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## Discovery of Trauma Induced Autism and a Possible Cure

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### Abstract

Autism is characterized by 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. Most cases of autism appear to be congenital in origin. This report opens the door to the possibility that some cases of autism may be caused by extreme trauma. Eight subjects were examined whose documented autism was precipitated by a single event that was experienced as so horrific as to make life too painful to continue living. In each case, the brain instantly responded by permanently altering its neurophysiology so that the person never again experienced emotional pain. Instead of ending their painful lives, these people put an end to emotional pain in their lives, with the unfortunate consequence that they also ended their ability to receive emotional pleasure. In one of these cases, a second trauma reversed the neurophysiological change caused by the original trauma, thus returning brain function to normal.

**Keywords:** *Autism, Trauma*

### Introduction

In 2015, trauma from a skull fracture and concussion intensified my lifelong autism. After that incident, lighting displays in stores triggered extreme anxiety, shopping became unbearable because of sensory overload from product displays

and overhearing conversations, interruptions to my train of thought caused anxiety lasting for hours, and the sound of a vacuum cleaner became excruciatingly painful inside my head. This effect is consistent with findings that patients with autism exhibit anxiety that is exacerbated in the setting of traumatic injury. [1]

In 2019, I wondered if trauma intensifies autism, could it also cause autism. Since that year I have studied eight subjects all of whom fit the criteria for trauma induced autism (TIA). [2, 3]

### Assessment of Subjects

All participants in this study had been determined to have autism rather than post-traumatic stress disorder (PTSD) according to the criteria below. [2, 3] From their histories it was inferred that their brains would have been profiled as neurotypical if examined prior to their respectively defining traumatic incidents.

PTSD is characterized by persistent mental and emotional distress caused by specific traumatic events or terrifying experiences. Trauma induced autism (TIA) is an extreme coping mechanism that changes the neurophysiology of the brain in situations where one feels that his/her entire life is too painful to continue living. TIA prevents a person from ever feeling pain again, at the price of cutting off the ability to feel any emotion at all.

**Table 1:** Comparative Neurophysiology

|                          | <b>Autism</b>  | <b>PTSD</b>  | <b>Neurotypical</b>  |
|--------------------------|--|--|--|
| <b>Hyperfocus</b>        | hyperfocus   | n/a  | n/a  |
| <b>Cingulate Gyrus</b>   | dysfunctional  | functional   | functional   |
| <b>Amygdala</b>          | inactive   | active   | active   |
| <b>Left Frontal Lobe</b> | high alpha activity  | high alpha activity  | high beta activity   |
| <b>Social Aspects</b>    | Unable to understand and respond to the needs of others          | Social skills unaffected by PTSD                                       | Varying degrees of social skills, depending on personality |
| <b>Emotional Effects</b> | Incapable of feeling emotion. Processes emotions intellectually. | Resists memories of specific events that were emotionally devastating. | Emotions flow freely.                                      |

## The Nature 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. [4, 5]

**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. [4, 5]

## 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. [5-7]

|    |                           |                                     |
|----|---------------------------|-------------------------------------|
| 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.

## A Common Theme

What is fascinating about these eight cases is that they all appear to be psychosomatic in origin. These young people experienced an event so emotionally devastating that their subconscious mind instantly changed their neurophysiology to keep them locked into a perpetual state of autistic hyperfocus ever afterward. The target organ that controls attention is the cingulate gyrus (CG), so the inference is that somehow their thoughts restricted how the CG functions. The benefit is that hyperfocus prevents them from every again experiencing emotional pain. The downside is that they never again get to feel emotion of any kind.

The seven subjects who were old enough to remember their defining traumatic event have episodic memory of it in intimate detail, but without feeling any emotion as they are telling the story. To them it was just something that happened.

Six of the eight subjects displayed undercurrents of subliminal anger that unexpectedly surface only in safe ways, e.g., at things rather than at people. Incidents like dropping a wrench, misplacing something important, or taking a wrong turn in traffic tend to unleash outbursts of anger more intense than warranted by the given situation. All eight become mentally paralyzed when under emotional attack.

## Subject A

*Subject A* was born shortly after his father had been killed in a military accident. Subject A's family reported that until age five this child had been affectionate, socially interactive, and emotionally expressive. At age six, his mother married a man

with a narcissistic personality disorder. From that point on, both parents neglected Subject A's emotional needs and frequently left him alone unsupervised.

*Subject A* remembers his failed attempt to commit suicide at age six. He wanted to end his unbearably painful life by joining his daddy in heaven and almost succeeded. Clad in a makeshift military uniform and with a rope fashioned into a hangman's noose, the young lad had climbed to the top of his backyard fence and was about to scale the spikes sticking out of an adjacent telephone pole when a neighbor suddenly appeared and shamed him out of it. *Subject A* was thus not able to end his painful life; however, his trauma induced autism prevented him from ever again feeling pain in his life.

