Neurologic development in children

Virth trauma, antibiotic abuse, vaccine reaction a single case report. Phillips, CJ ICA Review Sept/ Oct 1996. Fourteen month old female child whose chief complaints include delayed development, hypotonia, dysarthria, excessive cranial molding, photophobia, loss of visual motor control, history of excessive antibiotic therapy and adverse reaction to vaccinations. After one,week of chiropractic and cranio-sacral therapy Decreased symptoms of photophobia, increased muscle tone and ability to sit on mother's lap with minimal support, no pain when held erect and increased muscle strength allowing her to be held against her parent's shoulder with normal head control (previously flopped backwards if not supported), increased visual acuity, decrease in athetoid movements of arms, hands and fingers, immediate change in mood with a calmer, happier disposition.

M.D. and D.C. Cooperation improves child's life. Microcephalic (having abnormally small head/small brain). Today's Chiropractic p. 40 Sept/Oct 1995. Story of Fara Hoffman born microcephalic, "With the help of chiropractic adjustments and therapy can now, at age 5 feed herself, walk and make sounds. Her mother attributes Fara's miraculous progress to chiropractic care." Fara, who could not move received her first cranial adjustment. "They adjusted her, and her feet moved (said her mother), "I couldn't believe it.

Chiropractic Sacro-Occipital Technique treatment of arthrogryposis multiplex congenita. Getzoff H. Gregory T.M. Chiropractic Technique Vol.8, No. 2, May 1996. This is the case report of a 6 year old boy who suffers from arthrogryposis multiplex congenita (AMC), also known as amyoplasia congenita is a congenital lack of muscular development resulting in multiple joint contractures and deformities. From the paper AMC refers to a constellation of disease entities in which the extremities are commonly fixed in flexion, the muscle mass is usually hypoplastic and muscle biopsy may reveal denervation, persistence of small fetal muscle fibers or muscular dystrophy.

From the abstract [Child had] severe generalized locomotor disability, including the inability to bend over to tie his shoes, as well as recurring kidney infections. The patient received 26 chiropractic treatments using SOT protocols over a period of 9 months, after which he could bend over to tie his shoes. In addition, he learned to ride a bicycle without training wheels, could swim part of the way across a pool unaided, and presented a greatly improved physical demeanor.

Behavioral and learning disorders, autism

A pilot study of applied kinesiology in helping children with learning disabilities. Mathews MO, Thomas E, British Osteopathic Journal Vol. X 11 1 993.

The effects of chiropractic treatment on students with learning and behavioral impairments due to neurological dysfunction. Walton EV. Int Rev of Chiro 1975;294-5,24-26. 24 learning impaired students were placed under chiropractic care with many displaying dramatic results including increase in IQ, improvement of behavior, increased a grades, better athletic ability. Learning difficulties of children viewed in the light of osteopathic concept. Frymann V (1988). In RetalaffEW, Mitchell Fl Jr. (Eds). The cranium and its sutures, Springer, Berlin Heidelberg, NY, pp.27-47.

Osteopathic management of psychosomatic problems. Dunn, FE. JAOA, Vol. 48 No. 4 Neuropsychiatric Supplement Vol. 2 No. 1 Dec. 1948. Relationship between structure and mental states and patient management. Osteopathic concepts in psychiatry. Dunn FE JAOA, March 1950. A table describing the lesion (subluxation) frequency in schizophrenia is included. Patient management is discussed.

Posture and mental health. Quigley WH. ACA Journal March 1964, Discusses the relationship between mental health and posture. An analysis of 350 emotionally maladjusted individuals under chiropractic care. Hartmann GW, Schwartz HS. NCA Journal of Chiropractic, Nov. 1949. Classic review of 350 individuals helped under chiropractic care. Relations of disturbances of cranio-sacral mechanisms to symptomatology of the newborn. Fryman V. JAOA. 1966;651059. In a group of 1250 unselected babies examined five days post partum, a group of 211 'nervous' children were found suffering from vomiting, hyperactivity, tremors and sleeplessness. Release of strain' in the skull resulted in immedate quieting, cessation of crying, muscular relaxation and sleepiness. The effect of chiropractic adjustments on the behavior of autistic children; a case review. Sandeful, R, Adams E. ACA Journal of Chiropractic, Dec. 1987.

