Autism Treatment from the Institute for the Study of Peak States

By Dr. Grant McFetridge

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Time: 1.5 hours

Thank you Agata Jankiewicz for inviting me to this conference and giving me the chance to speak. I hope you all will find this talk useful in understanding the biological cause of autism that we've discovered. Please feel free to ask questions as we go if something is not clear - and we'll have time at the end for more in-depth questions.

About the speaker

I'm the founder and research director for the small, international and volunteer Institute for the Study of Peak States, based in Canada.

Perhaps like many of you, I have a multidisciplinary background, which turned out to be very useful for our work on autism. Back in 1984 I graduated from Stanford University in electrical engineering, and in over 25 years in that field, I worked as a research and development engineer, and taught EE at the California State University in San Luis Obispo. I also have a PhD in clinical psychology, and since about 1995 I've been working in the health field, primarily in research. In the 1990s, I developed the Whole-Hearted Healing (WHH) regression technique for trauma.

The Institute for the Study of Peak States

Our small, international Institute for the Study of Peak States was originally founded in the 1990s to solve just one problem - how to give people a permanent state of consciousness that Native Americans call 'walking in beauty'. In the course of trying to understand the biology behind this state of consciousness, we made fundamental discoveries that allowed us to solve many other key problems in psychology. And some of these discoveries were truly revolutionary. We'll be looking at some of them later on in this talk.

Incidentally, we generally publish our discoveries after they've been thoroughly tested by therapists around the world. In some cases we license our techniques, which allows us more control as we continue to improve them. We also have an agreement with our therapists that they only charge their clients if the treatment worked - we call this 'pay for results'.

What we will cover in this talk:

- Our autism research journey.
- Testing hypotheses about vaccines and brain damage.
- Peak States approaches to treating the autism infection.
- Premature births.
- Asperger's syndrome (AS).
- Using other treatment modalities for autism.

Institute for the Study of Peak States

Our involvement in autism research was by accident

So, how does one go about solving a problem like autism? To explain our results and techniques, I think it would be the most helpful if we do it chronologically, so you can see how our understanding evolved over time. The story starts back in 1998...

In that year, one of my friends and colleagues at the Institute, Wes Gietz, had an adult autistic son. The son was severely autistic, could not speak, and was living in a fully assisted setting. Wes and I were doing pure research on major prenatal developmental events, to identify how a person would change if we used my WHH trauma healing technique on those moments. Wes had regressed to the beginning of his birth, when he suddenly became hyper-aware of his son and his son's autism. This was completely unexpected, but very vivid, so we started to investigate this birth event and its connection to autism.

We discovered that just before the first major contractions of birth, during regression, mothers reported that their normal-feeling *in utero* child would suddenly start feeling autistic. Apparently, whatever was causing their child's autism was happening during the birthing process, and not later in the first or second year of life, as we had all assumed.

As an aside for people in the audience who are not familiar with prenatal psychology, with the right techniques it is quite simple to regress people to pre-birth experiences. Although generally not well known to other disciplines, this field of psychology has been active for over 40 years. A person who does this relives what happened at the moment of trauma, including their emotions, sensations such as pain, and has an awareness of their parent during the event.

- Our research started in 1998
- A friend and ISPS colleague, Wes Gietz, (pictured right with Dr Deola Perry) had an autistic son
- Autism starts during the first stage of birth

Our first autism process
Although we didn't know why Corey and other children with autism were changing during that first part of the birth experience, we thought that if we healed all the trauma at that moment, it might make a difference and stop the children from becoming autistic.

But how? Well, we had several problems to solve. First, how to treat an autistic child with psychological techniques, when they could not follow instructions and would not allow themselves to be touched. Fortunately, by this time we'd already discovered that the primary problems in development were caused by generational trauma, something that is now called 'epigenetic damage'. And any trauma healing technique that could successfully eliminate a generational trauma would also effect the family line. By this, I mean if a parent dissolves a generational trauma, it would also simultaneously dissolve in the child. Thus, we hypothesized that if we treated the mother, the child would change. We simply chose the mother because they were generally more involved in

their child's healing. We just got lucky here - what we did not know at the time was that healing the father would make no difference.

