

To Study the Co-Morbidities in Children of Cerebral Palsy

Abstract

Background: Cerebral Palsy is the most common group of Permanent disorders of motor impairment resulting from non-progressive injury in the developing brain. Motor impairments are often accompanied by disturbances of sensation, perception, cognition, communication, musculoskeletal problems. This has increased the awareness of co-morbidities in children with CP and calls for an interdisciplinary management of these co-morbidities as they adversely affect the quality of life.

Moreover, we are so blinded by the Physical disabilities that we fail to understand the Behavioural problems that these children go through. Thus, my present study was conducted to focus on the major comorbidities in children with Cerebral Palsy.

Aim and Objectives: To study the Co-morbidities in the children of Cerebral Palsy

Materials & Methods: The present study was conducted on 200 children age ranging from 1 to 18 years of age who came to the Pediatric OPD as well as the children who were admitted in the Pediatric wards, with cerebral palsy, at Dr. DY PATIL hospital and Research institute, Kolhapur.

After taking informed and written ascent from the parents of the children, the children were assessed by me and a detailed history was taken of the antenatal, natal and postnatal events and a proforma was filled assessing the musculoskeletal disability along with other associated co-morbidities like speech abnormality, feeding difficulties, visual abnormality, intellectual disability, communication difficulty, giving more focus to the behavioral problems.

Results: Out of 200 children with cerebral palsy, Intellectual Disability was seen in about 60 CP children (30%), Speech abnormality was seen in 110 children (55%) out of which feeding difficulties were present in 75 children (68%), Visual abnormality was seen on 15 children (8%) and Hearing loss was present in 15 children (8%).

Moreover, these children had behavioural problems which affected the quality of life: Anxiety and Parent-child communication gap being seen in about 80% cases followed by Adjustment disorder, and Depression.

Conclusion: Many children of Cerebral Palsy have behavioural co-morbidities and we should carry out an interdisciplinary approach for the management of these kids by concentrating on the behavioural problems in order to support them to improve the quality of life.

Publication:

1. Cerebral palsy: comorbidities, the second hidden side.
2. Study of correlation between thrombocytopenia and fungal sepsis in neonates
3. Abdomen' a pandora's box: Rare case of mesenteric cyst in newborn



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Biography

Dr Jinela Desouza, Final year Pediatric Resident at Dr. D Y Patil Deemed to be University, Kolhapur, India. She is doing Residency 3rd year in Pediatrics in Dr. DY Patil Hospital and Research institute, Kolhapur. Done MBBS at MGM medical college, Navi Mumbai. Done studies on rotary clubs of Kolhapur and doing current study on the Hemophilia centre at Kolhapur.

