



Case Study: EnLyte Therapy in Adolescents With Autism

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EnLyte is a natural, advanced generation folate prescription therapy indicated for any condition in which elevated homocysteine levels are causative or contributory to pathology. Because its ingredients are cofactors in multiple pathways involved in neurotransmitter synthesis, its main role since development and launch has been that of antidepressant. The following case study describes a teen who responded well to EnLyte therapy with no adverse events seen at the time of this report.

Case Study: PK

PK is a seventeen-year-old male with Autism who presented on Paroxetine (20 mg a day) and Risperidone (2 mg bid). His parents reported that he was indeed less obsessive and impulsive on these medications, and those were the specific symptoms that led them to seek treatment, but he was fatigued and gaining weight as well. His YBOX score was 15, indicating some OCD symptoms despite therapy, although pre-treatment it had been as high as 26.

His parents requested a discontinuation of these two agents and a trial of a natural therapy. Risperidone was discontinued abruptly, and Paroxetine was tapered over two weeks with some mild withdrawal noted (anxiety and intermittent "shock" sensations for 4 days). He was also started on EnLyte at the time of the initial visit, and returned after one month reporting full alertness, minimal impulsivity, and continued obsessive thoughts (as manifested by repeatedly asking his parents about a random matter for several minutes at a time, multiple times per day). His YBOX was now 23, but parents requested no additional agents. In six weeks, they reported a near resolution in obsessiveness with a YBOX score of 14. The patient remains stable at four and a half months post his initial visit.

Visit www.EnLyteRx.Com for full prescribing information.