

"WHAT CAUSES AUTISM?", A BRIEF REFLECTION

Carles UDINA i COBO, 2008-03-22, revised
(Translated by Bea CAMPS, 2009-08-31)

The document includes:

- not only the brief initial document, written on the occasion of the launch of the website at the beginning of 2008;
- but also the appendices, resulting from different scientific information, which appeared **later**, information which **confirmed empirically the certainty** of the initial document.

"What causes autism?", A brief reflection.

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Here below I **analyze critically** the following comment:

"Many **genes** probably contribute to this **baffling** disorder, as well as unknown environmental factors. A biomarker for early diagnosis would help improve existing therapy, but a cure is a distant hope." ("Science" 309 (5731) "25-125 questions")

Science and fashion

Objectivity is the first condition required by science, but fashions have been as linked to science as they are to clothes, if not more. Just over a century ago, with physiology and morphology –especially cerebral– scientists explained unequivocally all kinds of behaviour. The aberrations to which scientists arrived –especially the ones formulated by nazi scientists– lead to a new “paradigm” (that is, a **dogma**), the one of the hormones, that old people like me remember perfectly. Lately, genetics has emerged as the **definitive paradigm** that explains everything and negates, without any problems, whole sciences like psychology. **Until when? What will be the next “paradigm”?***

* A superb book to this respect is the one written by Stephen JAY GOULD “The Mismeasure of Man”

To begin with, it is important to clarify that a “correlation” doesn’t necessarily imply a “cause-effect relationship”. It is also obvious that it will always be possible to find correlations between a certain part of the genetic code and a good part of the behaviour of human beings with their external environment. However, as a second and basic criterion, in any behaviour of a human being in relation to his/her external environment, the incidence of genetic factors –assuming they exist– **will always be secondary to the environmental**.

We don’t have to fall into the **polysemy** of not knowing how to distinguish between “Condition” and “Sufficient Condition”. Genetics can be a condition, but it musn’t be in any case a sufficient condition. See in this Website, for instance, what is said about these two relationships in "**Què és la intel·ligència?**" (=“What is intelligence?”) or their definition in "**Les relacions**" (=“The relationships”).

The obsession for an exclusively genetic causality is like blindfolding yourself not to see reality. And possibly also **not to assume social responsibilities** for the negative effects:

- of **children’s breastfeeding and upbringing**
- of **eating and hygiene habits** (or rather, unsanitary), as well as
- of the indiscriminate **medicalization of society**.

The incorrect breastfeeding of newborn babies, the incorrect education of children, the even more appalling hygiene habits (bodily, including and particularly the eating and mental habits) and the increasing medicalization of society form a group of environmental circumstances, the effects of which belong completely to the domain of social responsibility. And their **negative** effects are **unquestionable**.

Epigenetics

The concealment of epigenetics* is a usual and accepted fraud in science. “Concealment” and “Fraud”, because we cannot call it any other way.

* Particularly by many geneticists and oncologists.

Epigenetics is not a principle nor a hypothesis, but a branch of science like any other (see "**Genètica**" [=“Genetics”] and/or "**Teoria holística**" [=“Holistic Theory”]). Metaphorically speaking, Brian TURNER explains that if genetics is like a bank of data (the DNA, the genome), then epigenetics would be like the **interpretation** that each user makes of the data. In this

case, the "user" would be the environmental circumstances of each individual (including his/ her own state of health).

Epigenetics studies the **different expressions** of the genes depending on the **different environmental conditions**, because it is known –even if it is said quietly– that genetic information:

- **doesn't** determine an individual in an unequivocal way;
- **nor** it is unalterable (except for the mutations due to external causes, like ionising or chemical radiations). There are also epimutations, which are inherited however.

Epigenetics helps to understand:

- the process of many tumours,
- why a man and a chimpanze are so different, even though they share 99% of their genes;
- why a mother cell decides to take one or another differentiation path;
- and many other additional questions, which escape traditional genetics." (Manel ESTELLER)

In the words of the Chilean biologist Humberto MATURANA "The '*human genome*' doesn't make a human being, but a '*humanizable*' being". And to tell a serious joke we could add: "a being who becomes human, or not that much, or even not at all, depending on his/her environment"

Speculating about the already-mentioned fashions, despite the current concealment of epigenetics, the day when this science produces patents and drugs, it will not be difficult to imagine it replacing genetics as the definitive "paradigm" of science...

Autism and vaccination (and induced childbirth)

A clear example of an epigenetical factor is the **modifications enforced onto the immune system** through vaccinations. As well as globally ignoring the existence of epigenetics, the prestigious "**Science**" magazine **still doesn't know** (at least not until July 2005) about the correlations already made between **indiscriminate vaccination and autism**, to mention just one example of an environmental factor which contributes to cause autism.

There have also been found correlations between autism and difficult **childbirth** with anesthetics and forceps.

Where do we have to look, primarily, for the causes of autism?

Indiscriminate vaccination is an **unnatural intervention** into the immune system, that is, an intervention of the **(+M, +S, -N)*** type. We shouldn't forget that the immune system is a "**linguistic**" / **informational system** of material support **(+M, +S)**, in which vaccinations intervene in an unnatural way (-N). What is, by definition, a **hormone**? Like everybody should know, a **molecular sign**, an element of a **(+M, +S)** system.

* See in this Website "**Sistemas. (±M, ±S, ±N): tipologies i arbre**" (= "Systems. (±M, ±S, ±N) typology and tree"). In summary: **±M** indicates if the system is **material or not**; **±S** indicates if the system is **symbolic or not**; **±N** indicates if the system has **natural long-term stability or not**.

Autism is a behaviour of the **(-M, +S)** type like any behaviour belonging to a superior animal in relation with its external environment. If autism can even be related to alterations of the previous systems (+M, +S) (like the case of the immune system), it is obvious that the causes will be, **also primarily, in alterations of the structures (-M, +S)**, that is, in the **psychological** structures.

We therefore have a non-genetic candidate: the immune system **(+M, +S)**. A candidate **half way** between genetics and the psychological world. Therefore, if we cannot find anything in genetics, as it only leads to confusion/ "**baffling**" ¿why keep **stubbornly** looking in that direction? Why not look closer, in the **own formation** of the individual as a social person? Why not look for causes of the same nature **(-M, +S)** as autism? Why is "traditional"/material science

so **scared** of the psychological factors? Couldn't it be that it is because this would imply social, and also scientific, **responsibilities**?

If the reader takes the time to read in detail "**Què és la conscienciació?**" (=“What is consciousness?”), "**Què és la intel·ligència?**" (=“What is intelligence?”) and "**Els drets dels nens**" (=“Children's rights”), he/she will be able to deduct many environmental conditions, that could potentially cause autism, undoubtedly much more important than any genetic correlation, supposing one can find any.

As the child protagonist in "**Els drets dels nens**" (=“Children's rights”) comments:

“In addition to investing all that money and campaigns in degenerative diseases –which are often a direct consequence of the bad hygienic habits of the patients (sedentarism, drugs, bad food, “stress”, ...)– I demand that long-term epidemiological studies are carried out on the consequences of the medication during childbirth, cesarians, the lack of breastfeeding and the indiscriminate vaccination campaigns. Whether they are somatic effects (in the mother and the child, like the ones already mentioned), or behavioural, that is, unaffection in mothers, parental phobia, child and adolescent violence, autism and the attention deficiency syndrome, ...”

We leave it to the professionals who deal with this sort of problems or any other interested reader (for instance, relatives of autistic children), to write a complete list of the environmental conditions which they think could have contributed to the problem, according to the three documents mentioned, or any other conditions that they can think of intuitively in this exercise.

As a way of help, the reader can take into account the **imprint**, because it is the **detonator** of many transfers of instincts to the psyche* and it stimulates also many psychological functions.