Secondly, exactly how are we going to heal the mother? Well, we figured that we'd have the mother heal the same birth moment and hopefully we'd eliminate all the relevant generational traumas. Fortunately, we had already developed techniques that caused people to automatically regress to selected prenatal moments in development by using imagery, music, and short phrases. This would take a lot of work by the research team, but once done, it was simple and repeatable and so could be used on anyone with identical results.

Third, once the mother was at the event, how would we actually heal the trauma? Well, back in the late 1990s the first effective trauma healing techniques were first popularized - TFT, EMDR, TIR, and our own Whole-Hearted Healing regression. For this technique, we decided to use EFT (emotional freedom technique) as it was the fastest, simplest, and least problematic of all the techniques available at the time.

My colleague Dr. Deola Perry (USA) and I developed the first process. In our first test in 2000, we had five mothers do that technique on themselves. The children were all around 10 years of age, and all very autistic. The mothers worked only from an instruction sheet without any guidance. Of that five, four of the autistic children stopped being autistic. The fifth parent quit midway in the process because the feelings that arose were too disturbing to her. (We also tried it on Wes but had no success. As we will see, it wasn't until 2015 that we realized that healing the father would not work.)

- Healing epigenetic damage in the mother heals autism in their child (healing it in the father has no effect on autism)
- After some research, we derive specific music, phrases, and imagery to regress the mother to her own birth event
- We used the well-known Emotional Freedom Technique (EFT) to heal targeted birth trauma in the mother
- Dr. Deola Perry and I developed our first autism process

At this point, it would be useful to describe exactly how the children changed. They didn't suddenly start talking and asking for $20 and a ride to the movies! Instead, the first thing the mothers noticed was that their kid suddenly felt emotionally present to them, and started to express normal emotions. The children also suddenly started going through all the developmental stages that they missed due to their autism - crawling, sucking their fingers, baby talk, and so on - but at high speed. In a surprisingly short time, much of it in the first few months, but finishing in less than a year, their psychological development came up to their physical age, including the ability to talk.

Ten years later we recorded one of the mothers (Linda Johnson) describing what happened during the treatment, and the long term results to her autistic son. This was a boy who would not even talk at the time of treatment. Her son went on to get a Master's degree in mathematics. Her video testimonial is online here. (https://www.peakstates.com/videos.html#diseases)

- In 2000, our first test was with five autistic children - four were successfully healed of autism (the fifth mother quit the program before finishing the treatment)
- The mother suddenly felt an emotional connection to their child and the children suddenly had emotions and wanted to connect with their mother
- The child immediately went through early childhood developmental states (very quickly) and completed them in less than a year - including learning to speak

Autism misdiagnoses

In 2008, refilled with enthusiasm, we took another crack at the autism by modifying our birth regression treatment. We asked for volunteers in Denmark, and the team there found 10 parents with children who had been diagnosed with autism by psychiatrists. But I certainly was surprised when I flew to Copenhagen and met those children. Of that group of 10, only about 3 were autistic! Five had a range of other issues, and in two cases, I could not find any problems in the children whatsoever. The mother of one of them told me her son was autistic because he would get into fights with brother!

So, we tried our latest healing approach on the birth event with these children, and got absolutely no improvement. And again, we did not know why.

As the news media has reported, the diagnosis of autism has been greatly increasing over time. I also saw this same misdiagnosis problem in the US and Canada. In the US, this is partly because a family can get financial support if their child is diagnosed with autism. However, even with this financial bias and mistaken diagnoses, we believe the number of cases is really increasing, because it turns out that autism is caused by an infectious bacterial disease, as we'll be seeing soon.

This also implies something else about an autism treatment. We really needed to find a treatment to help these children even if their symptoms were from other diseases that cause developmental disorders. The bottom line - the parent is not really interested in a cure for autism. What they wanted is a healthy child.

- We trialled a new treatment in Denmark in 2008 with 10 children diagnosed with autism
- 3 children had autistic symptoms
- 5 children had a range of other issues
- 2 children - could not find any problems
- Key finding - many children with an autism diagnosis are not autistic
- Implication - we want a treatment than covers a range of disorders in children

Asperger's syndrome (AS)

As some of you may know, the latest move in the US is to eliminate Asperger's syndrome from the diagnostic manual, and lump it under the 'autism spectrum disorder'. This turns out to be a big mistake, because in 2012 we were able to figure out what was causing it, and come up with a very effective treatment. It turns out that it has nothing to

do with autism at all.

