THEHIGHWIRE

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DURATION

1h 46s

15 SPEAKERS

Universal Broadcasting Network announcer

Del Bigtree

HLN News reporter

ABC 7 News reporter

CBS WBZ News reporter

NBC Nightly News reporter

Speaker on ABC 7 News

Speaker on NBC Nightly News

Catharine Layton, Informed Consent Action Network

Patrick Layton, Informed Consent Action Network

Heidi Bonaroti

Nick's mom

Nick

Barry Smeltzer, MPAS, PA-C BCIP

Dr. Marco Ruggiero

START OF TRANSCRIPT

[00:00:08] Universal Broadcasting Network announcer

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[00:00:18] Del Bigtree

Hello and welcome to HighWire. I hope you don't mind if I do this the rest of the show. I finally discovered the beauty of fidget spinners and I cannot stop. If this hasn't started annoying you taking place in the children across this country, then you're not wired like I am. But check it out. If you know nothing about fidget spinners, they're talking about in the news.

[00:00:39] HLN News reporter

Have you ever heard of this, it's called fidget spinners.

[00:00:42] ABC 7 News reporter

Into fidget spinners.

[00:00:43] CBS WBZ News reporter

These fidget spinners.

[00:00:47] CBS WBZ News reporter

At the moment, it is the fidget spinners.

[00:00:50] NBC Nightly News reporter

Fidget spinners.

[00:00:51] ABC 7 News reporter

They're called fidget spinners.

[00:00:53] CBS WBZ News reporter

This is a new toy meant to relieve stress and focus children.

[00:00:57] ABC 7 News reporter

Some of them call them stress relievers for children, but others say they can be a distraction.

[00:01:01] Speaker on ABC 7 News

It just became like a cool, trendy toy, overnight almost.

[00:01:04] ABC 7 News reporter

Manhattan toy store. In just 48 hours, they sold more than 300.

[00:01:09] NBC Nightly News reporter

But to some kids, they're more than a toy. Her son has ADHD and she says fidget tools help him focus. Her preference.

[00:01:17] Speaker on NBC Nightly News

Teach the children what they are, what they're for, what their intended purpose.

[00:01:22] NBC Nightly News reporter

Is. A nationwide debate spiraling around a pocket-sized gizmo.

[00:01:28] Del Bigtree

Alright, this is HighWire today. I want to talk a little bit about fidget spinners. You know, I have a kind of a theory. This thing may actually be able to determine whether your child is vaccine injured or not. I don't know, I'm just putting it out there, but if you have a kid that cannot stop doing this all the time, you know what we call this? We call this repetitive behaviors. Do you know why this thing was designed that's now your child's favorite toy? It was designed, as USA Today put it, "Fidget spinners: How they went from being a toy to help autistic kids to being a national phenom. 'Fidget Spinners have been around for years, mostly used by kids with autism or attention disorders....' '...toys to occupy restless hands have been hot sellers since the beginning of the year.'" Why do all of our kids have restless hands? Why are they all addicted to constant, repetitive behaviors? Is it possible that we're seeing something brand new in our society? Is this obsession with fidget spinners pointing out that our children's brains are not working the way they're supposed to? Now, I don't know, maybe it's a vaccine injury, maybe it's the fact that your child's on an iPad all day long and constantly taking in stimulation like this, where they cannot stop moving now so they got to give them something to do like this so they can read or so they can do math. We've got to keep them going, we got to keep that attention going, we got to deal with that nervous energy.

[00:02:51] Del Bigtree

There's got to be something wrong with this. I mean, I'm not really a doctor. I'm not a doctor. I'm not not anywhere near really, but I've written for them on television. But here's the point. Why is there an obsession with constantly having to fidget with things? Why can't our kids sit still? Why can't, I mean honestly, is this the answer to the future? Can you imagine a world where everybody just walks around doing this all the time? Maybe if they're really good, they have two or maybe they can balance one on their nose, you know, everywhere they go. I mean, there's like competitions on how clever they can be with these things. Seriously, go throw a football, throw a baseball. I don't know, take some piano lessons. Let's put this energy into something that's productive. If your kid cannot sit still and constantly needs to be fidgeting with things, maybe they have a problem. Maybe you should stop vaccinating right away. Maybe you should start feeding them organic food. Maybe you should start getting bottled water instead of that fluoride-filled crap coming out of your tap. I don't know. Start somewhere, but it's not normal, and you shouldn't be engaging with it, you shouldn't be buying these things for your kids, here's why. All the people that use these spinners that had autistic children, you know what they're trying to do with their autistic children? They're trying to break the repetitive behaviors.

[00:04:02] Del Bigtree

They're trying to get them to stop doing things that are repeating all the time. Don't add, you know, don't add this into your child's repertoire that we want them to be constantly doing repetitive behavior. You know, I was thinking about it today before I started, I actually developed my own repetitive behavior. This is a true story. I realized that, you know, at a certain point, I think I was about 20 years old, and I realized that every time I was going to make an emphatic point, I would lick my fingers. I'd be like, so today on HighWire, the most important thing I got to say today is, maybe it's vaccines. I mean, and I caught myself, like why the hell am I licking my fingers every time I'm about to say something important? It was really bizarre and I couldn't stop it, and people started pointing it out. And I'm thinking, what is going on? Where did this come from? How did I develop this repetitive behavior where I lick my fingers? And then one day, I was a waiter at the time, which I did for about 20 years before I ended up finally getting a career rolling. That's that's the way America works, by the way, it takes you about 20 years to get your career started, so no one can buy a house, no one can have kids, no one can get married until they're about 45, but that's a whole other show. Let's get back to repetitive behavior. I was doing this all the time.

[00:05:13] Del Bigtree

Every time I'm about to make a statement, and I started catching myself, but I couldn't stop it. And then I figured out where it came from. I was waiting tables one day, and I worked in this restaurant where you had this little pouch with the card that you would write the order on, and I realized that in order to grab it, I would lick my fingers and grab it and pick it up to write on it. But I only did that right at the point where I'd say, Hello, folks, what would you like to order today? And that repetitive behavior of licking my fingers, asking them what they want to order today and grabbing that check developed a repetitive behavior that I really had to go out of my way to stop it. So what I'm saying is, if you don't want your kid doing this all the time, the rest of their lives, and having to get therapists and take therapy and figure out how to get rid of this, this twitching I have in my hand, don't start it. That's my advice for you today. Get this thing out of the house. Forget the fact that it has lead and mercury and all the other things we're discovering, it's a totally toxic, disgusting mess that's probably even going to create more mental damage and then your kid's going to need a fidget spinner on his toes and every one of their hands. Anyway, that's it for fidget spinners today. Today I have a very special show.