* See, for instance, in this Website, "The psychological transcription of the instincts" [.13011] in "**Què és la conscienciació?**" (=“What is consciousness?”).

The imprint is the **maturation of the incomplete instincts**, the ones that haven't been yet able to be incorporated evolutively, but which generate behaviours that are transmitted from **mother to child** and are **indispensible** for the survival of the individual and the species (and, consequently, they have many probabilities to be incorporated as full instincts in the future*).

* This is only up until now, because, with the current human interventionism, causing the disappearance of entire species, the evolutionary future of the whole biosphere is uncertain.

The imprint is a **basic cultural phenomenon, very fragile/temporary (-M, +S, -N) but often ignored/unknown**.

For instance, the following belong to the imprint:

- 1) how **childbirth** has evolved (surgical, under medication with drugs, ...);
- 2) the absence or not of the continuity of the mother-child link at childbirth and the absence or not of breastfeeding by the mother; ...
- 3) the absence of "**skin to skin**" interactions with the newborns, especially preterm;
- 4) etc., etc., etc.

It is clear that a **non-natural childbirth**, like an **absence of the continuity in the mother-child link** (and in **breastfeeding**) is a **repressor** of the imprint, which **stops** among many others, processes which are basic for the individual (see in this Website "**Los derechos de los niños en Biocultura 2009**" (=“Children's rights at BioCulture 2009”) and "**Els drets dels nens**" (=“Children's rights”), the **transfers of the instincts to the psyche**. It is clear that survival is a basic instinct, **an instinct which is forgotten** when sudden death occurs.

Corollary on sudden death.

Sudden death is, foreseeable, a phenomenon **equivalent** to autism, in its most **intense** manifestation [affecting the systems **(+M, +S)** i **(+M, -S)**] and, consequently, **fast**. It is a giving up of the most basic instinct, the survival one.

Conclusion (replica of the "Science" magazine)

From here, with epidemiological **studies appropriate to each candidate condition, none of them genetical**, it will be easy to find in a few years **the most determinant causes** of autism, which, forseebly, may be an **accumulation of causes, all of them environmental**, including the **pregnancy conditions** (whether it was **desired**, maternal hygiene, ...).

And the expected consequence will be that the way to proceed:

- **it is not to look for a "biosignal"** –which will never be found–,
- **nor to state "precocious diagnostics"** (if we allow a poisonous snake to bite us, do we need a diagnostic?);

but the need of acting **preventively** (hygiene, specially **psychological**), **treating the newborn in a correct manner** (see in this Website "[Els drets dels nens](#)" [=“Children’s rights”]), which is **the best and only existent therapy** and not only **“improving an existing therapy”**. This aside, which is the **“existent therapy”** according to the magazine?

And we shouldn’t worry either if:

“the cure is a far-away hope”

because with well-raised babies, we wouldn’t need to talk about illness.

Somebody who wanted to study the reason “why?” a newborn dies if he/she doesn’t eat, would be treated as **ignorant, stupid***, however, thousands of scientists –and with the support of prestigious magazines– **want to study the death causes of isolated and/or not stimulated babies**, that is, the causes of autism and/or sudden death.

* “Stupidity” in the **strict interpretation** of the term, not as an insult, that is, a “stupidity” is an **absurd/incorrect use of thought** in order **to repress** the cognitive feelings from which it derives, like common sense and intuition (see in this Website "[Què és la intel·ligència?](#)" (=“What is intelligence?”)).

Somebody who left his/her child to die by not feeding him/her, would be **judged to have committed homicide**, however, millions of parents **don’t feed their children’s desire to live**, that is, they **don’t cuddle nor stimulate them** (and nobody –not even the “pro-life” associations– denounce that).

APPENDIXES

A0) "There is one autistic child every 150 (when not long ago it used to be one every 2500)", "Extrapolating, in Spain there could be 300 000 autistic children" (El Periódico de Catalunya, 2008-04-02)

It is obvious that **the extrapolation is incorrectly done**. Statistics and extrapolations are a danger in inexperienced hands and/or if one hasn't got criterion. In this case the mistake is to calculate the 300 000 Spanish autistic people based on the premise that there is one autistic person every 150 ($45\,000\,000/150 = 300\,000$), however, this high probability is precisely very recent. It only affects the youngest segment of the population. Until only a few years ago, as this same piece of information mentions, there was only one autistic child every 2500. And given that this was only until recently, we have to apply it to the whole of the 45 000 000 Spanish population, the ones that are around 20 years old, older than 30, older than 40, older than 50, ...

Consequently, $45\,000\,000/2\,500 = 18\,000$, which means that there is approximately twenty thousand. The 1/150 rate can only be applied to the babies born lately, the ones that are today one or two years old. We need to apply a lower proportion to the ones that are three or four years old, and decrease it successively until 1/2500 to apply it to the ones who were born before "recently". Therefore, in a first approximation, the number of autistic people could be of around twenty thousand or a bit more.

It is important to clarify this **manipulated** piece of information because, like much of the information that lacks of rigour, it makes it harder to see the seriousness and magnitude of the real problem.

It is a real problem, because, even though we are only talking about 20 000 or 25 000, the problem is not the quantity, but the **increase** in the probability of autistic cases appearing in the last few years **in all civilized countries** (because in the rest of the countries there are no statistics). This means that in 30 or 50 years **it will** affect 300 000 people in Spain and millions of people in the civilized world, a **pandemic**.

We also need to add the appearance of many more **"para-autistic"** people, that is, other pathologies less serious (attention deficit syndrome, dyslexia, ...) and/or the increasing marginal and/or socially unadapted people.

Having clarified this, the fact that the increment in autism is a **very recent** phenomenon, how is it possible that in an allegedly scientific and interdisciplinary magazine like "Science" they blame genetics as the cause of this **sudden** and **widespread** pathology? The causes are environmental, socio-cultural and, at the very most, epigenetic.

A1) "Nature" adds to the genetic cause ("nature.com", 2009-04-29)

"A group of scientists have found the first clear evidence that a common genetic variation influences the development of autism" ("El Pais.com" 2009-04-29); "We calculate that the discovered variations could be behind up to 15% of the cases within the autistic disorder spectrum", "there are many genes that interact and have an influence in the development of autism" (Hakon HAKONARSON, Children's Hospital of Filadelfia (USA)).

And the other 85%? If it only affects 15%, it seems clear that it is not an strict genetic cause, but only a **fortuitous** coincidence. Even more because it's "a common genetic variation" and because "there are many genes that interact and have an influence", which clearly highlights the dependence/need of other activating factors, **epigenetic and, ultimately, environmental**.

A2) It is recommended to read the conference "Los derechos de los niños en BioCultura 2009" (= "Children's rights at BioCulture 2009") 2009 May 9th Saturday.

A3) Autism and diet. Autism and fever (2009-05-31).

I wrote and delivered the conference "[Los derechos de los niños en Biocultura 2009](#)" (=“Children’s rights at Bioculture 2009”) in January 2009. Later, having received the programme for BioCulture, I noticed there was another conference scheduled to take place a few hours before mine:

“Observational study of biological and dietetic treatments for Autism spectrum disorders” (Anna VALLÈS i RUNGE)

which interested me because of what I had already written on autism the previous year (what the reader has just read). As, in the end I was not able to be there in person at the time, I asked the author if she could send me the script of her conference. She kindly sent me the “*.ppt” of the conference and also the base work, homonymous, sponsored by the Generalitat de Catalunya (the Catalan regional government), Department of Social Action and Citizenship.

Because of this circumstance, whilst looking for more information on ways to improve autism, I also discovered another piece of work, which had been published a few weeks before:

“Autism, fever, epigenetics and the locus coeruleus” Mark MEHLER and Dominick PURPURA (of Albert Einstein College of Medicine of Yeshiva University), a “*Brain Research Reviews*” (2009 mars).

