

REPEATING HISTORY

Investigating Pink Disease Down Under Highlights its Many Similarities to Autism...

BY DAVID KIRBY

Forever and a day” may sound cliché, but that’s how long the journey from New York to Australia seemed to take. After a six-hour flight to Los Angeles and a three-hour layover, I boarded a Qantas double-decker for the long haul to Melbourne. During the night I asked a flight attendant how long we’d been in the air. “Nine hours,” he said. “Halfway there.”

Australia may be a world away, but most Americans will feel at home there. I did. I was also excited about the purpose of my trip. I was heading Down Under not for tourism, but to work on a groundbreaking documentary, *From Acrodynia to Autism: Mercury Across Generations, More Evidence of Harm*, sponsored by SafeMinds, about the mostly forgotten illness, acrodynia, more commonly called “Pink Disease” in Australia.

Pink Disease ravaged children in Europe, North America and Australia in the first half of the 20th Century. Many did not survive. The name comes from the fact that many children developed raw, peeling hands and feet. Other symptoms included social withdrawal, lack of eye contact, loss of language, repetitive and self-injurious behaviors, body-rocking, toe-walking, sensitivity to light, noise and touch, low muscle tone, immune disorders and respiratory problems.

Sound familiar?

Some researchers and parents suspected the ghastly symptoms were caused

by teething powders, typically applied in Western countries to the gums of children at about six months of age. One active ingredient in most brands: inorganic mercury.

The profitable teething-powder industry, along with scientists and medical experts, insisted the powders were harmless, and essential to the health of a developing child. They noted that most exposed children developed no symptoms (only one in 500 kids given the powders got the symptoms), so it could not be the source. The fact that symptoms appeared around the same time children were teething was purely coincidental.

I wrote extensively about acrodynia in my book *Evidence of Harm*, largely because the symptoms were so like those of autism. Lyn Redwood, Sallie Bernard and other SafeMinds parents recognized the similarities and published a paper, *Autism: A Novel Form of Mercury Poisoning*, that gave side-by-side comparisons of

I was always screaming, crying continuously...I had a red rash. They didn't know what was wrong.



◀ **TOXIC TIMES**—Mercury-containing products such as Calomel and teething powders, commonly used in the first half of the 20th century, are now known to have seriously injured countless young children.



THE ACRODYNIA ERA—(Left) The campsite at Eildon, one of many set up for victims of Pink Disease. (Right) Heather Thiele and her twin brother Les at the age of two.



mercury toxicity and autism. At one point, Redwood found a photo in an old acrodynia textbook depicting a pale, droopy-eyed, sickly boy who could barely hold his head upright. She compared it with a picture of her own son, Will, at the same age. It looked like the same child.

The survivors of Pink Disease are now well into middle age, or older. Their stories had never before been put to film. SafeMinds commissioned the documentary, which was produced by film students from Swineburne University of Technology in Melbourne. We spent 10 days travelling around the gorgeous subcontinent to interview a handful of Aussie survivors. The stories we collected were gripping, moving, and heartbreaking.

SURVIVING MERCURY'S TORMENT

There was no question who our main character would be: Heather Thiele, a long-term survivor who created a Pink Disease support group in Australia in the 1970s. Heather lives with her husband in a modest farmhouse on the eastern edge of the Outback, near the tidy town of Dubbo. I wrote about her in my book and we had corresponded. It was great to meet this legend.

We spent an entire day interviewing Heather. What a tale she had to share. As a girl, her symptoms mirrored those of autism. "They started at six

months, and they got particularly bad from nine months to about 18 months," she says in the film. "I would have convulsions for hours at a time, and my mother would have to put me into cold water to get my temperature down."

Heather also wrote a paper detailing the ordeal of her childhood. "Immediately, I became lethargic, sensitive to noise, light and touch, lost my appetite and consequently lost weight alarmingly. I lost muscle tone and I found it hard to hold my head up or sit, and although I was on the verge of walking, I became like a floppy doll. The skin on the soles of my feet and palms of my hands became bright pink and began to peel off. I would scream if placed in a bath, so my mother started "washing" me with olive oil and cotton wool. Nothing seemed to pacify me, and I would go for days with-

out sleep. My mother says my cry was more like the whimper of a frightened animal, and could last for periods of 24 hours or more, without a break."

She also engaged in repetitive behaviors. "I'd be sitting, and rocking backwards and forwards," she recalls in *From Acrodynia to Autism*. "I'd bang my head along with the rocking." She also walked "on tippy-toes" until she was 10. No wonder Heather felt "very isolated, I felt like I was being smothered." Keeping eye

▼ **YOUNG VICTIMS**—Early descriptions of Pink Disease noted that the children affected had faces that "reflected sadness."



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From Acrodynia to Autism, is that humanity was warned, over and over
again, that people and mercury simply do not mix well.*

contact with others was almost impossible, leading one teacher to admonish her, “You look at me, you ignorant little girl, when you talk! Don’t you look away!”

