



Indian Family of Cerebral Palsy

Voluntary Organization dedicated for the welfare of the people with cerebral palsy since 1993

LEARN ABOUT CEREBRAL PALSY

What to Do on Suspicion of Cerebral Palsy?

Any child who has developmental delay in motor functions - means the motor milestones have developed later than the expected age might have cerebral palsy. The suspicion should be higher if the child had insult to brain say during perinatal period (refer to previous IFCP newsletters). Such babies are considered high-risk babies, it means they have higher risk to develop cerebral palsy in comparison to the babies who had no perinatal problem.

Therefore, for such babies one should not listen any words of consolation from friends, relatives and professionals. They may say, "some children develop at a slower pace compared to others". Kindly note that sometimes a child may develop insult to brain later than perinatal period and may regress in their milestones. They may also develop cerebral palsy. What should be done on suspicion of a child with cerebral palsy?

Following steps should be taken as soon as delayed motor development is suspected or a child who has sustained insult to brain.

1. Educate yourself about the age of development of various milestones and compare them with the high risk baby. (Chronology of milestones).
2. Compare suspected child's development with the development of your or others normal children.
3. Consult qualified specialist like paediatrician (preferably developmental paediatrician)/ paediatric neurophysician/ paediatric neurosurgeon /paediatric orthopaedician.

Special note

- (a) make it a point to consult a paediatrician during each vaccination day. Request him to see whether the child has cerebral palsy.
 - (b) remember, the specialists can diagnose CP even before developmental delay is observed. Therefore, all the high risk babies must be shown regularly to specialists.
4. As soon as diagnosis is made intervention should be started. At this time you are likely to face tremendous confusion. There are many indigenous methods and we do not know how effective they are. Therefore, those methods with at least some scientific proof should be tried. If you have money, manpower and time you may also try other non-invasive safe methods. As soon as diagnosis is made following methods should be started:
- (a) Specialized therapeutic exercises say physiotherapy.
 - (b) To learn correct methods of handling and nursing the child. There are many advantages of these methods e.g.
 - (i) The methods would help in breaking the wrong patterns,
 - (ii) would stretch the spastic muscles,

- (iii) would not reinforce abnormal reflexes.
- (c) Brain tonics may be given but only for a few months immediately after the insult to brain.
5. Regular consultation with various specialists. Please do not try to get this thing in hurry. Because, the professionals are usually very busy and if you are also busy (in other works) the net result will be less attention to the child. The professionals can always finish their work in a short time also. Parents and professionals should try their best to plan out the programme in such a way that no ones time is wasted and maximum proper attention is given to the child.
 6. Make sure that wrong methods are not tried.
 7. Prepare immediate, short term and long term plans of management in consultation with various specialists. Write the plan in your planner. The plan should be written down in the monthly and yearly calendars of next 5 years. Extra attention and treatment should be planned as soon as complications like contracture, etc., start developing. Not to forget that the child may have associated other disorders like speech abnormality, cognitive sub-normality, etc, and specialists to deal with these disorders should also be consulted. (To be continued in next newsletter, study motor milestones also in next issue of this newsletter)

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