Both pieces of work confirm what I reiterate once again in the said conference (“[Los derechos de los niños en Biocultura 2009](#)” [=“Children’s rights at BioCulture 2009”]):

“knowledge is **intrinsically anti-democratic**: when something is discovered, it is only one (who discovers it) versus the rest of the human beings (the ones who still ignore it)”

I can add the striking aphorism by Arthur SCHOPENHAUER (1788-1860):

“Every truth requires three stages. First, it is ridiculed and distorted. Then, it is violently negated. Finally, it is accepted as something unquestionable and obvious”.

This text on autism, or the many demands of “[Els drets dels nens](#)” [=“Children’s rights”] (the full base document), results, **obviously** and by pure common sense, from the “[Teoria holística](#)” (=“Holistic Theory”) and the systems “[+M, +S, +N](#)” (like many other consequences that I explain in this document, which are waiting to be published on the website). However, this is irrelevant to any scientist, because they **don’t know** this theory, just like many other pieces of previous knowledge, **equally ignored** by the scientific community (see for instance, “[Què és la conscienciació?](#)” (=“What is consciousness?”) or “[La memòria de l’aigua](#)” (=“The memory of water”).

These two pieces of work, on diet and fever, are the **empirical verification** (the only valid resource for the scientific community, because of the **limitation** of its knowledge, which has just been mentioned) that the causes of autism **have got nothing to do with genetics** –like almost all researchers have **absurdly** defended until today, and/or magazines like “Science” or “Nature”– but that the causes are the ones mentioned above, more than a year ago: certain conditions during pregnancy, childbirth and the imprint/breastfeeding.

Can somebody imagine that the number of toes and fingers on our feet and hands, or the sex, or the colour of our eyes (just to mention some of the unequivocal genetic features) could change depending on the diet or the body temperature? If this was the case, they wouldn’t be genetic features, obviously.

Autism and diet

The effects on the autistic behaviour of a 6-month diet, based on the elimination of parasites (candida, ...), draining and control of the excess of morphopeptides or opiacidic peptides (caseomorphin of gluten and caseine, ...), control of intestinal enzymes, elimination of heavy metals (kelation) and sulphur components, intake of oligoelements and multivitamins, specific drugs, ... have been researched.

The study of the diet was done with 20 children, between 3 and 13 years old. Out of all of them, 7 gave up (35% of the sample), from which 3 (15% of the sample), because symptoms of the illness had worsened and the other 4 (20% of the sample), because of the impossibility of following the prescribed diet. Out of the rest, 10 (50% of the sample) improved perceptively (decreases of 20% in the "Autism Valuation scale") and 3 (15% of the sample) in an almost imperceptive way.

The importance of the study, however, is in some of the colateral information, because it implies a **transcendental** contribution. In the section 3.1.4 "Personal background" the following information is provided:

In 15 (**75%** of the sample) of the 20 cases (100% of the sample) there has been some of the following **occurrences during pregnancy and childbirth***:

- Cesarian 7
- Distocic childbirth 5
- Childbirth induction 4
- Foetal suffering 2
- Preterm of 7 months 1
- Neonatal infection 1

* There are 20 occurrences (7 +5 +4 +2 +1 +1=20) for the 15 cases, because there are some cases with multiple occurrences.

In 7 (**35%** of the sample) out of the 20 cases (100% of the sample) there was some kind of **postvaccination reaction**. The vaccinations involved were:

- Triple viral 4 (20% of the sample)
- DTP Polio (diphtheria, tetanus, whooping cough, poliomyelitis) 2 (10% of the sample)
- Prevenar 1 (5% of the sample)

A percentage of 75% of the occurrences during childbirth (half of them cesarians!!) is an **enormous** occurrence rate (**three out of every four!!**), much higher than the average number of occurrences of this type in the total number of births (approximately only a third of the total). This data confirms unequivocally that **the alterations during childbirth are one of the main causes of autism**.

We have to add to this data the fact that occurrences like these come with other associated circumstances, which haven't been reported in this work, but which would be easily confirmed. For instance, that in cesarians there is a low proportion of breastfeeding associated.

That is, the problem is not only the childbirth conditions, but other conditions during breastfeeding that **add to these occurrences**. Therefore, in the case of having all the information relating to a child's "personal background", we can expect up to **90% of occurrences related to the childbirth and the "imprint"** (breastfeeding or not, pregnancy&childbirth link, sensitive stimulation ["skin against skin"], immunological maturity, ...). I would like to clarify that I am not talking about the need of breastfeeding during one or more weeks, but for longer than 6 months. And even then, avoiding situations of disconnection like the case mentioned by A. MORALES in "**Los derechos de los niños en BioCultura2009**" (= "Children's rights at BioCulture2009"). **Everything adds up**.

A 35% of postvaccination reactions is a very high incidence rate (**one out of every three!!**), **much higher** than the average incidence of the total group of vaccinated children. An average that, on the other hand, is difficult to evaluate because of ignorance and even concealment of the postvaccination effects by the pharmaceutical industry out of economic interests. **The data confirms unequivocally that vaccination is one of the causes of autism**, although not the main one. This is in contradiction with thousands of allegedly scientific articles, that try to prove that there is no link between vaccination and autism. Something similar to what happened, not long ago, with the many intents of proving that the tobacco is innocuous.

It is important to take into account that vaccination is **an alteration of the imprint**, more specifically **an alteration of the natural maturity process of the immune system**.

Therefore, all these cases can be included into the first ones, inferring –only from this study– **nearly 100%** of the causes of autism.

In relation to the beneficial effects of the diet, proved by this study, we need to take into account a factor that may have been overlooked. **The diet is not only a diet**, it also implies a required and **intense interaction between child and parents**. If autism is caused, mainly, by **deficiencies in the psychological interaction** with the newborn (whether it is during the pregnancy, childbirth, breastfeeding or the imprint in general) any other consequent increase in the specific relationship between the newborn and the parents can add to the beneficial effects of the diet (or the fever, or whatever it is specifically). It is important to reiterate another "demand" from "**Els drets dels nens**" ("Children's rights"):

"I demand to be loved, but **not** with mystical love (abstract/spiritual love), **nor** economic values (anything, no matter how expensive), **nor** virtualities. My perception of love is restricted to **food, contact, attention and dedication**. Dedication means **time** to be touched (because it is absolutely vital), **time** to be spoken to (because I listen, even though I don't understand), **time** to be looked at (because I know I'm looked at and I need it)".

Or even more strikingly ("**Los derechos de los niños en BioCultura2009**" ["Children's rights at BioCulture2009]):

"a newborn doesn't need to be loved, **it is enough to have a maternal (and paternal) instinct**"

The reader can say that 20 cases is a very poor statistic for so many conclusions. In my case it is more than enough because the causes of autism were already obvious, based on the "**Teoria holística**" ("Holistic theory"), without even having this information.

As mentioned at the beginning of this document, we insist: why is this study not done, just like the child from "**Els drets dels nens**" ("Children's rights") demanded?

In addition to investing so much money and so many campaigns in generative diseases –which are mainly a direct consequence of the bad hygienic habits of the victims (sedentarism, drugs, bad diet, "stress", ...)– I demand that **long term epidemiological studies** are carried out on the medication during childbirth, cesarians, the lack of breastfeeding and the indiscriminate vaccination campaigns. Whether the effects are somatic (in mother and child, like the ones already mentioned), or **behavioural**, that is, **disaffection** from mothers and **sudden death**, parental **phobia**, child and adolescent **violence**, **autism** and attention deficit syndrome,...