A big part of the problem is the way mental diseases are diagnosed. To use intellectual and observational criteria is generally too vague and uncertain. However, in the case of Asperger's, we were able to identify a simple kinesthetic diagnosis that was easy to do and completely reliable. A person with this problem feels like they live in a glass tube that surrounds them from head to toe, including over and below their body. This glass wall completely isolates them from the world, giving rise to the symptoms of Asperger's syndrome.

To diagnose is simple. Have the client look at your hand. Slowly bring your hand towards their body. Just before it touches their skin, the client will suddenly be able to 'feel' your hand in space. Kinesthetically, your hand has moved through their 'glass wall' and entered a clear space surrounding their body. This simple test is very easy to use and works very, very well.

This disease is caused by epigenetic problems inherited from the mother or father or both. If only from one parent, the glass wall will only cover half of their body. If from the father, the glass wall is on the right side. If from the mother, the glass wall is from the left side. If from both parents, the glass wall will completely enclose the client. To our surprise, once we realized that this existed, we found a lot of people who had a glass wall on only one side of their body. These people did not have the symptoms of Asperger's, because they had been compensating for the disability from birth. It did show up as a problem in sports, as they were unable to 'feel' the presence of anything in the distance on the side of their body that was affected with the problem.

The treatment is fairly simple, and results in the elimination of the glass wall sensation. In some cases, the client will react to the sensation of large spaces with fear (agoraphobia), but this is simple to eliminate at the end of the Asperger's treatment. Interestingly, adjustment problems rarely occur. Instead, the person is usually ecstatic from the change, saying things like how wonderful it is to be able to 'feel the huge sky' above them. Other aspects of the Asperger's diagnosis, such as poor social skills, take time to go away because the person has to relearn social interactions now that they can feel them like a typical person. The Institute offers this treatment on a 'pay for results' basis.

- Asperger’s syndrome is not autism
- A person with Asperger’s syndrome is surrounded by what feels like a glass test tube
- Some people have Asperger’s syndrome symptoms on only one half of their body and don’t realize it
- The treatment is fairly simple and results in the elimination of the glass wall sensation, which consequently eliminates the Asperger’s syndrome symptoms
- We offer this on a ‘pay for results’ basis.

A brain damage hypothesis

Again in 2008, we were stumped on how to continue. So we decided to investigate the hypothesis that autism was caused by some kind of brain damage, perhaps from birth trauma, impacts or blows to the head. By 2009 we had successfully created a treatment that eliminated all symptoms of TBI (traumatic brain injury), but this had no effect on the severely autistic children we were studying.

Note that a child can have brain damage that severely impacts their lives and abilities. When dealing with a group of 'autistic' children, a TBI treatment after the autism has been eliminated can be a critical next step. Because TBI can have a variety of symptoms, we see some children that are incorrectly diagnosed as autistic, but only need a TBI treatment. The Institute offers a TBI treatment on a 'pay for results' basis.

- In 2008 we tested the hypothesis that traumatic brain injury (TBI) caused autism
- Our conclusion was that TBI is not causing autism
- A TBI treatment might eliminate symptoms in children who were incorrectly diagnosed with autism
- After a successful autism treatment, the child might also need a following TBI treatment
- ISPS offers a TBI treatment on a ‘pay for results’ basis

The vaccine hypothesis

Also in 2008, I found parents of five severely autistic children in the US who were willing to act as test cases for new treatments. During that year, people were speculating that vaccines were causing autism, perhaps due to the viral bodies or perhaps due to the thimerosal's mercury toxicity, so we decided to take a look. What we found was a surprise. We found in our sample group of severely autistic children that all of them were getting some kind of infection from the shots. In our small control group of normal people we found that the vaccine had no effect on the child. So, over the next few months we came up with a way to eliminate this vaccine infection. However, treating the child had no visible effect on their condition. What we concluded is that the autistic children had some kind of suppressed immunity to the supposedly dead viral bodies, making them susceptible. However, curing it made no difference to their autism symptoms. In other words, the underlying problem that causes autism makes them susceptible to vaccines, not the other way around.

