

*medi ci nski tretman**medical treatment***NOVI NI VO TERAPIJATA NA
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U{ te nema specifi~ni lekovi vo tretmanot na autizmot. Gol em broj metodologibile i skoristeni vo evaluacijata na bezbednosta i efikasnost na farmakolo{ki te tretmani kaj decata i vozrasni te so autism. Vo studite se osobeno zna~ajni dva parametra, a toa se postoe~e "slепи" i kontrolni gru{pi. Studite so najvisok kvalitet gi kori{tat dvete - "slепи" i kontrolna procedura podednakvo. Ti e treba da bide izvedeni vo pove}e mesta i da sодржат gol em broj subjekti.

Istra` uwavata {to gi procenuvaat lekovite, predlo`eni vo tretmanot na autizmot, postojano se vo porast. Zabele`ivo e zabranzane i staknuvawe na potrebata od testirane na lekovite i podobra inf ormacija za tretmante, koja treba da bide pobrzo dostapna otkolku vo minatoto. Vo ovoj trud {e bide dat di skutirani slednite vidovi lekovite i vidovi terapii: mo`ni idni tretmani so lekovi-kako {to se oksitocin, tetrahydrobiopterin i ampakini te, hormonska terapija, antigabi~na terapija, vitaminske terapii, dimetylglutinot, alfa lipoic acid and diet therapies.

Klju~ni zborovi: autism, terapija, studii.

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INNOVATIONS IN THERAPY OF AUTISM**Vladimir E. TRAJKOVSKI**Faculty of Philosophy
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There is no specifically marked medicine for the treatment of autism. A number of approaches have been used in evaluating the safety and efficiency of pharmacological treatments of both children and adults with autism. Two study parameters are particularly important, the presence of "blind" and control groups. The highest quality studies utilize equally "blind" and control procedures as well. They have to be performed at multiple sites with a large number of subjects.

Research evaluating medicine proposed for treatment of autism, is on the increase. There is accelerated emphasis on medicine testing and better information on treatments should be more available than in the past. In this article, the following classes of medicine and therapies will be discussed: possible future medicine treatments - such as oxytocin, tetrahydrobiopterin and ampakines, hormone therapies, anti-yeast therapies, vitamin therapies, dimethylglycine, alpha lipoic acid and diet therapies.

Key words: autism, therapy, studies.

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Voved

Auti zmot pretstavuva pervazi vno razvojno naru{ uvawe { to se javuva vo ranoto detstvo i se karakteri zi ra so naru{ uvawa vo socijal nata i komuni katvnata sf era, namal eni interesi i povtoruva~ko odnesuvawe (1).

Auti zmot bi trebal o da bi de di jagnosti ci ran do vozrast od 18 meseci. Ranata intervencija e mnogu va` na za podobar i shod. Terapi i te vkl u~uvaat def ekto{ ki tretman, l ogopedski tretman, okupaci ska i bi-hejvi oralna terapija. U{ te nema speci f i~ni lekovi vo tretmanot na auti zmot. Nema f armakolo{ ki tretman { to bi poka` al markantno podobruvawe na jadrovi te si mptomi kako { to se socijal noto, govornoto i kogniti vnoto naru{ uvawe kaj auti zmot. Medi ci nski te vi dovi terapi i ~esto im ovozmo` uvaat na auti sti ~ni te i ndi vi dui da ` i veat nadvor od i nsti tuci i te (2).

I stra` uvawata { to gi procenuvaat lekovi te i koi bi le predlo` eni vo tretmanot na auti zmot, postojano se vo porast. Zab e` - li vo e zabrzano i staknuvawe na potrebata od testi rawe na lekovi te i podobra inf ormacija za tretmani te { to treba da bi de pobrzo dostapna otkol ku vo mi natoto.

Cel ta na ovoj trude da pri ka` e nekoi novi vi dovi bi omedi ci nski tretmani { to se koristat vo svetot.

1. Vidovi t ret mani koi mo` e da se korist at vo idnina

Oksi toci not e mal peptiden hormon, sosten od devet ami noki sel i ni { to, normal no, se sekretira od majkata pri ra|aweto i doe weto na deteto. Vo animal ni te studi i bil o najdeno deka toj e asoci ran so socijal noto odnesuvawe. Koga bil i nekti ran kaj ` i votni te, oksi toci not go zgol emil ni vno to socijal no odnesuvawe, a koga bi le dadeni negovi blokatori, toga{ se namal ilo ni vno to socijal no odnesuvawe i bil a izbegnuna socijal nata i interakcija (3).

Podatoci te kaj ~ovekot uka` uvaat na mo` - na ul oga na oksi toci not vo tretmanot na auti sti ~ni te si mptomi .

Introduction

The autism is pervasive developmental impairment that occurs in early childhood characterized with impairments in social and communicative sphere, reduced interests and repeated behavior (1).

The autism has to be diagnosed up to the age of 18 months. Early intervention is very important for better results. The therapies include special education and rehabilitation treatment, treatment of speech therapist, occupational and behavioral therapy. There is no specifically marked medicine for the treatment of autism. There are no pharmacological treatments, which indicate noticeable improvement of core symptoms such as social, speech and cognitive impairments of autism. Medical therapies often enable autistic individuals to live outside the institutions (2).

Research evaluating medicine proposed for treatment of autism, is on the increase. There is accelerated emphasis on medicine testing and better information on treatments should be more available than in the past.

The aim of this article is to present some new types of biomedical treatments used in the world.

1. Treatments that could be used in future

The oxytocine is a tiny peptide hormone consisted of nine amino acids that mother normally secrets during child's birth and breast-feeding. The animal studies associate it with social behavior. When oxytocine was injected in animals, it increased their social behavior, and when its blockers were used then their social behavior and social interaction were reduced (3).

Human data show that the role of oxytocine in treatment of autistic symptoms is possible.

