### APE: ADAPTED PHYSICAL EDUCATION

#### Lecture 3

Spina Bifida & CPME, MEI-YAO HUANG Ph.D.



U V APE 1

### Lecture Outline

Questions on Traumatic SC Injuries?
Questions on Reading?
Spina Bifida Lecture
CP Lecture
Work Session on Projects

U APE 2



# Spina Bifida

- Myelomeningocele
   incidence 80% of the cases
  - usually in the lumbar region
  - usually lack bowel and bladder control
- Meningocele
- Occulta

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# Spina Bifida (cont.)

- Hydrocephalus
- Shunt

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- ↗ tube & pressure valve
- used to relieve
   pressure and drain
   excess fluid
- Treated soon after birth





#### Development

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Range of motion Weight bearing stimulate bone growth ↗ circulation Developmental Positions rawling, sitting, standing, etc. Overprotected and isolated ΡE 5



## **Secondary Disabilities**

Bone deformities ↗ orthodics and braces Postural deviations Pressure sores Bruising Urinary infections Obesity ΡE

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#### Differences

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Age of onset Developmental implications - bone growth - contractures - sensory deprivation - obesity Social/Emotional Adjustment - Better acceptance of condition - Still have social adjustment concerns



# ISSUES

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Maximize ability to be ambulatory Ambulation immobilizes the hands and arms -- implications for PE Prolonged use of crutches nupper limb joint problems Negatives of regressing to a chair Impact of obesity on mobility Social impact - bowl & bladder control APE 8



#### Developmental Continuums

#### LEARNING CONTINUUM

Rote	Relationships	Concepts	Abstracts	Generalization
Low	I	Proficiency		High

#### **PHYSICAL/MOTOR CONTINUUM**

Reactions	Voluntary Control	Functional Motor Skills
Low	Proficiency	High
	SOCIAL CONTI	NUUM

USolitaryParallelInteractiveIntrospectiveVLowProficiencyHighA P E



# Cerebral Palsy (CP)

Permanent disability

Damage to motor control parts of brain

 Occurs before, during or shortly after birth

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### **CP** - Classification

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Topographical ↗ Monoplegia - 1 limb Diplegia - major involvement both lower limbs + minor involvement of upper limbs Hemiplegia - both limbs one side of body Paraplegia - both lower limbs **7** Triplegia - any three limbs Quadriplegia - total body: all limbs, head and neck ΡE



## **Cerebral Palsy- Classification**

#### Neuromotor

- Athetosis basal ganglia
- Ataxia Cerebellum
- Tremor basal ganglia
- ↗ Rigidity
- ↗ Mixed

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#### **Brain Parts and Function**

#### Brain Stem

- Midbrain: basal ganglia, thalmus
- Cerebellum

Cerebrum

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- Reflexes muscle tone and posture
- Posture, sensory input from eyes, coordination of mov.
- Balance, timing fast movements
- Initiate voluntary movement



## **CP** - Classifications

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Spasticity ↗ increased muscle tone hyperactive stretch reflex Athetosis 7 fluctuating muscle tone Incoordinated, involuntary movements head, neck, limbs and trunk many have speech problems ΡE



## **CP** - Classifications

Mixed
 ¬ Spasticity and Athetosis

Ataxia
balance
muscle coordination
hypotonicity

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## **CP** - Classifications

#### Tremor

Involuntary rhythmic shaking movements
 continuous or only when trying to move

Rigidity

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- diffuse damage to the brain
- ↗ severe mental retardation

オ severe spasticity



## **Cerebral Palsy - Classification**

Functional - Examples - 8 levels ↗ I - Severe spasticity & athetosis in all extremities - Motorized Wheelchair **7** II- Severe to moderate spasticity/athetosis - Regular Wheelchair - level surfaces VII- Moderate to minimal spastic hemiplegic - Walk and run without assistive devices ΡE 17

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## **Secondary Disabilities**

Mental Retardation Deprivation Contractures Vision problems Respiratory problems Seizure disorders

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#### Developmental Continuums

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## Planning for CP

Long Term Goals
Time
Integration with Related Services
Transition Services
Athletic options



#### Assessment

Tests available
Assessment needs
Functional abilities
Task Analysis
Product vs Process

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# **Prescribing & Teaching**

#### Motivation

- a reason to learn motor skills
- ↗ a believe they can learn skills
- Success

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- they need to perceive they are improving
- Peer tutoring models
- Maximize # of successful practice trials



#### **Evaluation**

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Student - emphasize progress Program identify methods that do and do not work adjust program based on progress Communicate Regularly **7** Student **7** Parents



### **CP** Issues

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Cognitive goals vs Motor goals? Inclusion for social involvement vs emphasis on acquiring motor skills Use of computer simulations? Development of well educated spectators? Long-term out look and quality of life? ΡE 24

