool; it has few downsides and is accessible to everyone. With diet, parents have great control over choices that can have immediate positive impact in the health of children.

**GETTING STARTED – CHOOSING A DIET**

The most successful parents (and children) in my private practice are those that take steps to carefully implement autism diets. They believe in healing, that recovery is possible, and that through calculated food choices they can make a difference. While modern medical channels present few options, parents are following Hippocrates’ traditional advice and letting food be thy medicine.

Their diligence at nourishing hope is always worth the effort. I am seeing measurable positive changes in children whose parents are working hard to correctly and consistently implement diet. As I work with parents, we chart diet and healing progress and carefully record improvement in sleep, behavior, cognitive ability, language, eye contact, aggression, digestive problems, rashes, pain and more.

There are many “autism diets” to choose from and deciding how to begin nutritional intervention can seem overwhelming. Ten years ago, it was a simpler choice—do diet! And, “do diet” meant do the Gluten-Free Casein-Free Diet (GFCF). Eliminating gluten (the protein in wheat) and casein (the protein in dairy) was the primary focus of diet for autism for many years and these interventions have proven to be very beneficial. Since then, additional advances in biomedical nutrition research and mom-centric anecdotal data have resulted in broader dietary strategies for autism.

Now, one has to decide which diet to apply. This decision can inhibit even the most recovery focused parent from getting started. Parents hear “You need to do this diet,” or “my son improved on that diet.” Because each diet has its group of supporters, parents whose children did well with a particular diet aptly tout it. This is similar to the world of weight loss diets—people that did well on Atkins Diet
are huge Atkins supporters, those who lost weight on the South Beach Diet sing its praises. How can there be so many varied opinions? Because every child is different, a diet that helps one child may not be the best for another. Each child has unique biochemistry, immune qualities, genes, environment assaults, and eating preferences.

My clients are relieved to learn that I do not spout the dogma of any one diet. As an Autism Nutrition Consultant and Defeat Autism Now! (DAN!) Practitioner, I practice nutrition intervention focused on improving systemic health and relieving physiological and behavioral symptoms. Autism diets are food-based strategies employed toward this objective. I help parents choose the best initial diet for their child and then work to customize that diet to further meet their specific needs.

In my book, *Nourishing Hope for Autism*, I discuss thirteen different diets that are recommended for autism. While each diet has merit, some include advanced components that are best supported by an experienced practitioner and not necessarily required to get started. In this article, I will explain the top three diets for autism—they include the most immediately helpful dietary principles and practices and there is much literature and community support to aid successful implementation. In addition to these diets, I’ll discuss the most common food allergies and substances, as addressing these comes hand in hand with diet.

The most popular autism diets are:
- Gluten-Free and Casein-Free Diet (GFCF)
- Specific Carbohydrate Diet (SCD)
- Body Ecology Diet (BED)

The additional substances (and their corresponding diets) I’ll also discuss are:
- Phenols and salicylates
- Amines and glutamates
- Oxalates

**Gluten-Free Casein-Free Diet (GFCF)**

*Does your child crave milk?*
*Does your child only eat wheat and dairy foods?*
*Does your child seem spacey after consuming gluten or casein, and agitated before?*
*Are you just beginning to look at diet for the first time?*

When parents decide to “do diet,” they typically begin with GFCF. There are many good books about this diet, and the food marketplace is increasingly GFCF friendly. This diet entails the removal of all gluten and/or casein containing foods. Gluten is the protein found in wheat, rye, barley, spelt, kamut, and commercial oats, and casein, the protein found in dairy.

When ingested by children with a compromised digestive tract, like many children that have autism, these proteins can cause gut inflammation, pain, and digestive problems. If the protein is not properly broken down during digestion, it can form opioids (opiate or morphine-like compounds).xviii Scientists believe that opioids in gluten and casein are toxic for children with autism due to the fact that these children have an abnormal, leaky, gastrointestinal tract.xix The properties of gluten and casein can lead to digestive problems such as diarrhea, constipation, gas, bloating, as well as foggy thinking and
inattentiveness for many children with autism. Studies and many thousands of parental reports indicate physical symptoms and autistic behaviors decrease on a GFCF diet.\textsuperscript{xviii}

According to parents surveyed by Autism Research Institute, a gluten- and casein-free diet is helpful for 65% of children with ASD, even though a food sensitivity panel may or may not have shown a reaction to these foods.\textsuperscript{xx} Therefore, I typically recommend a gluten- and casein-free trial period—often beginning the diet by removing first one, then the other.