Vo edna studija bile i spi tuvani koncentracii te na oksitocin kaj 29 deca so autizam i 30 zedna~eni po vozrost deca bez autizam. Decata so autizam i male poniiski ni voa na oksitocin. Decata bez autizam poka` al e povisoki ni voa so tekot na vozrasta, { to ne bilo sl u~aj i kaj decata so autizam (4). Hollander i sor. napravile dvojno-sl epa, placebo-kontrol i rana studija na infuzija so oksitocin kaj adulati, dijagnostici rani kako autizam ili Asperger-ov sindrom. Tie zabele` al e namaluvave na repetiti vnoto odnesuvawe kaj 13 od 15 nabquduvani subjekti koi primile infuzija so oksitocin. Za razlika od niv samo 6 od 15 ~lenovi na placebo-grupata poka` al e namaluvave na repetiti vnoto odnesuvawe. Ne bile najdeni razlike vo nesakanite efekti med u oksitocin-skata i placebo-grupata. Ovi e avtori ukazale i na toa deka socijal noto odnesuvawe mo`e da se podobri so oksitocinski ot tretman (5).

Tetrahydrobiopterin (R-BH4) e drug lek, istra`uvan vo tretmanot na autizmot. Toj e hemisko soedi nenie potrebno za sinteza na nevrotransmitterite, kako {to se serotoninot i drugite kateholamini. Vo edna otvorena pilot-studija {est predualili {ni deca so autizam bile tretirani so R-BH4. Roditelite soopstile za podobruvawe vo kontaktot so o~ite, vo `el bata za interakcija i vo brojot na zborovi. PET-skenovite pokazale 10% zgoljemuvawe vo vrzuvaweto na dopamin D2 receptorot vo n. caudatus i vo putamen. N. caudatus i putamen se komponenti na sistemot na bazalni te gangli i se polikwa dlaboko vo mozokot {to primaat razli~ni impulsi od korata na mozokot, gi procesi raat tie impulsi i gi vra}aat do motornata kora. N. caudatus vlijae na motivaciите процеси, a putamen e povrzan s nesvesnata koordinacija na ednostavnoto senzomotorno odnesuvawe. Bidej{ samo edna studija e sprovedena za ovoj lek, neophodni se i drugi istra`uvava za da se proceni negovata bezbednost i efikasnost (6).

One study examined the concentrations of oxytocine in 29 children with autism and 30 children at the same age without autism. The children with autism had lower level of oxytocine. The children without autism showed higher level while growing up which was not the case in children with autism (4). Hollander et al. made double "blind", placebo-controlled study of infusion with oxytocine in adults, diagnosed as autism or Asperger syndrome. They noted declined repeating behavior in 13 of 15 observed subjects who received infusion with oxytocine. Contrary to them, only 6 of 15 members of placebo group showed declined repeating behavior. There were no differences of unwanted effects between oxytocine and placebo groups. These authors indicated that the social behavior could be improved with oxytocine treatment (5).

Tetrahydrobiopterin (R-BH4) is another medicine examined in the treatment of autism. It is a chemical compound necessary for synthesis of neuro-transmitters, such as serotonin and other catecholamines. In one open pilot study, six preschool children with autism were treated with R-BH4. The parents reported improvement in eye contact, willing for interaction and number of words. PET-scans showed 10% increase in binding of dopamine D2 receptor in n. caudatus and in putamen. N. caudatus and putamen are components of the basal ganglion system and they are areas deep in the brain, which receive different impulses from the brain cortex, process those impulses and return them back to the motor cortex. N. caudatus influences the motivating processes and putamen is connected with unconscious coordination of simple sense-motor behavior. Since there is only one study carried out on this medicine, other researches are necessary to evaluate its safety and efficiency (6).

Ampakini se relativno nova klasa lekovi { to ja poka~uvaat aktivnosti na AMPA-receptorot. Ovi e receptori pomagaat vo prenesuvawe na glutamatni te signal i vo mozokot. Studi i te poka~uvaat deka ovi e zoni vo mozokot se pomal ku aktivni i imaat pomal a gusti na na AMPA-receptor. Ti e lekovi ja podobri le memorijata kaj pacienti te so Alzheimerova bolest. CX516 e ampakini { to ima efekt vrz kognitivnite i bi hejni oralni te simptomi kaj individui so Fragile X sindrom i autism (7).

2. Hormonska terapija

Sekretinot e polipeptid, sostaven od 27 ami noki selini, { to se sekretira vo tenkoto crevo kako odgovor na chlorovodorodnata kiselina od el udni kot. Sekreti not se apsorbi ra vo krvta i go predizvi kuva pankreasot da sekretira bi karbonati { to ja neutraliziraat kiselina vo crevoto. Sekreti not ja namal uva cirkulacijata vo crevoto i umereno go inhibira crevni otmotilitet, so { to go zabavuva dvi eweto na crevnata soderina. Poradi negovite za{ tini i smiruva~ki efekti na crevoto, sekreti not e koristen kako del od diagnostiki~ki testovi, sproveduvani za da gi evalui raat pri~inite na gastrointestinalnite naru{ uvawa; kako na primer, hroni~nata dijarea i sindromot na irritabilni creva.

Decata so autism, kako i drugite deca { to imaat gastrointestinalni problemi, mo`e da primat sekretin pri diagnostikoto testi rawe. Eden pacient so autism, Peter Beck, na vozrast od ~eti godini, primil sekretin pri laboratorijskoto testi rawe, sprovedeno za da se vidat pri~inite za negovata hroni~na dijarea. Za tri nedeli davave infuzija so sekretin odnesuvaweto markantno mu se promenilo. Peter mo`el da izre~e preku 100 zborovi, da ka~e kusi re~eni ci, da odgovara na pra{ awata i go podobril kontaktot so o~ite. Negovata dijarea, isto tako, se podobrila (8). Vo edna druga studija se soop{ teni sli~ni vidovi podobruvawa na simptomi, predizvi kuvaji i

Ampakines are relatively new medicine class, which increase the activity of AMPA-receptor. These receptors help the transfer of glutamate signals in the brain. The studies show that these areas in the brain are less active and with less density of AMPA-receptors. They improved the memory of patients with Alzheimer disease. CX516 is ampkine which influences cognitive and behavioral symptoms in individuals with fragile X syndrome and autism (7).