Until he left home at age 16, *Subject A* was the victim of continuing psychological abuse. He was also psychologically abused in his first marriage that lasted 22 years. His present family cringes in horror whenever *Subject A* recounts any of these episodes from his past. To him they were just things that happened about which he experienced no emotion, neither at the time nor in the telling of them afterward. He did not even realize that he had been abused.

*Subject A* describes himself as an emotional flat liner. He never laughs nor cries, never gets excited about anything, and always has the same expressionless face.

## Subject B

*Subject B* showed me a photo of herself taken at age four, in which she was excitedly playing outdoors and simultaneously making a strong emotional connection with the photographer in a way that no autistic child could. Two years later, all that changed. She never again felt excitement nor being emotionally connected to others.

At age 6, *Subject B* was forced to watch her father threaten her mother at gunpoint. Her mother knew her abusive husband would not pull the trigger if his daughter was watching.

As an adult *Subject B* has no social awareness and cannot understand other people's motivation. She pays more attention to her older son and cannot figure out why doing so upsets her younger son. If a friend gives her a hug, *Subject B* asks, "Why are you doing that?"

*Subject B*'s hyperfocus has given her eidetic memory, which is of considerable benefit in her career as a technical support consultant and web designer. Hyperfocus also makes her impatient with people who keep repeating themselves in conversation. "Why don't they remember what they say?" she asks herself, not realizing that repetition is often for the purpose of making an emotional connection.

## Subject C

*Subject C* was outgoing and socially interactive as a child. As a teenager his favorite activity was going to dances with his best friend. At age 17, *Subject C* witnessed this best friend being crushed to death in a mine collapse. From that moment on, he never again experienced emotional pain or pleasure. Whenever adversity struck his life, it was just something that happened about which he felt nothing.

*Subject C*'s fearlessness made him a formidable opponent in the ring. For seven straight years he was a welterweight Golden Gloves boxing champion, never once having been knocked off his feet in all that time.

*Subject C* has survived multiple strokes, multiple heart attacks, and multiple open-heart surgeries. When asked if he is afraid of dying, his response was, "No. If it happens, I'm OK with that."

## Subject D

*Subject D* described himself as overly loving when he was a kid. His sister verifies that until age five, *Subject D* was outgoing and emotionally expressive. His parents had been separated since his birth, and the only male he felt close to in his home was his sister's husband, whom he worshipped and adored. He hung out with his adult brother-in-law, went fishing, played basketball and football, and was starting to learn karate. All of this came crashing down when the brother-in-law moved out of the house never to return, because of his failed marriage.

Since that event, *Subject D* became withdrawn and angry at the world and has stayed that way until his present age of 39. Since the day he lost the only person in his life who meant anything to him, *Subject D* has never felt any emotion, has never felt anything for anybody. He also has never felt fear and even laughed during two incidents at which he was threatened at gunpoint.

*Subject D*'s hyperfocus has given him the same visual gift that Temple Grandin has, namely the ability to see accurate, distinct pictures in exceptional detail and to manipulate those images in his head. [8] He is obsessed with inventions and can look at anything and instantly see how to build something better.

## Subject E

*Subject E* is an autistic self-advocate who showed me photos of himself at age three in which he was being emotionally expressive to the photographer in a way that no autistic child could be. At age four, *Subject E* was punished for a bed wetting incident by being forced to spend all night terrified in one inch of water in the bathtub, during which time he never slept. His father told him that this is what happens to you when you do something wrong, then switched off the lights.

*Subject E* recalls that his lack of emotion was noticed by others as he was growing up. He never understood why people cried

over certain things and just told them to fix the problem and get over it. From ages 12 until 30, *Subject E* pushed people away if they got too close.

### Subject F

*Subject F* was a happy, gregarious child who loved to be the center of attention. At age 14, he suffered a severe concussion that kept him imprisoned in a darkened room for eight weeks. Through the walls he heard his narcissistic parents arguing, complaining what a burden he was to them, and making disparaging remarks about his failing grades in school. Six years have passed since the concussion, during which time *Subject F* has exhibited perpetual autistic hyperfocus. He has intense single-mindedness, takes everything literally, has no desire to socialize, is lacking in social awareness, is overwhelmed by three-way conversations, and pursues only individual activities.

### Subject G

*Subject G* is an autistic advocate with no known history of autism on either side of her family. When she was three, her older bipolar brother would get angry, shake her, throw things at her, or scare her on an almost daily basis. During a certain incident that happened at age eight, *Subject F* was prepared to kill her brother if she had to. *Subject F*'s parents did nothing to protect her from her brother's continuing abuse. It only ended when, at age 15, *Subject F* threatened him never to touch her again.

### Subject H

*Subject H* was born into a family with no known history of autism on either side. For the first two months of her life, she woke up every night crying. Mother and father would take turns comforting her. One night, the father observed the hostile mother shaking the infant. From that day forward until what is now 50 years later, *Subject G* has never cried. She lives her life in a perpetual state of autistic hyperfocus. She feels no emotional connection to anyone and is totally lacking in social awareness.

### The Author as Subject A

The author is *Subject A*, whose attempted suicide in 1950 induced autism psychosomatically. [9] 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 2*). 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 life-threatening 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.

