Interrogating assumptions: Challenging claims of neurological damage in autism therapies

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EDITORIAL

The article titled "The neurological damage caused by repetitive behavior modification based therapies in autism and the myth of early intensive intervention in autism" authored by Rajalakshmi Kandaswamy, published in the Journal of Neurology and Neuroscience (Vol. 7, No. 3). While Kandaswamy's article presents provocative claims, I am compelled to address the potential implications and offer counterarguments supported by empirical evidence.

Kandaswamy's article asserts that repetitive behavior modification-based therapies, such as Applied Behavior Analysis (ABA), cause neurological damage in individuals with Autism Spectrum Disorder (ASD) and perpetuate the myth of Early Intensive Intervention (EII) in autism. While this perspective challenges conventional practices, it is essential to critically evaluate the evidence supporting these claims.

Contrary to Kandaswamy's assertions, research in the field of autism intervention has consistently demonstrated the efficacy of ABA in promoting skill acquisition, functional independence and quality of life for individuals with ASD. Numerous studies, including meta-analyses and randomized controlled trials, have documented the positive outcomes of ABA interventions in improving communication, social interaction and adaptive behavior in individuals across the autism spectrum.

Furthermore, the concept of early intensive intervention, rooted in principles of neurodevelopmental plasticity and critical periods of growth, has been supported by empirical research. Early intervention programs, such as Early Start Denver Model (ESDM) and Early Intensive Behavioral Intervention (EIBI), have been shown to lead to significant improvements in developmental outcomes for young children with ASD, facilitating greater gains in cognitive, language and social-emotional domains.

In light of these findings, it is imperative to approach discussions surrounding autism interventions with caution and adherence to evidence-based practices. While alternative perspectives contribute to the richness of discourse in the field, it is essential to prioritize interventions that have been rigorously evaluated and demonstrated to be effective in improving outcomes for individuals with ASD.

I urge the editorial board to consider the potential impact of publishing controversial articles that may disseminate misleading information and undermine evidence-based practices in autism intervention. As advocates for individuals with ASD and their families, it is our responsibility to uphold the highest standards of scientific integrity and ensure that interventions are grounded in empirical research and best practices.

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Thank you for considering my concerns. I am available for further discussion and welcome the opportunity to contribute to the ongoing dialogue on this important issue.

CONFLICT OF INTEREST

There is no conflict of interest between authors.