



The Autism Spectrum Fallacy

David Rowland*

Independent Researcher registered with ORCID, Canada

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***Corresponding author:** David Rowland, Independent researcher registered with ORCID, Canada.
Email: david222@hush.com

Abstract

In 2013, the American Psychiatric Association merged four disorders of uncertain similarity under the umbrella of *autism spectrum disorder* (ASD). The American Psychological Association defines *autism spectrum disorder* as any one of a group of disorders occurring during preschool years and characterized by difficulties in communication and social interaction and by repetitive patterns of behavior, interests, or activities. These criteria are so vague as to be meaningless and have created an epidemic of false diagnoses of autism. Data indicate that 70% of those believed to be on the so-called spectrum are probably not autistic. There is only one autism, and it is 100%. Either you are autistic, or you are not. Autism does not belong on any alleged spectrum.

Keywords: *Autism, Asperger, Asd, Neurophysiology, Neuropsychology*

Introduction

Definition: Autism is perpetual and unrelenting hyperfocus, the state of intense single-minded concentration fixated on one thing at a time to the exclusion of everything else, including one's own emotions. The probable cause of hyperfocus is a dysfunctional cingulate gyrus (CG), that part of the brain which focuses attention. [1]

Description: Autism is an inherent neurophysiological difference in how the brain processes information. Autistic people live in a specialized inner space that is entirely intellectual, free from emotional and social distractions. They observe the world in detail without feeling any emotional attachment to what they see. [1] Autism is a

neurophysiological idiosyncrasy. The only thing different about an autistic brain is the specialized way in which it processes information. As such, autism does not fit the medical definition of *disorder* (i.e., pathological or diseased condition of mind or body). Michelangelo, Mozart, Paganini, Newton, Darwin, Jefferson, Edison, Tesla, and Einstein were autistic and obviously not suffering from any mental pathology. [2]

Historical Research

Autism, from the Greek word meaning self, was coined in 1911 by Swiss psychiatrist, Eugen Bleuler, who used it to describe withdrawal into one's inner world.[3] Autistic children appear to be in a world of their own, isolated and alone with senses that can easily overload. These children talk endlessly about one subject, engage in repetitive behaviors (e.g., wringing hands, rocking body), continually repeat certain words or phrases (echolalia), and are resistant to change.[4]

In 1943, psychiatrist Leo Kanner studied the case histories of 11 highly intelligent children who shared a common set of symptoms consistent with autism: the need for solitude, the need for sameness, and to be alone in a world that never varied.[5] Kanner assumed that these children came into the world without innate biologically provided ways of emotionally connecting with other people. [6]

In 1944, medical professor Hans Asperger described "a particularly interesting and highly recognizable type of child" who has an autistic personality that is an "extreme variant of male intelligence." Asperger described four boys who had severe difficulties of social integration that were compensated

for by the kind of high level of thought or experience that can lead to exceptional achievements in later life. He chose the label autism for this condition as referring to an inherent fundamental disturbance of contact, the shutting off of relations between self and the outside world.[7] Asperger remarked that for those boys, social adaptation has to proceed via the intellect, and in fact they have to learn everything by the intellect. He considered the autistic syndrome to be a stable personality trait that is genetically transmitted in families. [8]

In 1962, psychiatrist Gerhard Bosch compared infantile autism to the Asperger autistic syndrome and considered them to be two variants of the same condition.[9] In the family of the author of this article, one young lad has nonverbal autism and his younger brother has Asperger's, thus confirming that both variations have the same genetic origin.[2]

In 1979, psychiatrist Lorna Wing introduced the term *Asperger syndrome* to describe the autistic personality. Wing personally examined 34 cases fitting Asperger's description of the autism syndrome and found that they had the following 11 traits in common: [10]

- Single-mindedness combined with social isolation;
- Pedantic speech, often consisting of lengthy discourses on favorite subjects;
- Poor comprehension of other people's expressions and gestures;
- Tendency to misinterpret or ignore non-verbal signs;
- Impairment of two-way social interaction;
- Inability to understand rules of social behavior;
- Lack of the intuitive ability to adapt their approaches to fit in with the needs of others;
- Intensely attached to certain possessions;
- Excellent rote memories and intensely interested in one or two subjects;
- Absorb every available fact concerning their chosen field and talk about it at length, regardless if the listener is interested; and
- Thought processes are confined to a pedantic, literal, and logical chain of reasoning.

In 2020, David Rowland discovered that autism is caused by an inherent neurophysiological idiosyncrasy that creates a state of perpetual hyperfocus, which he defines as intense mental concentration fixated on one thought pattern at a time to the exclusion of everything else, including one's own feelings.[11] Hyperfocus is the sole factor responsible for the autistic person's withdrawal into an inner space that is entirely intellectual. Hyperfocus keeps a person's awareness fixated in the analytical/logical left frontal lobe of the brain with no ability to access whatever may be happening in the right frontal lobe, the place where emotions and social connectivity are felt. Hyperfocus explains all 11 traits of Asperger syndrome as listed by Lorna Wing above.

The Spectrum Fallacy

Autism does not belong on any alleged spectrum. There is only one autism, and it is 100%. Either you are autistic, or you are not.