[00:06:21] Del Bigtree

I'm going to do something that a lot of people have shied away from. I want to talk about attempting to cure autism. There are many, many parents across the country that I've met around the world that are using different types of therapies to literally draw their child out of the autism spectrum disorder. I've met children that literally could not communicate, weren't speaking, stemming, all of the issues with autism, and through several different techniques, their parents have pulled them all the way out of autism. Now they're functioning, many of them perfectly healthy, and returning back to the grade that they left years earlier and going on through college and having regular lives. It's a spectacular thing that it's even possible, but I want to put out a caution today. Not every single procedure works for every single parent. And this is why a lot of people avoid having this discussion, is because we simply don't want to give false hope. But I do believe that there, you know, for a fact, children are being drawn out of autism and what I think a lot of medical professionals that get involved in this issue say is, we can definitely make your child's life better, and then some, you will never recognize that they had autism before. But when we talk about repetitive behaviors, this is one of the issues of autism. It's not the only thing that defines autism, but it's what many parents talk about. Take a look at this young child. [Home video shown].

[00:08:14] Del Bigtree

Okay, if you found your head tilting to the side because you were watching that video, it could be because you have a vaccine injury. No, I'm kidding. We loaded that video in and it was sideways, and I got one guy back here, Jarvis, who's trying to do the work of 20 people and coming into this show, we decided, let it rip, it kind of makes the point anyway. But you see this child, up and down, bobbing, focused on one place in a carpet. A lot of times you'll see these children enamored by fans on the ceiling or light issues where they just totally fixate on it. That child is the child of two people that work with me. I have Patrick and Catharine Layton with me. Actually, you have produced the show today and done a wonderful job, except for the sideways video of your own kid. But we'll talk about that later. No, I wanted to bring you in because, you know, you work with me. We met during the screenings of VAXXED. But as we talk, one of the issues you deal with is you're trying to recover actually two children, and that was, was that Brennan?

[00:09:19] Catharine Layton, Informed Consent Action Network

Yeah, that was Brennan, our younger son.

[00:09:21] Del Bigtree

Brennan, your younger son. Now your older son. Tell me just very quickly, you had two kids. How did you discover that they were on the autism spectrum, what happened?

[00:09:31] Catharine Layton, Informed Consent Action Network

Well, our older son, we had a difficult delivery and he was fine and then he started regressing around one year old, so we just figured, oh, that must be it, he had a slow regression. A teacher said that we, you know, I think your kid might have autism, so we took him in and, you know, went through the usual and got the diagnosis. We had the younger son and I remember praying to God, thanking him, oh we have a normal kid. He'll teach Asher how to be, you know, neurotypical. And then we took him in for shots and we had kind of a big reaction, and so then he was diag-, I actually had to wait five months to get in for the diagnosis, but we knew he had it.

[00:10:06] Del Bigtree

Did you know pretty soon after the vaccine?

[00:10:09] Catharine Layton, Informed Consent Action Network

Yeah.

[00:10:09] Del Bigtree

What, you just said it's the vaccine that did it.

[00:10:12] Catharine Layton, Informed Consent Action Network

Well, his. Yeah, nothing else had happened. Well, he had, his eyes swelled shut and so the doctor said, oh he must have an ear infection, and so we took him in and got him on antibiotics and then it was just, he was gone. He even looked different. His face changed, his whole behavior changed, it was very dramatic.

[00:10:29] Del Bigtree

Of the two of you who started the research first, who started digging into this and saying, I think it's, I think this is the vaccines that are doing.

[00:10:36] Catharine Layton, Informed Consent Action Network

It was me. I went online and looked at the ingredients and I said, oh my God. And I was kind of disgusted with myself, I hadn't even looked at it before, I just trusted the doctor.

[00:10:46] Del Bigtree

Right. And when, you know, how is this dynamic as a couple, when your wife comes to you and says, we got to stop vaccinating or it's the vaccines, how did you respond, Patrick?

[00:10:57] Patrick Layton, Informed Consent Action Network

We weren't receiving the information that we needed from our doctors. We believed that our children had been fine previously. We didn't understand what it was, but we knew it was happening and we wanted to stop it, and it was when we saw our younger one that we realized there might be a connection or a vaccine reaction, and that's where Catharine kicked into gear researching. To be honest, at that time, I kind of stuck my head in the sand. I focused on work and it was a tough time. It was a troubling time. I didn't really, to be, I didn't really want to deal with it. And Catharine was the one who jumped in and she would keep coming to me. I'd get home from work sometimes really late, so she'd have to wait until the next day to tell me or she'd be up when I got home at 2 a.m. and, you know, or late. And she'd say, did you know that this is in vaccines? Did you know that there's this research out there that suggests that they can speak again, because our pediatrician had told us, don't expect to ever hear your child's voice.

[00:12:02] Del Bigtree

Yeah, let's just get on that. What are you told by the medical professionals, and, you know, and you've talked to a lot of other people that have had their children diagnosed. Are you told, don't worry, there's hope, we can recover these children, we've got techniques we can use now?

[00:12:16] Catharine Layton, Informed Consent Action Network

No, no. For our older son, it wasn't as bleak. They said, you know, he probably will never talk, and so just prepare yourself for that. But Brennan, our younger son, was much more severe. When I went to the neurologist, she told me, you guys need to start saving because he'll be in an institution one day. Just prepare yourself, that's what's going to happen.

[00:12:36] Del Bigtree

That's it. That's the best that medicine has to offer, prepare for the institution.

[00:12:40] Catharine Layton, Informed Consent Action Network

Yeah. And I already knew he was going to be diagnosed so I had been reading, and so I went in there and I said, well, have you read this book, have you read this literature, are you familiar with this? And she'd say, no. So they really don't know.

[00:12:49] Del Bigtree

So you said that book, this book. So you were reading that there was ways to possibly heal your child?

