

Neuro-Immune Diagnosis and Treatment Gives Hope to Children with Autism, Attention Deficit Disorder and Other Diseases.

**Children Once Thought of as Having "Untreatable Developmental or Behavioral Disorders in Reality Have a Medical Disease;
 New Protocol Has Already Helped Many Patients.**

Tarzana, Calif.—Doctors and researchers on the cutting edge of medical research are now bringing hope to many of the 500,000 children in the United States diagnosed with autism and many more of the more than 2.5 million with attention deficit disorder (ADD), attention deficit/hyperactivity disorder (ADHD) or chronic fatigue syndrome (CFS).

By treating these and other diseases as neuro-immune dysfunction syndromes (NIDS) and looking upon them as medical rather than developmental disorders, Michael Goldberg M.D., F.A.A.P, and his colleagues at the Neuro-Immune Dysfunction Syndromes Research Institute (NIDS-RI) have seen dramatic improvement and normalization in children previously deemed medically untreatable. During more than 20 years of evaluation and research, Dr. Goldberg has reduced or eliminated symptoms in numerous children throughout the United States and helped return cognitive function to normal and near normal in many.

The Epidemic

Autism is far more prevalent today than it was in the early 1980's when one in 10,000 children were afflicted with the disorder. Today, the National Institutes of Health (NIH) estimates that one in 250 children are diagnosed as autistic. Treating these children and others with similar disorders can cost more than \$60,000 per child, per year, according to parents whose children have the disorder. The number of children with ADD and ADHD also has increased dramatically in the past two decades, with estimates now topping 2 million, according to the NIH.

"Autism has migrated from a rare disorder to one that is now 10 to 20 times more likely to be diagnosed. It's scientifically impossible for an epidemic to be caused by developmental, genetic or "brain damaged" conditions," said Dr. Goldberg. "Without a doubt this is a disease process masquerading, or being misinterpreted, as a "developmental" disorder. We need to stop assuming that the symptoms are as a result of birth or genetic defects or psychological problems and start looking at the immune connection."

Dr. Goldberg says that, not only are these disease states

treatable but also over time, children's symptoms are reduced and they recover significant cognitive function. "Treating these children not only increases their quality of life, but decreases the current and future sociological and financial costs to our schools and communities," Goldberg said.

How it Works

According to Dr. Goldberg, NIDS patients are genetically predisposed to having a dysregulated immune system. The immune system malfunction can be triggered by a virus, intrauterine, prenatal or neonatal stress, combination of other stresses, illnesses or trauma and accounts for the cognitive processing and other deficits seen in many of these children. This is not a genetic disorder as though of in the past. Recent research supports the likelihood of an autoimmune connection in many of these families.

Diagnosis for NIDS is simple: an immune panel run through blood testing and a NeuroSPECT scan which measures blood flow to the brain. In many instances, testing reveals high titers for a number of herpes-like viruses, fungal or Candida overgrowth and multiple food sensitivities or allergies, which are usually secondary to a very activated immune system. A child's blood work frequently shows lowered counts of natural killer (NK) cells, an imbalance in certain immune ratios, as well as low ferritin and elevated lymphocyte counts with no apparent physical illness.

NeuroSPECT scans of children with NIDS show reduced blood flow to portions of the brain, including areas of the temporal lobes which affect social skills, auditory processing and language. Other "autistic" symptoms correspond to areas of dysfunction seen in the frontal lobes and cerebella area.

Research and Treatment

By regulating and cooling down the immune system and the targeted use of FDA approved drugs, Dr. Goldberg and other specialists working with these children have seen dramatic improvements. Many children have returned to fully normal functioning, often near or at the top of their class academically.

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(continued from front page)

Extensive clinical work over the past 5 years supports the NIDS-RI hypotheses that many developmental disorders are actually immune-mediated diseases affecting the central nervous system.

“Research on other diseases such as Alzheimer’s and multiple sclerosis has proven that the immune system plays a very powerful role in cognitive function,” said Jeffrey Galpin, M.D, a clinical associate professor of medicine at the University of Southern California and a renowned AIDS researcher. Drs. Goldberg and Galpin, along with the NIDS Scientific Advisory Board of leading medical researchers, professionals and specialists from the field of immunology, infectious diseases, nuclear medicine and pediatrics are calling for the trials of new immune modulator drugs to be applied to adults and children with these disorders in an accelerated, expedient manner.

