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THRIVE: PRACTICAL INSIGHTS ON PEDIATRIC DEVELOPMENT

Clumsy or Dyspraxia?

Many moms and dads report that their child is "a little clumsy". For some families, it can be difficult to recognize if this is simply part of development and adjusting to a growing body or an area to be explored more specifically.

The explanation may be developmental dyspraxia. Developmental dyspraxia is a motor learning difficulty that can affect planning of movements and coordination as a result of brain messages not being accurately transmitted to the body.

DO PARENTS DESCRIBE A CHILD IN THESE WAYS?

Bumping into things all the time, or accident-prone

Inability or difficulty with skipping, jumping rope or climbing

Strong but not very coordinated

Falling out of chairs, knocking things over or messy

Awkward or difficulty walking or running

Difficulty playing, participating, or insecurities with sports or games

Children with dyspraxia have particular problems learning new motor skills and activities and coordinating the upper and lower limbs of the body. To efficiently move through the environment and learn new skills, the body relies on sensory systems- tactile (touch), vestibular (movement) and proprioceptive (how muscles perceive actions). If these systems are not properly integrated, a child appears clumsy.

SOME CHARACTERISTICS OF DEVELOPMENTAL DYSPRAXIA ARE:

Awkward gait movement

Decreased sense of body awareness

Emotional lability, sensitivity or appears distracted

Difficulty judging distances

Difficulty imitating body positions

Poor balance

Poor sequencing of activities

Poor short and/or long term memory

Slow movement planning and reaction times in both fine motor gross motor

Even if only a few of these characteristics are noted in a child, an evaluation could be the first step to address the issue. While there is no cure for dyspraxia, a trained pediatric occupational therapist or physical therapist can assist the child in learning ways to improve their motor planning abilities and becoming more successful with gross motor learning and performance.

The DSM-IV indicates that 6% of all children ages 5-11 have a developmental coordination disorder. While an exact neural pathway is unknown, an insult in many different areas of the brain may result this condition.

IT IS IMPORTANT TO NOTE THAT MOTOR DIFFICULTIES ARE LIKELY TO COEXIST WITH SEVERAL OTHER DIAGNOSES, INCLUDING:

Auditory Processing Disorder

Executive Function Disorder

Hypotonia

Low Birth Weight

Sensory Processing Disorder

There are treatment options for developmental dyspraxia. There are several types of praxis (movement) that may be addressed in therapy. These types include: oral, sequential, postural, constructional, and praxis on verbal command.

Research shows that a combination of strength and coordination goals, as well as work on specific functional skills (climbing stairs, skipping) is most effective. A therapist can, through play and exploration of new motor activities, address the affected area(s) of praxis and improve overall motor planning and abilities.

ADVANCED TRAINING AND TECHNIQUES ARE ALSO USED IN TREATMENT OF DEVELOPMENTAL DYSPRAXIA, INCLUDING:

E-Stimulation (E-Stim)

Neuro-Developmental Treatment (NDT)™

Sensory Integration

Total Motion Release (TMR)®