Soon after this, we had another client, a young boy, who had severe autism but had no childhood immunization. This confirmed our results, that the vaccines were not causing autism.

- Vaccines were not causing autism
- Vaccines were infecting severely autistic children but eliminating the infections made no difference to their symptoms
- Children who had not been vaccinated would still get severe autism

Discovering the 'primary cell'

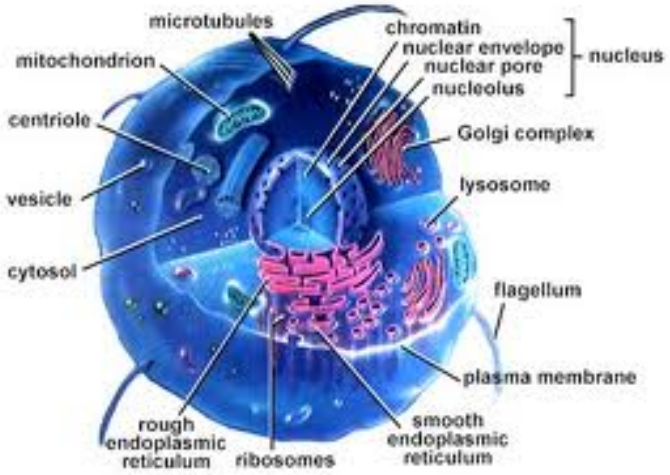
That initial autism treatment was an amazing success, but there were several significant issues that had to be solved before we could take that technique out and use it with other clients. First, what exactly were we healing? In other words, why did birth matter? What exactly was happening biologically? Secondly, if a client did not have success, how would we modify the technique to get better results? For example, we knew something in the process must be wrong, because Wes's son had not gotten better, but we did not know why.

It was impossible to answer these questions based on our simple regression model. Instead, another fundamental breakthrough in biology was needed that could tie regression experiences to cellular and subcellular biology. Fortunately, back in 2001 we had made that needed breakthrough.

We had found that there was one cell in the body that really mattered for health and illness - it was where the biological basis of consciousness was located. We ended up calling it the 'primary cell'; it develops during the fourth cell division after conception. This cell sets the pattern for all other cells in the body. Problems in this cell are experiences as sensations in one's body. And healing problems in this cell causes radically fast symptom elimination in a person, typically during treatment. And about a third of the population can 'see' inside that cell during regression (and in fact, in the present also).

With this discovery, over the next decade we learned more about the benefits and risks of working with this cell. It not only allowed us to come up with entirely new classes of treatments, but finally we were able to discover the real causes of a number of mysterious psychological problems ("diseases of unknown etiology"). This was an incredibly important breakthrough in our work.

- The ‘primary cell’ is where consciousness is in the body
- Problems in this cell are experienced as sensations in one’s body
- This cell sets the pattern for all other cells in the body

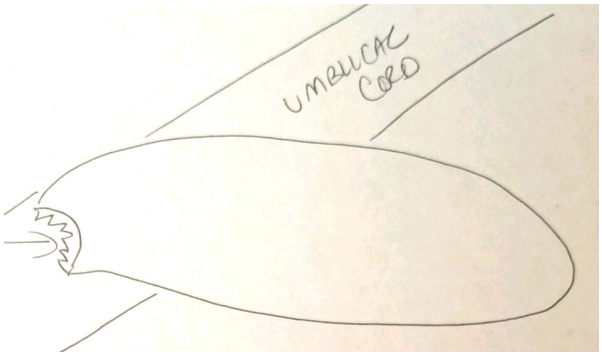


Finding an autism Rosetta Stone
After our failure in 2008, we tabled work on autism until 2015. And then we got lucky. One of our original study mothers, Linda Johnson, volunteered to work with us again on autism. We hypothesized that whatever was causing autism might still be in her in a reduced or suppressed form, and that she might be able to regress to the birth event and study whatever remained of the problem with us. And it worked.