[00:12:55] Catharine Layton, Informed Consent Action Network

Yeah.

[00:12:56] Del Bigtree

When did you decide, screw the medical profession and what they're telling us, we're breaking out on our own and we're going to try something else?

[00:13:04] Catharine Layton, Informed Consent Action Network

Well, I had taken my older son to a MAPS doctor, which is a Medical Academy of Pediatrics Special needs, which they kind of specialize in that. And we spent a lot of money and were given some treatments that didn't work with him and he regressed. And so at that point, I kind of had it with everybody, to be honest with you. No offense to all the doctors that do a lot of good for our kids. So I just started researching it myself. There's a lot of Facebook groups full of moms, and mostly what I've learned is from other moms and then reading my own research, doing my own research.

[00:13:36] Del Bigtree

And so what has been, you know, and I want to caution again, look it, whatever we talk about today, whatever doctors and parents we talk to, I just want you to know that there's hope, there's things you can do. I'm not saying that a certain technique works. I think people make a lot of money off this, too. The new vitamins, like anything else, there's parents out there that are really desperate that will try anything. But I do want to discuss things that, you know, people that are having success, you'll have to find that path on your own as you, Catharine, and you, Patrick, have found. What was the thing, what was the first thing that you said, oh my God, this is working, what did you try?

[00:14:14] Catharine Layton, Informed Consent Action Network

With our older son, we did a therapy called Sensory Learning, which is, it's kind of like three senses at one training, and it's almost like an advanced form of neurofeedback. And so our older son Asher was vomiting, anytime he put something in his mouth he couldn't talk. He didn't respond to anything, he was just not there. And I say after the fifth treatment, I remember, I walked in the house with him and Patrick said, hi Asher, how are you? And he said, hi dad, I'm fine. And we were like, oh my God. And he stopped throwing up anytime he put something in his mouth.

[00:14:48] Del Bigtree

Why was hi Dad, I'm fine a moment?

[00:14:50] Patrick Layton, Informed Consent Action Network

Prior to that, it was mimicry, echolalia. He would only repeat words that we would say, or he would say the words we were prompting him to say. And so we were trying to sort of train him that these are your responses, please, and thank you, and yes, no, hi, bye. And all he would do is repeat. He didn't understand.

[00:15:15] Del Bigtree

So like, I mean, not to, but like a parrot, like, parroting it back to you.

[00:15:17] Catharine Layton, Informed Consent Action Network

Yeah, exactly. Yeah, exactly.

[00:15:19] Patrick Layton, Informed Consent Action Network

So the fact that, unprompted, he responded to a question blew our minds and we both lost it completely, started bawling in the middle of the kitchen and laughing and hugged and we couldn't believe that our child had broken through for a second. So that was a big, the sensory learning was big. I noticed diet change.

[00:15:43] Catharine Layton, Informed Consent Action Network

Oh, yeah, diet.

[00:15:43] Patrick Layton, Informed Consent Action Network

We noticed a big difference in his repetitive behaviors, in his fidgeting, just from diet change, just from going gluten free, dairy free. He does have some dairy now but.

[00:15:57] Catharine Layton, Informed Consent Action Network

He's not sensitive to dairy, but our other son doesn't eat dairy.

[00:16:00] Del Bigtree

Right, so.

[00:16:01] Catharine Layton, Informed Consent Action Network

So he's dairy free, gluten free.

[00:16:01] Del Bigtree

So changing the diet really made a huge difference, you could see them, you know. And Asher, the oldest, is doing really well now, right. Is he going to a special needs school, like, where is he at?

[00:16:13] Catharine Layton, Informed Consent Action Network

No. He just graduated from a mainstream preschool like any other kid. Got up there saying, like, you would not have known that he had autism. And I spoke with the preschool director a couple of weeks ago and she said, yeah, I would not consider him autistic at all anymore, it's so amazing.

[00:16:26] Del Bigtree

Wow.

[00:16:27] Catharine Layton, Informed Consent Action Network

So, I'm really happy with that.

[00:16:28] Del Bigtree

And so, folks, I mean, this is happening. I have another mother I want to bring into this discussion who's also had a lot of success. Heidi is joining us. Heidi, can you hear me?

[00:16:38] Heidi Bonaroti

Hi. Yes, hi Del. Thanks for having me.

[00:16:40] Del Bigtree

Hey, cool. Let me just have that over here so I can hear it. Hold on a second. Alright. So, so Heidi, what was your experience? I mean, your, you know, where did you, how old was your child when they had an autistic diagnosis?

[00:16:56] Heidi Bonaroti

He had just turned three years old. But prior to that, when he was two, or I would say at about 12 months, he had language, he came right on his due date, no complications through pregnancy, everything was moving along beautifully. But at about 18 months, that's when he got the MMR vaccine, and we saw immediate loss of eye contact, isolating himself from us, loss of language, significant loss of language that he had. And it was devastating for us. We thought, what happened to my child? It's just like the lights went out.

[00:17:35] Del Bigtree

Now what happens when, I mean, so it seems so dramatic and sometimes it's more dramatic, for some parents it's almost immediate. Others, they sort of watch these ability to speak and walk and things like that disappear over time. Did you talk to your pediatrician about it, did you say something's wrong? Did you at first recognize it was the vaccines? Like, how did it, what was your thoughts at that moment?

[00:18:02] Heidi Bonaroti

Well, as a mother and I'm also a pediatric occupational therapist. So at that time, when I noticed this in my son, my entire caseload had autism. And I knew that the kids on a healthy diet were doing the best. So I said to my husband, you know what, I know it's going to be a pain in the neck, but we have to try it because I see these kids getting better. So prior to the diet, he just had one word statements or nothing at all. And three weeks into the gluten-free, dairy-free diet, he put his hand on the door, looked right at me, and said, want to go outside. And I was like, we're doing this. It was huge, huge game changer for Ben.

[00:18:49] Del Bigtree

It's got to be hard for, I think, parents who have healthy children to understand what that moment must be like. I mean, I think we all get excited for those first steps in our child or the first mommy, daddy. You know, oftentimes parents with injured children have all of those great elated moments of mommy, daddy, first steps, and then all of a sudden it just disappears, and I can't. And then when they finally do speak, they're just maybe repetitive, as you've pointed out. But that moment where you see, oh my God, my child's coming back, I just, I can't imagine what that must feel like.