Everywhere we travelled, we heard similar stories.

Elizabeth Meyers was interviewed in downtown Sydney. “I couldn’t stand to be touched anywhere on my body, and screamed and cried day and night,” she says in the film. “My mother stayed home, of course, to look after me. I was very irritable, crying, clammy. I’d been sitting, and I regressed back to lying.”

About an hour south of Sydney rests the beautiful beach town of Wollongong, home to acrodynia survivor Peter Hobbs, who lives on, yes, Mercury Street. Peter has suffered severe health impacts of mercury poisoning since he was a baby. “I was always screaming, crying continuously,” he recalls on film. “I had a red rash. They didn’t know what was wrong.” He also had, and continues to have, severe respiratory problems. “I would stop breathing in my sleep and they would have to put me in a tent and start me up again with an oxygen tank,” he says. (Will Redwood was also hospitalized for respiratory problems and required breathing treatments and oxygen as a toddler).

Heather, too, battled respiratory disease, a known effect of mercury exposure. She had pneumonia “dozens of times” as a child, and also slept at an angle to drain mucus. For many, breathing problems persist. “About a third of the survivors have bronchiectasis, which affects the cilia in the bronchi, so the lungs can’t work properly.”

One awful attribute of Pink Disease that differs from autism is early death.

Janice Collins lives in the fresh-air town of Goldburn, nestled under lush green mountains between Sydney and Canberra. Five of her siblings died in infancy, three of them from Pink Disease. In the town where Heather was born, 19 children developed acrodynia. She was the only one to survive, even though the doctor told her mother, “She’s so ill, she’ll never make school age.”

MERCURY, AUTISM AND ACRODYNIA

David Austin is a psychologist, autism researcher and parent of a young son with severe autism who lives outside Melbourne. He was instrumental in the making of *From Acrodynia to Autism*, in which he provides a riveting account of his research.

“Mercury naturally finds its way to the brain,” David explains on film. “In humans, it can get through the blood-brain barrier. But then that’s not the end of the story because the mercury’s still there, so the mercury can still go on, bind to other sites, kill other cells, interrupt other enzymes.”

David came across a book describing acrodynia symptoms and was astonished. “It read exactly like you would write a case study about an autistic child,” he marvels. “The withdrawal from social contact, the loss of eye contact, the loss of language, the irritability, the banging the head against the wall or beating your head with your fist, the light sensitivity, the sleep disruption. I was speechless after reading this book.”

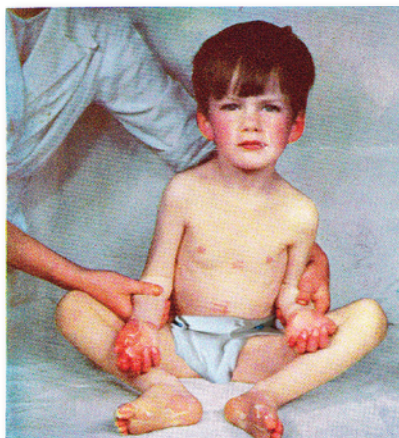
He is convinced that “the research is very clear: there’s an association between mercury and autism.” Assuming that people who developed Pink Disease were born with “an idiosyncratic sensitivity to mercury,” he adds, “then potentially that would carry through to the descendants of Pink Disease survivors.”

Taking that logic a step further, he notes, “If mercury is somehow as-

sociated with having autism, you would then expect to see more autism amongst the descendants of people who survived Pink Disease.” To test that theory, David and colleague Kerrie Shandley undertook a painstaking survey of survivors in Australia, and their descendants, using information culled from Heather Thiele’s support group.

“We received the data on thousands of children and grandchildren of those survivors. The autism rate amongst them was one in 25,” he says. “Compared to our national prevalence, matched birth year to birth year, of about one in 160. So we had a seven- or eight-fold elevation in autism. But only one in 500 exposed children got Pink Disease. So we knew that there was this individual sensitivity.”

The study, published the *Journal of Toxicology and Environmental Health* investigated the hypothesis that autism can result from the interaction between mercury and a genetic predisposition to heavy-metal sensitivity. “The large elevation in autism prevalence in this group of children was startling, especially given that rates of other childhood disorders were at expected levels,” the authors wrote. “The thing that differentiates these children from the general population, to which they were compared, is



▲ **SIGNS & SYMPTOMS**—Many victims of Pink Disease developed red peeling skin on their hands and feet.

a family history of mercury sensitivity. We were simply blown away by the results.”

One person who was not surprised was Heather. “I think there’s a higher incidence of autism and ADHD and all those behavioral problems in families of Pink Disease people. There is a definite connection,” she says. “I relate fully to autistic people. I feel that they’re so much like me. I’ve used the fact that I have symptoms the same as autism to explain to people that both are caused by mercury. People are only too willing to understand that.”