Most of the foods containing these offending proteins are easy to identify. While following the GFCF Diet, you’ll need to avoid any breads, crackers, pasta, or bakery items made with wheat and other gluten grains, and all dairy foods such as milk, cheese, butter, yogurt, and cream. Some sources however, can be sneaky, as some foods contain offending ingredients that are not apparent – such as:

- Soy sauce (except gluten-free soy sauce)
- Potato chips and fries (often dusted with gluten during processing and not listed on label, ensure they are gluten-free by checking with the company in the ingredient list)
- Malt (derived from barley)

When beginning the GFCF diet, be careful not to introduce a bunch of GFCF junk foods such as cookies, candy, and chips. Even though they don’t include gluten or casein, the sugar can feed yeast, imbalance blood sugar, and disregulate energy. Remember, diet is more than just the removal of offending foods – attention must be placed on ensuring healthy and nutritious food intake and additions.

GFCF is the best diet to follow when first beginning nutritional intervention for autism.

**The Specific Carbohydrate Diet (SCD)**

- Does your child have chronic diarrhea?
- Does your child have an inflamed gut, maybe even been on steroids?
- Have you tried GFCF to no avail?
- Does your child have trouble digesting grains?
- Does your child have dysbiosis (pathogenic yeast or bacteria)?

The SCD diet involves the removal of all complex sugars: everything except honey and fruit sugar, including the removal of maple syrup, cane sugar, agave nectar, brown rice syrup and more. SCD also removes all starches and all grains, including potatoes and sweet potatoes. This diet allows: meat, fish, eggs, nuts and seeds, certain beans, all non-starchy vegetables, and fruit. This is not a low carbohydrate diet but a specific carbohydrate diet that focuses on non-starchy vegetables, fruit, honey, and certain beans for carbohydrates and avoids other sugars and starches.

SCD is the second most commonly applied autism diet, and 66% of parents say it is beneficial for their child.\textsuperscript{xx} It is very helpful for those who have inflammatory bowel conditions and chronic diarrhea, although it can help constipation too.

The Specific Carbohydrate Diet aims to reduce gut inflammation and aid healing by “starving out” the bad gut bugs and avoiding foods that require carbohydrate digesting enzymes that are often in short supply (Horvath).\textsuperscript{iii} Because children with autism have systems that are routinely attacked by
pathogenic bacteria such as clostridia, they often need specific nutrition and diet support. By eliminating problematic foods, the bugs cannot continue to feed, and they die out.

Because it is more restrictive than GFCF, parents don’t usually begin dietary intervention with SCD. However, if there is a significant inflammatory gut condition, some will go straight to SCD. There is no reason not to begin with SCD; it’s an excellent diet for autism. It’s just that many parents are new to diet and are figuring it out on their own; beginning with the less restrictive GFCF diet, and then progressing if needed, makes sense.

SCD is often applied when doing GFCF is not enough and digestive problems still remain, or if someone needs to further evolve the diet to see any additional benefits. A variation of SCD is the GAPS (Gut And Psychology Syndrome) diet, created by Natasha Campbell-McBride, M.D. It includes the essentials of SCD, plus the addition of wonderful healing principles such as fermented foods and homemade broths.

While SCD diet is not inherently casein-free, I recommend that SCD be done casein-free until someone is certain that casein is not a problem.

The Body Ecology Diet (BED)

Does your child have persistent candida?
Does your child have harmful bacteria in the gut?
Does your child have bad smelling stool or gas?
Does your child sometimes act drunk, spacey or have manic anal laughter?
Does your child seem itchy or yeasty in any “moist” areas of the body like elbows, knees, or groin?