[00:19:27] Patrick Layton, Informed Consent Action Network

We celebrate, where a lot of parents with typical kids are celebrating, you know, t-ball seasons being completed and different various clubs, we're celebrating the first time our children interact with another child, the first time our child does imaginary play, the first time they keep a food item that's not a piece of bread or a carbohydrate down. You know, they, oh my gosh, they ate the piece of that chicken or they ate, they actually ate some avocado without gagging on it because of the texture difference, that kind of thing.

[00:20:03] Catharine Layton, Informed Consent Action Network

Or we could go out in public and not have to run home because we had a meltdown.

[00:20:07] Patrick Layton, Informed Consent Action Network

Yeah.

[00:20:08] Del Bigtree

Wow. So Heidi, just sort of very quickly take me through what you think were the most effective things that you used in treating your son.

[00:20:20] Heidi Bonaroti

Yes. Well, number one was the diet. He had high levels of candida, which is a very, it's a harmful form of yeast that cause toxic overload of his system. And not only was it affecting his gut, it was affecting his brain. So any fat-soluble liquid will pass through the blood-brain barrier and make a child high or drunk or, as we say, he would eat hamburger buns like they were going out of style. So when we cleaned up the diet, that was a huge game-changer for him. Another thing that we did was a really good probiotic, and which now we're doing Bravo, which I love, but it wasn't around back then. So I tell parents, get your kid on a good diet, get them on a good probiotic. And then for us, we did intensive applied behavioral analysis. So 25 hours a week of therapists coming to our house around the clock, standard therapies like OT and PT. We did do speech, but unfortunately it's really hard to find a speech therapist that knows autism. So ABA was our speech therapy.

[00:21:27] Del Bigtree

Now ABA is accepted, isn't it, in the medical community? Isn't that, is that one of the only things I think they do really support is ABA therapy for kids, correct?

[00:21:37] Heidi Bonaroti

It's the only research-proven method to prove or proven to help kids with autism learn. Now, there's other things, but it's very well-respected in the medical community.

[00:21:47] Del Bigtree

And you know, what do you say to someone that says it's not the diet, it's not the other stuff you're doing, it's just that you were really, you know, very adamant about the ABA therapy. Do you believe your child would have been in the same position had you not done all the diet and other things but just went to the ABA therapy?

[00:22:06] Heidi Bonaroti

You know what I tell somebody that says that? I'll say, if you don't believe me, what happens to you when you have a drink, a beer or a glass of wine? It passes the blood-brain barrier. It's the same with our kid, our kids. So it causes a reaction to the brain, and especially kids with leaky gut.

[00:22:25] Catharine Layton, Informed Consent Action Network

I would say too, we never did ABA, so they don't even have an argument with that with our kids.

[00:22:32] Del Bigtree

So you've just used diet then as a way to get it?

[00:22:36] Catharine Layton, Informed Consent Action Network

Well, not just diet, we've done other things. I'd say our biggest, and I know this is very controversial with the autism community, but our biggest intervention has been chelation.

[00:22:44] Del Bigtree

Chelation. Now this is something that, I mean, I've seen chat rooms talk about this. There are pro-vaccine people that will say things like anyone who chelates their child should be arrested, or anyone. I literally just read a pediatrician in Oklahoma that put out a, I believe it was a tweet saying, anybody that tries to recover their child from autism should be arrested. Can you imagine a statement by a doctor on something like that? They're so ensconced in this idea that you cannot heal these children that they would like to see you arrested, when, as I think what's fascinating because I've traveled the country on this, and I say it's the warrior mothers, not to knock you out. Patrick, but your response, I think, is what men have. And I would see that myself. I see it in the small things around, you know, my healthy children. You know, moms just have some instinct, they want to dig in there, and I just, I can't handle it. It's, you know, it's just too much. I see these fathers, they just go to work and they say, figure it out, baby, I'm just going to make sure we bring enough money in here. But, you know.

[00:23:51] Heidi Bonaroti

I'm sorry.

[00:23:52] Del Bigtree

Go ahead, no.

[00:23:53] Heidi Bonaroti

Oh, no, I was just kind of thinking, in our early years, those were the main things that we used to really help then, but we have some really cutting-edge interventions that we have done lately that has been a huge game-changer for men, and that's our, it's called Rerum, which is a vitamin D emulsion.

[00:24:11] Del Bigtree

What does that do? Why does that, how, do you know how it works, is there, how do you, have you come to the, what's it doing?

[00:24:19] Heidi Bonaroti

Okay. So Rerum is, it's a vitamin D emulsion that consists of vitamin D3, oleic acid and chondroitin sulfate. And those three things combined make it a super molecule. So when it enters the immune system, it releases macrophages, which will then target cells that shouldn't be there, which will then help restore the immune system. So for our son, he's been on Rerum for about 15 months, and we have just seen miraculous changes in him. I mean, he has conversational skills now. He interacts with kids his age and older. His eye contact is independent. I mean, he's performing at grade level with handwriting. He's improved three grade levels with reading. He's become a very gifted artist. So this for us, with the diet, I just, I can't say enough about it. It's just been a real answer to prayer for us.

[00:25:23] Del Bigtree

Fantastic. So when you say macrophage, I think that's been explained to me. It's sort of like the little, like they're almost like the Pac-Mans, I guess, of your immune system. And what they do is they seek out heavy metals and things that shouldn't be in your body and they eat them up and try to clear them out of your body. So if you can increase the macrophage, it would make sense, obviously, that that would, would be a good thing to do. Now, chelation. You use, you know, I mean, first of all, chelation can be somewhat, I mean, and it's somewhat controversial even in the movement itself. I know, I think when we think of chelation, we think of these injections of chemicals that attract metals. And the idea of chelation is chelating the metal out of the body, so mercury, aluminum, you know, heavy metals that are toxic, especially if they end up in our brain. The extreme, I think, version is you inject a liquid that attracts metals and then it's pulled out of your body, but that's not the, that's not the form you're using. How do you relate your child?