Post-traumatic evaluation and treatment of the pediatric patient with head injury a case report. Araghi HJ. Proceedings oJthe National Conference on Chiropractic and Pediatrics, 19921-8. From the abstract a two-year-old boy suffering from vomiting and loss of energy following impact trauma to the head and found by neurological exam ant CT scan to have suffered a concussion with no evidence of brain or spinal cord pathology.

Chiropractic adjustment of occiput resolved the patient's symptoms.

Blocked atlantal nerve syndrome in infants and small children. Gutman G. ICA Review, 1990; July37-42. Originally published in German Manuelle Medizn (1987) 255-10. From the abstract Three case reports are reviewed to illustrate a syndrome that has so far received far too little attention, which is caused and perpetuated in babies and infants by blocked nerve impulses at the atlas. Included in the clinical picture are lowered resistance to infections, especially to ear-, nose-, and throat infections, two cases of insomnia, two cases of cranial bone asymmetry, and one case each of torticollis, retarded locator development, retarded linguistic development, conjunctivitis, tonsillitis, rhinitis, earache, extreme neck sensitivity, incipient scoliosis, delayed hip development, and seizures.

Attention Deficit Disorders and hyperactivity

"After examning several diagnosed ADHD children, we fnd an upper cervical subluxation that can lead to neurotransmitter involvement." Larry Webster, D.C. International Chiropractic Pediatric Association Newsletter. January 1996. ADHA from Birth Trauma ADD linked to maternal smoking (From DC On Line by Brian Sutton. Dynamic Chiropractic Jan. 1, 1996 p.31). A study conducted at Massachusetts General Hospital in Boston suggests that mothers who smoke during their pregnancy will triple the risk of their children developing attention deficit disorder. The problems appear to develop in utero. A group in Chicago (The
University of Chicago study of 177 children) found that children with "conduct disorders," associated with increased delinquency and runaway behavior, were more likely to have been exposed to smoke while in the womb (Presented at the annual academy of Child and Adolescent Psychiatry in New Orleans, October 20, 19953. Neither project examined the effects of secondhand smoke on such disorders. First report on ADD study. Webster L. International Chiropractic Pediatric Association Newsletter. Jan. 1994. Two cases from the-ADD study are mentioned. Case #1 - Ten-year-old girl on 60 mg. Ritalin/day, severe scoliosis of 48 degrees Cobb angle. First seen 11/15/93. After ten adjustments mother reported a happier child, immune system doing much better and endurance much higher. Re-exarn revealed scoliosis reduced to 12 degrees. By 1/10/94 offmedication. Case #2 12-year-old boy diagnosed as ADD, asthma and seizures. First entered clinic 12/9/93 and after 8 adjustments, parent has withdrawn all medication with the cooperation of their doctor. Positive personality change has been noted.

Case Studies. Male - age 7 years. Webster, L. Chiropractic Showcase Magazine, Vol. 2, Issue 5, SurTuner 1994. The child was placed under care o" February 14, 1994 with the following clinical picture Hyperacavity, stuttenng, slow leanzer, retarded growth, left leg approximately 1" shorter than rght with a limp while walking. Medical plans were to break the left leg, insert metal rods in an aitempt to stimulate growth and equalize leg lengths.

Our examination consisted of Metrecom evaluation, full spine X-rays, and chiropractic examination of the spine. Areas of subluxation were as follows Sacrum anterior, inferior on left, 5th lumbar body left, atlas, anterior superior left. Patient was placed on an intensive correction program of 3 times weekly for a period of two months. During the first even visits the legs were never balanced, however, each time a reduction of the short leg occurred. On the 8th visit the legs balanced for the first time. Also noticed by Sth visit

1. The stuttering had stopped.
2. The grades in school had risen from non-satisfactory to satisfactory.
3. The hyperactivity had abated.
4. The limp was no longer constant.