Therefore, for many reasons:

0) It is very hard for the parents to know that it all relies on medical iatrogenies and/or ignorance of how to face pregnancy, childbirth and breastfeeding. In many cases, it is also caused by the inhibition of the maternal/paternal role. And even worse, it is very hard for parents to find out that, as we will see, autism is not reversible, only partially improvable. It is of very little use to the parents of autistic children to know of causes that cannot be corrected.

1) And future parents never think they can be victims of autism, of this lottery that already affects 1 out of 150 newborns, when only a few years ago:

- **before** the indiscriminate **medication** during childbirth, the spectacular increase of cesarians, and the increase of **preterm** newborns;
- **before** the lack of breastfeeding, and
- **before** the indiscriminate vaccination of newborns,

this terrible lottery **only** used to affect one out of 2 500.

2) We need to add that the medical body is traditionally a group which is not given to self-criticism and corrections. Cases of honest and courageous professionals who have been able to change –Michel ODENT is the best known example– are still a silenced and rejected minority.

3) And finally, I would like to add the already mentioned economic interests of the pharmaceutical companies, which are the ones that ultimately finance and control most of the medical research.

I reiterate what I said in "[Los derechos de los niños en BioCultura2009](#)" [= "Children's rights at BioCultura2009"]:

The time of dedication we want to avoid spending with our newborn, either preterm or born "on term", **will be multiplied by a thousand** in doctors' expenses, professors, psychologists, in the following years. That is what Wilhelm REICH said.

If we "knew what we were looking for and we understood what we found", what would we have to learn from this study? That if there are digestive and immunological deficiencies that need to be corrected, we have to go further and see what is **the cause behind them**. With cesarians, the highest rate of bottle feeding is associated (or, in other words, the lowest rate of breastfeeding). Even when breastfeeding takes place, the colostrum is most damaged, because even if it arrives, it arrives late and incomplete. The colostrum, far from the traditional belief that is the first watery milk, is an immunising "bomb" for the aseptic intestines of the newborn. In "[Los derechos de los niños en BioCultura2009](#)" (= "Children's rights at BioCultura 2009") the concept of "optimal period" is repeatedly mentioned. This concept derives from the HUBEL and WIESEL Nobel Awards and it is mentioned again in this case when talking about the period of the imprint. I add another clue for the reader, also from "[Els drets dels nens](#)" (= "Children's rights"):

I demand that the childbirth professionals don't confuse the good hygienic conditions needed at childbirth –to **avoid external contamination**, what used to cause the **puerperal fevers**, cause discovered by Ignazius SEMMELWEIS, even though his own colleagues made **his life impossible** until they didn't have any other choice than to accept it– with the **immunological and bacterial equilibriums** of the mother and/or mine. More specifically, I demand that my intestines, which are **aseptic** and consequently **useless and defenseless**, are conveniently "infected" with what will be my bacterial flora, particularly through the colostrum, but also through the faeces of the mother at the moment of birth, through her sweat during breastfeeding, ..., everything that will stop me from starting badly in life, with diarrheas, indigestions, stomach aches, ...

and I should have added at the end:

..., and, long term, it will avoid incrementing the risk of autism...

Autism and fever

It has been observed that fever reduces slightly the autistic symptoms. Obviously, the solution is to cause fever in people with autism...

The study of the fever concludes that:

"... a **radically** new theory on autism, suggests that the brain in people with this illness is **structurally normal**, although **deregulated**, which means that the symptoms of this disorder could be reversible.

... autism is an evolutionary disorder* caused by the **damage in the regulation** of the 'locus coeruleus', a packet of neurones at the root of the brain which **processes the sensory signals of all areas of the body**".

* Not of the genetic evolution, but of the evolution associated in child development (N.T.)

"the scientific evidence points directly towards the system of the ' locus coeruleus-noradrenérgicò (LC-NA) as the one involved in autism. LC-NA is the **only brain system involved** both in the production of fever and the control of behaviours"

"... because of the interrelation of the environmental, genetic and epigenetic factors... **stress plays a very important role in the deregulation** of the LC-NA system, **particularly in the final stages of prenatal development when the brain of the fetus is particularly vulnerable.**"

If we "knew what we were looking for and we understood what we found", what would we have to learn from this study? That the "secret" of autism relies basically on a sensory deficiency (and obviously, not genetic!!! but functional). Not in the effects that appear in the 'locus coeruleus' but **in the functional cause of this deficiency**.

Let's go back to the "optimal periods" of HUBEL and WIESEL. The case of the neural interconnections was one of the first cases in verifying the above mentioned. If these cannot develop in the last weeks of pregnancy (like in the case of **preterm** newborns) and during the first months of the newborn, they will generate with difficulty at the age of one year old, and even less at two years old, and no new interconnections could be created at the age of ten or twenty years old.

The newborn has to generate more than 10 000 interconnections among his/her initially "isolated" neurons. That is, every neuron has to establish up to 10 000 connections with other neurons. The neural interconnections are "functional", in other words, they are generated upon demand of the motor and sensory exercise. Even more than in the case of a muscle, that gets developed when exercised, but which becomes atrophied when not exercised. This is explained in "**Què és la intel·ligència?**" (= "What is intelligence?"):

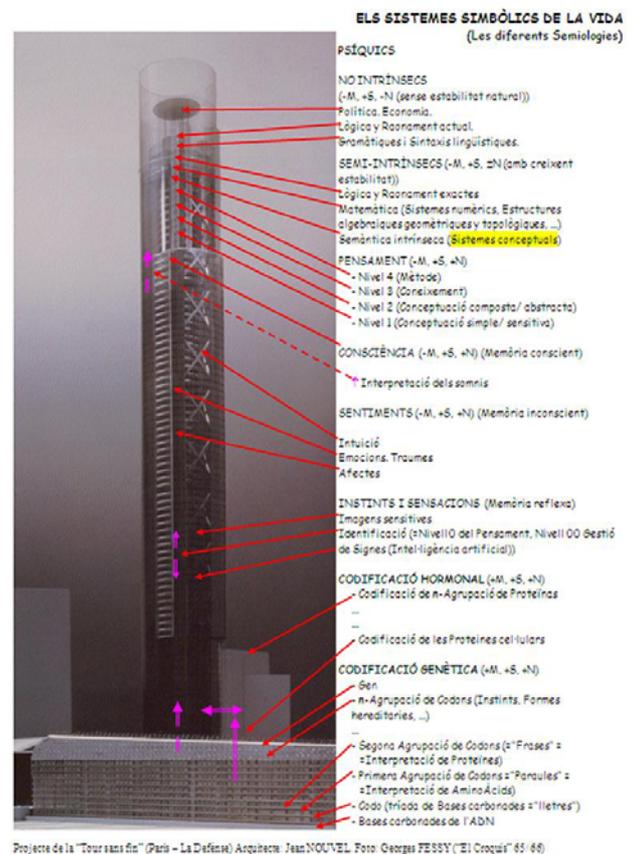
¿What use is to one baby to be born with 200 000 million neurons, compared to a second baby, born with 100 000 neurons, when, due to a lack of adequate contact (for instance, because of a lack of maternal breastfeeding), being confined to an awesome newborn pram (see [.214] at "**Què és la conscienciació**" "What is consciousness?"), or being overprotected, etc., etc., etc., at the age of two the first baby has **ten times** fewer neural connections than the second one?

Similarly to the case of the interconnections, from this study we have to deduct that –because we are dealing unequivocally with the **sensory centre** of the body– the deficiencies in the functioning of the 'locus coeruleus' are due to a functional deficit during its development period, its "optimal period", which is the one of the imprint. Obviously, the deficiencies -the effects- are biological, like in any atrophy, however, the cause **is not biological but psychological: a lack of psychological/ sensory exercise**. In the same way that in a muscle, the cause of atrophy is environmental: a lack of movement.

The study clearly confirms the **environmental factors**, represented by "stress".