[00:26:25] Catharine Layton, Informed Consent Action Network

We do a chelation that's known as ACC chelation, which is Andy Cutler chelation, who's a Princeton-trained chemist, PhD, who developed the protocol, actually on himself because he was poisoned from his amalgams. So it's, you know, it's very low dose. It is tough because you have to dose every three hours for 72 hours, meaning in the middle of the night. So you're up in the middle of the night giving your kid, it's oral, or you can do transdermal, you can make like a lotion. Our younger son, we could not get anywhere near his face when we started, and after 20 rounds now he takes it orally. But it's very low, low dose, very safe, and everything you you need for that, you just buy at the grocery store.

[00:27:03] Del Bigtree

So they're just average...

[00:27:05] Catharine Layton, Informed Consent Action Network

Alpha-lipoic acid is what we use. And it's a, it crosses the blood-brain barrier and picks up mercury and other synergistic metals.

[00:27:12] Patrick Layton, Informed Consent Action Network

And it's a supplement. It's a vitamin, you can buy it at grocery stores all over the country.

[00:27:19] Del Bigtree

Now, how do you know it's working? How do you know, I mean, I would say placebo effect. I'm a big believer in mind over matter, placebo effect. We know this is something that exists, is it because you so passionately want to believe this is working, that that's what's doing it?

[00:27:34] Catharine Layton, Informed Consent Action Network

Well, I would say that when we don't round, they don't get better, they kind of stall out. So a round is when you go through the 72 hours. And so, you know, we'll do a round, we don't do it every week like you can because we just can't do it without the sleep. But, you know, if we don't do it for a month, they kind of stall out. And then once we do it again, they kind of pick up more or they gain more or they gain more.

[00:27:53] Del Bigtree

Is there a way to test that you're actually getting the metals out of their bodies?

[00:27:56] Catharine Layton, Informed Consent Action Network

Yeah, we've done stool and urine tests that show that, you know, mercury and aluminum are being excreted when we're rounding.

[00:28:02] Del Bigtree

Wow. I want to move on, we have a couple of doctors we're going to talk to that are working on this. But Heidi, what would you if you, you know, to speaking to parents out there that may be watching right now that just got an autism diagnosis, what would be your recommendation, what would you want to say to them?

[00:28:22] Heidi Bonaroti

More than anything. Well, we know the great philosopher Hippocrates said all disease starts in the gut. And we've been on the journey 13 years, and I would say, you know what, this is all about healing the gut, you heal the problem. And that is why so many of these interventions are working. So get your kid on a healthy diet, get them on a very good quality probiotic, and what's working for one child won't work for another. So I always tell them, try one thing at a time, so you can keep a journal so you know what's working. And what what's going to work for Ben won't work for Brennan. And so the Laytons have had great success with the things that they're doing and so will other parents. So the key is to always keep doing something and stay connected with parents, you know, surround yourself with warriors and parent support groups.

[00:29:15] Del Bigtree

How do you find the right approach? I mean, you know, there's lots of doctors out there, lots of vitamins, lots of things, you know, what do you think... <video cuts out and back in>

[00:29:25] Patrick Layton, Informed Consent Action Network

Because they are trusting their gut to know that it was an injury, that the issue from their child is most likely, not necessarily always, but more than likely a biological issue that can be treated, and that some improvement in the quality of their life, if not recovery completely, is possible. So you have to have faith that that is going to come, that that improvement is going to come. You have to trust your gut. And I believe that the science is far behind the mothers in this movement. And while we wait for the mainstream science to catch up to moms, moms are the best resource. Get into those social media groups. There are a lot of good ones out there. The one that, one of the ones that we started with that actually turned us on to the low dose, high frequency chelation, there's a book called Fight Autism and Win, the second edition. There's a group there.

[00:30:22] Catharine Layton, Informed Consent Action Network

There's another group called Recovering Kids Biomedical Healing. There's also a great organization called Talk About Curing Autism, Generation Rescue, Autism Action Alliance, National Autism Association. A lot of really good organizations.

[00:30:36] Patrick Layton, Informed Consent Action Network

We could not agree more with Heidi. Each child has individual issues. There is no greater or more knowledgeable caretaker of that child than their mother and father. So dads get involved, understand what it is that moms are researching. Get into those groups yourself and read about them. You may have an idea or a thought that mom doesn't have. And talk to those great medical professionals like the few that you're going to meet on this show today and more. There is a great network out there of doctors who do want to learn and who are helping to treat and recover our kids. So just trust your gut and love your child and have faith.

[00:31:16] Del Bigtree

I really appreciate, Heidi, you sharing and Patrick and Catharine. Whether you realize it or not, and if you're new to just even tuning into this subject, parents are under attack. There are pediatricians out there, there are Child Protective Service groups that so totally believe that you cannot heal your child, that if you even attempt it, you're going to find yourself in, you know, really fighting to maintain custody of your child. I cannot believe that that's happening in the United States of America. And it's amazing to me, you know, honestly, you know, we know that the new head of the FDA was put in charge that are trying to start fast-tracking cancer drugs and AIDS drugs because we get so frustrated that someone that's dying is not allowed to try a drug that may or may not work or get on to a trial. You know, what difference does it make? You know, honestly, if I want to take this risk, and I think that these parents of autistic children, I mean, for some of these children, they're in such dire need of something. Medicine is denying this, they're looking the other way, they're burying their heads in the sand and thank God these parents, you guys, these warriors that are out there are finding ways and finding doctors and finding specialties. But I appreciate you taking the risk today to share your story, and if you're listening out there, we'll continue to have more episodes like this in the future. And as I said, none of these things are guaranteed, but parents are having success. As Patrick said, start that journey, look inside of yourself. I want to show you a video of a child, that's, you can, it's a really neat video because you get to watch their transition into autism, through autism, and then coming out the other side. Take a look at this, it's really fascinating.

[00:34:11] Nick's mom

Hi, Nick.

[00:34:12] Nick

Hi.

[00:34:13] Nick's mom

How old are you now?

[00:34:14] Nick

11.

[00:34:16] Nick's mom

11 years old. What are your favorite things to do at 11?

[00:34:19] Nick's mom

I play the Wii, doing Legos, having Nerf wars, going places, and going outside.

[00:34:25] Nick's mom

That's cool. How's summer going?

[00:34:30] Nick

Awesome.

[00:34:30] Nick's mom

How'd you get better, Nick?