2. Hormonal therapy

The secretin is polypeptide, consisted of 27 amino acids secreted in small intestine as a reaction to the chloro-hydrogen acids from the stomach. The secretin is absorbed in the blood and challenges the pancreas to secrete bicarbonates, which neutralize the acid in the intestine. The secretin reduces the circulation in the intestine and moderately inhibits intestine motion, slowing down the movement of intestine content. Because of its protective and relaxing effects on the intestine, the secretin is used as a part of diagnostic tests conducted to evaluate the reasons for gastro-intestinal impairments; for example: chronic diarrhea and syndrome of irritable intestines.

Children with autism, as other children with gastro-intestinal problems, can be treated with secretin while diagnostic testing. A patient with autism, Peter Beck, at the age of 4, was treated with secretin in laboratory testing carried out to find the reasons for his chronic diarrhea. After three-week treatment of secretin infusion, the behavior remarkably changed. Peter could pronounce more than 100 words, compose short sentences, reply questions and he improved eye contact. His diarrhea improved, too (8). In another study, similar symptom improvements are registered, causing interest for secretin therapy in autism.

interes za sekreti not kako mo` na terapija za auti zmot. Vo ovaa studija se uka` uva deka sekreti not mo` e da ja podobri sostojbata so crevnata li gavi ca, odnosno da ja normalizira, so { to se onevozmo` uva golemi te proteini, ili toksi ni da pomi nat od crevata vo krvta, so { to se prevenira si ndromot na propu{ tl i vi creva (9). Koga se vnesuva vo terapeutski dozi, sekreti not se dava intravenski. Obi~no se dava vo pomal i dozi vo vremetraewe od { est nedeli, a vo gol ema doza se dava edi ne~no. Dodeka vo nekoi studi i nema izve{ tai za nesakani ef ekti, nekoi drugi uka` uvaat deka e mo` no javuvave na osip po ko` ata, general i zi rano crvenilo na glavata, vratot i gradi te vedna{ po inf uzi jata, treska, tahi kardi ja, povr}awe i zgol emena razdrazl i vost. Edno od najnovite i stra` uvawa gi otf rla nao di te na oni e studi i kade { to sekreti not ne poka` al ni kakov korisen ef ekt, ili i mal nesakani dejstva. Ovaa dvojno-sl epa, placebo-kontrol i rana i vkrstena studija pokazuva deka sekreti not gi podobruva simptomi te kaj decata so autizam { to i maat hroni~na dijarea mnogu pove}e otkolku kaj oni e deca { to go nemaat ovoj problem. Janet Kern i kollegite prou~uale 19 deca so autizam davaj}i mu na sekoe dete edna inf uzia na placebo sol en rastvor. I stra` uva~ite izvestile deka kaj 5 mom~i wa so hroni~na dijarea do{ lo do namal uvawe na i ritabili nosta, voznemi renosta, pl a~eweto, hipерактивноста, koga ti e bile tretirani so sekretin, a nemale odgovor na placebo, dodeka drugi te li ca nemale odgovor ni na sekretin, ni na placebo. Kako dopolnuvawe na ova, decata so autizam i hroni~na dijarea poka` ale podobruvawe vo re~ni kot i namal uvawe na stereotipi noto odnesuvawe. Pri toa bilo zabel e`ano edno vlo{ uvawe kaj edno dete bez gastrointestinalni simptomi, kaj kogo do{ lo do eskal irawe na bi hejvi oralni te problemi. Na krajot, ti e zakl u~vaat deka mo` ebi i ma subtip na deca so autizam ili pervazi vno razvojno naruvawe i hroni~na dijarea koi i maat pol za od sekreti not (10).

This study shows that secretin can improve the condition of intestinal mucus, i.e. normalize it disabling the big proteins or toxins to pass from intestines into the blood, which prevents the syndrome of porous intestines (9). When inserted in therapeutic doses, the secretin is applied intravenously. It is usually applied in smaller doses in duration of six weeks, or once if it is a bigger dose. Some studies show no side effects while others report possible occurrence of skin rash, generalized blush on head, neck and chest immediately after the infusion, as well as fever, tachycardia, vomiting and increased irritability. One of the latest researches rejects the findings of the studies where secretin did not show any useful effect nor had unwanted activities. This double "blind", placebo controlled and cross-examined study shows that secretin improves symptoms in children with autism and chronic diarrhea much better than in those children without this problem. Janet Kern and colleagues studied 19 children with autism, giving each child an infusion with secretin (2CU/kg) and one infusion of placebo salty solution. The researchers reported that 5 boys with chronic diarrhea reduced the irritability, anxiety, crying, hyperactivity when treated with secretin, and did not respond to placebo, while others did neither respond to secretin nor placebo. Additionally to this, children with autism and chronic diarrhea showed improvement in vocabulary and reduction of stereotype behavior. The aggravation was noticed in one child without gastrointestinal symptoms who showed escalation of behavioral problems. At the end, they concluded that there was a subtype of children with autism or pervasive developmental impairment and chronic diarrhea, who benefited the secretin (10).

3. Antigabi~na i fungicidna terapija

Probioticite se mi kroorgani zmi { to se koristat vo terapeutski cel i za da go kontroliraat razmno` uvaweto na gabi te, fungi te i bakteri i te vo crevata. I ma stoti ci razl i~ni vidovi polozni bakteri i koi se dostapni vo farmacevtski te ku}i, a nekoi od ni v se: Lactobacillus acidophilus, Lactobacillus casei, Lactobacillus bulgaricus, Lactobacillus salivarius, Lactobacillus termophilus i Lactobacillus plantarum. **Drugi polozni vidovi gi vkl u~vaat:** Bifidobacterium bifidum i Streptococcus faecium (da ne se pome{ a so Streptococcus faecalis, koj e patogena bakterija). Ovi e vidovi bakteri i mo` e da se najdat vo razl i~ni formi, kako { to se suspenzi i, pra{oci, kapsuli i tableti. Ovi e produkti mo` e da pomognat vo kontrola na gabi te i patogeni te bakteri i od rodot Clostridia vo crevni ot trakt. Se preporna~uva simultana upotreba na probiotici te so fungi ci dna terapija. Gabi te se del od crevni ot ekosistem i tie gi dr` at drugi te organi zmi pod kontrola. Dokolku ne se zemaat probiotici simultano so fungi ci dni lekovi, toga{ mo` e da se slu~i da dojde do razmno` uvawe na patogeni te bakteri i.