The Body Ecology Diet is an anti-candida diet focused on clearing up yeast and dysbiosis (imbalance of bad bugs in the gut). BED is often called BEDROK (Body Ecology Diet Recovering Our Kids) in the autism community. BED incorporates the principles of proper food combining, acid/alkaline balance with low acid-forming foods, low/no sugars and limited starches, easily digestible foods, fermented foods, and other solid nutrition recommendations to clear up candida overgrowth and support health beginning in the gut. BED includes many fermented foods such as raw sauerkraut and other cultured vegetables, non-dairy kefir drinks, and non-dairy yogurt.

BED allows only a few grains such as quinoa, millet, buckwheat, and amaranth (when properly soaked)—restricting more starches and grains than GFCF. In addition to being gluten-free, BED is rice-free, corn-free, and soy-free. Foods such as rice bread, gluten-free pretzels, and rice pasta are not allowed on this diet. BED allows casein, but can be done casein-free. I always recommend going casein-free (on any healing diet) until you are certain that dairy is not an issue.

If your child has candida, BED may be for you. Though it requires that the child eat vegetables as the food combining aspect allows meat with vegetables and starches with vegetables but not meat and starch together. BED may be challenging if a child is picky and does not have a varied diet.

Like SCD, this diet is beneficial for helping reduce dysbiosis and restoring good flora balance in the gut. However, these two diets conflict with each other as they rely on very different underlying principles. SCD removes certain sugars and all starches, while BED removes all sugars and certain
starches. Even if someone chooses a different diet, many of the Body Ecology principles can also be applied, such as the inclusion of fermented foods, soaking grains, and consuming more non-starchy vegetables full of minerals and alkalinizing to the body. Fermented foods in particular are wonderful for supplying good bacteria that are known to reduce pathogenic bacteria such as clostridia, and for overall digestive and immune function.

**Problematic Food Substances**

While following any autism diet, it is important to monitor and moderate the intake of certain additional food based substances.

Common problematic food substances are:
- Phenols and Salicylates (removed in the Feingold diet and Failsafe diet)
- Amines and glutamates (also removed in Failsafe along with phenols and salicylates)
- Oxalates (reduced in the low oxalate diet).

**Phenols and Salicylates**

A phenol is a chemical structure that is an organic compound with an aromatic/benzene ring, and is both naturally occurring as in salicylates and chemically manufactured as with artificial food additives. Phenols can be created by man from a petroleum derivative in food additives such as artificial colors, flavors, and preservatives. Artificial colors and preservatives have been found to cause hyperactivity in children in recent study.

Salicylates are a type of phenol that act as natural pesticides in plants that are not harmful to humans because we have an enzyme (phenolsulfotransferase, PST for short) that breaks them down. Some foods high in salicylates are: red grapes, apples, berries, almonds, and honey. According to studies conducted by Rosemary Waring, Ph.D., children with autism are short of the enzyme PST and building blocks that break down phenols and amines in food. When children consume salicylates, they can get a wide range of symptoms including hyperactivity, fatigue, diarrhea, other negative gut symptoms, sleeping challenges, aggression and irritability.

The **Feingold Diet** is the most basic diet that restricts salicylates and phenols. It avoids artificial ingredients such as: artificial colors, artificial flavors, the preservatives BHA, BHT, TBHQ, and aspartame and other artificial sweeteners. It restricts many of the most commonly reactive salicylates: (here’s a partial list) almonds, apples, apricots, berries, cucumber, curry spices and most spices, grapes and raisins, oranges, honey, peaches, peppers, and tomatoes. A craving to these foods is typically a good indicator of sensitivity.

**Amines and Glutamates**

Amines are phenolic-like substances and can affect children similarly to salicylates. Amines are derivatives of ammonia and exogenous forms (originating outside the body) found in certain foods. Biogenic amines in foods can be produced by breakdown of amino acids; therefore, often well cooked (easily digestible foods) can contain high amounts of amines such as slow cooked meats, broths, and fermented foods.
This can provide a challenge because for some individuals these easily digestible forms of food are helpful in the diet; however, for others that are sensitive to amines because of an inability to detoxify them, these wonderful foods can cause reactions. Reactions are wide ranging including symptoms of salicylate sensitivity, aggression, depression, migraines, and affect mental functioning. Amines occur in banana, chocolate, red wine, beer, sauerkraut, soy sauce, aged cheese and meats, bone broths, and slow cooked meats.

