The Tomatis Method as a Treatment for Autism
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Statement of the Problem
Autism Disorders are lifelong neurodevelopmental disabilities characterised by impaired communication, sensory sensitivities and repetitive and restricted interests and behaviours.

Proposed Solution/ Intervention
The Tomatis Method claims to be beneficial in treating many problematic symptoms of autism including areas related to speech and language, auditory processing and social skills. The program is implemented by having participants use headphones to listen to modulated music via a device called an Electronic Ear (EE). Participants also repeat phrases into a microphone and listen to these recordings, as well as recordings of their own mother’s voice all of which are modulated by the EE. The intervention lasts for 20 or more 1-2 hour listening blocks that are separated by 3 to 8 weeks. It is claimed that a minimum of 75 total hours (4 blocks) is required for those with autism but generally much more time is required to achieve appreciable results.

The theoretical rationale – how does it work?
Its proponents claim that the method works by using sound stimulation at high frequencies to energise or “charge the brain”. The procedures are claimed to recreate meaningful stages of listening development using the sounds of the mother’s voice, songs, stories and the participant’s own voice. The goal is to remediate the process of listening which has been compromised due to illness, trauma or emotional difficulties by delivering music and sounds to the ear via both bone and air conduction.

What does the research say? What is the evidence for its efficacy?
The evidence for the efficacy of the Tomatis Method for autism is limited. Individual studies have included only small numbers of participants and are methodologically flawed. A Cochrane Review of auditory integration therapies found that no studies of the Tomatis Method met the necessary methodological criteria for inclusion.

Conclusions
The Tomatis Method, like other sound-based therapies and listening programs, has very little support for its claims, particularly those promoting it as an intervention for autism. The program cannot be recommended given the lack of research evidence of efficacy combined with the program’s extensive financial and time requirements.

Alternative Options
Empirical evidence has shown that early intervention based on applied behavior analysis (ABA) or speech and language therapies are more likely to produce successful outcomes for children with autism.

The MUSEC Verdict:
Not Recommended

Key references may be found at:
http://www.musec.mq.edu.au/community_outreach/musec_briefings/