Druga va` na postapka e kontrola na razmno` uvaweto na gabi te preku **djeta**, odnosno isf rlawe na { e}erite, poradi nivni ot potti knuva~ki efekt na razmno` uvaweto na gabi te. Osnovno pravilo vo el i minacija na { e}erite e: toa { to e sl atko, da ne se jade. Li stata na ograni~eni hrani vkl u~va: bonboni, sladoli ed, torti, blagi pi ti, ~okolada i ovo{ ni sokovi. Otkako deteto je po~ne so ovaa di eta se ~ini deka vodata je mu stane glaven pijalak. Si te vidovi { e}er treba da bidat el i mi ni rani, vkl u~vaj}i go i medot, i si rupite, i ovo{ ni ot { e}er i raf i niranite { e}eri. Nekoi avtori preporna~uvaat komplet na el i minacija, dodeka drugi preporna~uvaat povremena. Ponekoga{, mo` ebi, je bi de potrebno dodavawe vitamini C ako deteto e navi knato da pi e sok od portokal koj, isto taka, e el i mi ni ran. Ovo{ jeto mora da bi de otstraneto od i shranata za eden mesec za da se zabrza el i minacija na gabi te.

3. Anti-yeast and Fungicide Therapy

Probiotic is a microorganism used in therapeutic aims to control growth of yeast, fungi and intestinal bacteria. There are hundreds of different useful types of bacteria available in pharmaceutical houses, such as: Lactobacillus acidophilus, Lactobacillus casei, Lactobacillus bulgaricus, Lactobacillus salivarius, Lactobacillus termophilus and Lactobacillus plantarum. Other useful types are Bifidobacterium bifidum and Streptococcus faecium (not to be confused with Streptococcus faecalis, which is pathogen bacteria). These types of bacteria can be found in different forms, such as suspensions, powders, capsules and pills. These products can help to control yeasts and pathogenic bacteria from the family Clostridia in intestinal tract. Simultaneous use of Probiotic with fungicide therapy is recommended. The fungi are part of intestinal eco system and they control other organisms. If Probiotic is not simultaneously used with fungicide medicine, then a growth of pathogenic bacteria can occur.

Another important procedure is the control of bacteria growth through **diet**, i.e. ejecting of sugar because of its stimulating effect on bacteria growth. The basic rule for sugar elimination is not to eat sweets. The list of restricted food includes candies, ice cream, cakes, sweet pies, chocolate, and fruit juices. When starting with this diet, it seems that water becomes the main drink for the child. All types of sugar should be eliminated including honey, syrups, fruit sugar and refined sugar. Some authors recommend complete while others recommend temporary elimination. Sometimes, however, it is necessary to add vitamin C if the child is used to drinking orange juice, which is also eliminated. The fruit must be eliminated from the diet in a period of one month in order to fasten the elimination of fungi.

Deserti te { to sodr` at mnogu { e}er treba da bi dat i sf rleni na neopredeleno vreme. Vo toj slu~aj gl avni izvori na jaglenohi drati }e bi dat kompirite, gravot, p~enkata, sladok tropski kompir, brokol a i dr. Si te vi dovi meso i riba se dozvoleni vo ishrana ta. Di etata, isto taka, treba da bide kombini rana so fungici dna terapija, { to dava dvapati pogol em efekt vo elimi nacija na razmno` eni te crevni gabi, otkolku ako di etata se koristi bez fungici dñata terapija. **Nystatin** eden od najstari te i najbezbedni fungici dñi lekovi. Negovata bezbednost se dol` i na faktot { to toj ne se apsorbi ra vo krvotekot vo dozi koi naj~esto se pripi{ uvaat. Re~isi 100% od nistatin se elimi ni raat vo f ecesot. Zaradi toa { to ne vleguva vo krvta, toj e bezbeden i ne mo` e da predizvika nekoi seriozni nesakani dejstva. Mnogu od decata so autizam ne sakaat da zemati kapsuli, zaradi { to najdobra opcija e davawe vo forma na suspenzija. Naj~esto suspenzite na nistatin se formuli rani da sodr` at 100.000 edinici vo 1ml. Ako se dade vo 48 pati pogol emi dozi od preporavnite, toga{ mo` e da dade nesakani efekti vo smisl a na zgol emena agresivnost.

Amfotericin B mo` e da bide mnogu toksi~en ako se dade intravenski. Zatoa, pak, daden oralno toj e mo{ ne bezbeden lek. Koga }e se dade oralno, negovata bezbednost se sporedova so onaa na nistatin, bi dej{i toj lo{ o se apsorbi ra od GIT (11).

4. Vitamin not erapija

Vo 18 studii, sprovedeni za eval uaci ja na dejstvoto na **vitamin B6** kaj li cata so autizam, toj poka` al pozitivni rezultati. Nitu eden nesakan efekt ne bil soop{ ten vo tie studii. Ova e pove}e od zna~en rezul tat za efektnost i bezbednost, oso beno ako se znae deka drugi te lekovi { to se davaat kaj autizmot poka` ale nekonzistentni rezultati i imale rizik od nesakani efekti.

The deserts, which consist of much sugar, should be eliminated forever. In that case, main sources of carbohydrates are potatoes, beans, corn, sweet potatoes, broccoli and others. All kinds of meat and fish are allowed in the diet. The diet should be combined with fungicide therapy, which shows twice bigger effect in elimination of intestinal fungi growth, than if the diet is used without it.

Nystatin is one of the oldest and the safest fungicide medicine. It is safe due to the fact, that it is not absorbed in the circulation of the blood in mostly prescribed doses. Almost 100% of Nystatin is eliminated in feces. Because it does not enter the blood, it is safe and cannot cause any serious and unwanted activities. Many autistic children do not want to take capsules and the best option is a suspension. Most frequently, suspension of Nystatin is formulated to contain 100.000 units in 1 ml. If it is applied in 4 - 8 times bigger doses than the prescribed one, then it can show unwanted effects of increased aggressiveness.