Glutamate is the most abundant excitatory neurotransmitter in the brain, involved with learning and memory. While this neurotransmitter is important, too much glutamate, especially from food additives can be neurotoxic (killing brain cells), and create hyperactivity, prevent the body’s natural calming mechanism, cause shortness of breath, headaches, anxiety, and other problems, and may play a direct role in immunoexcitotoxicity in autism.

Glutamates can be derived from foods—both naturally occurring in foods (parmesan cheese, soy sauce, peas, corn, tomatoes) as well as monosodium glutamate (MSG) and other additives containing MSG such as autolyzed yeast and hydrolyzed vegetable protein. Highly sensitive people even have problems with naturally occurring glutamate in foods. MSG and ingredients containing MSG are often used in processed foods that are designed to taste “meaty” or “cheesy” such as gravies, broths, soups, meat-flavored vegetarian foods, and nacho chips. Foods high in naturally occurring glutamates include parmesan cheese, soy sauce, natural bone broth (though much less than bullion and the artificially flavored broths), peas, tomatoes, corn, and sauerkraut.

Even nutritious foods such as fermented foods including yogurt and raw sauerkraut, and bone broths contain amines and glutamates. In highly sensitive people, even these nourishing foods can cause reactions. While all MSG should be avoided, none of these naturally occurring foods or substances are “bad” or toxic - in fact, very often they are nutritious foods IF you can process them. They are only problematic when a child has intolerance to them, so you needn’t remove these substances permanently.

However, be aware of reactions that these foods can have and look for these reactions in your child, or do a trial elimination and test. The Failsafe Diet removes phenols and salicylates (more thoroughly than the Feingold Diet), as well as amines and glutamates, including MSG and food based forms. Failsafe also removes additional food additives including propionic acid, used in preserving bread and dairy products, and found by Derrick MacFabe, M.D. in rat studies to cause similar behavioral and biochemical symptoms that are found in autism.

Oxalates

Finally, autism diet followers should take note of oxalates. Oxalates are sharp crystals; the same that are responsible for certain forms of kidney stones. Oxalate crystals can be inflammatory and damaging to children’s delicate biochemistry, and the low oxalate diet reduces these compounds. Normally, a healthy gut will not absorb too many oxalates (naturally occurring in high levels in certain foods such as spinach, beets, and almonds) from the diet, because as they come through the digestive tract they are metabolized by the good bacteria in the gut or bind to calcium and are excreted in the stool.

However, when the gut is leaky these oxalates are absorbed and high levels end up in the blood, urine, and tissues—especially damaged tissue. Once the oxalates are in the tissue, they create inflammation and pain. In cells, oxalates can lead to oxidative damage, depletion of glutathione, pain associated with urination, and inflammation related to the immune system. Glutathione is important
for immune function, inflammatory regulation, detoxification, and antioxidant status and often low in children with autism;\textsuperscript{xxx} therefore oxalates could exacerbate challenges for some children with autism.

It is also theorized that oxalates contribute to further inflammation in the intestines and more profound leaky gut, and may be the reason that some children have trouble healing leaky gut and yeast overgrowth; although, more study on oxalates and the low oxalate diet needs to be done.

Oxalates are bound to calcium in nature so they are often found in very healthy foods: almonds and other nuts, beans, spinach, leafy greens, sweet potatoes, berries, and more. There are many nutritious foods that are high in oxalates, so someone would not automatically want to reduce these foods. However, be aware that if a diet is very high in oxalates, such as high amounts of almond and nut flours, and gut inflammation, dysbiosis, and pain are problems; one might consider a trial of a low oxalate diet.