UNHEEDED WARNINGS/ UNDENIABLE TRUTHS

As the film points out, children today are exposed to mercury in many ways: food, air, water and vaccines, to name a few. Such cumulative exposure to mercury, both pre- and post-natal, would clearly be more dangerous to those children with a genetic sensitivity, a DNA-based vulnerability inherited from their parents and grandparents.

Several interviews confirmed what the paper reported. Janice’s son and grandson, for example, both have Asperger’s. Then there is the case of Audrey Neilson, a Pink Disease survivor in the town of Newcastle, north of Sydney, whose daughter Caroline Williams has severe ADHD and grandson Steven has Asperger’s.

“Steven was extremely clingy as a baby, he liked his own company even back then,” Caroline says of her son. “His teacher had noticed that he’d sit on the chair and rock.” Steven himself now wonders if he and his grandmother were both poisoned by mercury. “I never thought Pink Disease had anything to do with As-



Child with Acrodynia, form of mercury poisoning
(courtesy L’Acrodynia by AW Cameron, 1931)



Child diagnosed with Autism
(courtesy Lyn Redwood, Safe Minds, 2001)

Symptoms and Similarities between Acrodynia and Autism

Pink Disease (Acrodynia) Symptoms from L’Acrodynia by A.W. Cameron, 1931 and PD survivor Heather Thiele	Autism Symptoms from Autism: A Novel form of Mercury Poisoning, Bernard, et. al. 2001
Mood alterations describes as a loss of joyfulness. If someone comes close to them they move away or cry.	Social deficits, social withdrawal, aversion to touch, depression, flat affect.
The children may stop playing and laughing. Their faces reflect sadness.	Grimacing, staring spells, aloofness, depression, prefer to be alone.
In most children there is irritability. The children stop talking, some cry or are cranky.	Irritability, aggression, temper-tantrums. Loss of speech, agitation, unprovoked crying.
Intelligence may remain intact, but in serious cases it disappears.	Borderline intelligence, degeneration of higher mental powers, some have recovery of IQ.
Some children hit themselves, bang their head against furniture bite themselves or others, pull out their hair	Self-injurious behaviors to self and others, head banging, hitting the head.
Restlessness and rocking from side to side or repetitive behaviors.	Repetitive and preservative behaviors, stereotypical behaviors.
Some children repeat the same words for hours or are obsessed with images.	Echolalia (repeating words and phrases) and obsessive compulsive tendencies.
Some symptoms are so pronounced that they resemble acute psychosis.	Anxiety, schizoid tendencies, irrational fears. (Catatonia also recently reported)
Insomnia, some children spend days without sleeping or sleep one or two hours a night.	Sleep disturbances, insomnia, difficulty falling and staying asleep.
Photophobia is present but may go unnoticed. Also sensitivity to sound and touch.	Oversensitivity to light, photophobia, sound sensitivity and aversion to touch
Loss of appetite and vomiting may be observed with muscular hypotonia (low muscle tone)	Anorexia, nausea, feeding problems, decreased muscle strength, (especially upper body)
Diarrhea has been described in the early phase but in most cases there is constipation.	Diarrhea, constipation, gaseousness, abdominal discomfort and colitis.
Loss of eye contact and preference to be left alone. Appear unaware of what is going on around them.	Poor eye contact, gaze avoidance, problems with joint attention.
Bright red feet and hands, peeling of skin in sheets.	Rashes, dermatitis, other skin problems.

perger’s, until now,” he says. “But I’ve had mercury in my vaccinations. And I’ve got a grandmother who’s survived an awful lot of mercury, so it’s possible.”

It is possible that Steven was negatively impacted by mercury just as his grandmother had been many decades before. What is astonishing, and the central, poignant message of *From Acrodynia to Autism*, is that humanity was warned, over and over again, that people and mercury simply do not mix well.

“Humans seem to have been so slow, glacial, in doing something about mercury,” says David Austin, stating the tragic but undeniable truth. “We’ve known how toxic it is for millennia, but it seems like we keep having to suffer catastrophes to remind ourselves of mercury’s toxicity.”

Heather Thiele is equally perplexed, and saddened, that children around the world are still being needlessly exposed to mercury, especially thimerosal, a full century after Pink Disease first began claiming its small victims. “I have great anxiety over the fact that this happened, that we were poisoned, and there was no apology,” she laments near the close of the film. “We have suffered a life different to what it should have been. And now I see history repeating itself

in the vaccine/autism story.”

Heather, an Australian survivor typical of that country’s rugged, stoic endurance, exhorts viewers at the end of the documentary to, “Refer back to the humble, simple people like myself to say what it’s like,” she says plaintively. “Don’t ever let this happen to another generation.” ◀

Click here to watch
From Acrodynia
to Autism:
Mercury Across Generations,
More Evidence of Harm