**Table 2:** 50 Traits Caused by Autistic Hyperfocus [4, 5, 9]

|                         |  |
|-------------------------|--|
| <b>Mental Traits</b>    | <ul style="list-style-type: none"> <li>• Intense single-mindedness</li> <li>• Trapped in thoughts</li> <li>• Mind always busy, tendency to overthink</li> <li>• Passionately pursues interests, often to extremes</li> <li>• Amasses encyclopedic knowledge about areas of interest</li> <li>• Self-awareness but no social awareness</li> <li>• Interruptions trigger agitation, confusion, or anxiety</li> <li>• Cannot multitask</li> </ul>   |
| <b>Sensory Overload</b> | <ul style="list-style-type: none"> <li>• Hypersensitive to loud noises and bright lights</li> <li>• Experiences anxiety from being mentally trapped in a sensory assault</li> <li>• Overwhelmed from hearing unwanted conversations</li> <li>• Overwhelmed by too much information</li> <li>• Coping with electronics and filling out forms may cause anxiety</li> <li>• Sensory overload makes it impossible to think or focus</li> <li>• Difficulty listening to radio or talking with others while driving</li> </ul> |

|                         |  |
|-------------------------|--|
| <b>Emotional Traits</b> | <ul style="list-style-type: none"> <li>• Unable to feel emotion</li> <li>• Processes emotions intellectually</li> <li>• Has generalized physiological responses instead of emotions</li> <li>• Anxiety bypasses the intellect to warn of unprocessed emotions</li> <li>• Incapable of experiencing fear</li> <li>• Can be angry without knowing so</li> <li>• Never (or rarely) cries or laughs</li> <li>• Cannot nurture self psychologically</li> <li>• Shrinks from emotional displays by others</li> <li>• Unable to defend against emotional attacks</li> </ul> |
| <b>Social Traits</b>    | <ul style="list-style-type: none"> <li>• Considers self to be an outsider</li> <li>• Lacks innate desire to socialize</li> <li>• Unaware of feelings, needs, and interests of others</li> <li>• No awareness of how perceived by others</li> <li>• Unaware of socially appropriate responses</li> <li>• Cannot pick up on subtleties, unable to take hints</li> <li>• Unable to read body language</li> </ul>  |
| <b>In Conversation</b>  | <ul style="list-style-type: none"> <li>• Speaks factually with no trace of emotion</li> <li>• Takes everything literally</li> <li>• Easier to monologue than dialogue</li> <li>• Oblivious to motivations of others while they are speaking</li> <li>• Misses sarcasm</li> <li>• Misses social cues and nonverbal communication</li> <li>• Participating in 3-way conversations may be overwhelming</li> <li>• May have difficulty following topic changes</li> </ul>  |
| <b>In Relationships</b> | <ul style="list-style-type: none"> <li>• Understands love intellectually but cannot feel love</li> <li>• May understand empathy but unable to feel it</li> <li>• Cannot be emotionally available to others</li> <li>• Others cannot provide an emotional safety net</li> </ul>   |
| <b>Temperament</b>      | <ul style="list-style-type: none"> <li>• Drawn more strongly to certain things than to people</li> <li>• Innate forthrightness tends to scare others</li> <li>• Never bored, always engaged in some mental activity</li> <li>• Consistent to daily routines, agitated if routine is disrupted</li> <li>• Spontaneity not possible, activities must be pre-planned</li> <li>• Cannot lie spontaneously, can tell only premeditated lies</li> </ul>  |

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 applied a mind-body healing modality that reduced the intensity of my hyperfocus by releasing stored tension from my cingulate gyrus. [10] 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.

### A Possible Cure

For three years I searched for a possible cure for trauma induced autism, but to no avail. In TIA, a traumatic event

creates an inherent neurophysiological change in how the cingulate gyrus functions, thus locking the person into a perpetual state of hyperfocus. Although TIA is induced psychologically, there is no known therapy that can reverse it. No one can be talked out of hyperfocus.

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.

TIA is an unconscious choice to shut out the outside world and live in an inner space that is entirely intellectual, free from emotional and social distractions. TIA creates a self-inflicted structure that can only be cured if/when the individual unconsciously chooses to let go of that structure.

### Conclusions

Eight subjects have been identified who apparently suffer from trauma induced autism (TIA). If autism can be induced by trauma in eight individuals, then it is possible that trauma may cause autism in many others. However, eight is an insignificant sample size from which to project meaningful information over the entire population of autistic people. We do not yet know if TIA is rare or commonplace. More research is required, and perhaps this can be facilitated by clinicians adding specific questions about trauma to their patient histories.

In each of these eight cases, a traumatic event precipitated a change in how the brain functions. In one of these cases, a second trauma restored brain function to normal. The implication is twofold: (1) TIA is an unconscious choice to shut out the outside world and live in a structured inner space that is entirely intellectual, free from emotional and social distractions; and (2) TIA can only be cured if/when the individual unconsciously chooses to let go of this inner structure.

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