**GETTING STARTED**

Now that we have discussed three effective autism diets and problematic food substances, where does someone start? Typically I recommend GFCF or SCD. Sometimes, based on the diet of the individual, I may suggest BED instead—for example if a child has significant yeast overgrowth and is currently on GFCF (which may filled with too many sugars and starches), but the child will eat vegetables, I may suggest BED. If nuts must be consumed, I also may suggest BED. Additionally, I may suggest just adding fermented foods, soaked grains and nuts, and more vegetables—several BED principles, but not the full Body Ecology Diet.

After that, I refine the diet by potentially removing the salicylates, amines, glutamates, or oxalates. This can be done by looking for reactions, but more accurately by eliminating them for a few weeks and then reintroducing them to see how the child reacts.

The easiest and most important initial action, no matter what diet you choose, is to remove artificial ingredients and junk food. Artificial ingredients are highly toxic and very difficult for the liver to breakdown—they are associated with hyperactivity, asthma, aggression, irritability, and sleep disturbances. Once you realize the deleterious nature of certain foods, you’ll naturally choose not to include them, or “eliminate” them, from your child’s diet.

Food additives and ingredients to avoid

- Artificial colors: red #40, yellow #5
- Artificial flavors: vanillin
- Preservatives: BHA, BHT, TBHQ
- Monosodium glutamate: MSG, hydrolyzed vegetable protein and other hydrolyzed items, autolyzed yeast, yeast extract
- Artificial sweeteners
- Trans fats, partially hydrogenated oil found in many commercial mayonnaise, margarine, and peanut butter products, fast foods and fried food, and baked goods.

The most important dietary principle is to start. It sounds simple but start somewhere (often with the most simple thing such as getting rid of all artificial ingredients) and see what’s next.
You Can Do Diet

I know what you are thinking, “My child is picky and very inflexible with eating new foods. I’m never going to be able to get him to eat anything other than wheat and dairy, and never mind anything “healthy.” I also understand that you are really wondering if an autism diet will help your child and their symptoms.

I appreciate these concerns. I have had some very picky eaters in my nutrition practice—many children ate only bread and dairy, others subsisted on just pancakes and fries. However, there are solid reasons why these children are so one-sided in their food choices, primarily cravings.

When the body creates opiates from foods, one can become addicted to them and thus crave nothing but those foods, or when yeast overgrowth is present, a preference for only carbs and sugars can result. Children eventually narrow their food choices to include only those that make them “feel better” (in the short term). It’s worth trying diet because once the child gets passed the cravings (a few days to a few weeks), they often expand food choices dramatically and it becomes much easier to do.

Most of my client’s children eat limited amounts of vegetables—if any. However, it’s also very common that once they apply diet (and the cravings diminish), children begin eating more vegetables (or meat)—often for the first time. In fact, this is the experience with a majority of my clients. Now, there are some children that are very self-limiting, and it takes time to change their diet. But keep at it. Sometimes as occupational therapy or sensory integration begins to address food textures, a child begins to expand more.

Until then, get creative and make foods crunchy or smooth based on their preferences. Begin to add new food options such as gluten-free pasta before removing the existing food. Be aware that brand preference, may be because of MSG or other additives that can be addicting and make that food “exciting.” Add enough salt to taste to make your versions of their favorites more flavorful—don’t go overboard but don’t feel you need to limit salt.

As we enter 2009, more children are recovering. They are finding relief from autism symptoms. In my practice, I often hear reports from parents that digestive disturbances are often one of the first areas that children find relief as diarrhea or constipation is eliminated. Then children often feel better—from there, they can engage more in school and therapy and I often hear reports that language and behavior improve. The other most common comment I hear to great elation from the parents is sleep improving—supporting the wellbeing and outlook of the whole family.

Parents are wisely and correctly applying autism diet with great success. Biomedical diets are helping children recover from autism. As a parent, you have a very powerful healing tool at your disposal as a complement to behavioral and other treatments recommended by your autism pediatrician. I encourage every parent to try diet—read, learn and try.

