

“Auties Under Pressure”: Hyperbaric oxygen therapy

By David N. Brown

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Of the “alternative” treatments for autism, probably the one most currently “in vogue”, as measured by quantity and positive tone of coverage, is hyperbaric oxygen therapy. The basic premise is that autistics don't process oxygen as well as “neurotypicals”, and that respiring a higher concentration of oxygen at higher pressure can solve the problem. As practiced, this is done through some kind of chamber (though the higher O₂, at least, could be provided with relatively portable tanks).

I think the most fundamental problem of HBOT can be summed up in what I see as a general problem with evaluating autism treatments: “*controlling for the controls*”. Autistic behavior and functioning is very much dependent on environment. Any scientist trying to set up an experiment will try to establish maximum control over the environment. In the process, he may very well remove the stressors (noise, crowds, allergens, etc, etc) that trigger a subject's most extreme and negative manifestations of autistic behavior. This could easily lead to improvements that are genuine, and beyond arguable “placebo effect”, but nevertheless have little if anything to do with the “treatment” alone. In this case in particular, the problem is especially acute, because the “treatment” amounts to placing the autistic child in an artificial, confined and sealed environment. Claimed benefits are plausible, but one would be hard-pressed to prove higher oxygen was responsible. I think a good comparison test would be HBOT vs. a sound-proof room.

The greatest problem with “hyperbaric therapy” is the existence of advocates who will offer to sell chambers to families. The costs asked are sure to be prohibitive, which is bad enough. What is completely unconscionable is that placing the technology in anything less than “professional” hands is an obvious recipe for disaster. Fires and explosions may be the most common problem with chambers and air tanks alike, with a prominently recurring scenario being patients (probably for lung disease) who ignites himself while trying to smoke in an oxygen tent. (Another is mishandled “scuba” tanks, on which readers may consult the “Keystone Kommies” episode of *Worlds of Naughtenny Moore*.) A wide variety of biomedical problems can also occur. One grisly footnote in the history of the technology is that Nazi scientists were prosecuted for using it for outright “executions”. While a reasonably competent (and non-homicidal) operator would presumably avoid such gross mishandling, a novice might well produce the same deadly results by accident. Then there is the question of the quality of the equipment. The apparatus for sale might be anything from state-of-the-art to salvage from a military base's scrap heap (and who can say if the buyer or even the seller would know the difference?) Whatever state it is in when it arrives in the owner's hands, things can only go downhill without a professional to maintain as well as operate it. The end result is a clear and present danger not only to the recipient of the “therapy” but to the operator and anyone on or in proximity to his property! Whatever one makes of HBOT, the individuals who make these irresponsible offers should be rejected and denounced in the strongest of terms.

David N. Brown is a semipro author, diagnosed with Asperger's Syndrome as an adult. Previous works include the novels *The Worlds of Naughtenny Moore*, *Walking Dead* and *Aliens Vs Exotroopers*, and the nonfiction ebook *The Urban Legend of Vaccine-Caused Autism*. This and other articles related to autism are available free of charge at evilpossum.weebly.com.