

Written Statement  
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Permanent Subcommittee on Investigations,  
Committee on Homeland Security and Governmental Affairs  
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Good afternoon, Chairman Johnson, Ranking Member Blumenthal, and members of the Permanent Subcommittee:

On July 4, 2015, my then-partner's son was diagnosed as being on the autism spectrum. I was in a Ph.D. program in Political Economy at the University of Sydney where I had access to almost all current scientific and medical journals. I wanted to better understand what was happening, so I went to the CDC's webpage on the causes of autism. As a Ph.D. student I was trained to focus on primary source documents, so I read all of the references in their footnotes.

To my surprise, I quickly discovered that the CDC's narrative did not add up:

- Claims that autism is genetic don't make sense because autism prevalence was rising too fast — there's no such thing as a genetic epidemic.
- Then the CDC blamed valproic acid, a treatment for epilepsy that is contraindicated in pregnancy, and thalidomide, which was never approved for use in the U.S. — so those factors could only explain a handful of cases stemming from inadvertent use.
- Finally, the CDC pointed to advanced parental age; however, the effect sizes were modest and the increase in the proportion of older parents is insufficient to explain the surge in autism prevalence.

Furthermore, the cost of autism was already in the hundreds of billions of dollars a year in the U.S. and yet government was not responding with a sense of urgency.

I changed my doctoral thesis topic to “The Political Economy of Autism” and spent the next four years reading and analyzing nearly everything that has been written on autism prevalence, causation, and cost. In 2019, my thesis passed rigorous external peer review. It’s now in the top 10 of the most downloaded doctoral research papers in the history of the University of Sydney. Since then I’ve continued my research with Children’s Health Defense, as an independent journalist, and as a Fellow at Brownstone Institute.

**Here are the facts:**

In 1970, the first autism prevalence study in the U.S. found an autism rate of less than 1 in 10,000 children (Treffert, 1970).

According to a study by the EPA, sometime around 1987 the autism rate in the U.S. began to skyrocket (McDonald & Paul, 2010).

The most recent report from the CDC showed that 1 in 31 eight-year-old children in the U.S. in 2022 were on the autism spectrum (Shaw et al., 2025).

That’s a 32,158% increase in the last 52 years.

Two massive studies from the best epidemiologists in California show that changes in diagnostic criteria only explain a small fraction of the rise in autism prevalence (Byrd et al., 2002 and Hertz-Picciotto & Delwiche, 2009).

There are 22 studies that claim that vaccines don’t cause autism. None of these studies have a completely unvaccinated control group. So unfortunately, if you want to understand what’s causing the autism epidemic, these studies are of no use.

Then there are five large genetic research projects — AGRE, SSC, ASC, MSSNG, and SPARK. Together they have produced 501 published papers. The search for “the gene for autism” has consumed over \$2.3 billion dollars and researchers have almost nothing to show for it because genes don’t suddenly create epidemics — the human genome just doesn’t change that fast.

Next there are four large epigenetic research projects (genes and the environment) — CHARGE, MARBLES, SEED, and EARLI. Combined they’ve produced 437 publications that look at the effects of:

- air pollution
- pesticides
- heavy metals
- fluorinated substances
- polychlorinated biphenyls
- nutritional factors
- flame retardants
- maternal metabolic conditions (including obesity and diabetes); and
- volatile organic compounds.

None of these studies control for vaccines as a possible covariate or confounder, so it’s impossible to know the true impact of these variables.

The best available evidence suggests that anything that causes an immune activation event — an infectious disease, an industrial toxicant, or a vaccine — can cause autism. But research from Thomas and Margulis (2016) shows that the autism rate in children with no vaccines is 1 in 715 and the autism rate in vaccinated children is 1 in 31. So these large epigenetic studies can help explain the 1 in 715 autism cases related to toxicants in the air, water, soil, and food but

they are unlikely to help us stop the autism epidemic unless they radically change their protocols and reanalyze existing data.

**So then that leaves us with a much smaller set of studies for understanding autism causation.**

The key study that helps us to understand the relative impact of the different toxicants that contribute to causing autism is Ozonoff et al. 2018. Using a brilliant study design they showed that up to 88% of autism cases are characterized by autistic regression — the child was developing normally and then suddenly the child lost eye contact, speech, and the ability to socialize with others. This suggests an acute toxic exposure and we now have eyewitness testimony from thousands of parents that the acute toxic exposure that preceded the autistic regression was a “well baby” vaccine appointment.

The critical missing piece in autism research is vaccinated vs. unvaccinated studies. Thankfully there are now six good studies that we can rely on.

Unfortunately, these studies have been systematically suppressed and ignored by the mainstream media and the medical establishment.

Two studies by Gallagher and Goodman (2008 and 2010) show that the birth dose of the hepatitis B vaccine significantly increases autism risk.

Three studies by Anthony Mawson (2017a, 2017b, and 2025) confirm that vaccination increases the odds of developing autism by at least 4.2-fold.

***Preterm birth*** coupled with vaccination increases the odds of neurodevelopmental disability by more than 12-fold compared to preterm birth without vaccination (Mawson et al., 2017b).

And finally, a study by Hooker & Miller, published in 2021, found that:

- Vaccination increases autism risk 5-fold.
- Vaccination in the absence of breastfeeding increases autism risk 12.5-fold.
- Vaccination in addition to C-section birth increases autism risk 18.7-fold.

After conducting my systematic review of 1,000 studies my belief is that the autism and chronic disease epidemics are primarily caused by toxicants — mostly from vaccines and about a dozen additional toxicants. If we stop exposing children to these hazards in the first place that would stop the epidemics of chronic illness in children. Now we must summon the political will to act.

### **Further reading:**

*The Political Economy of Autism*

[https://ses.library.usyd.edu.au/bitstream/handle/2123/20198/Rogers\\_T\\_thesis.pdf](https://ses.library.usyd.edu.au/bitstream/handle/2123/20198/Rogers_T_thesis.pdf)

“Mapping the entire field of autism causation studies in one article”

<https://tobyrogers.substack.com/p/mapping-the-entire-field-of-autism>