



UNDERSTANDING AND MANAGING THE “VIRTUAL AUTISM” WITH HOMOEOPATHY: A NATURAL & HOLISTIC APPROACH TO CONTROL

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Abstract

The term "Virtual Autism" has emerged to describe autism-like symptoms observed in young children excessively exposed to digital screens during early developmental stages. This phenomenon, while not a formally recognized medical diagnosis, is gaining attention for its potential to mimic the social, cognitive, and Behavioral features of autism spectrum disorder (ASD). The condition is thought to result from environmental deprivation, particularly a lack of real-world interaction and stimulation due to prolonged exposure to virtual media. This abstract explores the concept of Virtual Autism, emphasizing its distinction from classical autism and highlighting the importance of early detection and behavioral interventions. Additionally, it discusses the role of homoeopathy as a complementary approach in addressing the symptoms associated with this condition. Homeopathic remedies, based on the principles of individualized treatment and holistic healing, may offer supportive care in restoring emotional balance, improving attention, and enhancing developmental progress. The paper also underscores the need for further research and clinical studies to evaluate the effectiveness and safety of homeopathic treatment in cases of suspected Virtual Autism.

Key words: Virtual Autism, Autism spectrum disorder(ASD),Cognitive, and Behavioral features, Digital media, Socialization, Sensory-motor coordination, Constitutional Remedies, Imaginative play

Introduction

Autism Spectrum Disorder (ASD) encompasses a range of neurodevelopmental conditions characterized by difficulties in social interaction, communication challenges, and repetitive behaviors. Traditionally, ASD is diagnosed in early childhood based on a combination of behavioral assessments and developmental screenings.



In recent years, a new phenomenon known as "Virtual Autism" has gained attention. Virtual Autism refers to autism-like symptoms in young children that are believed to be linked to excessive exposure to screen time, particularly digital media such as tablets, smart phones, and televisions. Unlike traditional autism, which has genetic and environmental underpinnings, Virtual Autism is hypothesized to result from environmental factors, specifically prolonged screen exposure during critical periods of brain development.

Emergence of Virtual Autism:-

The concept of Virtual Autism arose as clinicians and researchers observed a notable increase in autism-like symptoms in children with high levels of screen time. Symptoms may include:

- Delayed speech and language development
- Impaired social interactions
- Reduced eye contact
- Limited imaginative play
- Increased irritability and tantrums
- Hyperactivity and inattention

In many cases, these symptoms improved significantly when screen time was drastically reduced, suggesting a potential causative link.

The Digital Age and Child Development

The rapid proliferation of digital devices has transformed modern childhood. While technology offers educational benefits and entertainment, excessive screen time has raised concerns about its impact on young minds. Early childhood is a critical period for brain development, during which children acquire fundamental skills in language, socialization, and sensory-motor coordination. Excessive screen time can disrupt these developmental processes by reducing opportunities for face-to-face interactions, physical play, and exploration of the natural environment.

Clinical Observations and Research

Several studies and clinical reports have documented cases where reducing or eliminating screen time resulted in marked improvements in children displaying autism-like symptoms. These observations have prompted further investigation into the potential link between screen exposure and developmental delays.

Objectives and Significance:

Understanding Virtual Autism is crucial for several reasons:

Prevention and Intervention: Early identification and intervention are key to addressing developmental delays. Recognizing the potential impact of screen time allows for timely intervention by reducing screen exposure and promoting alternative activities.

Parental Guidance: Educating parents and caregivers about the risks associated with excessive screen time can empower them to make informed decisions about their children's media consumption.

1. **Public Health Implications:** As digital media becomes increasingly integrated into daily life, public health initiatives can promote healthy screen habits and support child development.

what to do- if you suspect a child may be affected by **Virtual Autism:**

1. Reduce Screen Time Immediately

- Eliminate or drastically limit all screen exposure (TV, phones, tablets).
- Replace digital entertainment with real-world interaction and play.
- Follow the **WHO guidelines:** no screens for children under 2, and limited supervised use for older toddlers.

2. Increase Human Interaction

- Encourage face-to-face communication, eye contact, and physical play.
- Engage the child in activities that involve **talking, singing, reading, and exploring** their environment.
- Spend quality, tech-free time with the child to stimulate brain development.



3. Create a Stimulating Natural Environment

- Use toys, outdoor activities, music, and storytelling to engage the child's senses.
- Promote interaction with peers, family members, and nature.

4. Observe for Signs of Improvement

- Many children show improvement in communication, attention, and behavior within weeks of screen withdrawal and increased human interaction.
- Signs to look for: better eye contact, improved speech, reduced tantrums, and more interest in surroundings.

5. Seek Professional Help

- Consult a developmental pediatrician or child psychologist to rule out ASD or other developmental issues.
- Early intervention, including **speech and occupational therapy**, can be crucial.