Amphotericin B can be very toxic if applied intravenously. If applied orally, it is a very safe medicine. When applied orally, its safety is compared to the one of Nystatin because it is badly absorbed from GIT (11).

4. Vitamin Therapy

In 18 studies implemented for evaluation of influence of **vitamin B6** on people with autism, it showed positive results. There were no unwanted effects, reported in these studies. It has been more than a significant result for the efficiency and safety, especially when it is known that other medicine applied in autism showed inconsistent results and had unwanted effects.

I stra` uwavata za upotrebara na vitamini B6 po-nale vo 60-ti te godini od minati ot vek. Vo 1966 godina dvajca britanski neurolozi - A.F. Heeley i G.E. Roberts - soop{ tle deka kaj 11 od 19 deca so autizam na{ le abnormalni metaboliti vo urinata pri upotrebara na triptofanski test. Davaj} i im po 30 mg tableta vitamini-B6 do{ lo do normalizi rawe na nivnata urina. Vo taa studija ne bile napraveni bihejvi oralni i spi tuwawa. Germanski ot istra` uva~ V.E. Bonisch vo 1968 godina izvestil deka kaj 12 od 16 deca so autizam i malo zna~itelno podobruvawe vo povedenieto koga im bilo dadeno visoki dozi vitamini-B6 od 100 mg do 600 mg dnevno. Trojca od negovite pacienti prvpot proborele po davaweto na vitamini-not-B6 vo ovoj otvoreni kliniki obid.

Po izdavaweto na knigata "Infantile autism" od dr Bernard Rimland vo 1964 godina, toj po-nal da prima stoticci pisma od roditeli te koi se obidel so megavitaminska terapija kaj nivnite deca so autizam. Vo prav{ alni kot, { toj im go pratil na okolu 1000 roditeli, otkril deka 57 eksperimentirale so visoki dozi na vitamini. Mnogi na od nivnите rezultati kaj nivnite deca. Kako rezulat na toa, Rimland po-nal golema studija so preku 200 deca so autizam na koi im dal megadozi na vitamini-B6, niacinamid, pantotenska kiselina i vitamini-C. Vitamini te bile smesteni vo edna multi pna tableta, specijalno dizajnirana za ovaa studija. Na krajot od studijata, po ~eti meseci, bilo jasno deka vitamini-not-B6 bil najv`ni ot od siste 4 i spisuvani vitamini i deka vo nekoi slu~i dovel do izvredno podobruvawe. Vitamini-not-B6 pokazal zna~itelno podobruvawe kaj 30% do 40% od decata. Samo nekolku od decata pokazale minorni nesakani efekti (razdrasilost i vost i ~uvstvi telnost na zvukovi), no ti i s~eznale koga bil dodaden magnezijum. Magnezijum ne samo { to gi elimi~ni ra nesakani te efekti, tuku toj ~esto go podobrava govorot i povedenieto. Dve godini posledna toj i drugi dvajca istra` uva-i inicirale vtori eksperimentna studija za megavitaminska terapija, koncentri{aj}i se na vitamini-B6 i magnezijum.

The research on the use of vitamin B6 started in the 60s of the last century. In 1966, two British neurologists – A.F. Heeley and G.E. Roberts – reported that 11 of 19 children with autism found abnormal metabolites in the urine using triptophan test. Applying each patient 30 mg tablet of vitamin B6 they succeeded in normalizing the urine. This study did not make any behavioral investigations. The German researcher V.E. Bonisch in 1968 reported that in 12 of 16 children with autism showed significant behavioral improvement when they were applied high doses of vitamin B6 from 100 mg to 600 mg per day. Three of his patients could talk for the first time after applying vitamin B6 in this open clinical trial.

After the publication of the book "Infantile autism", Dr. Bernard Rimland in 1964 started receiving hundreds of letters by parents who had tried megavitamin therapy on their children with autism. In the questionnaire he had sent to about 1000 parents, he found out that 57 had experimented with high doses of vitamins. Most of them saw positive resultants with their children. As a result of this, Dr. Rimland started a large study with over 200 children with autism who were given mega doses of vitamin B6, niacynamid, pantoten acid and vitamin C. The vitamins were put in a multi type tablet, specially designed for this study. At the end of the study, after four months, it was obvious that the vitamin B6 was the most important one of the four examined vitamins and that in some cases it brought excellent improvements. The vitamin B showed considerable improvement with 30% to 40% of the children. Only a few children showed minor unwanted effects (irritable and sensitive to sounds) which disappeared when magnesium was added. Magnesium, not only eliminates unwanted effects, but it frequently improves speech and behavior.

Two years later, he and two other researchers initiated a second experimental study for megavitamin therapy, concentrating on vitamin B6 and magnesium.

Toj bi l dvojno-sl ep placebo-kontrol i ran eksperiment kaj 16 deca so autizam i povtorno i malo statisti~ki zna~ajni rezul tati. Dozi te se dvi ~ele me|u 300 mg i 500 mg dnevno.

Vo dvete studi i decata poka~ ale { i rok rang na izvonredni rezul tati so vitami n-B6. Tie i male podobar kontakt so o~ite, poka~ uval e pogol em interes kon svetot okol u niv, pomal ku bili besni, govorot bil podobar i, op{ to zemeno stanal e ponormal ni. Francuski te istra~ uva-i, predvoden od prof . Gilbert LeLord, napravi le dopolnitel no i stra~ uvawe so vitami n-B6 i magnezi um. Nivni ot eksperiment go sprovel e vrz 44 hospitali z rani deca so autizam. Ottoga{ i maat publ i ci rano pove}e studi i, kade { to ja i spis tuvaat upotrebata na vitami n-B6 so magnezi um i li bez nego kaj deca i adul ti so autizam. Vo nivni te studi i davan e 1 gram dnevno vitami n-B6 i pol ovi na gram magnezi um. LeLord i sor. neodamma gi rezi mi ral e rezul tati te od 91 pacient, kade { to zabele` ale: kaj 14% markantno podobruvawe, kaj 33% podobruvawe, 42% bili bez podobruvawe i kaj 11% vlo{ uvawe na klinika sl ika. Vo si te nivni studi i ne bili zabel e` ani nesakani dejstva.