“There is so much more that can be done to help these children,” said Dr. Goldberg. “While the medications currently available help reduce symptoms, the most promising research for the future is in the area of immune modulator drugs. These drugs should be extremely effective in regulating immune system dysfunction when used on these children and adults with related disorders.”

The Neuro-Immune Dysfunction Syndromes Research Institute has embarked on a fundraising campaign to implement these new therapies and make effective available medical treatment to all afflicted children. For more information on the campaign or NIDS, visit www.nids.net or www.neuroimmunedr.com or to download medial materials go to <http://www.nids.net/about.htm>. To reach the NIDS Research Institute and Parent Coalition call 888-540-4999 or 818-951-8579.

Facts About NIDS

Definition:

Neuro-immune dysfunction syndromes (NIDS) are a classification for illnesses or disorders related to problems with the complex interactions between the central nervous system and the immune system.

Number of children affected:

3 million+ children, specifically:

-Likely large majority of the more than 500,000+ diagnosed with autism. Autism has increased from 1 in 10,000 to 1 in 250.*

-Many of the 2 million children or 1 in every 20 people diagnosed with attention deficit disorder (ADD) or attention deficit/hyperactivity disorder (AD/HD).**

-Many of the 500,000+ diagnosed with chronic fatigue syndrome.**

Diseases that are likely NIDS:

Diseases that were originally diagnosed as autism, ADD, AD/HD, pervasive developmental disorder (PDD), chronic fatigue syndrome (CFS) and other related disorders.

Causes of NIDS:

NIDS sufferers are most likely to have a genetic pre-disposition for immune system dysregulation. This “pre-disposed” system can be triggered by intrauterine prenatal or neonatal stress, or by viruses, illnesses or by a combination of other stressors and trauma. Overuse of antibiotics and immunizations are not believed to be causes, but may add further stress and play a role as triggers.

NIDS premise:

When the immune system is dysregulated/ dysfunctional, the body can reduce blood flow to the brain, particularly to vital areas of the temporal lobes. When this decreased blood flow disrupts neurological function and development in the critical early years of life, this can cause observable “autistic” symptoms. Areas of the brain affected are those directly related to social skills, auditory processing and language.

Symptoms:

Patients will generally have a combination of cognitive impairment, fatigue, fine and gross motor abnormalities, headaches, inability to concentrate, inappropriate behaviors, irritability, lack of focus, language delays, “low grade” fevers, bowel disturbances, chronic congestion or recurrent ear infections, multiple chemical and food sensitivities, multiple rashes, obsessive compulsive disorders, photo-sensitivity, poor socialization skills, poor eye-contact or poor muscle tone.

Diagnosis:

Blood work and NeuroSpect analyses can be used to diagnose NIDS. NeuroSpect brain imaging is a scan that measures blood flow to the brain and provides a very accurate diagnostic tool, showing areas of lower perfusion in the temporal lobes corresponding to decreased function, specifically areas of auditory processing, speech, social skills, etc.

Treatment:

Many of the children with NIDS can be clinically treated using currently approved agents and diet modification.

Most promising treatment:

If used properly, new agents called immune modulators, currently in the developmental pipeline, can potentially restore immune systems to normalcy and reduce dependence on other combinations of medicines.

Clinical trials:

Immune modulators are NOT currently slated for medical research in children, especially in relation to NIDS conditions, which are still being thought of as developmental delays or disorders. The Neuro-Immune Dysfunction Syndromes Research Institute is ready to begin trials as soon as funding is obtained.

More information:

www.nids.net or www.neuroimmunedr.com

*Source: National Institutes of Health

**Source: Centers for Disease Control

About Michael Goldberg, M.D., F.A.A.P.

Dr. Goldberg has more than 20 years of experience evaluating and treating children with disorders that fall within the evolving spectrum of neuro-immune dysfunction syndromes (NIDS), including autism, attention deficit disorder, attention deficit/hyperactivity disorder, pervasive developmental disorder and chronic fatigue syndrome.

Dr. Goldberg received his medical degree from the University of California-Los Angeles (UCLA) and his pediatric training at the LAC-University of Southern California Medical Center. A pediatrician, the Director of the NIDS Medical Advisory Board and a fellow of the American Academy of Pediatrics, Dr. Goldberg is a member of the clinical teaching staff at both UCLA and Cedars-Sinai Hospitals.