In 2013, the American Psychiatric Association merged the following four disorders under the umbrella of autism spectrum disorder (ASD): autism disorder, Asperger syndrome, childhood disintegrative disorder, and pervasive disorder not otherwise specified (PDD-NOS). This alleged spectrum is a basket catch-all for conditions of uncertain similarity.

The American Psychological Association defines autism spectrum disorder (ASD) as any one of a group of disorders typically occurring during the preschool years and characterized by varying but often marked difficulties in communication and social interaction.[12] DSM-5, *the Diagnostic and Statistical Manual of Mental Disorders*, describes autism as being characterized by (1) persistent deficits in social communication and social interaction; and (2) restricted, repetitive patterns of behavior, interests, or activities. These criteria are so vague as to be meaningless. If you do not know what causes certain symptoms, then you know nothing about any presumed disorder in question.

Epidemic of False Diagnoses

In 2018, the Centers for Disease Control (CDC) reported that 1 in 44 children were diagnosed with an autism spectrum disorder, for a prevalence rate of 2.27% of the population.[13] In 2012, a review of global prevalence of autism found 62 cases per 10,000 people, for a prevalence rate of 0.62%.[14] This apparent 266% increase in autism prevalence is in stark contrast to all other disorders in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), for which there have been no increase in prevalence over this same 6-year period.[15] These data indicate that 70% of those believed to be on the autism spectrum are probably not autistic.[16]

Phenotyping is based on observing gene expressions in individuals and relating their conditions to hereditary factors. Nowadays professionals diagnose by ticking off symptoms on a checklist, without questioning the possible causes of said symptoms. This is a major step backward from clinical phenotyping.

A 2016 study reported that many children originally diagnosed with autism spectrum disorder were later found not to be autistic.[17] A comprehensive 2019 study in *JAMA Psychiatry* indicates that autism is being significantly over-diagnosed.[18] Dr. Laurent Mottron, co-author of this study, has expressed these concerns: "*The autism category has considerably overextended ... most neurogenetic and child psychiatry disorders that have only a loose resemblance with autism can now be labelled autistic ... you could not have ADHD and autism before 2013, now you can.*"[19] Doctors

now tend to label as autistic anyone who simply has ADHD and poor socialization.[20]

Conclusions

Autism does not belong on any alleged spectrum. There is only one autism, and it is 100%. Either you are autistic, or you are not. The American psychiatric and psychology professions have created an autism spectrum umbrella category that includes unrelated conditions and has resulted in an epidemic of false diagnoses of autism. Data indicate that 70% of those believed to be on the so-called spectrum are probably not autistic.

References

1. Rowland D. Redefining autism. *Journal of Neurology, Psychiatry and Brain Research* 2020;(02).
2. Rowland D. Autism's true nature. *Journal of Neurology, Psychiatry and Brain Research* 2021;(2).
3. Blatt G. "Autism", *Encyclopedia Britannica*.
4. Montgomery S. *Temple Grandin*. New York, 2012: Houghton Mifflon Harcourt, p 22.
5. Kanner L. "Autistic Disturbances of Affective Contact". *Nervous Child*, 1943.
6. Grandin T, Panek R. *The Autistic Brain*. New York: 2014, First Mariner Books, pp 5-7.
7. Frith, U. *Autism and Asperger Syndrome*. Cambridge, 1991: Cambridge University Press, pp 37-92.
8. Wing L. Asperger syndrome: a clinical account. *Psychological Medicine* 1981;(11):115-129.
9. Bosch G. *Infantile Autism* (trans. D Jordan, I Jordan). New York, 1970: Springer-Verlag.
10. Wing L. Asperger syndrome: a clinical account. *Psychological Medicine* 1981;(11):115-129.
11. Rowland D. The neurophysiological cause of autism. *Journal of Neurology & Neurophysiology* 2020;11(5):001-004.
12. "Autism spectrum disorder (ASD)". *APA Dictionary of Psychology*.
13. "Prevalence of autism spectrum disorder". *Surveillance Summaries*, Centers for Disease Control and Prevention, Dec. 3, 2021. M, Di
14. Elsabbagh M, Divan G, et al. Global prevalence of autism and other pervasive developmental disorders. *Autism Research* 2012;5:160-179.
15. Rowland D. Epidemic of False Diagnoses of Autism. *Journal of Neurology, Psychiatry and Brain Research* 2023;(01).
16. Lundström S, Reichenberg A, et al. Autism phenotype versus registered diagnosis in Swedish children: prevalence trends over 10 years in general population samples. *British Medical Journal* 2015, Apr. 28.
17. Blumberg SJ, Zablotsky B, et al. Diagnosis Lost: Differences between children who had and who currently have an autism spectrum diagnosis. *Autism* 2016;(7):783-95.
18. Rodgaard E, Jensen K, et al. Temporal changes in effect sizes of studies comparing individuals with and without autism: a meta-analysis. *JAMA Psychiatry* 2019;76(11):1124-1132.
19. "Are We Overdiagnosing Autism". *Healthline.com*.
20. Basu S, Parry P. The autism spectrum disorder 'epidemic': Need for biopsychosocial formulation. *Australian and New Zealand Journal of Psychiatry* 2013;47(12):1116-8.

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