The Political Economy of Autism

TOBY ROGERS
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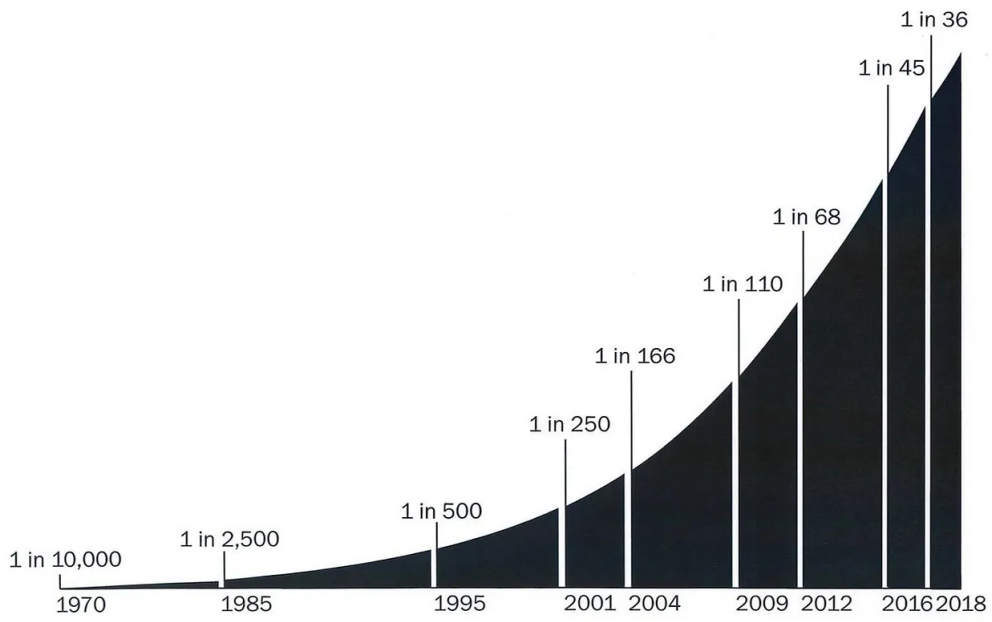
Autism is an epidemic and a pandemic by any reasonable definition of those words. J.B. Handley, in *How to End the Autism Epidemic*, produced the best chart showing the growth in autism prevalence in the U.S. over the last 50 years:

Increase in Autism Prevalence in the U.S. 1970 to 2017



Source: Handley (2018).

Darold Treffert at Winnebago State Hospital in Wisconsin was one of the first people to attempt to measure autism in the general population. His study, published in *Archives of General Psychiatry* in 1970, showed an autism rate of less than 1 in 10,000 children.

Then, sometime around 1987, the autism rate in the United States began to skyrocket. By 2017, the autism rate in the U.S. was 1 in 36 kids (Zablotsky et al., 2017). So the U.S. has experienced a 277-fold increase in autism prevalence in the last 50 years.

In some places and populations the rates are even higher: in Tom's River, NJ, the state's largest suburban school district, 1 in 14 eight-year-olds is on the autism spectrum; in Newark, NJ, 1 in 10 Black boys is on the spectrum (forthcoming).

The United States is in the midst of a genocide.

Genetic theories of autism never made much sense because "there is no such thing as a genetic epidemic" — the human genome just does not change that fast. An early twin study by Susan Folstein and Michael Rutter at the Institute of Psychiatry in London in 1977 suggested a strong genetic component to autism. More recent scholarship shows that this was likely overstated; the study only had 21 twin pairs and did not effectively control for environmental factors (twins usually grow up in the same family and are thus likely exposed to the same toxicants).

As the autism rate exploded throughout the U.S., the state of California hired eleven of the best geneticists in the country to examine the role of genes in autism. They concluded that genetics explains at most 38% of autism cases and in two places they explained that this was likely an overestimate (Hallmayer et al., 2011). Whatever is driving the surge in autism prevalence, it is not primarily genetics.

Well perhaps the increase in autism prevalence is just the result of better awareness (and what's called "diagnostic expansion and substitution")? That theory of the case does not check out either. The state of California funded two multimillion dollar to examine sharply rising prevalence in the state and whether it was the result of social factors. The first study was led by pediatric epidemiologist Robert S. Byrd at UC Davis who directed a team of investigators at UC Davis and UCLA. The investigators concluded that, "The observed increase in autism cases cannot be explained by a loosening in the criteria used to make the diagnosis" and "children served by the State's Regional Centers are largely native born and there has been no major migration of children into California that would explain the increase in autism" (Byrd et al., 2002).