Dr. Goldberg began to focus on NIDS in 1983, after his wife developed an undefined illness, marked by recurrent flu symptoms, fatigue, sore throat, swollen lymph glands and cognitive dysfunction including short-term memory loss and a decreased "processing ability."

Dr. Goldberg noted that many of the children he was seeing had a blood work profile like his wife's. When he looked at advanced work on neuro-cognitive dysfunction, neuro-imaging techniques and the complex multi-dimensional inter-

actions between the immune and central nervous systems, it became clear that the underlying cause of all of these illnesses was immune dysfunction. This has been supported and verified extensively by clinical work, peer review and the evolving medical literature.

The NIDS Scientific Board and Research Institute were formed by Dr. Goldberg and colleagues in 1998. They have been monitoring the emerging body of evidence relating to the neuro-immune system. The groups seek to demonstrate that NIDS is a medical disease under which supposedly "incurable" conditions such as autism must be urgently reclassified (rather than as currently classified as "mental disorders"), and therefore open to medical treatment.

Dr. Goldberg's passion lies in developing a treatment pipeline that uses the large body of existing science and clinical evidence to help the current generation of affected children. He believes this can only be done by focusing on treatment options now, built on the large body of existing science and clinical evidence and not by spending additional years and millions of dollars researching and analyzing old ideas or concepts that cannot apply to these children.

Dr. Goldberg has a busy practice in Tarzana, California, and travels extensively to attend and speak at medical conferences worldwide.

NIDS Research Institute Scientific Board Members & Specialists

(Available for Interviews by Appointment Only)

Michael Goldberg, M.D. Pediatrician, Teaching staff Cedars-Sinai / UCLA Medical Centers. President - Neuro-Immune Dysfunction Syndrome (NIDS) Research Institute Scientific Board

Dr. Goldberg pioneered the use of neuro-immune agents to treat children diagnosed with autism, attention deficit, attention deficit/hyperactivity disorder and other similar diseases. In his 20 years of treating patients, many have shown dramatic improvement to the point that the symptoms for which they first sought medical treatment have been significantly reduced or have disappeared. Dr. Goldberg is an expert in NIDS, the NIDS-RI protocol and the successful treatment of children with NIDS.

Jeffrey Galpin, M.D. Clinical Associate Professor of Medicine/University of Southern California

An internationally recognized researcher and physician, Dr. Galpin's career accomplishments include developing the first gene therapy for AIDS and co-developing a drug for AIDS. He is currently working with the NIDS board to prove that immune modulating therapies are a viable treatment option for the autistic population and other connected adult neuro-immune disorders.

Julie Griffith, M.D. Pediatric Neurologist/Northern California

Dr. Griffith is a pediatric neurologist in Northern California. She provides neuro-cognitive Insights and assists the NIDS-RI with the selection of cognitive evaluation tools to support therapeutic and clinical trials.

Byron Hyde, M.D. Director of Nightingale Research Foundation/Ottawa, Canada

Dr. Hyde specializes in the treatment of chronic fatigue syndrome (CFS) or myalgic encephalomyelitis. He has written one of the leading textbooks on this often misunderstood condition. He provides the NIDS-RI with clinical input regarding protocols and immune profiles currently under development.

Nancy Klimas, M.D. Professor of Medicine, Psychology, Microbiology and Immunology / University of Miami School of Medicine and the Miami VA Medical Center

Dr. Klimas is a clinical immunologist whose work in associating the degree of immune activation with severity of cognitive dysfunction has led to the study of potential mechanisms relative to these findings. These observations are being translated into clinical trials that will aid in finding treatments for symptoms of cognitive dysfunction through immune-based therapies.

Ismael Mena, M.D. Professor Emeritus/University of California – Los Angeles/Director of Nuclear Medicine/Las Condes Clinic – Santiago, Chili

A professor of radiology services at UCLA for more than 20 years, Dr. Mena has published a host of articles related to neuro-imaging in both autism and chronic fatigue syndrome. Long considered a leader in this field, he possesses one of the most comprehensive pediatric NeuroSPECT scan databases, with controls, in the world. This scan is critical in the diagnosis and treatment of neuro-immune disorders.

