

Austism, Hip Dysplasia and CranioSacral Therapy

By: Norma Hayhurst, RN, CHT, CST

Personal Information: 2yo, Male

History:

Symptoms: CP-mixed, seizure disorder, autism, left hip dysplasia, mental retardation, unable to talk, has a permanent feeding tube, head is misshapen, especially the right occiput, temporal and parietal bones

Pertinent Medical History: Emergency Cesarean section for an Abruptio Placenta. The surgery was delayed until a special team from Children's Hospital was present at the delivery. The child's heart rate dropped and he experienced anoxia which is believed to be the cause of brain damage. During the 5th month of the pregnancy, Mom was accidentally bitten by one of their pet dogs and her doctor ordered a tetanus shot. The child has been admitted to Children's Hospital on numerous occasions for pneumonia, continuous seizure activity, tubes in his ears, and etc. He recently experienced an unknown origin fracture of the right knee, near the epicondyles. There are questions about the quality of his bone density because he does not stand, although he is placed in a stander at his preschool for CP children.

How long treated by others, frequency and type: He has been followed by a local pediatrician (specializing in high risk) and Children's Hospital (1 ½ hrs away) since birth. Numerous infections, seizures, feeding tube, ear tubes and so forth have required hospitalizations. He has been Life Flighted to Children's Hospital on several occasions, the most recent was in June of 2001 for pneumonia. He continues to receive physical and occupational therapy on a regular basis.

Evaluation:

Findings: This child's initial session was on 8-7-00. He was unable to roll over, lift head and or move as is typical of his 2 ½ yrs of age. He is capable of following with his eyes, slowly moving his head from side to side, moving his arms (no actual grasping for items in front of him) and legs (although there is more restriction to the legs with a C-curve to the right from the hips downward. He is unable to suck; tongue protrudes, makes no sounds, and often stares off into space, right eye not even with left eye movement. His right occiput, mastoid/temporal, and parietal are flatter and misshapen in comparison to right side of the body. The right side of his body more in flexion and the left side of his body more in extension, especially from the pelvis downward.

Tools used: CranioSacral Therapy - Pediatric Protocol, SomatoEmotional Release, Zero Balancing (1/2 moons on legs), Lymph drainage, a lot of direction of energy whenever and wherever needed. Mouth work has been extensive, including Avenue of Expression, RTR of the tongue and some other advanced techniques in the mouth. Many ear pulls.

Objective results: The shape of head has improved, although the right is still not the same as the left side, fairly normal head size, medication doses have been steadily decreased (p.o. his physician) and he has been weaned off some seizure meds. Last year he was administered hearing test and brain function tests at Children's Hospital. There have been positive results in his brain wave activity and hearing deficit. His hearing is normal in left ear (previously mild loss), while his right ear has mild loss (previously moderate to severe loss). He has decreased ear infections, colds, improved bowel and bladder functions,

improved sucking reflex (able to use pacifier and taste food on tongue) and improved tongue movements.

Subjective results: He has always been hyper-sensitive on arrival and departs very relaxed following his sessions. He seems more observant of the world around him, follows others with eye and head movements (side to side), able to make noises, responds stimuli (lie baby sister touching him, other family or friends talking to him, television and music). He has had some SER sessions, especially from intubations, IV's, and other intrusive procedures done during his many hospitalizations. His RAS is quite often set very high, but this has been negotiated to lower rates. Sometimes his sessions last longer than an hour because it takes some time to lower his RAS. A positive reaction to his sessions is deeper sleep during naps and nighttime sleep. For the past two falls he has had the opportunity to attend a special dolphin program in the Florida Keys which has gained national attention. His parents feel this has been extremely beneficial to his well being. I frequently play dolphin and whale songs during his sessions, which brings forth positive reactions from him. There seems to be a deep soul recognition to their songs and energy.

Average length of sessions: one hour

Number of sessions: 58