The state of California revisited this question in 2009 with a study led by the top environmental epidemiologist in the state — Irva Hertz-Picciotto at the UC Davis Mind Institute. This study concluded that changes in diagnostic criteria, the inclusion of milder cases, and earlier age at diagnosis explain about a quarter to a third of the total increase in autism (Hertz-Picciotto & Delwiche, 2009). In a subsequent interview with *Scientific American*, Hertz-Picciotto explained that these three factors "don't get us close" to explaining the sharp rise in autism over that time period and she urged the scientific community to take a closer look at environmental factors (Cone, 2009).

There are now seven good 'societal cost of autism' studies (Jarbrink and Knapp, 2001; Ganz, 2007; Knapp et al., 2009; Buescher et al., 2014; Leigh & Du, 2015; Cakir et al., 2020; Blaxill, Rogers, & Nevison, 2021). They all show that the U.S. and much of the developed world is heading for economic and social collapse as a result of surging autism costs.

Autism increases poverty and inequality. Lifetime care costs for autism range from $1.4 to $2.4 million. Mothers of kids with autism earn 35% less than mothers of kids with other health limitations and 56% less than mothers of kids with no health limitations (Buescher et al., 2014).

In 2015, autism cost the U.S. an estimated $268 billion a year in direct costs & lost productivity; given current rates of increase, autism costs will reach $1 trillion a year (3.6% of GDP) by 2025 (Leigh & Du, 2015). As a point of comparison, the U.S. Defense Department budget is "just" 3.1% of GDP.

All of the more recent studies show autism costs surpassing $1 trillion a year in the near future. There is no plan by any level of government to raise revenue to meet these costs or prevent autism to mitigate these costs. Elected officials are frozen like a deer in the headlights.

In the last decade, three groups of top epidemiologists have published consensus statements declaring that neurodevelopmental disabilities including autism are caused by toxicants in the environment (The Collaborative on Health and the Environment, 2008; Mount Sinai Hospital, 2010; Project TENDR, 2016).

This is good news because it means that autism is likely preventable. The bad news is that the leading mainstream toxicologists do not want to lose their jobs so they generally avoid mentioning pharmaceutical products (even though these products appear to have an outsized impact). Parents groups have made up for the cowardice of mainstream toxicology by funding their own research.

We have fairly good data that five classes of toxicants increase autism risk:

1. Mercury from coal fired power plants and diesel trucks;
2. Plastics;
3. Pesticides & herbicides;
4. EMF/RFR; and
5. Pharmaceuticals (Tylenol, SSRIs, & vaccines).

Taking each toxicant in turn...

For every 1,000 pounds of environmentally released mercury, there was a 61% increase in the rate of autism (Palmer, 2006). For every 10 miles closer a family lives to a coal fired power plant the autism risk increases by 1.4% (Palmer, 2009).

Plastics: Children with autism had significantly increased levels of 3 endocrine disruptors (two phthalates — MEHP & DEHP, & BPA) in blood samples as compared with healthy controls (Kardas, 2016).

Pesticides & herbicides: Increased use of RoundUp is strongly correlated (r = 0.989) with the rising prevalence of autism (Swanson, 2014). Organophosphates increase autism risk 60 – 100%; chlorpyrifos increase risk 78% – 163%; pyrethroids increase risk 78% (Shelton et al., 2014).

9 studies show an association between acetaminophen (Tylenol) use & adverse neurodevelopmental outcomes (Bauer et al., 2018). Avella-Garcia (2016) & Liew et al. (2016) found that males exposed to Tylenol in utero have significantly elevated risk of autism.

8 studies show a statistically significant association between selective serotonin reuptake inhibitor (SSRI) use in pregnant women and subsequent autism in their children (see meta-analysis in Kaplan et al., 2016). Doctors who prescribe SSRIs to pregnant women are committing malpractice.

Unfortunately, in the debate over toxicants that increase autism risk, all roads lead back to

vaccines. At least 5 studies show a statistically significant association between vaccines & autism (Gallagher & Goodman, 2008 & 2010; Thomas & Margulis, 2016; Mawson et al., 2017a & 2017b).

Dr. Paul Thomas is the most successful doctor in the world at preventing autism. Data from his practice show:

If zero vaccines, autism rate = 1 in 715;

If alternative vaccine schedule, autism rate = 1 in 440;

If CDC vaccine schedule, autism rate = 1 in 36.

That study had large sample size (3,344 children), access to medical files, and good researchers working on it. But look closely. His alternative vaccine schedule reduces autism risk by more than 1200%. However even an alternative vaccine schedule increases autism risk by 160% versus no vaccines at all.

And all of those other toxicants that I described above that have been shown to increase autism risk? Those are the 1 in the 715 cases when the parent does not vaccinate at all. Autism appears mostly be a story of iatrogenic injury from vaccines.

This is not a surprise. Thousands of parents have been telling us for years that their children regressed into autism following vaccinations. Ethylmercury is a known neurotoxin and is still in 7 different vaccines (Thomas & Margulis, 2016, p. 14).