In the epigenetic factors lies the explanation of the vaccination effects on autism. The interaction between a system **(+M, +S, +N)**, like the immunological, another one **(+M, +S, -N)**, like the vaccinations, and another one **(-M, +S, +N)**, like autism, (because autism is a behaviour and therefore, psychological) could be surprising considering the deep differences among these types of systems (see "**Sistemes.pdf**" [= "Systems"], and also "**Què és la conscienciació?**" [= "What is consciousness?"]), in section [.12] "Muscular management: the rupture with traditional material science". The "Global model of the psyche", which I established from 1995, explains this. Briefly, it corresponds to the methodological transfer of the horizontal lilac arrow (shown in the diagram at right).

This simplifying scheme of the "Global Model of the psyche" can be seen in more detail in different documents, like the one on **consciousness**, for instance, which I have just mentioned.



This methodological transfer is **a new validation** of the "Global model of the psyche". A new one, because previously, scientists Richard AXEL and Linda BUCK had studied the beginning of the process that generates smell signals (for which they were awarded with the 2004 Nobel

Prize of Medicine), process which corresponds to the same **lilac** arrow, as above. These, and many other processes, imply an **information exchange among systems of different nature** (like the IT intercommunicators, a screen, a keyboard, ..., the public transport intermodalities: airplane-train, train-port, ...), which in this case is an exchange between the systems **(+M, +S +N)** and **(-M, +S, +N)**.

In addition to the environmental and epigenetic factors, genetic factors are still mentioned in the study. I interpret this as a "political" maneuver by the authors of the study, not to oppose directly the current dogma of the genetic causes.

Preterm newborns

There are some other equally recent studies that prove a **much higher risk** of autism in preterm newborns (Catherine LIMPEROPOULOS, Children's Hospital Boston; *Pediatrics*, 2008 April), corroborated a year later by Karl KUBAN (Boston University School of Medicine; *Journal of Pediatrics*, 2009 January). These are tests that confirm the same thing: the terrible effects of the **sensory deficiencies** associated to the **deficit of the pregnancy link** (see [.2] "The link: what is it and why is it so important?" in "**Los derechos de los niños en BioCultura2009**" (= "Children's rights at BioCulture 2009"). Deficiencies that lead to disfunctions of the 'locus coeruleus'.

Shortly after publishing this website www.sistemaconceptual.org another article appeared: "Long term outcome for very preterm infants" in "The Lancet" Volume 371, Number 9615, 8 March 2008, pages 787 to 788. Because of this, I immediately wrote a brief document "**TheLancet**" available from the "FAQ's" of the website, where the following is stated:

"... behind the apparent success of the low mortality among preterm newborns, something unthinkable a few years ago, we are starting to observe the **high price** that these newborns have to pay. **A price that affects the highest level of the cognitive and intellectual development.**"

and where the reader will be able to understand a little –because of his/her predictable surprise– about the reason why the **solution** to the "**disconcerting**" problem of autism appears in a website on knowledge like this one. In summary, I insist, because the correct approach is **not** material (genetic, physiological, ... **(+M, +S, +N)**), but symbolic/psychological **(-M, +S, +N)**.

Autism and diet/ fever

If the study on the diet made clear that the cause of autism lies within pregnancy, childbirth and breastfeeding/imprint conditions, the study on fever adds specific information to the biological mechanisms involved.

With regards to the studies themselves and considered as a group, it is clear that we should progress further along these lines of research to know exactly what it is specifically that causes the improvement. To know specifically what is behind fever and diet. This would allow us to find a therapy with results:

- more efficient (improvement up to 30% in the "Scale of Valuation of Autism")
- less tiring for the parents, and
- with fewer contraindications, which would allow to increase the 50% of the treatable cases, to almost the totality.

Obviously, in children affected by autism, we have to do everything at hand to improve their condition. However, from my point of view, the most important thing is **prevention**. We have to cut down drastically the increase of autism in the last few years. This means a **re-approach of the present "culture"** (we should strictly call it "ignorance") of the medicalization during pregnancy and childbirth, of preterm newborns and/or of newborns with a low weight, bottle feeding, indiscriminate vaccinations and, in general, the **lack of attention and stimulation of the newborn**. Medical research has acquired enough knowledge and medical technology to be able to solve the few cases that are strictly at risk and with minimal secondary effects.

What today are considered –completely mistakenly– normal conditions for the newborn (cessarian, medicalized childbirth or childbirth with an intervention, preterm newborns, newborns with low weight [twins and even triplets, which have recently increased enormously due to the in vitro fertilization], bottle feeding, ...) have to be considered **situations of high risk for autism**.

In consequence, it would be necessary **to train pediatricians adequately** in order to detect this illness, because the symptoms **don't appear after the age of one or more**. They actually appear much earlier, **but they go unnoticed due to the ignorance of the causes of autism**.

Like I mention in the brief document "**WREICH**":

"What is serious, seventy years after [the contributions of Wilhelm REICH], is that many health professionals **still ignore this transcendental cause-effect relationship**. It is easy to see that still today many people do not understand what was obvious to REICH 70 years ago. For instance, I still haven't met a pediatrician, who in a first visit, is interested in knowing the details of the gestational history, of the childbirth and the breastfeeding of my children. Why should he/she do it? Because this history can condition the interpretation of the symptoms and, particularly, the treatment of the pathology/dysfunction that may have derived."

A newborn to whom his/her mother, father, or babysitter, gives a **bottle** with an extended hand, twisted to see something else or to talk to somebody else; a newborn permanently forced to be immobilised in a bulky pram, far away from the contact and the look of his/her parents, etc, etc, etc,... **all these are high-risk newborns** in which autism can present itself with a probability of one in 50, and not only one in 150. And this probability would increase to one in 10 if we take into account the "personal history". That is, it is extremely important to recognise and to detect as soon as possible all the cases of autism.

This is the way to detect autism, or even better, to avoid it, and not the "**biosignal**" suggested by the "**Science**" magazine.

And with regards to what has been mentioned on **sudden death**, the risk group **coincides** with the one of autism. It also coincides with the risk group of more benign pathologies: **dyslexia, attention deficit syndrome**, ... or the already mentioned **cognitive and intellectual delays**, because everything is due to **causes with similar roots**.

On the other hand, as soon as any level of autism is detected, I am convinced that the best and most valid therapy in most cases would be something like a brief training for the mother and the father in massage technique and that, daily, they would take it in turns to give their child two or more massage sessions of an hour each. If it is detected when the newborn is only a few months old –as soon as the first signs appear–, the book by Françoise BARBIRA FREEDMAN ("Yoga for babies") is very suitable with regards to the type of massage. This would be the "**existing therapy**", but I insist that the "**best existing therapy**" would be **to treat the foetus and the newborn in the right manner**.

"El País" (2009-06-02)

As the highest expression of the **dramatic ignorance** among the medical profession on the subject of upbringing of the newborn, here is a piece of news published in "El País" (2009-06-02) –a new "discovery of the garlic soup"– with the following title:

"In the skin of the father: the 'kangaroo method' reassures and stimulates the babies born by cessarean"

With the traditional habit of not contrasting the information, the journalist dates and names the place of the discovery of one of the "garlic soups" (in the article up to 4 "garlic soups" are discovered as if it was recent and vanguard knowledge):

"The skin against skin or method of the *kangaroo mother* consists in carrying the newborn against the chest in order to establish continuous contact. The system, **devised in 1979 in Colombia**, and universally

spread in the decade of the nineties, has expanded across the world and its advantages for the newborn have been **scientifically** proven.”