James Oleske, M.D. Chairman of Immunology/Department of Pediatrics at the University Medicine & Dentistry of New Jersey

A specialist in autism, ADD and chronic fatigue syndrome, Dr. Oleske offers NIDS-RI clinical and research resources, and a significant experience base with these afflictions.

Vijendra Singh, Ph.D. Professor/Biotechnology Center at Utah State University

Dr. Singh is working on auto-immune theories for autism at the Biotechnology Center at Utah State University. With more than 20 years experience in neurobiology and immunology research, he serves on the Scientific Board of the Autism Autoimmunity Project.

Letter from NIDS Executive Board

Welcome new readers and those just becoming aware of the NIDS effort! To those of you whose children I take care of and / or who have become aware of and have helped with this grass-roots effort called NIDS – THANK YOU.

For the first time we are reaching a point where the number of patients receiving support from their physicians and expressing the desire of other physicians to learn more about the neuro-immune connection, has changed dramatically. Prominent, academic based pediatric - developmentalists have seen children change “in ways they never anticipated” such that they are interested in “replicating” my protocol in a trial manner. As represented by the media clippings in this newsletter, NIDS has become a viable concept, and most important, a logical, viable option to the “doom and gloom” and “hysteria” called Autism.

But problems still exist. NIDS awareness is still in it’s infancy . . . we must grow rapidly if we are going to change things fast enough to help today’s children. While the issue is no longer will this happen, but rather when, the difference sadly could be NOW vs. ANOTHER 10 – 15 years. For while literally EVERY “Autism” group is discussing autoimmune, neuro-immune, and even some of them “viruses”, they have not yet made the connection (or remain unwilling to do so) that this is a disease process that can be treated now, not some strange developmental disorder called “Autism”. This can be changed, but I must confess, I never imagined there would be a need to keep fighting the kind of obstacles that still exist, when ALL logic and data says the old ideas cannot, do not make sense.

Many parents, often having seen many renowned experts, are told to expect little. What objective evaluation, measurement, or test, gives those “experts” the right to say their child was “damaged goods” and could not be fixed. “That as mothers they were foolish to believe otherwise.” Herein lies another part of the problem. We are condemning you and your children to a bleak future, with NO objective support of any kind that this is even what the experts think it is. Hasn’t this become at least a little ludicrous, suspicious to many by now?

But there is another problem facing all of you. With all the other groups holding on to the idea of “Autism,” NIDS has yet to receive the funding and focus it needs. While one can now say, this effort will ultimately succeed, I may shortly lose the ability to hold together the key coalition of researchers ready to move for your children now (top researchers ready to place your children first for new ideas, NEW therapies, not years after the adults, and with the knowledge and experience to increase significantly the odds of expedient success). This newsletter, the media releases, the efforts of so many of you out there are aimed at trying to push this over the top, create a real chance to change this now for yourselves, your children, and so many others.

Together, this can be done. We all need to distribute NIDS information, push “awareness” and through that hopefully the end of old “fables.” In turn, we can try to point as many as possible to a pathway of logic, science, and appropriate medical care and help for their children.

Again, to all of you reading this, welcome and thank you. Thanks to the efforts of many already, there is a real chance to make the future NOW. We must all make this happen, or a lot of today’s children will never have the chance they so deserve.

Michael J. Goldberg, MD

NIDS Mission Statement

The NIDS Research Institute, consisting of the NIDS Parents Coalition and the NIDS Scientific Board, is dedicated to increasing the public's awareness of the likely connection between neuro-immune and/or auto-immune dysfunction and conditions such as Autism, ADD, Alzheimer's, ALS, CFS/CFIDS, MS and other immune mediated diseases. The Institute is also committed to facilitating access to treatment options and research studies for families suffering from these disease processes. It will strive to fulfill this mission by working in cooperation with Neuro-Immune Technologies, Inc, a research integration company dedicated to the development of new treatments for this population.

NIDS Video Tapes

Presentation from December 1, 2001 Conference:

- **Autism Spectrum Disorders,**
- **Chronic Fatigue Syndrome and ADD/ADHD**
- **A Medical Epidemic and the NEURO-IMMUNE CONNECTION**

December 1st Set Includes the following:

- Full video of Dr. Goldberg's NIDS presentation
- Question and Answer Session video
- CD-ROM with Presentation Slides; Articles such as Autism and the Immune Connection and A New Definition of Autism; the April 2000 Congressional Testimony by Dr. Goldberg, Many articles and Citations; Peer Studies and Validation documents on the NIDS Hypothesis; Do's and Don'ts of the Diet; Why NIDS Article and much more!!