Drugi dve studi i od istra~ uva-ki te grupi vo SAD, predvoden od Thomas Gaultieri i sor. na Uni verzi tetot vo Severna Karolina i George Ellman i sor. od Sonoma, dr `avnata bolnica vo Kalifornija, i male pozi ti vni rezul tati kaj pacienti te so autizam (12).

Vitaminot C e va~ en anti oksidant i mo` e da bi de od gol ema pol za kaj decata so autizam. Toj e vitami n rastvorl iv vo voda i zatoa mnogu retko mo` e da se zabel e` i vi sti nska toksi~nost, osven { to mo` e da se formiraat kri stal i na askorbi nskata ki sellina vo urinata, koga toj se koristi vo ekstremno visoki dozi. Vitamino-C treba da po~ne da se dava vo doza od 5-10 mg/kg/dnevno so postepeno poka~uvawe na dozata. Avtori te postavi le hi poteza deka dejstvoto se dol` i na prepostaveni te dopami nergi~ki efekti na vitamino-C. Kako i da e, rezul tati te od ovaa studija u{ te ne se povtoreni (13).

That was a double “blind”, placebo-controlled experiment with 16 children with autism and again there were statistically significant results. The doses ranged from 300 mg to 500 mg per day.

In both studies, the children showed wide range of excellent results with vitamin B6. They had better eye contact, showed bigger interest for the world around them, were less furious, their speech was improved, they became more normal in general.

The French researchers led by Professor Gilbert LeLord additionally examined vitamin B6 and magnesium. Their experiment was carried out with 44 hospitalized children with autism. Since then, they have published a large number of studies, examining the use of vitamin B6 with magnesium or without it, both with children and adults. In their studies, a daily dose of 1 g. vitamin B6 and half a gram magnesium was applied. Lelord and associates have summarized their results recently with 91 patients and stated 14% with noticeable improvement, 33% with improvement, 42% without improvement and 11% with worse clinical picture. In all their studies, unwanted actions have not been noticed.

Other two studies of the research groups from USA, led by Thomas Gaultieri and associates at the University of North Caroline and George Ellman with associates from Sonoma, the state hospital in California, has positive results in patients with autism (12).

Vitamin C is an important antioxidant and could be of great benefit for children with autism. The vitamin is soluble in water and therefore real toxicity is rarely noticeable, except formation of crystals in ascorbic acid in the urine when used in extremely high doses. Vitamin C has to be applied with starting daily dose of 5/10 mg/kg and with gradual increase of the dose. The use of vitamin C has been examined in a small double “blind”, placebo-controlled cross-examined study, where a slight alleviation of the symptoms has been found in schoolchildren with autism. The authors have put forward hypothesis that the action is due to assumed dopaminergic effects of vitamin C. The results of this study have not been repeated again (13).

Folnata kiselina e polzna za upotreba kaj auti zmot. Gol emi ot francuski istra` uva~ Jerome Lejeune izvestil deka davawe na okolu 250 miskrogrami folna kiselina na kilogram telosna te`ina dnevno doveduva do golemi podobruvawa kaj nekoi deca so autizam. Toj daval folna kiselina na iljadni ci mentalno retardirani deca (naj~esto so Downov sindrom) po 20 mg dnevno vo razli~ni studii, bez da ima ni kakvi { tetni i nesakani efekti (14).

5. Dimethylglycine (DMG)

Dimetylglucin e supstancija so sladok vokus, opisana kako prirodna, ednostavna sostojka so nepoznati, nepo~elni i nesakani efekti. DMG e dostopen vo mnogu prodavnici za zdrava hrana vo SAD. Toj legalno e klasificiran kako hranliva supstancija. Se upotrebuva vo poveze forme, a naj~esto kako si tni tableti od 125 mg. Vкусот му е пријатен и деката брзо ги xвакаат tabletite.

Mnogi studии maat doka~ano deka DMG ja zasi~uva efikasnost na imunitet sistem, gi podobruva fizickite i atletske performance kaj lu~eto i ~ivotnite imati i rok rang na polzni efekti. Toj e mnogu bezbeden. Mo~e da se sretne vo mnogu mal i kolikostva vo kaf eavio ot oriz i crni ot drob. Hemski i fiziologici toj prilega na vitaminitite rastvorlivi vo voda, kako na primer, vitaminitite od B-grupata. Glavnata pri~ina {to toj ne e klasificiran kako vitamini ne toa deka nema specifici~ni simptomi povrzani so deficit na DMG.

Mnozi na roditeli izvestile deka u{te vo prvite denovi od po~etokot na terapijata so DMG, povedenieto na decata zabele~itelno se podobri lo~bil zabel e~an podobar kontakt so o~ite, govorot bil podobren i decata poka~uvale pogolem interes i mo~nost za zboruvawe.

Za predu~ili{ni deca se preporu~uva za po~etok polovi na od 125 mg tableta ili kapsula zaedno so pojadokot, a za pogolemi deca po edna tableta.

Folic acid is useful when applied for autism. The great French researcher Jerome Lejeune reported that a dose of 250 mg of folic acid at one kilogram of corporal weight per day showed great improvements in some children with autism. He applied a daily dose of 20 mg folic acid to thousands of mentally retarded children (mostly with Down syndrome) in different studies without any harmful and unwanted effects (14).

5. Dimethylglycine (DMG)

DMG is a substance with sweet taste described as natural, a simple component with unknown and unwanted effects. DMG is available in many healthy food stores in USA. It is legally classified as nutritious substance. It is used in many forms mostly as small tablets of 125 mg. They are taste~ful and children quickly chew them.

Many studies have proved that DMG enhances efficiency of the immunity system, improves physical and athletic performances, both in people and animals, and has a wide range of useful effects. It is very safe. It is present in small quantities in brown rice and the liver. From the aspect of chemistry and physiology, it is soluble in water like vitamins, as for example vitamins of B group. The main reason it has not been classified as vitamin is the fact that it has not specific symptoms related to the deficit of DMG.