Linda was able to regress and see what occurred at this critical moment. And what we found was a real surprise. She was able to witness that during the initial stages of her son's birth, she reacted aggressively to what felt like an expansion of her son in her belly. This feeling of aggression triggered a strange looking bacterial organism (resembling a slug with teeth) to move along the child's umbilical cord and into the head of her son and 'eat' random pieces of his brain. Now, her imagery was of her son, but in reality she was witnessing events inside her son's primary cell, superimposed on his body image.

Finally, we had found both 'motive and opportunity' at the birth event. (1) Both mother and child were already infected with the 'autism bacteria' inside the primary cell. (2) The initial stage of birth triggered rage in the mother. (3) This in turn triggered the autism bacteria to move into the child's primary cell nucleolus and causes damage in random places, resulting in the range autism symptoms we see in clients. (4) The *in utero* child now feels autistic to the regressed mother.

- Linda Johnson became our Rosetta Stone to finding the cause of autism
- The primary cell nucleus is the subcellular analog to the brain - damage in the nucleus (especially the nucleolus) shows up as dysfunction in the brain
- People who regress to this event ‘see’ a body image superimposed on the image of the nucleus
- Pictured right is a sketch by a mother who observed the autism bacteria during birth



1. Both mother and fetal child were infected with the autism bacteria
2. Initial stage of birth triggers survival rage in the mother
3. The autism bacteria damages the child’s nucleolus

4. The fetal child immediately starts feeling ‘autistic’ to the mother

'Seeing' autism in the nucleolus
At this point, I'm going to go into something a bit unbelievable. So feel free to ignore this short portion of the talk, as it only applies to our research efforts but not to treatment.

Once we knew what to look for, we found that some of our staff, using a particular peak state ability, could 'see' these holes in autistic children's brain. The severely autistic children's brain looked like swiss cheese, wth much of the brain (nuclear) material removed. Interestingly, the damage was in random locations (with an exception we'll cover a bit later). But even more surprisingly, we found that both the autism infection and the consequent damage were present in *many* of our staff and in a random sample of mothers. It turned out that this disease is very widespread, but in most people gives subclinical symptoms, as the infected person can apparently compensate for the more limited damage to their nucleus (brain).

The autism type of brain damage was particularly interesting for several reasons. We could now see why our TBI process had no effect - we had assume that there was brain matter present that needed repair. Like framing in a house, if the 2x4s were missing, there was no possibility of repair. Our TBI technique could not replace the missing material in the nucleus of the primary cell.

We've talked here about making observations that are very hard to believe or accept from a conventional standpoint. But these observations - regardless of how they were made - actually allowed us to construct biological models and so create techniques that had obvious, measurable effects. And given equipment and a large budget, they could easily be duplicated in just about any lab in the world. Truthfully, as an electrical engineer myself, I would have preferred the high-tech equipment - but we're doing all this work on a shoe string budget and we simply could not afford the expensive gear!

- With a particular peak ability, holes can be ‘seen’ in the brain of a person with autism
- This is actually an image of damage in the nucleolus
- People with severe autism have much of their ‘brain’ material missing
- These observations allowed us to quickly test new autism treatments.
- Our TBI treatment could not replace the missing pieces of the nucleolus

Seizures
We also uncovered another issue. Many of the severely autistic have a range of epileptic seizures. One of our research colleagues was able to identify the cause in his autistic daughter. He found that a blob shaped organism, probably bacterial (not amoebic) was finding a home in the holes in the nucleolus. This organism was somehow 'shorting out' or inducing an electrical signal into that region of the nucleus.

- Epileptic seizures were caused by another bacteria living in the gaps (caused by

the autism infection) inside the nucleolus

Treating the autism infection

Over the next two years (2015-2017) Linda Johnson and our staff worked on finding a treatment for the disease we had found. What we wanted was to find a way to immunize the child (and mother) to the autism slug infection. We could assume that the damage would be reversible, which our initial successes at eliminating autism demonstrated would be the case. Now, a drug treatment would be possible, but would require years and a tremendous amount of money. Instead, we wanted to do this quickly and cheaply, so we started looking for a psycho-immunological treatment for the infection.