Case study the effect of utilizing spinal manipulation and craniosacral therapy as the treatment approach for attention deficit-hyperactivity disorder. Phillips CJ. Proceedings on the National Conference on Chiropractic and Pediatrics (ICA), 199157-74. A 1 0-year-old boy with a three year history of hyperactivity, also suffering from ear infections, headache and allergic symptoms. Chiropractic analysis revealed multiple cervical, thoracic and pelvic dysfunctions. The boy also had multiple cranial faults. By the 11th chiropractic adjustment hyperactivity symptoms had abated (his other health problems had cleared up from earlier spinal adjustrnents). After 5 1/2 months relatively symptom free he had two falls and hyperactivity, headache and allergy symptoms returned. A single session of spinal and cranial adjusting revolved this exacerbation. A strong link between spinal dysfunctions and hyperactivity is suggested.

A multi-faceted chiropractic approach to attention defcit hyperactivity disorder a case report. Barnes, T.A. ICA International Review of Chiropractic. Jan/Feb 1995 pp.4143. From the author's abstract An 11-year-old boy with medically diagnosed Attention Deficit Hyperactivity Disorder has been a patient and student at the Kentuckiana Children's Center for threeiyears...His case shows a history of early disruptive experience, repeated ear infections, consistent temporomandibular joint dysfunction, heavy metal intoxication, foot allergy, environmental sensitivity and multiple levels of biomechanical alteration. This report emphasizes the need for care in all aspects of the structural, chemical and mental triangle of health in children with attention deficit hyperactivity disorder.

"He has improved academically and has advanced to the next grade level...he recognizes that he has control over his behavior and there is hope that he will be mainstreamed back into a regular public school setting soon...his mother says she notices improvement in his attention span and temper.

Effects of biomechanical insult correction on attention deficit disorder. Arme J. J of Chiropractic Case Reports, Vol. 1 No. 1 Jan. 1993. Seven-year-old male was referred by his mother because of radical behavioral changes (uncharacteristic memory loss, inability to concentrate and general agitation) following a motor vehicle accident (other symptoms included loss of appetite, headache, difficulty in chewing, ear pain, hearing loss, diffculty in breathing through the nose, neck pain, and bilateral leg pain). An M.D. diagnosed "attention deficit disorder" and Ritalin was diagnosed with partial improvement. After four months the mother sought chiropractic care. Spinal analysis revealed anterolisthesis of C2 on C3, reversal of cervical lordosis from C 1 -C4. Correction was accomplished using the Thompson technique with the terminal point table, three times a week for 16 weeks and twice per week for one week....l2 week follow up revealed restoration of cervical curve, with residual C2 anterolisthesis. At 17 weeks Ritalin was stopped by M.D., the patient's medically diagnosed attention defcit syndrome seems to have been solved as were the other symptoms. The mother discontinued chiropractic care after settlement and the patient's behavior symptoms gradually returned and is back on Ritalin.

EEG and CEEG studies before and after upper cervical or SOT category 11 adjustment in children after head trauma, in epilepsy, and in "hyperactivity." Hospers LA, Proceedings of the National Conference on Chiropractic and Pediatrics (ICA) 1992;84139. Five cases were presented. Conventional EEG studies demonstrate responses of two children with petite mal (absent seizure) with potential for generating into grand mal. Upper cervical adjustment reduced negative brainwave activity and reduced the frequency of seizures over a four month period. In two cases of "hyperactivity" and attention deficit disorder, upper cervical adjustment reduced non-coherence between right and left hemispheres in one child and in another, CEEG demonstrated restoration of normal incidence of the alpha frequency spectrum. Increased attention span and improvement of social behavior were reported in both cases. A child rendered hemiplegic after an auto accident displayed abnormal brainwave readings. After adjustment, the CEEG demonstrated more norrnalized brainwave readings. Child was able to utilize his left arm and leg contralaterally to the injured side of the brain without assistance after upper cervical adjustments.

An evaluation of chiropractic manipulation as a treatment of hyperactivity in children. Giesen JM, Center DB, Leach RA. JMPT 1989; 12353-363. Blinded study. Seven hyperactive children appeared to benefit from chiropractic adjustments. "The results of this study are not conclusive, however they do suggest that chiropractic manipulation has the potential to become an important nondng intervention for children with hyperactivity."