“There are **studies that prove** that, as a consequence of being skin against skin with the father, the newborn manages better their temperature and, despite not being able to breastfeed, it allows them to better reach for the mother’s breast later”

“If the newborn finds himself/herself in a warmer environment than a cot, it helps him/her to adapt. Breastfeeding is **a reflex**”

“Talk to him/her with your voice [the one of the father], which he/she recognizes” (see also at “**EI kerigma del pensament**” [=“The kerigma of thought”]: [.211] “The motherly language, a semiology previous to language”, section where it is briefly explained the mistaken understanding of the wrongly called “motherly language”).

For reasons of discretion, I have deliberately omitted the names of all the people who make the comments.

Science and medical research have reached such **stupidity*** levels, that they first deny the most undeniable reality (such as the evolution, the instincts, the imprint, ...) in order to establish medical and pharmacological practices that clearly go **against nature** (“clearly” only for the people who haven’t lost their common sense yet). Finally, (because in the end there is no other way but to accept that “the remedy is worst than the illness”) empirical research is needed to return –slowly and unwillingly– to what it should always have been obvious and common-sensical. It is what was clearly illustrated by the experts committee of the European Union (in their report “SPC2003320”), in some paragraphs that I quote in my document “**Los derechos de los niños en BioCultura2009**” (=“Children’s rights at BioCulture 2009”), at [.0] “Motivation”) and also here below:

“The document doesn’t talk about the advantages of maternal breastfeeding based on scientific research because of the following three reasons:

- In the first place, because maternal breastfeeding is the **natural and characteristic way of the human species** to feed newborns and babies, that is why [it is a reality that] **it is not necessary to prove it with scientific tests**.
- Secondly, because “exclusive maternal breastfeeding is the model of reference to evaluate alternative feeding methods with regards to growth, health, development and other short and long term effects”. Therefore, the people suggesting these alternatives should be **the ones to provide proof of the superiority or equality** of these alternative ways of infant feeding.
- Thirdly, because the advantages of breastfeeding are **widely known by the public** and can be consulted in many publications sponsored by professionals as well as many political reports.”

* “Stupidity” in the **strict interpretation** of the term, not as an insult, that is, a “stupidity” is an **absurd/incorrect use of** thought in order **to repress** the cognitive feelings from which it derives, like common sense and intuition (see in this Website “**Què és la intel·ligència?**” (=“What is intelligence?”).

Why is it called “kangaroo method”? Because it is what marsupials or Metatheria have been doing for 146 millions of years, even before placental mammals –like human beings and most of the mammals we know–, who appeared afterwards in the evolution chain. Placental mammals have extended the duration of pregnancy in “kangaroos”, as well as maintaining breastfeeding and the intimate contact between the mother and the newborn, which had also been introduced by the “kangaroos”. That is, **we are more than kangaroos**.

Consequently, the “kangaroo method”, that is, the “skin against skin”, is nothing else but the “woman **method**”, or, if you like, the “**ancestral/ traditional mother method**”, but it is only in the last 50 years that cultural fads and a wrongly understood science (the medical science in particular) have broken with the evolution process of many millions of years.

To carry out a “scientific” study in order to prove the suitability of the “skin against skin” is such a stupid act as it would be to carry out a study today to prove that human beings are mammals.

However, to say that “breastfeeding is a reflex”, is this news? What would we say about a journalist reporting that it has been discovered that 2+2 equals 4? Furthermore, in this case, we have to clarify that “breastfeeding” is not a reflex. “Breastfeeding” is an **instinct** that is exercised through the reflex of **sucking**.

ADDENDUM 2010-06-08

Some responsible people from a website on pregnancy and birth (<http://www.bebesymas.com>) kindly offered me the possibility of having an interview with Emilio SANTOS, which I enclose here below after my comments.

I extract the following paragraph:

“There are particularly strong indications that **there is a link between the oxytocin pandemic and the autism pandemic**. There are studies that reveal this relationship and that consider the possibility that the oxytocin administered to the mother **inhibits** the production of oxytocin by the newborn, causing the brain to develop fewer oxytocin receptors in the long term.”

Having contacted the interviewee in order to ask him for more specific information, the information he gave me was much more **horrifying**. There is unequivocal documentation on the relationship between autism and the medicalization of birth **since 1981** (Nikolaas TINBERGEN, Nobel Prize in 1973 for his work on etiology), and more specifically the relationship between autism and drugs (oxytocin, sedatives, ...) **since 1991** (Ryoko HATTORI, analyzing the **aberrant** “Kitasato University Method”). And, even in the adults that managed to be untouched by autism, they have found clear correlations with their **tendency to drug addiction** *.

* The above proves once again the **importance of the exchange of information** at birth and also the **importance of the ‘imprint’** (another informational phenomenon): the presence of synthetic drugs at birth and during the first moments of extrauterin life, conditions his/her –drug addictive– behaviour in adulthood, many years afterwards.

The important thing is that this **corroborates everything that has been previously exposed**. That is, the problem **doesn’t finish** in the decrease of “oxytocin receptors in the brain”, this **is only the beginning of the problem**. This functional decrease creates a real problem: **the limitation of the circulation of psychic information (=antistimulation) that is the strict cause of autism**. It’s like Multiple sclerosis: the physiological problem of the support (the lack of myelin in the nerves) stops the psychomotor information from circulating, which is the strict problem (“**the ability of the nerves to conduct electric impulses from and to the brain is interrupted and this causes the appearance of symptoms**”). What are these electric impulses? They are nothing else but **information** (psychomotor information in this case, see “¿**Què és la conscienciació?**” (=What is consciousness?), although we still don’t know how to read the language supporting this information, but this is another problem, because the **information transmission is unquestionable**. The analogy with autism is, therefore, clarifying enough.

The reader shouldn’t doubt that one day all these correlations will be found, **always linked with information deficit**, which ridicules the **absurd** genetic hypothesis on autism, despite them being defended by some ‘prestigious’ magazines. These correlations will always point at **iatrogenic causes**, at the **arrogance** and **ignorance** of altering indiscriminately the natural processes, or even worse, so successful and extraordinary as birth. “There is no worse deaf (or blind) than the one who doesn’t want to hear (or see)”.

In relation to all this, I also suggest reading the impressive case of a premature 23 week old newborn, which I have recently compiled in the document “**El ‘miracle’ d’un nadó molt-prematur de 23 setmanes: ¿matèria o informació?**” (=The ‘miracle’ of a very premature 23-week old newborn: matter or information?) <http://www.sistemaconceptual.org/mm/file/Miracle23setmanes.pdf>, which will soon be also available in English. In this document there are more reflexions on autism (in the sections “The other side of the coin. Pau’s colleagues a year after” and “The articles of scientific magazines”).

[Sugerencias](#)

"La epidemia de oxitocina podría estar relacionada con la epidemia de autismo". Entrevista al doctor Emilio Santos (I)

- [Resumen de la semana del 11 al 17 de febrero en Peques y más](#)
- [¿Custodia compartida?](#)
- [Portada](#)

[3 comentarios](#)



[Mireia Long](#) 17 de febrero de 2010



Hoy publicamos la primera parte de una extensa entrevista que hemos realizado al doctor Emilio Santos, que [ya anunciamos previamente](#). Aunque hemos tardado más de lo deseado en finalizarla, estoy segura que el resultado, por lo exhaustivo y explicativo, va a hacer que la espera haya merecido la pena.

Al **doctor Emilio Santos** lo conozco desde hace años, pues nos hemos encontrado por diversas circunstancias en reuniones sobre temas de embarazo y parto. Lleva varios años enfocando su trabajo práctico y también teórico hacia el parto respetado y sin medicalización no necesaria. Actualmente dirige el [Centro Urdimbre en Madrid](#) y atiende partos en casa y en el Hospital Acuario. Además de ginecólogo es **psiquiatra y físico.**

Siempre me ha parecido un hombre de gran inteligencia y **sensibilidad, interesado en la parte emocional tan importante del embarazo y el parto**, pero también un **científico riguroso** que toma sus decisiones basándose en datos contrastables. La entrevista que he realizado, de la que hoy publicamos la primera parte, me ha reforzado esta impresión previa.

