HYPERBARIC OXYGEN REPORT, Vol. I, No. 1, June 1994

- It Was Called "Childhood Autism" Until Hyperbaric Oxygen Therapy!

The information which follows herein has been given to the National Office of the American College of Hyperbaric Medicine which maintains archival information in the form of professional articles. communications to medical journals. and more informal reports of the experiences and findings of professional persons who have been working with hyperbaric oxygen. It is hoped that the information contained herein will stimulate interest in professionals in large medical centers with departments of hyperbaric medicine, to the end that controlled studies involving large groups may validate the findings reported here.

Little Michael was almost three years of age, but seemed somehow like a little old man. He was a puzzle to his mother. He would not talk, avoided all eye contact with others, and was disinterested in his environment or what was happening around him. He was content to sit most of his day, like the proverbial "couch potato." He was not alert, but could not be said to be drowsy either.

"Childhood Autism?"

He could best be described as inattentive. To look into his brown eyes gave one the feeling that there was no one in-



Above: Dr. Francis Coy is seen here in the hyperbaric chamber with Michael. First treatment day.

Below: After 19th treatment. Michael is developing a sense of humor, and smiling often. Here, he stands up in the hyperbaric chamber in order to make eye contact with others, and wave a hand!



side who cared if he made contact with those around him. The term "childhood autism" is the nightmarish terror of parents in this situation. Reading up on the subject is no help, considering the psychiatric speculations regarding ego-centered independence covering delusions of a selfsufficiency which excludes any need for contact with others, and condemns the child to a life of omnipotent fantasies with absolute withdrawal from the real world.

Birth Trauma?

Still, was it possible that there was a physical reason for his behavior? There was a question of birth trauma, but in the absence of straightforward neurologic signs or a seizure disorder, doctors were reluctant to attribute brain damage or even brain dysfunction as the reason for Michael's failure to thrive. Beyond one pediatrician's counsel to try mineral oil for the child's problem of constipation, no recommendations were forthcoming from doctors, except to give matters time to work themselves out. Meanwhile... [Cont'd on p. 2]