Yes I want a Video Tape Set!

Quantity _____ x \$89.00 = _____

S & H @ \$16.00/tapeset in U.S. = _____

Total = _____

Name: _____

Address: _____

All purchases are tax deductible
You may also purchase on-line at www.NIDS.net
Or mail check to:

NIDS Research Institute and Parent Coalition
 3115 Foothill Blvd Suite M-307
 La Crescenta, CA 91214
 (818) 951-8579

The NIDS Research Institute and Parent Coalition is a 501(c) (3) Non Profit Organization

Letter from the Executive Director of NIDS Parent Coalition

Hello Readers,

I want to take this opportunity to welcome all readers to the NIDS Parents Coalition's NIDS NETWORK newsletter. The NIDS Coalition is the Parent/Patient support arm of the NIDS Research Institute. The Coalition focus is on Public Education and Awareness about NIDS and its far-reaching effect in today's society. Fundraising--in support of furthering NIDS research and expansion of treatment availability and options--is as critical and in fact, the two primary goals cannot be separated. In upcoming issues, as well as on the NIDS.net site, we will outline what individual parents and groups can do to help 'Spread The Word' about NIDS—at this time I will highlight those items, including some pending plans, below. If you would like further information, check our web site or e-mail me directly.

The December newsletter will review:

- Plans for a NIDS Day/Night at several national restaurant chains
• Contribution cards with several grocery chains
• NIDS Shirts availability
• A major 'gift' campaign for the holiday season
• Chapter formation initiative
• Details on the National Video Conference in January 03

Also, there will be a meeting of the NIDS California Chapter in the next 4-6 weeks. Contact info is on the back page of this newsletter.

Have you watched the December 1st Videotape set? This presentation provides a comprehensive overview of NIDS, the theory behind the treatment and specific case histories of NIDS patients. These tapes prove to be an invaluable tool in explaining NIDS to parents and medical professionals as well.

In closing, let me heartily thank all who have dedicated time and energy to the NIDS effort this past year. We are very close to 'breaking this open': Only the lack of funding and support is holding back the research and trials needed to 'change the paradigm' and help all those suffering from NIDS.

Marc Share
Executive Director (marc@healnids.org)
NIDS Parents Coalition

YES! I am interested in more information on the NIDS Coalition.

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ Email: _____

Circle the information below that pertains to you:

I am a PATIENT PARENT/FAMILY DOCTOR/MEDICAL

My area of expertise is: _____

I would like to be involved with the NIDS Research Institute and Parent Coalition in the following categories:

- Upcoming events Parent Support Groups
Treatment Options Volunteering

Please contact me via _____

(if phone is preferred method, please indicate the most convenient time to call)

RETURN TO: NIDS Coalition, 3115 Foothill Blvd., Suite M-307, La Crescenta, CA. 91214

NIDS Work-Up

The following are the proposed blood tests for NIDS recommended by Dr. Goldberg.

These tests can either be done by his office or by your own pediatrician.

The Most Important Tests:

- CBC
- Sedimentation Rate
- CMV IGG / IGM (if IGG Positive)
- ANA Titer
- EBV IGG / IGM (if IGG Positive)
- Hypothyroid Panel
- Ferritin Level
- Immune Panel (to include):

- Total & Percent CD4
- Total & Percent CD8
- Total & Percent CD16 / CD56
- Total & Percent CD19
- Lead Level
- Vitamin B12 level
- Folic Acid
- Comprehensive Metabolic Panel
- SGOT / SGPT
- Lipid Panel
- Candida Titer (IGG, IGA, IGM)*
- *Immunodiagnostic Labs
(800) 888-1113
- HHV6 Titer (Immunodiagnostic Labs)

- Quantitative Immunoglobulin (IGG, IGA, IGM, IGE)
- Gliadin Antibodies
- Alpha Interferon
- Allergy Food Screen (95 foods)*
- *Meridian Valley Lab (253) 859-8700

Optional / Useful Tests

- Thyroid Antibodies
- Herpes I & II IGG / IGM
- Rubella IGG Titer
- Coxsackie Virus A & B

