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## **Reversal of Trauma Induced Autism**

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#### Abstract

The author is a neuropsychologist who describes in detail how his autism was induced by trauma suffered at the age of six, how his enquiring mind led him to the discovery of the neurophysiological cause of autism, how he developed a litmus test to know for certain if someone suspected of being autistic has been correctly diagnosed, and how his lifelong autism has recently been reversed by an unexpected traumatic event.

#### **Definition and Description of Autism**

**Definition**: Autism is perpetual and unrelenting hyperfocus, the state of intense single-minded concentration fixated on one thing at a time, to the exclusion of everything else, including one's own feelings. The probable cause of hyperfocus is a dysfunctional Cingulate Gyrus (CG), that part of the brain which focuses attention [3].

**Description:** Autism is an inherent neurophysiological difference in how the brain processes information. Autistic people live in a specialized inner space that is entirely intellectual, free from emotional and social distractions. They tend to observe the world in scholarly detail without feeling any emotional attachment to what they see [3].

## **Litmus Test for Autism**

Hyperfocus is the unique and defining causal state of autism that creates all of its documented traits. Hyperfocus prevents someone from dividing attention between two thought patterns or two stimuli at the same time. An autistic person talking to you is incapable of feeling any emotion in that moment. The easiest way to find out if someone is autistic is to ask these five questions, to which you will receive the following responses **[3-5]**.

1.	How often do you cry?	"never" or "rarely"
2.	How often do you laugh?	"never" or "rarely"
3.	What are you afraid of?	"nothing" or an intellectual answer
4.	What are you feeling now?	"nothing" or an intellectual answer
5.	Do you ever get bored?	"never"

Example of an intellectual answer: "No, I'm not angry. That wouldn't be logical."

Anyone who answers all five questions as above is autistic. Anyone who answers four or fewer as above is not autistic.

**Note**: If the person answers the third question with a phobia (e.g., of heights), then re-ask the question this way, "Aside from this phobia, do you normally experience fear of any kind?"

## **Case History**

In 1950, at age six, I attempted suicide and would have succeeded had it not been for the intervention of a neighbor. I wanted to join my daddy in heaven who had been killed in a military accident, and I wanted my mother and stepfather to regret how badly they had treated me. Clad in a makeshift military uniform and equipped with a hangman's noose I had taught myself to make, I climbed to the top of my backyard fence and was about to scale the spikes sticking out of an adjacent telephone pole when a neighbor suddenly appeared and shamed me out of it. Thus, I was unable to end my painful life; however, I was prevented from ever again feeling pain in my life by what decades later I figured out to be psychosomatically induced autism [1,2].

Until I left home at age 16, I was the victim of continual psychological abuse from my parents. However, my autism shielded me from knowing that this was even happening. Whenever I tell my family about an incident from my childhood, they cringe in horror. However, I felt nothing,

 Table 1: 50 Traits Caused by Autistic Hyperfocus

neither at the time nor in the telling of it afterward. To me they were just things that happened.

In 1964, I was misdiagnosed as having an Emotionally Unstable Personality Disorder (EUPD) by a psychiatrist at the University of Toronto. The correct diagnosis should have been Asperger syndrome (high functioning autism).

For my entire life, I have exhibited all 50 traits caused by autistic hyperfocus (**Table 1**) [**3**]. The more predominant of these include intellectual preoccupation, inability to feel emotion, lack of social awareness, taking everything literally, intimidating others with my forthrightness, propensity for monologues, inability to be spontaneous, hypersensitivity to loud noises, and total fearlessness. In every dangerous or lifethreatening situation, I am always focused on the event itself and incapable of feeling fear or even nervousness in that moment. I confront every situation in real time with a cold calculation of risk and an immediate plan of action.