This means we wanted to find a psychological-like technique that could target the disease and make the client immune. And in the early spring of 2018 we found a way. Our first test case was Linda Johnson, quickly followed by tests on the staff who were also infected. This immediately caused the holes in the nucleolus (which 'looked' like holes in the brain) to fill back up and eliminate symptoms.

This also answered one of our original questions - why was the treatment only successful in an autistic child if the woman used it, but had no effect if the father did? It turns out that the susceptibility to the disease is carried by epigenetic damage (generational traumas) in the female's line. In other words, although men and women can both be infected, the generational traumas that allow this disease to get a foothold are only carried by the mother. As the father only contributes epigenetic damage to the child from his male lineage, healing the father does not carry over to healing the child. Only working on the mother will have an effect in the child.

- Psycho-immunology treatments use psychological-like techniques to make a person immune to a pathogen
- In 2018, we found a psychological technique to make mother’s immune to the autism infection
- The epigenetic damage that makes a person susceptible to the autism bacteria is carried by women
- Making the mother immune to the autism bacteria will also make the child immune. However, making the father immune will not make his child immune.

The mother's rage during birth

But let's pause a moment and look at this birth issue again. As we said, there were two problems, the infection *and* the mother's reaction to the birthing child. It might sound a bit like we are 'blaming the mother' for autism here, which is *not* the case at all. What makes this problem complex is that this disease has a psychological component; and that the mother can unconsciously interact with it in some way that is harmful to her child.

Thus, to get full and reliable results, we needed to address the mother's unconscious aggression towards the child. Worse, we had some observations that suggested that

the mother felt she had to damage her child to survive. With this sort of drive in place, it was quite likely that even without the autism slug pathogen, the mother would (or did) stimulate some other pathogen to harm the baby. And in fact, we found just such a case in one mother who appeared to evoke a prion disease interaction with her child. And likely there are other pathogenic examples. Sadly, these unconscious survival programs for most people are simply played out at times of extreme stress or particular triggers, regardless of the person's normal inclination. For example, our original successful treatment was designed to try and eliminate the mother's birthing rage, not get rid of the pathogen. And too, this sort of problem lying in the unconscious would manifest itself at odd times later on in the child's life.

But why did this exist? We came to realize that the mother's rage was not directed at all children - instead it was directed at the male part of her children. For example, it is well known that there are far more male autistic children than female. What we found is that the mother was stimulated into rage during birth because she was activated against the male child; or in the case of a girl, to the right side of her daughter that felt male to the mother. And in fact, we found that in female children, most or all of the damage to the brain (nucleolus) was on the right side, not the left. In regression, the mother could identify that her female side (her left) felt aggressive towards her child's male side side. Of course, with a male baby the aggression tended to be towards both sides as all of the child felt 'male'.

We were finally able to find the origin of this problem during conception trauma. The egg, which feels female, had the same rage towards the sperm just before and during conception. Later on in life, this rage would be activated in other settings, such as birth. Thus, to fix the birth rage problem, we needed to eliminate the conception problem. To our surprise, this conception rage was found in most of the women we checked, even when they had normal children with no signs of autism. It turns out that in women who also had the autism bacterial infection, they and their children also had autism 'holes' in their brains, but they were small enough and in locations that only gave sub-clinical symptoms.

- Healing the autism pathogen is not enough - we also needed to eliminate the rage towards the child during birth
- Our first successful treatments in 2000 worked by eliminating the mother’s birthing rage
- The mother’s rage and survival aggression was directed towards the male part of her child
- The origin of the mother’s birth rage was at conception - between the egg (female) and sperm (male)

Premature births

If you are a mother with a child with developmental disabilities, autism, or other problems, you really don't care about the diagnosis. What you want is a normal, healthy baby or child. And we were worried that our treatment would be too narrow in scope, and miss a variety of other diseases and problems in children. In other words, we might

get rid of the autism but the baby might still not be well. And there was some literature in the field of autism that suggested this was the case. In particular, autism turns out to be very correlated to premature births. And premature births in turn are correlated with a *lot* of other problems in the children.