[00:34:32] Heidi Bonaroti

I drank a <unclear>, you made delicious meals that are healthy, and dad gave me so much that helped me.

[00:34:43] Nick's mom

That's so true. That is so, so true. That is pretty much the gist of what we did. We just went back to the basics of life and gave you good things and helped your body in the way it needed. And look at you now. We're so proud of you, babe. Love you.

[00:34:59] Nick

Love you, too.

[00:35:01] Del Bigtree

Can you imagine losing your child, having a perfectly healthy child running around, walking, talking, saying their first words like, I love you, mommy, I love you, daddy. And then you take him and you do what you were told to do and you vaccinate that child, and then suddenly seizures or fevers or you just slowly watch their eyes change and they're not making eye contact or they're losing speech or losing words and slowly their vocabulary is disappearing and they're starting to stumble around, they're having more difficulty walking than they did. And then they start these repetitive behaviors where they keep stemming is what they call it, or they're pounding their head against the wall. I mean, the stories go on and on how difficult autism can be. And then imagine you find a way to bring your child back out of that against what everyone in medicine is saying. They're saying it's not possible, but you find a way. I have two doctors joining me today, Barry Smeltzer and Dr. Marco Ruggiero. Both of these guys are having some success in treating children with autism. And I'm going to talk to you, Barry, first, because that was your son, Nick.

[00:36:10] Barry Smeltzer, MPAS, PA-C BCIP It was.

[00:36:11] Del Bigtree

And just tell me, you know, were you the one that figured it out, was your wife? First of all, who first decided, you know, recognized that something was wrong with Nick?

[00:36:22] Barry Smeltzer, MPAS, PA-C BCIP

Really, it was all my wife. I mean, just like with Catharine, it is something where I was working mainstream medicine at the time, Del, so if there was anything going on, my wife was way ahead of me in regards to understanding not only what was going on behaviorally, but also what was going on medically. And when Nick started to regress, we had noticed that, slowly, especially after different rounds, whether it had been his DTaP or his MMR vaccines or another round of antibiotics that he ended up being on, you know, and he slowly started losing that speech. Then he even, you know, each round he lost more and then more. And eventually we got to the point where he was eating maybe, you know, three, four foods and going to the bathroom, having a bowel movement once, you know, every 3 to 4 days. And when we actually got him evaluated with the developmental pediatrician, he, or I should say she literally watched him play with a couple of the therapists that were there at the time and did her checklist, and at the end of that meeting, oh, by the way, your son has moderate to severe autism. You know, he'll probably end up in a group home, so you probably should get your affairs in order.

[00:38:00] Del Bigtree

Wow, the same thing that Catharine was told. Now what. So you said, you know, your wife really made the discoveries on what to do. Where did you start? What was the first thing that, you know, went against? Well, let me let me ask you this. You're told that medicine can't heal this, that you better just prepare to put your child in a home. Did you fight your wife when she wanted to try some alternative techniques or something? Was there any part of you that said, you know, where were you at?

[00:38:31] Barry Smeltzer, MPAS, PA-C BCIP

Well, the good news is, is that we have a relationship where, when it comes to our children, and I knew what she was doing. So when we went to the developmental pediatrician, it hit me like a ton of bricks. I was shocked. I was hopeless. I was the one who was, you know, in denial, much more so than she was. By the time we got that diagnosis, she was already doing the research. She is already reading Jenny McCarthy's book at that time, which was brand new. You know, this was back in 2008. And she was the one who said, you know what? We're changing the diet. And you asked, what was the first thing that we noticed? She cleared out our pantry. She literally went 100% gluten free, dairy free, soy free. 72 hours, Del, our son looked like he was detoxing from drugs. He wouldn't sleep. He was irritable. He wouldn't eat, barely drank anything, had night sweats. I mean, if you were to put somebody in a hospital, you'd say he's going through detox.

[00:39:47] Barry Smeltzer, MPAS, PA-C BCIP

But this is a kid who had lost all of his speech, all of his eye contact, and after the third day of this, which we were both like, God, should we just stop this, because this was insane, got our first word back. I told her, you know what? Whatever you're reading, whatever you're doing, throw it at me. It took, it was that immediate. And I think that's one of the reasons why, number one, Nick was a great responder, and that's something that, as I've seen now, thousands of patients, it can't be stated enough that if you do simple things and you're seeing benefits, that's a great sign. And the other thing was, is that we were in it together. I mean, you know, she was the one who has always been at the cutting edge of learning new things. And then she would come to me and say, hey, what do you think about this? And then I would take the medical background and take it to another level, and that's how we ended up finding new and innovative things, and that is what helped our son. And I agree with you, there is no protocol for any of these kids. And it really takes a village, it takes an army. You know, the groups, the parents, the forums. And then you find somebody who will be your partner in crime. All of that is what gets these kids better, because these are the most sensitive, difficult, complex patients I've ever dealt with, but they're also the most rewarding cases because everybody's already given up on them. You know, these families, when they get to someone like me, they've already been to their pediatrician, they've already been to the neurologist, they've already been to the developmental pediatrician. So if they're coming to see me at that point, they're on their last straw as far as hope. So thank you, Del, for allowing them to hear from parents and from someone like me and Dr. Ruggiero that there is hope.

[00:41:56] Del Bigtree

Alright, I want to bring Dr. Ruggiero into this discussion. Dr. Ruggiero, it's an honor to have you here. I mean, as I travel the country, I hear your name a lot. And I don't have injured children, so I've never directly worked with you, but what got you into working with children on the autism spectrum disorder in that group? How did you get involved in this?

[00:42:21] Dr. Marco Ruggiero

Well, first of all, let me thank you for this great opportunity. I hope that everybody will be able to understand me despite my thick accent. I'm doing my best to learn some Arizonan accent, but I'm not good at that as yet. What, I would say who. And it was Dr. Jeff Bradstreet who brought me in this field. When I first met him at a immunology conference in Frankfurt, Germany, in 2013. I had been working in the field of neurosciences and experimental immunotherapy and oncology for the previous 30 some years, but at the NIH, at the Big Pharma Burroughs Wellcome and also at the University of Florence. And we met with Dr. Bradstreet at this conference on immunology, and he shared with me his ideas of how a radiology, I am a certified radiologist, how radiology could help identify the lesions in the brains of autistic children, and how immunology or I should say immunotherapy could help restore those lesions. So we began a very fruitful collaboration that brought two peer-review papers that are among the, in the 5% percentile, this is among the most read scientific papers of all, where we identified the lesions in the brains of autistic children through a method that is easy, reproducible and completely harmless. It is called a transcranial ultrasonography. And also we were able, just a few days before his untimely death, we were able to publish another paper describing what we now call the pathogenesis of autism. I think that we all agree that the cause of autism, or, as we say in medicine, the etiology of autism is not known. So we cannot pinpoint one single cause, like, for example, in tuberculosis, we know it's the Mycobacterium tuberculosis.