	• Intense single-mindedness
	Trapped in thoughts
	• Mind always busy, tendency to overthink
	Passionately pursues interests, often to extremes
Mental Traits	Amasses encyclopedic knowledge about areas of interest
	Self-awareness but no social awareness
	Interruptions trigger agitation, confusion, or anxiety
	Cannot multitask
	Hypersensitive to loud noises and bright lights
	• Experiences anxiety from being mentally trapped in a sensory assault
	Overwhelmed from hearing unwanted conversations
Sensory Overload	Overwhelmed by too much information
, , , , , , , , , , , , , , , , , , ,	Coping with electronics and filling out forms may cause anxiety
	Sensory overload makes it impossible to think or focus
	• Difficulty listening to radio or talking with others while driving
	• Unable to feel emotion
	Processes emotions intellectually
	Has generalized physiological responses instead of emotions
	Anxiety bypasses the intellect to warn of unprocessed emotions
	Incapable of experiencing fear
Emotional Traits	• Can be angry without knowing so
	• Never (or rarely) cries or laughs
	Cannot nurture self psychologically
	Shrinks from emotional displays by others
	Unable to defend against emotional attacks
	Considers self to be an outsider
	Lacks innate desire to socialize
	Unaware of feelings, needs, and interests of others
Social Traits	• No awareness of how perceived by others
	Unaware of socially appropriate responses
	• Cannot pick up on subtleties, unable to take hints
	Unable to read body language

	• Speaks factually with no trace of emotion
	• Takes everything literally
	• Easier to monologue than dialogue
	Oblivious to motivations of others while they are speaking
In Conversation	Misses sarcasm
In conversation	Misses social cues and nonverbal communication
	• Participating in 3-way conversations may be overwhelming
	May have difficulty following topic changes
	Understands love intellectually but cannot feel love
	• May understand empathy but unable to feel it
In Relationships	• Cannot be emotionally available to others
*	• Others cannot provide an emotional safety net
	• Drawn more strongly to certain things than to people
	Innate forthrightness tends to scare others
	• Never bored, always engaged in some mental activity
Temperament	• Consistent to daily routines, agitated if routine is disrupted
Ŧ	• Spontaneity not possible, activities must be pre-planned
	Cannot lie spontaneously, can tell only premeditated lies

During the 22 years of my first marriage, it was impossible for me to be emotionally available to my family. I was unable to defend myself against my ex-wife's emotional attacks because they paralyzed my thinking processes. At the time I had no idea that I was being emotionally abused. It was only by retrospective analysis decades later that I was able to figure this out.

In 1982, I felt no emotion as I watched my grandmother, the only person who ever loved me, die in hospital. My focus was entirely on asking questions about the readings on the monitoring equipment and finding out that my grandmother was brain dead before her heart stopped beating. I felt absolutely nothing.

In 2015, I had a falling accident that resulted in a skull fracture and concussion, which injuries exacerbated my sensory overload issues. The sound of a vacuum cleaner became excruciatingly painful inside my head, lighting displays in hardware stores caused anxiety, product displays and overhearing unwanted conversations in stores became unbearable, participating in three-way conversations became stressful, and sudden interruptions to my thought patterns caused mental distress lasting for hours.

In 2018, I discovered the neurophysiological cause of autism (**Table 2**) [4]. In a neurotypical brain, the Cingulate Gyrus (CG) acts like an automatic transmission that seamlessly switches attention back and forth between frontal lobes, as required. In autism, however, a dysfunctional CG keeps the person trapped in his/her left frontal lobe, the intellectual problem-solving part of the brain – with no ability to access the

emotional/creative processing right frontal lobe, which plays a central role in spontaneity, social behavior, and nonverbal abilities. Some neurotypical people are left brain dominant, and others are right brain dominant. Autistic people, however, are left brain exclusive. We speak factually, without emotion, and with a neutral facial expression.