Any child’s diet can change and recovery is possible. It may take time and require great patience, but you can make improvements. It’s crucial that parents believe that it’s possible for their child to change and improve. By envisioning the changes, you project a positive image that is important for your child and the success of your overall efforts. I’ve never known a child that did not benefit from dietary
intervention, and I’ve never seen a child’s diet that did not (with proper attention) eventually expand and improve—increasingly, as the body heals.

I, like you, are committed to helping children get better. Nourishing hope comes from the depths of our heart and is fueled by intense love and devotion. Always have hope.

Julie Matthews

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**Nourishing Hope for Autism: Nutrition Intervention for Healing Our Children**

By Julie Matthews, Autism Nutrition Specialist
Defeat Autism Now! (DAN!) Practitioner,

Recommended by Elizabeth Mumper, Medical Director of Autism Research Institute (ARI), this biomedical autism diet intervention guide for parents provides scientific why and how autism diets work to help recover children from symptoms of autism. This book shows how to successfully implement diets and cook creatively for families.

Simply stated: “This is one of the single most important pieces of literature to have on hand if you are a parent or physician serious about understanding and implementing biomedical autism diets.” *Nourishing Hope for Autism* provides the proven scientific understanding of why diet helps children heal. Recommended by parents and autism physicians, this autism diet book gives practical steps for dietary intervention, a roadmap for getting started, evolving and customizing the varied approaches.

You will learn about the critical connection between the nutrients that go into the digestive system of the child with autism and the impact they have on the child’s brain. Parents are using this teaching today to help bring about real recovery results—improvement in cognitive ability, physical pain, digestive problems, rashes, speech, eye contact and aggression. You will come back to this book time and time again as you apply autism diets.

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**Cooking To Heal™ Autism Nutrition Education & Cooking Class DVD**

By Julie Matthews, Defeat Autism Now! (DAN!) Practitioner, Autism Nutrition Specialist

This DVD provides 4 inspiring hours of LIVE nutrition and cooking instruction for parents who cook for children with autism. Ideal
workshop for those who want to gain a thorough understanding of how to cook for autism diets and create meals families will love.

Taught by Julie Matthews, a top autism nutrition specialist, food enthusiast and Defeat Autism Now! (DAN!) Practitioner, you will be inspired to explore the many healing food options when cooking daily for family and children with autism. You will learn about the critical connection between nutrients you feed your child and the impact this food has on the symptoms of autism.

Filmed live in a culinary kitchen with parents, chefs and clinicians in attendance, Julie provides solid autism nutrition teaching along with creative hands-on cooking instruction for preparing recipes and foods that heal and are delicious to eat. She focuses on the picky eater and practical preparation for daily cooking in the kitchen while focusing on the many autism diets. This DVD is recommended by many parents and chefs who are using the tools and techniques daily to support their child’s recovery plan.

About The Author

Julie Matthews, Defeat Autism Now (DAN!) Practitioner, is a leading autism nutritionist specialist in the United States. She is committed to helping parents find hope and healing for their children living with autism through biomedical autism diet intervention as a complement to behavioral and other physician recommended treatments. Julie’s core area of study and expertise deals with the connection between diet and supplementation and recovery from the brain/body disorder known as autism.

The research Julie bases her practice and teaching on is compelling: there is a direct biomedical connection between the digestive system of the child with autism and what happens in their brain and the symptoms they experience as a whole-body disorder. Her most meaningful work is done with hundreds of families from around the world during private one-on-one nutrition consultations. Her autism nutrition practice, Nourishing Hope, is based in San Francisco, California. Julie works with patients in person, via video conferencing and by phone.

Julie has educated more than 10,000 parents and professionals at leading autism conferences internationally including the yearly ARI/Defeat Autism Now! (DAN!), Autism One, National Autism Association and Mindd International Foundation conferences. She enjoys speaking to parent support groups around the country.

Julie is also a contributing biomedical columnist and board member for Autism File, a leading magazine for 50,000 families and physicians of children with autism. She is host of an Autism One Radio program and author of *Nourishing Hope for Autism: Nutrition Intervention for Autism Spectrum Disorders*. Julie is also the founder of *Cooking To Heal™, an autism nutrition and cooking class program.*

References

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