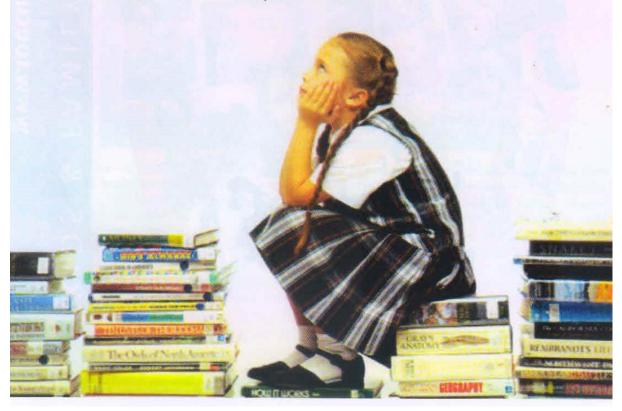


Cranial Osteopathic Medicine for Learning Difficulties and Special Needs

Learning difficulties may prevent a child realizing their full potential. Although each child is an individual with their own unique learning path, there are certain common features. Learning difficulties (including dyslexia and dyspraxia) can be broadly categorized into two main causes:

Neurological: an inability of the brain to process information correctly.

Physical: an inability of the musculoskeletal system of the body to respond appropriately to orders from the brain. Osteopathic Medicine may be able to help both types to varying degrees. Both can be due to physical strain and discomfort in a child's body limiting the development of both the brain and the musculoskeletal system. The most common cause of this is unresolved strain from the birth process.



1- Birth history

Birth is arguably the most stressful event of a child's life. Even a relatively straightforward birth imposes enormous stresses on the baby, in particular on the head. This can have implications for the subsequent development of the brain and body.

After birth, there is still much growth and development yet to occur in the brain, and this can be delayed or impaired by restriction within the skull. For example, the area of the skull behind the ear and the subsequent growth and development of the temporal lobe of the brain underlying this may be compromised. This is the region that deals with language and word recognition, and is sometimes implicated in dyslexic children. Another example is recent medical research which shows that many children with attention deficit and hyperactivity disorder (ADHD) appear to have restricted growth of the frontal area of the brain.

2- Early diagnosis

Physical stresses respond more readily to treatment when the child is very young. Early treatment also reduces hindrances to growth and development of the brain, thus limiting the severity of any developing learning difficulty. It is therefore important to be able to recognize characteristic early signs of a problem in the health, development and behavior of a child as early as possible.

3- Effects of physical strain in a childindications of retained birth stresses There are usually indications in a child's history of retained birth stresses, which can contribute to learning difficulties:

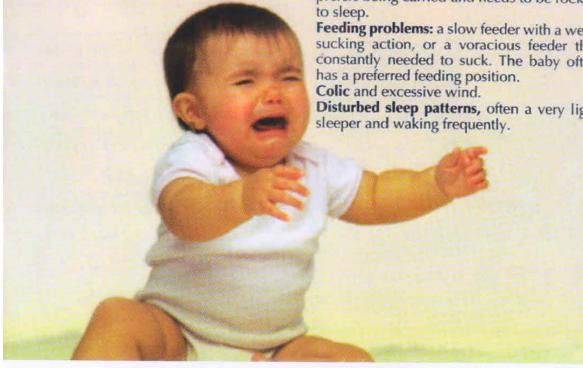
- As a baby

Babies with retained birth molding display a number of common symptoms as a result of their discomfort:

Excessive crying, or an irritable baby who prefers being carried and needs to be rocked

Feeding problems: a slow feeder with a weak sucking action, or a voracious feeder that constantly needed to suck. The baby often has a preferred feeding position.

Disturbed sleep patterns, often a very light



- As a toddler

Mobility and play: The child may sit, crawl and walk early, seeking movement to relieve physical discomfort. The child may not become engrossed in play for any length of time, preferring to be on the move. This may contribute to poor concentration later on.

Sleep patterns often remain disturbed. They may be a light sleeper, often finding it difficult to drop off to sleep at night.

Behavior is often at the difficult end of 'normal' toddler behavior!

Teething may be particularly uncomfortable as the already stressed bony structure of the face resists the rapid changes necessary in the eruption of teeth.

Head banging or pulling at the head or hair is often an indicator of stresses within the head, and not simply a sign of frustration.



A child who is physically uncomfortable may not complain of aches and pains. The stresses have probably been present since birth, and have become 'normal' for that child. They may be affected at a subtle level and display any or all of the following characteristics:

Behavior may be volatile, in the same way that anyone who is feeling tense may overreact emotionally.

Illnesses; The child often has a depleted immune system and succumbs to many infections. Learning can be detrimentally affected by both a child feeling unwell and increased time lost from school. Retained birth molding in the head restricts the development of the nasal sinuses and the ears. Such children are vulnerable to chronic ear infections and glue ear, with associated loss of hearing that can delay speech development and interfere with classroom learning. They are often habitual mouth breathers.

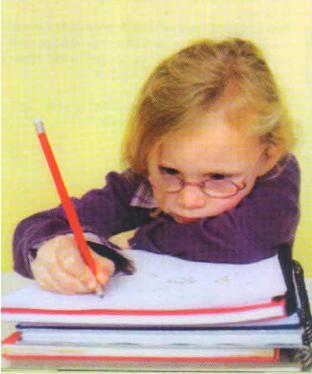
Physical signs; There may be asymmetries in the child's posture, such as holding the head on one side, or one shoulder being higher than the other. It may be easier for the child to turn to one side than the other. This has implications on the best seating position within the classroom, to facilitate activities such as watching the teacher, copying from the blackboard etc.

Physical discomforts; The child may complain of headaches, growing pains, stomach aches or other physical aches and pains.

Clumsiness, poor balance; The child may fall a lot, often seeming to bump the same part of their body (such as the head!).

Handwriting is laborious and often untidy. Fatigue.

It is noticeable how similar these signs are too many of those classically associated with learning difficulties.



Gradual recognition of learning difficulties

Learning difficulties do not suddenly happen. Usually there are indications that a problem may be present from birth onwards. Early on the child may be able to overcome these difficulties, and seems to be reaching milestones. However, as demands are placed on him at school, it may become increasingly difficult for him to keep up with his peers. Eventually he falls behind, and a 'learning difficulty' is identified.

5- Osteopathic treatment

For best results, osteopathic treatment should be carried out as young as possible. Treatment is most effective before the age of 5 years, when there is still active growth of the head and brain.

After 5 years there is usually an improvement in physical well being and concentration, and teachers and parents often report that the children seem to find it easier to grasp concepts.

On average 4-6 treatments are required, but this varies according to the age of the child and the severity of the problem. The younger the child, the quicker birth stresses are to resolve with treatment.

Other factors

6- How to help a child with learning difficulties

An osteopathic assessment of the child is of paramount importance to ensure that there is no undue strain in the body that is causing or aggravating the learning problem.

A visual assessment is also helpful to identify any visual problems. Specialists in this field are Developmental Optometrists, who not only assess the ability of the eye to focus, but also tracking of the eyes and the ability of the brain to interpret visual information.

A hearing test is recommended where there has been a history of glue ear, or other reasons to suspect hearing loss.

Neurodevelopmental therapy may be recommended where there are retained primitive reflexes, to help the development of co-ordination.

Diet is also important, as food allergies and intolerances can impair learning and concentration.

Specialized teaching. None of the above is a substitute for specialized teaching, which is essential. Ideally, therapists and teachers should work together to find the best way of helping each child.

