

CEREBRAL PALSY

It is a non progressive neuromuscular disorder causing mild to severe disabilities throughout life. This condition is manifested as a group of persisting qualitative motor disorders which appear in young children due to damage to the brain during delivery or due to some pathological conditions in the intrauterine life. The neurological problems are multiple but non progressive in nature. Approximately 2 per 100 live birth is having this problem. This disease is having no hereditary tendency.

Causes of cerebral palsy:

- 1) Injury to the brain during delivery.
- 2) As a complication of forceps delivery.
- 3) Lack of oxygen supply to the baby during delivery.
- 4) Infections during delivery.

Signs and symptoms of cerebral palsy:--

The signs and symptoms may not be similar in all babies affected. Depending upon the damage to the brain there may be mild to severe lesions.

Mild cases:- 20% children will have mild disability.

Moderate cases:- 50% cases are having moderate disability. The affected children require self help for assisting their impaired ambulation capacity.

Severe cases:- About 30% of the affected children are totally incapacitated and bedridden and they always need care from others.

Abnormal findings in cerebral palsy:-

- 1, Abnormal neonatal reflexes.
- 2, Stiffness of all muscles with awkward motion.
- 3, Extension of extremities on vertical suspension of the infant.
- 4, Scissoring of the lower limbs due to spasm of the adductor muscles of the thigh.
- 5, In severe cases the back bend backwards like an arch.

6,May have total or partial paralysis.

7,Arrest of neurological and behavioral developement.

8,Swallowing may be difficult in some cases.

9,Drooling of saliva.

10,Mild to severe mental retardations.

11,Abnormal movements are seen in some cases.

12,Tremors with typical movements.

13,If cerebellum is affected there will be loss of muscle tone with difficulty in walking.

14,Complete or partial loss of hearing.

15,Speech may be affected.

16,Squint and other visual problems may be associated.

17,Convulsions may be seen in some children.

Cerebral palsy is diagnosed by detailed clinical examination and by eliminating other similar diseases like brain tumour, progressive atrophy ect.All investigations like CT scan,MRI and routine investigations are needed to ruleout other diseases.

Management of carebral palsy:--

General management:

This includes proper nutrition and personal care. Symptomatic medicines are needed to reduce convulsions and muscle stiffness. Diazepam can reduce spasticity and athetosis.
Dantrolene sodium helps to relax skeletal muscles.

Physiotherapy:

Here massage,exercise, hydrotherapy and ect are needed.Special training is given

to train walking,swallowing and talking.The affected children are also trained to hold articles for routine activities.

Rehabilitation:

Moral and social support should be given to these children.They should be send to special schools where special training can be given by trained staff.Mentally retarded children need special training.Depending up on the disabitity special instruments and machines are given for locomotion and to assist their daytoday activities.

Occupational therapy:

This is given by occupational therapists.They train the disabled people to do some suitable works so that these people can have their own income.