ENDING AUTISM

([j.b. handley blog](https://jbhandleyblog.com/))

Nov 6

J.B. Handley: Is there a path to end the autism epidemic?

(Author’s Note: This Op-Ed originally appeared in newspapers throughout the country in the Fall of 2018, including [*The Daily Herald*](https://www.heraldextra.com/sanpete-county/is-there-a-path-to-end-the-autism-epidemic/article_db39f349-1ed9-53bf-8196-46c1572c0bab.html) in Utah.)

SHERMAN OAKS, CA — New published science and the screening of at-risk children before they receive any vaccines may provide a middle ground between the “all or nothing” positions of the two warring sides of the vaccine-autism debate, according to one of the leading critics of the government’s current vaccination program.

On one side of the debate are parents who believe that today’s high number of mandatory vaccinations (children in the 1960s received three vaccinations, today’s children receive 38) can cause autism in vulnerable children.

On the other side are government health officials who deny any link. However, critics claim the government is being influenced by pharmaceutical companies whose revenues from vaccines exploded from $170 million in the early 1980s to more than $60 billion today.

A study published in 2013 in the *European Journal of Clinical Investigation* concluded that the pharmaceutical industry “masterfully influences evidence base production” and also “exerts direct influences on professional decisions and health consumers.”

“There is a wealth of relevant scientific studies that prove that autism prevalence has skyrocketed in the United States,” says J.B. Handley, the father of a child with autism and author of the book *How To End The Autism Epidemic* (<https://www.chelseagreen.com/product/how-to-end-the-autism-epidemic/>.)

“And since 2004 there have been 11 groundbreaking discoveries in separate but related scientific fields that, taken together, reveal one of the causes of autism.”

Handley says those discoveries, published in peer-reviewed journals, include the work of such respected researchers as Dr. Carlos Pardo-Villamizar, a neurologist at Johns Hopkins; Dr. Christopher Exley, a professor of bioinorganic chemistry at Keele University in England; and the late Dr. Paul Patterson, a professor of biological sciences at the California Institute of Technology.

“Because of this new, published science,” Handley says, “we now know that autism is created by immune activation events in the brain during critical phases of brain development, typically by the time a child is 36-months-old, and that these immune activation events in the brain can be triggered by the aluminum adjuvant in vaccines. While the first of these discoveries occurred in 2004, the critical missing pieces have only fallen into place since 2010.”

All the while, the autism rate has exploded. The Center for Disease Control and Prevention noted that the rates for autism in children went from one in 150 children in 2000, to one in 36 children in 2017.

Handley says returning to the vaccine schedule used in the mid-1980s provides a moderate solution. He also believes that there should be thorough screening before any vaccines are given to determine which children are at-risk from serious vaccine injury.

“We have the capacity to systematically assess the children who are more vulnerable before they receive a vaccine,” Handley says. “These children are at risk and it is the duty of our public health program to protect them.”

Handley believes these are some of the steps that should be taken:

1.) Removing vaccine safety from the Centers for Disease Control. Having the same agency that is in charge of promoting vaccinations also in charge of vaccine safety is an inherent conflict, he says.

2.) Screening vulnerable children should be implemented immediately. Some vulnerabilities are because of genetics, parental health histories of autoimmunity, and other children have problems that are apparent with a physical exam.

Children who may have adverse reactions to vaccines also frequently have such conditions as ear infections, dark circles under the eyes and eczema.

3.) Test children before giving booster shots. Booster shots are provided for most vaccines. Handley believes many of these shots are unnecessary, as immunity has already been accomplished through the initial vaccine. A simple blood test would reveal if a booster shot is really necessary, he says.

4.) Establish clear rules for when a child should not receive vaccinations. A child should not be vaccinated when the child is sick, has eczema, is taking antibiotics, and several other conditions.

“I’m not against all vaccinations all the time,” Handley says. “But more screening to spare at-risk infants would be a positive step in the right direction, and it’s something that could be achieved today. Based on his health history, my son with autism never should have been vaccinated.”

[J.B. Handley](https://jbhandleyblog.com/?author=5ac09965396f8c56823fcc93)

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