

## **Dr. Amy Holmes: In Her Own Words**

*A compilation from Internet discussion group postings*

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I can tell you what I did to my son:

1. had 21 amalgam fillings in my mouth while I was pregnant
2. ate tuna at least 3 times a week while pregnant
3. use thimerosal-containing contact lens solution while pregnant.
4. he got all vaccines "on time", all the ones that could have possibly contained mercury did contain it. >>Amy

my son Mike - DOB 10/18/94

Unremarkable pregnancy.

Born by planned C-section (advanced maternal age and very large baby). Weight 9 pounds, 2 oz. Very healthy. Apgars 8/9.

Uneventful first year. Got all immunizations on time.

Sat at 4 months, crawled at 7 months, walked at 10 months.

Spoke first word at 9 months. By 12 months, had 10 to 15 words. Good eye contact, good imitative skills, very social. Stopped talking 5 days after MMR plus Hep B at 12 months, gradually lost all imitative skills, all interaction and eye contact.

By 18 months was in his own world. Would not even respond to his name. We asked everyone why he was acting this way, including several pediatricians - no answers.

Finally diagnosed as autistic at 26 months. We began an intensive ABA program (Lovaas) at 28 months. We took him to see Dr. Stephanie Cave at 29 months. She ran a number of tests, including hair analysis for heavy metals. He was very high in lead, aluminum, and antimony. Mercury was only slightly elevated. She gave him DMSA 100 three times a day for 5 days, followed by 100 mg twice a day for 2 weeks (the old treatment).

By 1 month after this first chelation course, he had improved noticeably - behavior was better, no longer as "zoned out" as before, was no longer pale, looked healthier. Repeated the hair analysis several months later. This showed a significant drop in lead, but still high antimony and aluminum, and to our surprise, a high level of mercury. No one knew what this meant at the time - this subsequent high level of mercury meant that mercury had been mobilized back into the bloodstream, thus could finally show up in the hair. Looking back, if we had realized the significance of this finding then, Mike would be completely recovered now.

After this, we pursued other areas like getting rid of yeast and pathogenic bacteria, gluten and casein-free diet, getting rid of multiple food allergies, and did not return to the heavy metal issue until he was 4 years old. By this time, I had taken over his case. I repeated a hair analysis for heavy metals when he was 4. Mercury had dropped (of course - it had gone back into its favorite storage areas), but aluminum and antimony were still very, very high, and the lead was back up to elevated range. I started him on a kinder, gentler course using DMSA 200 mg TID for 3 days, off for 11 days while repleting minerals. I repeated this 2 week cycle for a total of 4 cycles, then got a toxic urine screen on the last cycle. To my surprise, tons of mercury were coming out. That is when I started investigating mercury-autism connection in Mike's case. After a few weeks, I was convinced that mercury was responsible for a lot of his problems, so we continued with the same 2 week cycles of DMSA for several more months, repeated the urine toxic metal screen with almost the same findings.

From April of 1999 to the present, I have been doing these 2 week cycles, 4 to 6 at a time, then allowing him a month off now and then to fully recover from the chelation. We got a urine toxic metal screen last month (4/00) which showed mercury at 2.7 ("normal" range 0 - 3). This is the first time he has ever been in the "normal" range for mercury (provocative urine). One year ago,

Mike was essentially non-verbal and preferred to engage in meaningless self-stimulatory behaviors. Today (5/00), he speaks in sentences, addresses people by name to get their attention, and no longer "stims" non-stop. His receptive language is excellent, expressive is still 2 years behind his peers (but is catching up fast). His pronunciation, which had been so bad as to make any words completely unintelligible, is now improving to the point that we can understand almost everything he says. And as far as my son goes, I have no neurologic or behavioral evidence left in him to suggest that mercury is still a significant problem for him - he is talking, answering questions, carrying on conversations. His strabismus is gone. His bilateral Babinski sign are now gone. He no longer walks on his toes. I could go on and on, but the bottom line is that I used DMSA every 8 hours, 3 days "on" and 11 days "off" and he is not the same horribly impaired child that he was even a year ago.

I intend to continue chelation until no more mercury comes out on provocative urine toxic metal screen. Hope this helps,

Dr. Amy Holmes

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the bad news is that there is a huge increase in childhood conditions like autism and ADD. the good news is that autism is really looking like a neurotoxic problem, with all the other biochemical problems secondary to the presence of the toxins. This is good news because this is something we have a chance of fixing. And it appears that, if you can get these toxins out at a reasonably early age, the child can be "indistinguishable from his peers". Mercury looks like it is usually the biggest problem, but, it doesn't look like most cases are purely mercury and mercury alone. There are some other heavy metals that play a big part, both by themselves and by (horrors of all horrors) potentiating the toxicity of mercury. For example antimony is almost always extremely high, with arsenic, lead, cadmium sometimes high, and we are also finding solvents like hexane or xylene or organochlorines or such as benzene to be sometimes high.

I think just about all the kids today are getting pretty high exposures to various toxins. The main ones that are having major problems are those with defective or immature detox systems in the liver, although the exposure to mercury is certainly higher today than it has ever been in infancy before. 6 to 8 vaccines containing thimerosal in the first year alone - the first on the 1st or 2nd day

out of the womb. This is a relatively recent development (last 10 years), and I think this fact alone accounts for the epidemic of autism seen in the last 10 years. So far, I have gotten hair tests from 110 autistic children - all but one fit the counting rule for mercury/metals toxicity- that you diagnose mercury toxicity based on a large number of essential mineral levels being abnormal.. The essential elements are widely scattered all over the place. I also have some hair tests from "normal" people - about 10 total. The most interesting comes from a 25 year-old woman with no amalgams ever. Her essential elements are right around the mean. We got her hair just because of her amalgam- free status. She was not a patient.