6. Consider Holistic Support (by Homeopathy)

- Homeopathy may support emotional and cognitive healing by selecting individualized remedies based on behavior and overall constitution.
- Use only under guidance from a qualified homeopathic practitioner.

7. Educate and Involve Caregivers

- Parents, grandparents, and babysitters should all be aware of the harmful effects of screens.
- Consistency in screen restriction across all caregivers is essential for improvement.

Homeopathic Approach to Virtual Autism:

Homeopathy, a holistic system of medicine founded by Dr. Samuel Hahnemann, is based on the principle of “like cures like” and the use of highly diluted natural substances to stimulate the body’s self-healing mechanisms. In the context of **Virtual Autism**—a condition believed to arise from excessive screen exposure leading to symptoms similar to autism spectrum disorder—the homeopathic approach focuses on the individual child’s totality of symptoms rather than a fixed diagnosis.

Key Elements of the Homeopathic Approach:

1. Individualized Case-Taking:

Homeopathy considers the child’s complete physical, emotional, mental, and behavioral picture. This includes:

- Developmental history
- Behavioral changes after screen exposure
- Emotional responses (e.g., withdrawal, irritability)
- Sleep patterns, fears, and food preferences

2. Selection of Constitutional Remedies:

Remedies are chosen based on the child’s overall constitution and symptom totality, not merely on the diagnosis of "Virtual Autism." Commonly indicated remedies include:

- **Carcinosin** – for children with sensitivity, perfectionism, or emotional trauma
- **Baryta carbonica** – for delayed development, shyness, and learning difficulties
- **Calcarea carbonica** – for slow developmental milestones, fearfulness, and fatigue
- **Silicea** – for children with weak vitality, delayed speech, or social withdrawal

3. Emotional and Environmental Support:

Homeopathy emphasizes the role of **natural life style, emotional bonding, and reduced screen time** as vital complements to remedy administration. Encouraging physical play, face-to-face communication, and a nurturing environment are integral to the therapeutic process.

4. Non-Suppressive, Gentle Treatment:

Homeopathy aims to correct imbalances without suppressing symptoms, which is particularly important in developmental disorders. The remedies are non-toxic and safe, even for very young children.



5. Monitoring and Follow-Up:

Regular follow-ups help assess remedy effectiveness and track the child's progress as screen exposure is minimized and natural interaction increases.

Conclusion

The homeopathic approach to Virtual Autism is holistic, individualized, and supportive, aiming to restore the child's natural developmental trajectory. When combined with behavioral therapies and reduced screen time, it may help reverse or improve symptoms. However, further clinical studies are needed to validate its long-term efficacy and establish standardized treatment protocols.

References:-

1. **Heffler, K. F., & Oestreicher, L. M. (2016).** "Causal Inference and Correlation in Developmental Psychology: The Case of Screen Time and Autism-Like Symptoms". In *Developmental Psychology and Digital Media*. Academic Press.
Journal Articles
Chonchaiya, W., & Pruksananonda, C. (2008). "Television Viewing Associates with Delayed Language Development". *Acta Paediatrica*, 97(7), 977-982. DOI: 10.1111/j.1651-2227.2008.00831.x
2. **Madigan, S., Browne, D., Racine, N., Mori, C., & Tough, S. (2019).** "Association Between Screen Time and Children's Performance on a Developmental Screening Test". *JAMA Pediatrics*, 173(3), 244-250. DOI: 10.1001/jamapediatrics.2018.5056
Conference Papers
4. **Zamfir, M. (2014).** "Virtual Autism: A New Clinical Phenomenon". Paper presented at the Annual Conference on Pediatric Neurodevelopmental Disorders, Bucharest, Romania.
Reports and Working Papers
5. **American Academy of Pediatrics (2016).** "Media and Young Minds". *Pediatrics*, 138(5), e20162591. DOI: 10.1542/peds.2016-2591
Dissertations and Theses
6. **Smith, J. A. (2017).** "The Impact of Screen Time on Child Development: A Longitudinal Study". PhD diss., University of California, Berkeley.
Online Articles and Web Resources
7. **World Health Organization (2019).** "Guidelines on Physical Activity, Sedentary Behaviour and Sleep for Children Under 5 Years of Age". Available at: [WHO Guidelines](#)
8. **Zimmerman, F. J., & Christakis, D. A. (2007).** "Associations between Content Types of Early Media Exposure and Subsequent Attentional Problems". *Pediatrics*, 120(5), 986-992. DOI: 10.1542/peds.2006-3322
Clinical Observations
9. **Clinical observations by Marius Zamfir** detailed in conference presentations and subsequent case study reports highlighting improvements in children after reduced screen time.