Aluminum is a known neurotoxin (Grandjean & Landrigan, 2014) and is used in a majority of vaccines. “The dose makes the poison” paradigm has collapsed in recent years and now we know that many toxicants have no safe dose.

In a sane world, all of this would be seen as good news. In a sane world the CDC, EPA, NIH and every major newspaper would rush out to Portland, Oregon to examine whether the data from Dr. Paul’s practice (and other studies) are correct. But we live in an insane world...

To date, the CDC, EPA, NIH, the federal government, and all state governments have ignored Dr. Paul’s work. None of the top 10 major newspapers in the U.S. have reviewed his book, *The Vaccine Friendly*, plan even though it is a bestseller on Amazon. In fact the Oregon Medical Board was so incensed by Dr. Paul’s success in preventing autism that they pulled his medical license briefly in 2021 (he has since been reinstated).

All of this information is public and available to anyone with an internet connection and a library card. By 1999 it was clear that vaccines that contained mercury were a problem (see Kirby, 2005). By the early 2000s it was clear that the problems with vaccines went well beyond mercury. Government had a choice to make: come clean or double down. And starting with senior scientist Thomas Verstraeten and then William Thompson the CDC decided to just flat out lie, manipulate findings, and destroy data.

The pharmaceutical industry also had a choice to make: improve their products or utilize their extensive capture of media and government to protect their existing toxic products. As everyone now knows, they chose to protect their existing toxic products. But the pharmaceutical industry has an enormous problem on their hands. We know some vaccines (hepatitis B, HPV, flu, DTaP...)

cause catastrophic harms. And pockets of unvaccinated people across the country — who are healthier than vaccinated children — are the control group that provides evidence of Pharma's crimes.

So starting in 2015, with the introduction of SB277 in California, the pharmaceutical industry began a systematic effort to eliminate the unvaccinated control group in all 50 states. They start by removing religious or personal belief exemptions to vaccination. In subsequent years they introduce bills to eliminate all medical exemptions to vaccination (SB 277 in CA in 2019) to get to 100% vaccination rates (even though all scientists will tell you that there are some children who should not be vaccinated because of underlying health conditions). In the Pharma legislative blitzkrieg no one is spared so that there will be no evidence left of the harms from these products. If 100% of children are treated, then there is no background rate of illness and all vaccine injuries just appear "normal".

These mandatory vaccine bills are racketeering and crimes against humanity. With the introduction of coronavirus vaccines in late 2020, the situation has gotten much worse. Pharma now aims to vaccinate 100% of adults as well as 100% of kids and the results thus far have been catastrophic.

So here's where things stand. The vaccine paradigm has collapsed (and no, mRNA, DNA, and adenovirus vector vaccines are not going to save it). Pharma has piles of cash and extensive capture of the media, academia, and government. So they have the ability to do just about whatever they want. Fearing prosecution and seeking immense profits, Pharma has abandoned any pretense of science, consent, or health and pushed all in to set up a totalitarian state that will serve their interests.

But Pharma has harmed so many people — first with the childhood schedule and now with coronavirus vaccines — that there are now millions of people who have seen vaccine injury first-hand and are now fighting back with everything they've got. Variously referred to as the medical freedom movement, the health choice movement, and/or the personal sovereignty movement, these brave citizens are taking on the most powerful industry in the world and fighting to save our country from Pharma fascism. The fighting is so fierce because the stakes are enormous. We are fighting to preserve human life as we know it from the most predatory and corrupt industry in the world.

To learn more about the toxicants associated with autism, read The Political Economy of Autism. To learn more about the battle to save our country and the world from Pharma totalitarianism, please subscribe to my Substack.

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205 Comments

Write a comment...

Toby Rogers Nov 24, 2021 Author

This thread ^^ did a million views on Twitter before I got deplatformed for pointing out that Fauci blocked access to the antibiotic Batrim during the AIDS epidemic and his decision led to 35,000 preventable deaths from pneumonia.

LIKE (89) REPLY ...

31 replies by Toby Rogers and others

Jurate Oct 17, 2021 Liked by Toby Rogers

Wish I found you when my kids were babies. My sons are 11and 10 now. I used alternative vaccine schedule on my kids and took more than 5 years instead of two and one shot a time to get the vaccines in . I had huge pressure from the doctors and not much information to go by , just a gut feeling that my preemie 5 lb baby after 3 month in nicu (born at 2 lb) should not be getting the whole “bouquet” of shots as healthy babies. I was being guilted , made feel as bad mother but I stood my ground, quit my job to stay home so that no day care would be needed and doctor would feel better why my child is not on normal vaccine schedule. Now as more experienced and informed mom I would just fire those doctors . Anyway both of my sons are healthy and I no longer feel guilty or crazy for taking this long to get the shots in. In fact I feel guilty for giving them at all. The 12 year old meningitis boosters coming up and I’m not sure they need it... there is no way they getting gardisil or the big v .

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12 replies

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