And sure enough, we found an early developmental connection to premature births. It lies in implantation. It turns out that the zygote is supposed to start making primordial germ cells (the precursor cells that later become eggs and sperms) just after the zygote implants into the womb wall and starts 'breathing' via its placenta. But in people with the conception rage, this developmental order is reversed - the zygote starts making the children too soon, in an internal developmental experience very similar to birth. Unfortunately, the zygote is not yet breathing well or at all, and the newly created life experiences mild to extreme suffocation. This suffocation translates later on in life as both survival fear and aggression, and in a variety of different pathogens which the organism selectively tries to acquire to relieve their suffocation trauma. These organisms do not actually reduce the suffocation, but rather help mask the suffocation sensations.

Thus, to really do the job of helping these autistic children, we also needed to solve the premature birth problem, whose precursor was during implantation. In March of 2018 we were finally successful in solving this problem - and it turned out to be related to the conception rage problem.

At this point, we are not going to go into any more detail on our treatment procedures. Based on our experience with other diseases, it will probably be another two years or more before we will be confident we've adequately tested the autism treatment. Experimentation in the area of changing a person's immune response has potential risks which are outside the scope of this talk, and we don't want people to experiment in this area without adequate training and safety protocols in place.

- Premature births are strongly correlated to autism and other problems in children
- The parental zygote (the mother of the autistic child later in life) starts making her primordial germ cells before fully implanting
- This creates suffocation trauma in the newly formed organism and causes a variety of problems and diseases

Using other treatment modalities for autism

Let's look at conventional medical techniques for a moment. The biggest problem with autism research today is that the autism pathogen is completely unrecognized. Once this was known, we could anticipate that biologists could both find a blood test to identify if a person was infected, and hopefully find a drug to combat the infection. Would using a drug to eliminate the autism infection also reverse the damage to the nucleus? We don't know, but it would be a worthwhile effort to find out. At a minimum, it could be used on pregnant mothers just before birth to eliminate any damage that the organism causes.

I assume that this conference will present a number of different methods for treating autistic children. Other treatment modalities are a very good thing! First of all, the autism spectrum disorder is a label for a variety of symptoms. It is a bit like classifying a mouse and an elephant in the same category because they both have four legs and tails. It is almost certain that there are other diseases labelled as autism that have nothing to do with the autism bacteria we found - as we saw in the case of Asperger's, which was a totally unrelated problem. Thus, these modalities may help where our treatment cannot. Secondly, different modalities can exploit different healing mechanisms, making them more effective for some or all people who have autism. We are not trying to stifle innovation! As our own work has shown, any given technique has only a few years of use before it is obsoleted by something better...

- A blood test could be derived to test for the autism pathogen
- Drug treatments might work to repair autism damage, but would certainly be successful if used on pregnant mothers before birth
- Other autism treatment modalities are a very good thing
- They may be addressing other diseases included in the category of autism
- They may use different healing mechanisms on autism that could be more effective

Summary

To recap, there are a number of points we've covered today.

- Autism is caused by a bacteria that damages the nucleus of the primary cell.
- A psycho-immunology treatment to get rid of the pathogen works.
- The mother is unconsciously stimulated into rage during birth of her child, which triggers autism damage.
- A treatment involving very early developmental events eliminates this rage issue.
- Asperger's syndrome is a completely different disease unrelated to autism.
- Children with traumatic brain injury can also be treated so that their symptoms are eliminated.

We've covered a lot of material today, and I'm sure you have many questions. We have a number of textbooks on various aspects of what we've discussed (although autism is not one of them). To learn more about the primary cell, we recommend you read *Peak States of Consciousness: Theory and Applications*, volume 2 (2008); and about various diseases of the primary cell, the *Subcellular Psychobiology Diagnosis Handbook* (2014). For more on our various healing techniques, we recommend Paula Courteau's The Whole-Hearted Healing Workbook (2013), which has also been translated into Danish.

- *Peak States of Consciousness: Theory and Applications*, volume 2 (2008)
- *Subcellular Psychobiology Diagnosis Handbook* (2014)
- The Whole-Hearted Healing Workbook (2013) by Paula Courteau

Again, thanks to Agata for her work in making this conference happen, and to all the volunteer staff and volunteers who made our work possible. Thank you for listening, and

feel free to ask any questions now that you have.