[00:44:19] Dr. Marco Ruggiero

But in autism we may say there are many co-factors, we may say it is multifactorial. But what Bradstreet and myself and my wife Pacini did was to identify the pathogenesis, that is, how does autism develop and therefore how we can try to address these alterations. Actually, we found that there is a disruption in the flow of lymph from the brain, so the brain cannot drain all its toxic waste, whether it is dead cells or whether it is metabolized or if you prefer to call them toxins or toxicants or metals or whatever. And so the brain became clogged with all these toxic substances and cells and maybe also infectious infection or pathogens. And we were able to publish these in mainstream peer-review journals, and from that I found that it was a kind of a new step in my research career, and the untimely death of Dr. Bradstreet gave me a further drive to pursue this type of research. So from that, we developed a ways to reconstitute a brain microbiota, that is a completely novel concept that I was the first to describe. That is the microbes that are inside our heads and whose influence in the functioning of our brains is nothing less than immense. And from there we were able to develop these immunotherapeutic approaches that Ms.. Bonaros Heidi has so cleverly described. So just briefly, who did bring me in this world, Dr. Jeff Bradstreet, and who is still leading or driving my research is my good friend Jeff.

[00:46:10] Del Bigtree

Okay. Wow. The late Jeff Bradstreet, who died in very mysterious circumstances. Actually, a doctor who was found with a gunshot wound to his chest and floating in a river in his hometown. That is under investigation. That was originally ruled a suicide, and now, of course, I think the thought that a doctor would shoot themselves in the chest and throw themselves in a river lacked some coherent thought, and so there's more investigation going on there. Now, look it, you know, you two doctors come at this from different approaches. Obviously, Barry, you came into this because your child was injured, and then I think Doctor Ruggiero, clearly you met Bradstreet and were stimulated by this idea. You know, I'm curious, Doctor Ruggiero, did you just say microbes in the brain? Is that what I heard? Because that's something I've never heard before. Does everybody have microbes in the brain? Is it just autistic children? Tell me a little bit about that.

[00:47:15] Dr. Marco Ruggiero

Yes, well, gladly. And you are not the only one who has not heard of this before, because this is a completely new concept. But I think that you know that we have microbes in our guts, the so-called gut microflora, or with a more modern term, gut microbiome or microbiota. And we know that it is absolutely essential for the functioning of a number of functions in our body, from the immune system to the digestive tract and so on. And as a matter of fact, nowadays everybody is talking about reconstituting or keeping a healthy microbiota in the gut. But it was only a few months ago when I published a paper again in mainstream journal, that you can find in PubMed that is at the National Library of Medicine of the US, where I described how the brain microbiota, that is the microbes that we have inside our brains, all of us, not only have contributed to the evolution of the human brain, you don't find microbes in the brains of cats and dogs, you only find microbes in the brains of apes and humans. And we have published papers describing how these symbiotic relationship between microbes and the cells in our brains, the neurons and glial cells, has contributed to the evolution of the human brain as we know it today, but also as it influences its function in a way that has been described as immense.

[00:48:48] Dr. Marco Ruggiero

So essentially, just like you want to reconstitute your gut microbiota, your gut microflora, taking probiotics, let's say, after a cycle of antibiotics, because everybody knows that the antibiotics, they kill the bad microbes, but they also kill the healthy probiotics, so you want to replenish your gut microflora with healthy probiotics. Now, we have discovered that that's not enough. You also have to rebalance the microbial populations inside our brains. But you cannot do this if at the same time you do not rebalance the functioning of the immune system, and also you do not restore the flow of lymph from the brain so that the brain can get rid of all its toxic waste. I think it would take hours and hours to describe these completely new concepts that have led to the definition of the so-called fourth brain. So I've written a book called Your Third Brain. Well, throw it away, because now I should write another one called Your Fourth Brain because.

[00:49:55] Del Bigtree

So start with your third brain while we wait for your fourth brain to come along. Wow. I mean, that's. And obviously, you're one of those guys, I think everyone sitting watching this is thinking, okay, where can I get a glass of wine, sit down and talk to you for like, you know, hours and hours. Barry, let me go to you really quick. Where are you finding success in the patients you're working with? As you've said, you know, thousands, what types of treatments do you use and do you bring in other doctors or do you, are you the primary physician that works with children when you're dealing with children on the spectrum?

[00:50:31] Barry Smeltzer, MPAS, PA-C BCIP

I think that it is, primarily we work with the families. So, yes, it is primarily myself. I have a nurse and I have assistants, but we're constantly working with families in order to come up with new strategies, you know, like the things that, you know, that the pioneers like Dr. Ruggiero, who are leading in regards to finding these new therapies, well, then they come and we are the ones that are implementing that. Because, with the clinical side, being able to explain everything that Dr. Ruggerio knows and does, takes time and it takes explanation because not everybody is going to be on board with it at first. And, you know, you have to know which patients are going to be good candidates for every therapy. And that's where we can help disseminate, you know, not only is this a child who needs this, but it's the right time for this. Because not every child should be doing everything like you guys were talking about. And that's something that we've learned over time, that there's a timing for so many of these interventions, and the timing of it is as important as the intervention itself. And there's plenty of families that I've seen that come to me and have done the right therapy at the wrong time or the right treatment at the wrong time, and their child either wasn't ready for it, or it was too much or too fast, and it ended up being a disaster or it just didn't work, and then we find through testing and through understanding the microbiome and understanding their nutrient deficiencies, understanding their epigenetics to be able to then get them the right types of treatments done at the right times. And all of a sudden these child or these children start making improvements, and it can be as simple as dietary changes, it can be as simple as adding different supplements. It can be a combination of all of that.

