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CASE STUDY OF CHILD WITH DOWN SYNDROME WITH DEVELOPMENT AND SPEECH DELAY

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A woman consulted with me in May 2017 concerned about her daughters development and speech. The child (2 years old, Down Syndrome) had a recent ear infection following diagnosis of a chest and kidney pneumonia infection. The mother mentioned stimming in her emails and was concerned her daughter had repetitive behaviours. We began with a basic Naturopathic approach to health and within a few weeks her immune system had improved and she was more focused and attempting to speak more.

In July 2017 the child developed severe cradle cap around her ears, her mother tried a topical cream with no relief. I suggested a stool test as it seemed to be a fungal infection - a sign of imbalance in her gut flora. In the meantime she started the child on the Nutrivene Protocol and slowly added one product to her daughter's program at a time. During this time the child developed parainfluenza but they were relieved to be able to fight it without antibiotics. Grommets were prescribed by their ENT specialist at this time. They began seeing a chiropractor to clear the ears to avoid grommets.

In August 2017 the child had grommet surgery and was administered anaesthetic and antibiotic ear drops. The mother emailed me to say she was upset that her child had developed a lot of pus in her ears following the surgery and was prescribed more antibiotics. She was concerned this had disrupted her daughters gut flora further and was keen to get stool testing.

They kept in touch regularly by email, asking questions and sending updates on the child's progress. Simultaneously, blood tests revealed low iron and Vitamin D and other indications of systemic imbalance. We worked on these over the following weeks until the family saved enough money to do a comprehensive PCR stool test.

October 2017 stool test results arrived. High levels of Escherichia Coli and Bacteroides Vulgatus were detected. High levels of B. Vulgatus cause immune imbalances and autistic behaviours according to research. High levels of E. Coli are associated with systemic inflammation, metabolic disorders and irritable bowel symptoms.

We also found the child was low in several species of beneficial bacteria, specifically Prevotella which is low in the microbiome of children with autism, B. Crossotus which is low in the

microbiome of children with metabolic issues, C. Eutactus which is low in children with irritable bowel and autism symptoms, B. Wadsworthia which is low in children with metabolic issues and O. Formigenes which reduces the ability to digest Oxalates. Low levels of beneficial flora are commonly the result of antibiotic, anaesthetic and vaccine use.

The child started a comprehensive Gut Healing program to improve digestion and absorption and support her natural defence system against pathogenic bacteria. We addressed Candida overgrowth, Biofilms and began herbs and supplements to reduce high levels of toxin-producing microbes. Several months into the program the child's mother emailed me very excited to say the pus in her daughter's ears had completely gone. The ENT specialist told them to "continue whatever they were doing". In addition, her speech has improved significantly and the physiotherapist was very pleased with her development at their last appointment. The child's mother was ecstatic and relieved after a long period of poor immunity, development and speech delay, to see signs of progress.

The child will begin the final stage of her Gut Healing program. Specific foods and supplements are selected to increase beneficial strains of bacteria. Restoring essential microbial species is crucial to avoid recurrence of pathogenic overgrowth. I am pleased to say we addressed the three main concerns her mother came to me to treat in May 2017; speech, development and immunity.