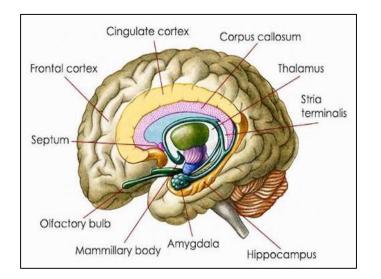


Image Credit: nutritionreview.org

The neurological structure of the autistic brain is the same as for any other brain. What is different about the autistic brain is how it functions with respect to its neurophysiology. [4, 5]

## Table 2: Autistic Neurophysiology

Cingulate		The cingulate gyrus (CG) is that part of the brain which focuses attention. In
Cortex/Gyrus	Dysfunctional	autism, the CG appears to keep the person's attention trapped in the left frontal
		lobe, creating a perpetual state of hyperfocus.
		In the autistic left frontal lobe, alpha frequencies (8-12 Hz) predominate over beta
Left Frontal		(12.5-30 Hz), which is the exact opposite of the neurotypical brain. Higher alpha
Cortex/Lobe	Dysregulated	frequencies in the left brain appear to be compensating for the inability to access
		creativity and intuition from the right brain.
		There is normal brainwave activity in the right frontal lobe, with alpha frequencies
<b>Right</b> Frontal		predominating over beta. However, neural networks are suspected of being
Cortex/Lobe	Inaccessible	underdeveloped. The autistic person is completely unaware of anything that
		happens in his/her right frontal lobe, the place where emotions and social
		connectivity are experienced.
		The amygdala plays a central role in the expressing of emotions, especially fear. A
Amygdala	Inactive	dysfunctional CG prevents the autistic person from feeling any emotion, with the
		result that the amygdala is virtually non-functioning. An autistic person typically
		never experiences fear.

In a neurotypical brain, the cingulate gyrus (CG) acts like an automatic transmission that seamlessly switches attention back and forth between frontal lobes, as required. In autism, however, a dysfunctional CG keeps attention fixated in the left frontal lobe (logical/analytical) – with no ability to access the right frontal lobe (emotional/creative), which plays a central role in spontaneity, social behavior, and nonverbal abilities. Some neurotypical people are left-brain dominant whereas others are right brain dominant. Autistic people, however, are left brain exclusive. We speak factually, without emotion, and with a neutral facial expression. We tend to speak in monotones without the changes in inflection that characterize neurotypical speech.

Left brain exclusivity creates perpetual hyperfocus, which is the defining characteristic of autism. Hyperfocus is the unrelenting state of intense single-minded concentration fixated on one thought pattern at a time to the exclusion of everything else, including one's own feelings. This is the ultimate onetrack mind.

The role of the amygdala is to express emotions, especially fear. Inability to experience emotional activity in the right frontal lobe renders the amygdala nonfunctional. Autistic people are incapable of experiencing fear of any kind. None of us have ever experienced an adrenal *fight-or-flight* reaction. In every life-threatening situation we coldly calculate risks and mitigating factors to form an immediate plan of action [5].

In 2018, I applied a mind-body healing modality that reduced the intensity of my hyperfocus by releasing stored tension from my Cingulate Gyrus [6]. Sensory overload was no longer an issue, a vacuum cleaner became merely background noise, and sudden interruptions to my thought processes became annoying rather than devastating. I was finally able to grieve for my grandmother's passing some 36 years earlier. What did not change, however, is that I still ticked all five boxes on the Litmus test for autism. I was still autistic, although less intensely so.

### Serendipity

In 2021, I slipped on an icy patch of pavement, fell, and hit the back of my head on the frozen surface. I lay on the ground crying uncontrollably for what must have been at least four minutes. In my entire life (since age six), I have never been able to cry. I was not crying from pain, because there was none. I was crying from fear, something I had never experienced in my entire life. Thus, I now fail the Litmus test for autism, being able to tick only three of the requisite five boxes. I am no longer autistic. The closest term that describes my recovery is *spontaneous remission*. My psyche gave me autism, and my psyche took it away.

#### Conclusion

Autism that was induced by trauma at age six was unexpectedly reversed by a subsequent trauma that occurred some 70 years later. The author is most probably the only person who has intimate experience of autism both from the inside looking out and from the outside looking in.

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