¿Qué te llevo a la Obstetricia después de estudiar Física y luego Psiquiatría?

Yo siempre tuve en mente la obstetricia pues he estado convencido desde hace muchos años de la idea de que el nacimiento de los seres humanos es preciso que sea cercano a como la Naturaleza ha previsto. Este convencimiento siempre estuvo en la base de mi motivación de hacer Medicina, y lo que aprendí esos años reforzaron mi idea inicial.

Siempre me apasionó la curiosidad sobre el cuerpo humano, pero comencé mi formación estudiando Física, pues estaba convencido de que se acude en exceso al médico y a la salud, que anula la confianza del individuo en su cuerpo y además interfiere en muchos procesos de curación; pensaba y pienso que la medicina está bien en situaciones concretas, pero no en la mayoría de las situaciones en que se recurre a ella; no quería ser una pieza más de este sistema. La elección de ciencias físicas tuvo que ver con mi enorme curiosidad científica. Quería saber sobre el origen de las cosas, lo grande y lo pequeño.

¿Cuáles son los riesgos de la inducción?

El primer riesgo de la inducción es obvio, **cuando se induce el parto deja de ser un proceso natural** en el que el cuerpo actúa por sus propios mecanismos y **su sabiduría**; cuando se induce se interviene en el proceso natural y el parto se medicaliza.

En todas las inducciones es precisa la cercanía de un quirófano y una vigilancia especial. La parturienta **se convierte en paciente**.

¿Cuándo se debe inducir?

La investigación científica será la que en los próximos años va a mostrarnos con más claridad cuando se debe inducir y cuando no. Hoy, los científicos, pensamos que hay casos en los que sí es necesaria, pero **son muy claros y son pocos**.

Por ejemplo, una causa clara de inducción es una bebé que va cogiendo poco peso dentro del útero y que esta circunstancia se debe a una insuficiencia placentaria. Debo aclarar que inducir simplemente por un crecimiento intrauterino escaso no es razón para inducir si no se confirma previamente la insuficiencia placentaria mediante un ecodoppler. Pues cuando el bebé es más pequeño de lo esperado en las mediciones suele deberse a dos motivos, o un error en las fechas de embarazo o una medición ecográfica errónea, por lo que la confirmación de la insuficiencia placentaria es indispensable para confirmar que la inducción es precisa.

La causa más frecuente es **la inducción postérmino**, que se debe realizar a partir de las 41 semanas y media o las 42 semanas. La evidencia hace señalar que es razonable inducir en estos casos, aunque si la madre, en buenas condiciones, decide esperar a que el parto se desencadene naturalmente es también posible, ofreciendo toda la información segura y veraz a la embarazada.

La segunda causa más habitual es la **inducción por rotura de bolsa** si no se desencadena el parto en un plazo breve, ya que existe un riesgo de infección. Pero hay que tener presente que en estos casos la vía de infección más posible son las exploraciones vaginales. Yo, por tanto, en caso de rotura de bolsa, no realizo exploraciones vaginales para evitar las infecciones y **espero hasta cuatro días a que el parto comience por sí mismo antes de acudir a la inducción**. Este protocolo que yo aplico lo he copiado del que se usa en el [King's College Hospital de Londres](#).

¿Qué porcentaje de inducciones programaste el año pasado en los partos que atendiste?

Un 7 por ciento.

¿Hay un exceso de inducciones en España?

El mayor porcentaje de inducciones evitables surgen en la medicina privada por una **conveniencia de tiempo del profesional o de la madre**.

¿Puede una mujer estar segura de que una inducción es necesaria?

Las mujeres deben saber que las inducciones deben ser solamente realizadas en caso de necesidad médica real y que esos casos, realmente, son pocos. Una mujer debe estar informada y recibir del profesional que la atiende toda la información cierta sobre los riesgos de esperar o de la necesidad de inducir, para que ella pueda tomar su decisión.

Como he mencionado antes es importante que tenga en cuenta lo que he dicho anteriormente de la mayor frecuencia de las inducciones por conveniencia no médica en la medicina privada.

¿Qué peligros e inconvenientes tiene la oxitocina sintética? ¿En que casos puede ser necesaria?

El uso de la oxitocina sintética en los partos se ha institucionalizado de manera rutinaria en la segunda mitad del siglo XX. Se adoptó esta medida en la práctica obstétrica en la creencia de que la aceleración artificial del parto disminuiría el tiempo en el que la madre y el hijo estarían en un trance arriesgado.

Sin embargo, hoy, la evidencia científica ha mostrado muchos **datos que contradicen esta creencia**.

Primero, la oxitocina rutinaria no hace que el parto sea más corto, pues un parto en postura libre y natural tiende normalmente a hacerse **más breve**.

Segundo, la propia oxitocina sintética en sí causa algunas complicaciones en los partos y eso supone un riesgo que hace que deba usarse solamente cuando sea necesaria. Como decía, **la oxitocina sintética se asocia a mayores probabilidades de sufrimiento fetal, desgarros en casos de cesáreas anteriores o desprendimientos de placenta**.

Y tercero y más importante, a nivel científico empiezan a recopilarse indicios que señalan **que la oxitocina rutinaria podría estar relacionada con alteraciones de personalidad en el niño o en el adulto**. En concreto hay fuertes indicios de **que hay una relación entre la epidemia de oxitocina y la epidemia de autismo**. Existen estudios que han revelado esta relación y se considera que es posible que la oxitocina administrada a la madre **inhiba la producción de oxitocina del bebé, haciendo que a la larga su cerebro desarrolle menos receptores oxitócicos en su cerebro**.

Los peligros del uso de la oxitocina sintética deberían tenerse en cuenta en todos los casos y valorar uno por uno si el riesgo que se asume puede ser compensado por los beneficios de su uso, y realizar las inducciones cuando realmente son necesarias.

Carles UDINA i COBO

Sant Josep, 67; 08340 Vilassar de Mar (Maresme; Barcelona; Catalunya)

☎ 34+937 595 035 (+Fax); 34+660 298 994 (mòbil);

Correu electrònic: carles.udina@cat21.cat Webs: www.sistemaconceptual.org www.cat21.cat

2009-11-03

Alan I. LESHNER, PhD.

Science Executive Publisher. Chief executive officer of American Association for the Advancement of Science.
1200 New York Avenue, NW; Washington, DC 20005; USA

In July 2004, the "Science" magazine published a consultation on the 25 most important questions still to be resolved by science –among these, there was the question of knowing how the processes of consciousness work– as well as 125 other questions, one of which was the question about the causes of autism.

Knowing the above through an interview that you gave –appeared in the Barcelona newspaper "La Vanguardia" on 2006-03-21– I sent you a registered letter in **May 2006** informing you that I was able **to explain further and clearly how the processes of consciousness work**, together with some pages clarifying that the perspective that allows to understand them is not biological, but symbolic, which is the reason why biological research has failed so far. I was asking for your collaboration to divulge this priceless knowledge.

In order to divulge this and many other questions on knowledge and related subjects still ignored to this date, in March 2008 the following website was launched:

www.sistemaconceptual.org

Recently, the website has been translated from Catalan, my mother tongue, into English, but the fifty-something enclosed documents with the "in extenso" contents (in "pdf" format, downloadable for free) are still to be translated.

One of these documents [Què és la conscienciació?](#) (=What is consciousness?) includes a detailed description –72 pages in Catalan– of *¿how the processes of consciousness work?, as ¿well as the faculty of man to do mathematics?*.

Due to a series of fortuitous coincidences, this past year I have studied the subject of autism, which has allowed me to find out clearly the nature of its causes, unknown to this date, because people have looked for them in the wrong place, in heredity.