Dr. Amy Holmes

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We have a little over 300 autistic kids in the practice. I am at home, so I don't have any of the charts handy, but I will give it a try giving you the most typical picture I see:

1. Hair (Toxic Metals)

very high antimony - almost universal

high aluminum

high arsenic

high-normal to high cadmium

high-normal to high lead

slightly high mercury

the others are not consistently high or normal or low.

Here's an example (I have a couple I brought home to go over the results prior to seeing the parents back)

5 y/o WM

Hair - Doctor's Data (ref range - 68th pctile in parentheses)

aluminum 11 (<8)

antimony 1.506 (<0.066)

arsenic 0.16 (<0.08)

beryllium <0.01 (<0.02)

bismuth 0.48 (<0.13)

cadmium 0.077 (<0.15)

lead 1.12 (<1)

mercury 0.43 (<0.4)

titanium 1.3 (<1)

the others were OK

We have just started testing kids in the beginning of treatment with urine toxic elements (Doctor's Data). We cannot get a 24-hour urine on most, so we get an 8-hour urine, and have to base our decisions on mcg/g creatinine instead of mcg/24-hours. We do a challenge test with DMSA, low-dose for 2 days, collect the urine on day 2. So far, almost all the tests fall into the same ranges - mercury is coming out in large amounts along with other metals.

Here is an example - not the same child, unfortunately.

6 y/o WM

aluminum 10 (0 - 35)

antimony .4 (0 - 5) - DMSA does not pull antimony out well at all

arsenic 154 (0 - 100)

bismuth 3.7 (0 - 30)

cadmium 5 (0 - 2)

lead 31 (0 - 15)

mercury 28 (0 - 3)

nickel 12 (0 - 12)

... the rest are low, so I won't list them

Consistent findings:

1. elevated MCH and MCHC (without anemia)
2. elevated total IgE
3. high intracellular calcium, low zinc, selenium, magnesium
4. other trace minerals either low or on very low side of normal

(except potassium and copper) - this persists even with supplementation.

5. Inability to fully break down gluten and casein (high casomorphins and gliadinomorphins on urine test) - ? inhibition of DPP IV

Well, the list goes on and on and on.

And, you are right. Most of us DAN! types think ADHD/ADD are on the same spectrum as autism, just affected to a lesser degree.

That is a good question about the pyrroles, and I don't know much about them. I know they are present in elevated amounts in urine in schizophrenics and people with autism, and those that have elevated values waste B6 and zinc in their urine. Woody McGinnis is the expert on this matter.

I am very aware of the UF report on the effect on peptides being a major factor in autism . BTW, I did my internship and residency at UF, so I have a big fond spot in my heart for anyone who is affiliated with UF. Robert Cade is a pioneer in this area and I have a lot of respect for him and his work.

Bernie, this whole mercury thing has put autism into a new light. I think that, finally, we may be able to offer some good safe treatment to these kids with a reasonable hope of some normalization if they are treated early.

Amy

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Bernie Rimland.(ARI director) The conversation (of course) eventually turned to mercury. He asked me if I thought all autistic children with no identifiable syndromes were all mercury-poisoned. I told him that I thought they were, at least based on my testing of about 200 autistic children so far. There was a long silence on the other end, and then he said that he had reviewed a lot of the data himself, and had come to exactly the same conclusion.

It appears that there is no difference in children "born" autistic and those who were developing normally and then had a regression. The only real difference may be the timing of the poisoning and maybe some individual susceptibility.

Amy

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I have obtained almost 110 hair analyses now on autistic kids. So far, ALL (amazing) display the highly scattered (all over the place) essential elements. What I am not finding is elevated hair calcium - in fact, most have VERY LOW hair calcium. The ones with the lowest hair calcium are the ones with vastly elevated levels of other heavy metals, especially antimony, aluminum, and arsenic. I have almost 25 hair tests from "normal" people. Most have no amalgams at all - only one has the "scattered pattern". 20 of the hair tests are from children who are NT - none of these show the "scattered" pattern. The one scattered pattern I have from a normal person is from an adult with a mouthful of amalgams. As far as anyone can tell, he has no overt symptoms or signs of heavy metal toxicity. Another thing I am finding consistently is evidence of uncoupling of

oxidative phosphorylation from the Krebs cycle - almost 100% across the board - another mercury effect.

Dr. Amy Holmes

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There was a lot of anecdotal evidence presented - for instance, the one that really stuck with me. Four year-old girl with really bad autism. The "before" videotape was hard to watch - she was in therapy (and had been doing a good ABA program for about a year). The only program she had progressed in over the last year was simple imitative skills ("Do This"), and she hadn't progressed very far in this one. She screamed non-stop whenever she was awake, and this was most of the time since she rarely slept. Various and sundry tests to determine metal loads, toxicity, and levels of other non-metal toxins. Lots of metals, xylene, hexane. Many, many biochemical impairments. She was started on a pretty intensive detox for all the things that were found. The metals were addressed with DMSA mostly. (The aluminum, antimony were handled separately). Plus other things for the xylene and hexane and whatever the other things were (sorry, can't remember exactly what the others were). Two "after" videos were shown. The first was 1 year later. Again in ABA - but what a different picture. Advanced program this time, reading social stories and asking and answering questions about them, advanced conversation drills, well, you get the picture. The last video was 2 years later - she was in a regular 1st grade (no aide), completely normal in her interactions with others, no impairment in language. Amazing. I think that is what we all want.

Amy

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