Since the very beginning of the therapy with DMG, many parents reported that their children's behavior considerably improved, they had better eye contact, improved speech, showing greater interest and abilities for talking.

At the beginning, pre-school children are recommended a daily dose of half of 125 mg tablet or capsule when having breakfast, and older children one tablet.

Postepeno treba da se zgol emuva dozata od edna na ~eti ri tabl eti dnevno, a za vozrasni te od 2 na 8 tabl eti dnevno. Ako se pojavi po~etno zgol emuvawe na hi perakti vnosti ({ to se javuva kaj 5-10% od sl u~ai te), toga{ dozata treba da se namali. Vo toj sl u~aj, se dodava 800 mi krogrami f ol na ki sel i na. Se prepura~uva davawe na DMG 2-3 nedeli, poto~a dodavawe na B6 i magnezi um { to, isto taka, treba da po~ne postepeno (12).

6. Alfa-lipoic~na kiselina

Alfa-lipoic~nata kiselina e diol masna kiselina, koja pretstavuva pri roden vrzuv~ki agens i mo}en anti oksi dans. Taa bila upotrebuvana vo Germanija pri tretmanot na dijabeti~na nevropati~ja so odl~ni rezultati. Nejzini te anti oksi dantni efekti mo`e osobeno da bидат од помо{ када decata so autizam. Se po~nuva so doza od 1-3 mg/kg/dnevno i se poka~uva do 10 mg/kg/dnevno. Alfa-lipoic~nata kiselina e pri roden produkt na ~ove~ki te kletki i zaradi тоа i ma mininalna toksi~nost. I spituvali te dozi nad 25 mg/kg/dnevno, davani pove}e od 3 godini kaj vozrasni lica, ne poka`ale toksi~nost. Alfa-lipoic~nata kiselina mo`e da goolesni otstranuvaweto na `ivata od intracelularno do ekstracelularno. Toa mo`e da bi de mnogu polezno za mobiliziraweto na `ivata { to ovozmo`uva dostapnost na DMSA da ja vrze `ivata (15).

7. Diet a slobodna od glut en i kazein

Gluteni te se protein i { to se sre}avaat vorasti telni ot svet i pripa|aat na potklasata monokotiledoni. Vo ova semejstvo se p~eni cata, ja~menot, ovesot, r`ta i nivni te derivati. Kazeinot e fosfoprotein od mleko, ~ija molekularna struktura e mnogu sl i~na so onaa na glutenot.

Ima sigurni podatoci deka nekoi od lumento so autizam se intoleranti kon hrana { to sodr`i gluten i kazein, pri { to reagi raat so mnogu fizikalni i bihejvi oralni problemi, kako { to se: glavobolka, bolka vo `eludni kot, gadewe, vriskawe i plaveve,

The dose has to be continuously increased from 1 to 4 tablets daily, and for adults 2 to 8 tablets per day. The dose has to be reduced if initial increase of hyperactivity occurs (noticed at 5 – 10% of cases). In that case, 800 mg folic acid is added. DMG is recommended to be applied for 2-3 weeks, then gradually adding B6 and magnesium (12).

6. Alpha -Lipoic Acid

Alpha-lipoic acid is diol fatty acid, which is a natural binding agent and powerful antioxidant. It was used in Germany on the treatment of diabetic neuropathy with excellent results. Its antioxidant effects can be a great benefit in children with autism. The treatment starts with a daily dose of 1-3 mg/kg and it increases to 10 mg/kg. Alpha-lipoic acid is a natural product of human cells and therefore it has minimal toxicity. The examined doses of more than 25 mg/kg daily applied for more than 3 years with adults, did not show any toxicity. Alpha-lipoic acid can alleviate the removal of mercury from intracellular to extra-cellular. That can be very useful for mobilization of mercury, which enables DMSA to bind mercury (15).

7. Diet Free of Gluten and Casein

Glutens are proteins present in flora and belong to the subclass monocotyledons. In this family are wheat, barley, oats, rye and their derivatives. Casein is phosphorus protein in milk with very similar molecule structure to gluten.

There are certain data that some people with autism are intolerant towards food that contains gluten and casein and they respond with many physical and behavioral problems such as headaches, stomachaches, nausea, screaming and crying, sleeping problems, hyperactivity, aggression, high

problemi vo spieweto, hi peraktivnost, agresija, preuvstvi telnost kon zvukovi, zamor, depresija, crevni problemi (dijareja, opstipatio, gasovi), u{ ni infekci i duri i konvulzi i. Za da se podobri ovaa simptomatologija treba da se izbegnuvaat oni e vidojni hrana { to gi soder` at glutenot i kazeinot.

Tretmanot so di eta bez gluten i kazein podrazbira pridr` uvawe kon odredeni pravila { to treba da se po-i tuvaat:

- di etata mora da se sproveduva kontinuirano i dosledno;
- nau~ete go deteto deka hranata ne e samo zadovolstvo, tuku i izvor na zdravje;
- odnapred bideote gotovni na isku{ enija i imajte dobra zamena za sekoy vid hrana;
- odnapred obezbedite dobra i vokusna hrana za deteto;
- zdravjeto na deteto neka bi de prioritet i celoto semejstvo neka ja zema i stata hrana kako i deteto;
- povrzete se so drugi lue { to prime nuvaat vakva di eta;
- vni mavajte na saboterite vo i shranata;
- poka`ete i na sredi nata deka sakate na deteto da mu pomognete, a nikako deka sakate da mu go smeni te na-i not na `ivot;
- i spisuvajte go toa { to treba da vleteze vodetski ot organi zam, vkl u-uvaj} i gi lekovi te, vi tami nite i drugo;
- sadovite za gotvewe na hranata i pri borot za jadewe mora da bide posebni;
- produktite koi se upotrebuvaat mora da bide posebno skladirani;
- da se izvestat rodni nite za cele i da se zamolat da ne im davaat na decata tajno od zabranetata hrana;
- nikako ne predavajte se bidej}i na krajot }e bideote zadovolni od rezultati te.