Knowing how the processes of consciousness work can be a question highly valued by scientists, but it was a hundred years ago when FREUD –the first one to raise the question– proved the difficulty of solving problems/pathologies linked to this faculty. However, the knowledge of these processes that I have already described doesn't allow to resolve the several associated pathologies, so widely spread through humans (neurosis, schizophrenia, violence, ...).

On the contrary, in the case of autism, given its causes –which are **iatrogenic and related to unhealthy new cultural habits**– if they were taken into account, **it would be possible to drastically decrease this terrible and "baffling" new pandemic**. For this reason, it has been translated into English and effort is put into divulging it, starting from the institutions and professionals who deal with the subject.

Aware that the magazine has been interested enough to promote –**mistakenly**– the research on this subject from a genetical perspective, **I appeal to your sense of responsibility** to help me divulge this knowledge about the real causes of autism, independently from these precedents and/or from editorial formalisms, formalisms which always have to be at the service of the purposes and not the other way round: "Love truth more than yourself", as you yourself expressed to the above-mentioned diary "La Vanguardia".

In the above-mentioned website I talk about **some of the other 25 and of the 125 most important questions collated by the magazine "Science"**.

Best regards,

Carles Udina i Cobo

Carles UDINA i COBO

Sant Josep, 67; 08340 Vilassar de Mar (Maresme; Barcelona; Catalunya)

☎ 34+937 595 035 (+Fax); 34+660 298 994 (mòbil);

Correu electrònic: carles.udina@cat21.cat Webs: www.sistemaconceptual.org www.cat21.cat

2009-11-03

Philip CAMPBELL, PhD.

Editor-in-Chief of Nature publications

The Macmillan Building, 4 Crinan St. London N1 9XW, UK. United Kingdom (Reino Unido/ Inglaterra)

In **May 2006** I wrote a letter to you prompted by some comments of yours on the "Memory of water" in the video "TOP SECRET: Wasser. Auf der Spur eines unerklärlichen Phänomens", because of its close relationship with **a global explanation of phenomenology, an explanation which includes the perspective that allows to unify the "4 forces" of physics.**

It also coincided with a letter that I sent to "Science" –of which I sent you a copy–, magazine interested in **explaining how the consciousness processes work**, which, according to a survey that they conducted, was one of the most important 25 questions **still** to be explained by science.

In order to divulge these and other questions still ignored today, in March 2008 the following website on knowledge and related subjects was launched:

www.sistemaconceptual.org

Recently, it has been translated from my mother tongue, Catalan, into English, but not the fifty documents attached, with "in extenso" contents (in "pdf" format, downloadable for free).

Apart from one of them which explains in detail *how the processes of consciousness work?*, as well as *how man has the faculty to do maths?* ([Què és la conscienciació?](#) [=What is consciousness?]), another document, also in Catalan: [La memòria de l'aigua](#) [=The memory of water], explains the direction that research should aim at in order to explain this phenomenon from the current science, as well as its importance, because it is the key to:

- **understand the appearance of life** (a question that is assumed, but which remains **totally unexplained**), and
- **explain globally all the phenomenology**, including the unification of the 4 forces of physics.

At the same time, this document is the conclusion of the "Holistic Theory", an extended document which I am still revising, in order to improve its understanding.

However, what triggered my letter was when I recently saw that "Nature" had published some articles on the genetic causes of autism, which is **a mistaken perspective that prevents the resolution of this serious problem, a problem that is worryingly expanding**. I am enclosing a document explaining in detail where **we need to look for the causes and where not to**.

Knowing how the processes of consciousness work can be a question highly valued by scientists, but it was a hundred years ago when FREUD –the first one to raise the question– proved the difficulty of solving problems/pathologies linked to this faculty. However, the knowledge of these processes that I have already described doesn't allow to resolve the several associated pathologies, so widely spread among humans (neurosis, schizophrenia, violence, ...).

Knowing how life could have appeared or how the four forces could be unified (and other related questions), is not going to resolve any real problem of humanity.

But, on the contrary, in the case of autism, given its causes –which are **iatrogenic and related to unhealthy new cultural habits**– if they were taken into account, **it would be possible to drastically decrease this terrible new pandemic**. For this reason, I have made the effort to translate it into English and to try to divulge it, starting from the institutions and professionals who deal most with this subject. And, for the same reason, **I appeal to your sense of responsibility** to help me divulge this knowledge on the real causes of autism.

Sincerely,

Carles Udina i Cobo

SENT BY e-MAIL TO VARIOUS INVESTIGATORS ABOUT THE CAUSES OF AUTISM

Dear Sirs,

due to the fortuitous coincidences that I mention in the enclosed document, some months ago I asked myself about the reasons of autism. At the same time, as this is a subject which you all are researching into and/or dealing with, I am enclosing the document, translated into English (AutismENG.pdf).

I insist in my concern, which I have had for a long time, about the fact that mistaken perspectives like genetics are preventing seeing what the real causes of this problem –and many others– are, avoiding the resolution of this terrible pandemic.

Because I am not a professional dedicated nor implicated in this subject, I appeal to your sense of responsibility and your influence in the matter, to collaborate with the diffusion and/or use of this knowledge, so that this problem can be dealt with in an adequate manner in the future, and thus, rapidly minimised.

Finally, I am grateful for all the information which has helped me produce this document, information and authors whom I thank and mention in detail in the said document.

The document “Children’s rights at BioCulture 2009” –closely linked to the subject of autism– hasn’t been unfortunately translated into English yet, only to Castilian (also called “Spanish”). You can find it in the Castilian/Spanish version of the website:

www.sistemaconceptual.org

more specifically at the following address:

www.sistemaconceptual.org/mm/file/BioCultura2009CAS.pdf

The document at the origin of all of them “Children’s rights”, is, for the moment, only in my language, Catalan, more specifically at:

www.sistemaconceptual.org/mm/file/Elsdretsdelsnens.pdf

although you can find a little summary in English at the following address:

www.sistemaconceptual.org/en/ressources.html#Nens

Best regards,

A handwritten signature in blue ink, appearing to read 'Luis Ullrich i Gb'.

Only one replied:

Assumpte: Re: What causes autism? a brief reflection

De: TLAutStudy@aol.com

Data: Thu, 5 Nov 2009 07:52:15 EST

A: carles.udina@cat21.cat

Dear Colleague

This is a very nice and coherent presentation

Thank you for sharing

Please consider shortening and editing it ... and publishing it in the US

Best personal regards

Ed Yazbak

F. Edward Yazbak, MD, FAAP

70 View Crest Drive

Falmouth, Massachusetts 02540

(508) 540 5060

Skype: FOUYAZ

In a message dated 11/5/2009 6:03:56 A.M. Eastern Standard Time, carles.udina@cat21.cat writes:

F. Edward YAZBAK, MD, FAAP, founded TL Autism Research, 70 Viewcrest Dr., Falmouth, MA02540

Dear Sir,

I have read in a Website (www.vacunacionlibre.org) "Autism in the United States: a Perspective", and, in your Abstract, "Studies of all possible causes of the epidemic are urgently needed."

Due to the fortuitous coincidences that I mention in the enclosed document, some months ago I asked myself about the reasons of autism. At the same time, as this is a subject which you are researching into and/or dealing with, I am enclosing the document, translated into English (AutismENG.pdf).

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although you can find a little summary in English at the following address:

www.sistemaconceptual.org/en/ressources.html#Nens

Best regards,

Carles UDINA i COBO

Sant Josep, 67; 08340 Vilassar de Mar (Maresme; Catalunya; Spain)

Phone 34+937 595 035 (+Fax); 34+660 298 994 (mòbil);

Correu electrònic: carles.udina@cat21.cat

Webs: www.sistemaconceptual.org www.cat21.cat

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