Recommended Software

Dr. Goldberg recommends that NIDS children enhance their academics with a variety of computer software programs. The following is an abbreviated list compiled by a Speech and Language Pathologist affiliated with NIDS:

- Jumpstart Kindergarten ----- Knowledge Adventure
- Jumpstart First Grade - ----- Knowledge Adventure
- My 1st Incredible Amazing Dictionary -- DK Multimedia
- Sammy's Science House ----- Edmark
- Bailey's Books House ----- Edmark
- Elmo's Preschool ----- Creative Wonders
- My First Amazing Words and Pictures -- DK Multimedia
- Potato Head in Veggie Land - ----- Hasbro
- Tonka Trucks - ----- Hasbro

NIDS Chat

Dr. Goldberg Online !!!

Date: Every Tuesday
Time: 7:00PM - 9:00PM PDT (GMT-07:00)

Use MIRC (connect to server 216.58.141.230 port 7000)
and join #NIDS,
or go to www.neuroimmunedr.com,
Click on Conference, log-in,
and then click on CHAT (top menu).
Select/join the "NIDS Chat".

Dr. Goldberg plans to be online on MOST TUESDAY
EVENINGS of each month, as his schedule permits.

Please join us!

- For more information on the NIDS fundraising campaign or NIDS itself, visit www.nids.net or www.neuroimmunedr.com.
- To download medical materials go to <http://www.nids.net/about.htm>.
- To reach the NIDS Research Institute or the NIDS Parent Coalition call 888-540-4999 or 818-951-8579.

“NIDS KIDS” - Success Stories

“Nicholas was born healthy . Other than problems with GE reflux and occasional ear infections, his first 2 years were on track developmentally. At his 2 year well child check, it was confirmed that he was delayed in speech and was showing social disengagement from family and friends. He was diagnosed with autism at 3 1/2. His prognosis was bad; we were told by his pediatrician that he would pray for our family. Most of his day was spent in solitude. He would scream to be put down whenever he was picked up. He would spin himself (and objects) constantly and spent much of his day running down the hallway looking peripherally at the wall. After several months searching for answers, I located Dr. Goldberg’s article on Autism and the Immune Connection. Finally a theory made sense. We made an appointment the next day. After 1 1/2 years on the protocol, Nicky is becoming verbal, he is self sufficient, and has entered Kindergarten near the top of the class academically. We expect his “Special Needs” designation in school will be removed within the next 1-2 years.”

Suzanne Roelike/Arizona

“We have been seeing Dr. Goldberg for 5 years. We now have a well adjusted 7 year old boy in typical first grade. He is in the highest reading and math groups and is the best speller in the class. He has a terrific vocabulary and wonderful conversations. He still has an aide to help him when the teacher has ‘too much language’ because his auditory processing is a little slow. But otherwise he is happy and healthy and has friends. He takes piano and horse back riding lessons, and does gymnastics without an aide and with other children his age...”

Lori Dell/Pennsylvania

“My son, Reed, was officially diagnosed as autistic when he was three. My husband and I went from doctor to doctor trying to help our child. Most of these doctors did not even perform a cursory exam because they didn't believe autistic kids could get better. They had nothing to give us, not even hope. He is now recovered because of the work because of the doctors from the NIDS (Neuro-Immune Dysfunction Syndrome) Research Institute. When Reed entered kindergarten, he was in the third percentile for speech. By that time, we had been seeing Dr. Goldberg for about a year. By the third grade, my son tested in the 85th percentile for speech and by fifth grade no longer received any assistance at all at school. Dr. Goldberg has been treating my child and others like him successfully for the last decade. On my son’s current seventh grade report card, he earned all “A’s;” and a “B” in art. He is in all the accelerated classes with no assistance. None of his teachers or friends even knows he was ever diagnosed with autism. But more importantly, he is well liked and doing all the things the doctors said would never be possible. He will grow up to be a productive working citizen for whom the government does not have to provide.”

Marcia Ryan/Minnesota

Contact Us

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NIDS Canadian Chapter

Susan and Doug McCreary
dmcreary@sympatico.ca
(519) 942-2348

Suggestions

Do you have an area of interest regarding NIDS or Autism itself? Please forward all requests for future newsletter articles to:
sroelike@ hotmail.com, or sjsmith@erols.com



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If your life is touched by

Autism,

ADD/ADHD,

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Then NIDS is for you !

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