[00:52:42] Del Bigtree

Let me ask you both a question, and it's this. You've both seen, I'm sure, thousands of patients, so you're seeing a large swath of people that are all or children that are suffering from the same issue, but as Dr. Ruggiero pointed out, we don't know the cause yet. Do you feel like, are vaccines the only thing that's causing autism or do you find parents that you're sure the vaccines had nothing to do with it? Where in this discussion do vaccines sit? For the both of you, I'll start with you, Barry. What are your thoughts on vaccines, is it the only thing causing autism?

[00:53:22] Barry Smeltzer, MPAS, PA-C BCIP

No, you can't simply state that it's the only thing because I have patients in my practice that have never been vaccinated and do fall into the autism spectrum. But these are kids that also maybe had traumatic birth. They had multiple antibiotics. They were not able to be breastfed. They, you know, it is a perfect storm that I feel leads to the regression and the loss of development, and that comes from an environmental load that is continuously, continuously growing in our country and in our world to where these children don't have the amount of ability to detoxify all of this, even during pregnancy. There was a study done in 2008 that demonstrated over 270 chemicals in cord blood. That's not even, before the baby's even born they have 270 different chemicals that they now have to detoxify even before being born.

[00:54:31] Del Bigtree

I just got a few more minutes here, let me just. Dr. Ruggiero, what are your thoughts? Are vaccines the only cause? What would you say you're seeing as you look at these patients, what are your thoughts right now?

[00:54:43] Dr. Marco Ruggiero

Well, I fully agree with Barry that since autism is a multifactorial, we cannot identify one single cause. But looking at the pathogenesis, that is, how does autism develop, we may have some hints. I think that everybody agrees by now that in autism there is inflammation in the brain, the so-called neuroinflammation. There is a disruption of the immune system that in some of its branches works more than it should, in other branches, works less than it should. So it's not as simple as immune deficiency or autoimmunity, it's a delicate and complex balance. And then we all know, we also know for a few months that also there is a disruption in the brain microbiota, something that was simply not known until the publishing of this paper of mine in November 2016. So knowing that there are at least these three targets, the brain microbiota, the immune system, and the functioning of the brain as far as inflammation is concerned, now there could be many, many causes targeting these three points. That is, there are many causes that may induce inflammation in the brain, there are many causes that may induce a disruption of the immune system, and many causes that may induce a disruption in the brain microbiota.

[00:56:12] Del Bigtree

I only have a couple more minutes here and I wanted to just jump in this very quickly. You know, there's a lot of people that say that Jeff Bradstreet was murdered because of a product called GcMAF. Could you quickly, Dr. Ruggiero, explain to me. What? I mean, I'm not going to get into whether or not that's why Bradstreet was, you know, left us early, but what is GcMAF and why is it so controversial?

[00:56:39] Dr. Marco Ruggiero

Well, I can tell you, I've been working on GcMAF for many, many years. My first paper published on macrophages activators was in the 90s when I was working at the NIH. Now we know that GcMAF actually works through a molecule that has been mentioned by Ms. Bonaros Tehidy that is called chondroitin sulfate, another molecule that has been the object of my studies for the past 34 years. And actually the controversy around GcMAF was born because of some claims that this molecule alone was able to fight a number of conditions ranging from cancer to HIV infection to autism. Some of these claims were frankly unrealistic, but the fact is that if you stimulate properly some branches of the immune system and particularly macrophages, and now we know that the molecule responsible for this is condroitin sulfate, well, you can achieve a number of positive effects. So GcMAF was born out of this theory. The theory was right that immunotherapy can be useful in a number of conditions as different as cancer or autism. What was wrong was to identify all these effects with a protein. We now know that these effects are due to another molecule that is called chondroitin sulfate. So because of the controversies, because of many claims, because of some sort of an aura of snake oil, the GcMAF field has been very controversial in the past, even though I must say there are scores and scores of peer-review publications explaining in detail what it is, and we have published several papers describing describing what it is, how it works, how it can be effective in a number of conditions. Today we have something that goes well above and beyond this concept that has been mentioned by Mrs. Bonaroti, but the concept is that if you rebalance the immune system and if you rebalance the brain and the gut microbiota, you will see good results in a number of different conditions.

[00:58:53] Del Bigtree

Alright, I'm down to 30 seconds. You have a product that you're using now that's helping do exactly this. Just very quickly, what's it called and how do people find it?

[00:59:03] Dr. Marco Ruggiero

Are you asking me or?

[00:59:04] Del Bigtree

Yeah, you, Dr. Ruggiero.

[00:59:07] Dr. Marco Ruggiero

Well, this product is a supplement made in Germany that is called Rerum, and it's an emulsion of chondroitin sulfate, vitamin D3, and oleic acid that are all known legitimate supplements generally recognized as safe. Now, the novelty here is....

[00:59:26] Del Bigtree

I'm running out of time, I got five seconds. We're going to get deeper into this another time, Dr. Ruggiero. Rerum was the product he was talking about. There is hope. If you have a child that's been recently diagnosed with autism. Barry Smeltzer, Dr. Ruggiero, these are places you may want to start, and definitely get on Facebook and talk to other parents. There's hope, children are being healed, and that means the medical community has got it wrong. We'll catch you next week. Thank you for joining us here on HighWire.

[01:00:02] Universal Broadcasting Network announcer

The views and opinions expressed in these radio programs are those of the individual hosts and do not reflect the official policy or position of Universal Broadcasting Network.

[01:00:11] Del Bigtree

Hello and welcome to HighWire. I hope you don't mind if I do this the rest of the show. I finally discovered the beauty of fidget spinners and I cannot stop. If this hasn't started annoying you taking place in the children across this country, then you're not wired like I am. But check it out. If you know nothing about fidget spinners, they're talking about in the news.

[01:00:32] HLN News reporter

Have you ever heard of this, it's called fidget spinners.

[01:00:36] ABC 7 News reporter

Into fidget spinners.

[01:00:37] CBS WBZ News reporter

Fidget spinners.

[01:00:41] CBS WBZ News reporter

At the moment, it is the fidget spinners.

[01:00:43] NBC Nightly News reporter

Fidget spinner.

[01:00:45] ABC 7 News reporter

They're called fidget.

END OF TRANSCRIPT
