IM HELPS CHILDREN WITH CEREBRAL PALSY

The Interactive Metronome (IM) has been shown to help conditions in children diagnosed with Cerebral Palsy. This advanced brain-based treatment program was developed to improve the processing abilities that affect attention, motor planning and sequencing. This, in turn, strengthens motor skills, including fine and gross motor function, mobility, and many fundamental cognitive capacities such as: planning, organizing, and language.

Therapists and physicians understand the correlation between the neurological functions of motor planning and sequencing and the critical aspects of human development, such as: basic thinking, organizing, language processing, reading fluency, comprehension, phonological awareness, and coordination. When a child or adult demonstrates a deficit in motor planning and sequencing, it is typically accompanied by problems in learning, coordination, or behavioral control.

Prior to the development of Interactive Metronome, Inc. (IM), therapists were able to identify patients with these difficulties, but there was no system for measurable assessment and improvement. Today, we know how to measure a child's motor planning and sequencing abilities and we can show functional improvements in a short period of time.

Over the course of the treatment, patients learn to:

- * Focus and attend for longer periods of time
- * Increase physical endurance and stamina
- * Filter out internal and external distractions
- * Control fine and gross motor skills
- * Improve their ability to monitor mental and physical actions as they are occurring

CASE STUDY

Valeri is a 12 year old who came to Focus Point Therapy specifically for Interactive Metronome treatment. Her personal goal was to wear a pair of blue jeans like all of the other children in her regular classroom. She

couldn't manage the zipper or the snap due to poor bilateral hand strength and lack of control from Cerebral Palsy. She had an imbalance of tone between the right and left side of her body. She was very quiet and rarely spoke at home or in school. She was very sedentary, spending most of her time in her room. In addition, she didn't have friends; but, she had a very active younger brother. She needed help with self-care and hair maintenance. When she drank liquids, she lacked tongue control and often aspirated part of the liquid as she swallowed with large gulps. When the therapist was testing her on the IM pre-test she went from standing to nearly falling over because she lacked stationary standing balance and she possessed a very awkward gait.

In just 3 sessions Valeri was able to go from assisted IM exercises to doing them on her own. Using creative clinical techniques, she did hundreds of repetitions of the reciprocal foot movement on the sensor pad, sometimes missing the pad; but, continuing with determination. I received a call from her mother who stated that Valeri, for the first time, went to the refrigerator to pour herself a glass of juice without anyone assisting. She started to talk, not just a little, but all the time. At the first teacher conference, the teacher remarked that Valeri was participating and raising her hand to give



answers. Her grades dramatically improved from her usual C level work up to A and B+ levels. In therapy when she needed a break, she would get on the suspended bolster swing and talk non-stop about planets and the solar system - her favorite interest. The next thing I noticed was her ability to swallow improved. She had better tongue control and she didn't aspirate, as had previously been the case. Her personality kept flourishing and she was full of never before revealed information. Her confidence was very evident and she...was wearing her first pair of blue jeans like all the rest of the kids, managing them independently.

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