Fact Sheet
Cerebral Palsy

What is Cerebral Palsy?

Cerebral Palsy is not a single condition. It is an umbrella term used to describe a group of conditions that affects the brain and nervous system, affecting balance, movement and posture. Cerebral Palsy is caused by damage to the brain, during pregnancy, birth or soon after birth; resulting in most symptoms being visible in a child before their 3rd birthday.

Types of Cerebral Palsy?

There are several different types of cerebral palsy including Spastic, Athetoid and Ataxic, with Spastic being the most common type. Those with Cerebral Palsy may not necessarily have just one type, but a combination of two or more.

Spastic
Those with Spastic Cerebral Palsy suffer from stiff and weak muscles or drawn in limbs, making control of movement difficult. Spastic Cerebral Palsy can be found in 7 in 10 cases, with its degree varying from case to case.

Athetoid
Athetoid CP affects a child's ability to control the muscles of the body, often resulting in involuntary muscle movements and in some cases children will also suffer from involuntary muscle spasms.

Ataxic
This type occurs in less than 1 in 10 cases. Those diagnosed with Ataxic Cerebral Palsy often have difficulty with balance and fine movement, resulting in shaky hand movements and difficulty with speech. Muscle tone is usually decreased making walking difficult for some.

What are some common signs or symptoms?

The symptoms of Cerebral Palsy vary from child to child with some having trouble with balance and coordination while others may be profoundly disabled and require life-long care. Babies with Cerebral Palsy often are slow to show growth indicators such as smiling, crawling and walking.

A common misconception is that those with Cerebral Palsy inevitably have learning difficulties, due to their difficulty with speech, however this is not the case as there is often a wide range of intelligence.

Children with Cerebral Palsy often have other related conditions. These may include:

- Epilepsy (As many as one in three have Epilepsy)
- Incontinence.
- Impaired vision and/or hearing.
- Delayed growth.
- Curved spine (scoliosis).
- Drooling
- Feeding problems such as slow feeding, gagging and vomiting
- Weakness or paralysis of the limbs
- Slowness in developing speech and social skills.

**What causes CP? Is it Genetic?**

It is generally believed that Cerebral Palsy is caused by problems during labour and birth, however this only accounts for 1 in 10 cases. The most common cause of Cerebral Palsy can be found in 80% of all cases, and occurs when damage is made to the child’s brain while in the womb. Factors such as maternal infections (rubella, toxoplasmosis & chicken pox), genetic problems and malformations of the brain all contribute to this.

Cerebral Palsy can also be caused after birth in a minority of cases, with infections such meningitis and encephalitis leading to Cerebral Palsy. There are other factors which are known to increase the risk of a child developing Cerebral Palsy, these include:

- Extreme pre-maturity, particularly those born before 28 weeks of development
- Prolonged lack of oxygen during birth
- Babies that are part of twins, triplets or more.
- In children, whose mother’s have smoked, drank alcohol or taken drugs such as cocaine during pregnancy.

**How is it diagnosed?**

In the first few months of a child’s life, an infant with brain damage may display one or more of the following symptoms that can collectively lead to the diagnosis of Cerebral Palsy:

- Lack of alertness
- Irritability
- Trembling of the arms and legs
- Poor feeding abilities
- Eye fluttering
- Low muscle tone
- Abnormal posture (child may favour one side of their body)
- Seizures
- Abnormal reflexes.

During the first six months of life, the child may develop other signs of brain injury especially in terms of muscle tone and posture:

- The infant may have trouble eating- often pushing out their mouth
- The child’s muscle tone may gradually change from floppy to very stiff.
- One side of the child’s body may move more freely and easily than the other.
- The child may hold his or her hand in tight fists.

It usually becomes apparent after 6 months of age that the child is finding it hard to reach specific developmental milestones such as crawling. Doctors however may delay making the final diagnosis as it takes a child’s motor symptoms 2 to 3 years of age to develop fully. As a result the child is likely to be monitored over time by an interdisciplinary team. The doctor may then look at the child’s medical history as well as development, muscle tone and usual posture.
An MRI scan may be ordered to determine which areas of the brain are determined, as well as a CT to determine which areas of the brain are underdeveloped. This technology enables some children at risk of developing Cerebral Palsy to be diagnosed very early.

**Are there treatments available?**

There is no cure for cerebral palsy, but there are a number of different treatments available to help relieve symptoms and increase a child's sense of independence and self-esteem. As many different symptoms come over Cerebral Palsy a child may need a few of the following:

- Physical Therapy
- Speech Therapy
- Behavioural Therapy
- Mechanical aids such as braces for walking, wheelchairs
- Muscle relaxants to help with contractions

Surgery can also be applied to help with various symptoms such as muscle contraction, spasms, tremors and rigidity, and to improve motor function.