Prehranbeni produkti { to mo`e da se koristat vo di etata bez gluten i kazein se slednive:

sensitivity to sounds, fatigue, depression, in intestinal problems (diarrhea), obstipation, gases), ear infections and other convulsions. Food containing gluten and casein should be avoided in order to improve these symptoms.

The treatment with a diet free of gluten and casein means obeying certain rules that have to be respected:

- The diet has to be carried out continuously and persistently;
- Teach your child that food is not only pleasure, but source of health;
- Be ready for temptations in advance and have good replacement for any kind of food;
- Provide, in advance, good and tasty food for your child;
- The health of your child has to be a priority and the whole family has to use the same food as your child;
- Contact with other people who use the same diet;
- Take care of nutrition saboteurs;
- Show people that you want to help your child and not to change the child's life;
- Examine everything which enters your child's organism, including medicine, vitamins and so on;
- The dishes for preparing food and cutlery have to be special;
- The used products have to be separately stored;
- To inform the relatives about the aims of the diet and to ask them not to give the child secretly the forbidden food;
- Do not give up because, at the end you will be satisfied with the results.

Food products that can be used in the diet free of gluten and casein are the following:

- **Izvori na proteini:** svinjsko meso, jagnečko meso, telečko meso, junečko meso, piletino meso, meso od misirka, patka, fazan, rakovi, kolki, tuna, pastrmka, losos, sardini, jajca, rasti telni proteini - soja, lutoči pi od soja, jogurt od soja.
- **Bračna:** orizovo bračno, soi no bračno, skrob od pčenika, pčenkarno bračno, griz, bračno od leča, bračno od grav, bračno od kosteni, bračno od proso.
- **Zelenuk:** zelenina salata, praz, luk, morkov, celer, magdonos, bel kompir, domati, spanač, cveklo, zelenina pišperka, gračok, borianija, soja, grav, krastavica, tikva, tikviči, zelka, karf i ol, pčenika, trupka.
- **Ovočje:** ovočni sokovi, sok od morkov, sok od cvekla, sok od domati.
- **Zrnasti i semkasti produkti:** orevi, sončogledovi semki, semki od tikva, badešmi, lečniči, susam, leblebički, kikiriki.
- **Druge:** ~ist kakao, ~okolado za gotvewe (bez mleka), margarin bez kazeina, alkoholni ocet, ovočni ocet (bez jabolko i grozje, a ako se sproveduva dieta na gabi, togači ne smee ni vinski ocet).

Prehranbeni produkti { to **ne smee** da se zemaat vo dijetata bez gluten i kazein, se sledni ve:

- mleko i mlečni proizvodi (si rewe, krem-sirewe, jogurt, pavlaka, kiselina mleko);
- pčenica i proizvodi od pčenica (testenini, pčenica na pasta, bračna);
- jačmeni proizvodi od jačmen (bračno);
- ovesi proizvodi od ovesot (bračno);
- 'r' i proizvodi od 'r' (16).

Zaključek

Biomedicinska terapija na autizmom je aktuelen metod i sučitinski je da se sfati

- **Protein sources:** pork, lamb, veal, beef, chicken, turkey, duck, pheasant, crabs, seashells, tuna, trout, salmon, sardines, eggs, vegetable proteins – soybean, soybean shells, soybean yoghurt.
- **Flour:** rice flour, soybean flour, starch, corn flour, groats, lentil flour, bean flour, chestnut flour, millet flour.
- **Vegetables:** lettuce, leek, garlic, carrot, celery, parsley, white potatoes, tomatoes, spinach, beet, green paprika, peas, green beans, soybean, bean, cucumber, pumpkin, squash, cabbage, cauliflower, corn, rape.
- **Fruit:** pears, quince, figs, oranges, mandarins, strawberries, raspberries, blackberries, pineapple, melon, water melon, coconut, dates, bilberries, apricots, peaches, plums, prunes, cherries.
- **Drinks:** fruit juices, carrot juice, beet juice, tomato juice.
- **Grains and seeds:** nuts, sunflower seeds, pumpkin seeds, almonds, hazelnuts, sesame, chickpea, peanuts.
- **Other:** pure cocoa, cooking chocolate (without milk), margarine free of casein, vinegar, fruit vinegar (without apple and grapes, and in diet with fungi, then wine vinegar must not be used).

Food products that **must not** be used in diet free of gluten and casein are the following:

- milk and milk products (cheese, feta cheese, yoghurt, cream, sour milk);
- Wheat and wheat products (pastas and flour);
- Barley and barley products (flour);
- Oats and oat products (flour);
- Rye and rye products (16).

Conclusion

Biomedical therapy of autism is a current method and it is essential to consider that medicine is not

deka lekovi te ne se zameni za drugi te vidi dovi tretman na autizmot. Golem broj deca so primena na ovi lekovi stanuvaat pomirni, pomal kuhi peraktivni, so zgolj emeno vni manje, reduci rana agresija i avtoagresija, dodeka nezainteresi rani te deca stanuvaat pootvorenji.

Analizi rani te vidovi bi omedičinski terapijmožebi, učte nemaat dokačana vrednost, no vo nekoi studiji imale pozitivni rezultati, odnosno vodelo kon podobravawe na autističnata si mptomatologija. Sekako, potrebni se natamožni istračuvava zaredi doutvrduvawe na vistinskata vrednost na ovi lekovi. Vo načata sredina mnogu od navedeni te lekovi voopsto ne se zemaju. Zatoa se nametnuva potrebata od ponuvawane na terapijata na autizmot so nekoj od ovi te vidovi tretman i vo načava država.

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replacement for other kinds of treatment of autism. A large number of children with implementation of this medicine become calmer, less hyperactive, with increased attention, reduced aggression and self-aggression, while uninterested children become more open.

The analyzed types of biomedical therapies might not have approved value, but they showed positive results in some studies, i.e. they led towards improvement of autistic symptoms. Certainly, further research is needed in order to determine the real value of the medicine. A great number of listed medicines are not used in our country. Therefore, it is necessary to start therapy in autism with some types of these treatments.