



Politics, Pseudoscience, and the Real Needs of Children with Autism

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Recent statements by U.S. President Donald Trump discouraging pregnant women from taking paracetamol and questioning the necessity of neonatal vaccines, including hepatitis B, have reignited myths long rejected by science. While presented as health advice, these claims lack robust evidence and pose risks to public health by undermining trust in both safe medications and vaccination programs.

Paracetamol and Autism: Association Is Not Causation

Several observational studies have reported statistical associations between prenatal paracetamol (acetaminophen) use and increased risk of neurodevelopmental disorders [1,2]. Yet such studies cannot establish causality, are prone to bias, and often fail to adjust for confounders such as maternal fever, itself linked to adverse outcomes [3]. Both the European Medicines Agency and the World Health Organization have reaffirmed in 2025 that paracetamol remains the analgesic/antipyretic of choice in pregnancy when used responsibly [4,5]. Alarmist claims risk leaving pregnant women untreated for fever or pain, potentially harming mother and fetus [6].

Vaccines and Autism: A Myth That Refuses to Die

The supposed link between vaccines and autism originates from a fraudulent 1998 *Lancet* paper [7]. It was retracted, and its author was struck off the medical register. Since then, multiple large-scale studies, involving hundreds of thousands of children, have found no causal association [8–10]. Still, repetition of this myth in political discourse fosters vaccine hesitancy. Greece’s measles outbreak in 2017–2018, with over 3,000 cases and preventable deaths, illustrates the consequences of low vaccine coverage [11].

Misinformation as a Public Health Hazard

Misinformation and disinformation are now recognized by WHO as threats to global health [12]. Social media amplifies rumors, while political endorsement gives them dangerous legitimacy. During COVID-19, vaccine hesitancy surged in response to misinformation [13]. The harm is even greater when vulnerable groups — pregnant women, infants, children with autism — are targeted.

Autism Beyond Etiology

Autism discourse must move beyond the endless search for “causes” to focus on meaningful support. The recent FDA authorization of leucovorin for certain autism-related symptoms [14] should not be portrayed as a cure but as one element in improving quality of life. True progress depends on early intervention,

interdisciplinary collaboration, inclusive education, and lifelong support structures [15].

The Responsibility of Science

Professional bodies, including the American Academy of Pediatrics and the American Academy of Neurology, have reaffirmed there is no evidence linking paracetamol or vaccines to autism [16,17]. It is our duty to ensure these authoritative voices reach the public clearly, without distortion. Scientists and clinicians must speak with unity, partner with journalists, and advocate for investments in public health systems, not in miracle cures.

Conclusion

When political leaders amplify pseudoscience, the consequences are not abstract. They erode public trust, endanger children's health, and reverse decades of progress. Misinformation is not benign opinion — it is a preventable risk factor. Protecting children requires not only rigorous research but also collective responsibility to defend truth in the public square.

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