Cerebral Palsy is a physical disability that affects movement and posture.

**DIAGNOSIS**

- **Infant has risks for cerebral palsy?**
  - No
  - Yes

- **Infant has abnormal motor development?**
  - No
  - Yes

- **Infant has abnormal neuroimaging?**
  - Not cerebral palsy
  - Cerebral palsy

**Risks For Cerebral Palsy**

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>CP Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal Risks (thyroid, pre-eclampsia, bleed, infection, IUGR, placental abnormalities, multiples) +/-</td>
<td><strong>10.0%</strong></td>
</tr>
<tr>
<td>Born Premature</td>
<td>0.7%</td>
</tr>
<tr>
<td>31-37 weeks</td>
<td><strong>5.0%</strong></td>
</tr>
<tr>
<td>28-31 weeks</td>
<td><strong>10.0%</strong></td>
</tr>
<tr>
<td>&lt;28 weeks</td>
<td><strong>0.7%</strong></td>
</tr>
<tr>
<td>Term Born</td>
<td><strong>12.0%</strong></td>
</tr>
<tr>
<td>• Encephalopathy</td>
<td><strong>0.1%</strong></td>
</tr>
<tr>
<td>• Healthy, no known risks</td>
<td></td>
</tr>
</tbody>
</table>

**Assessing Motor Development**

**Age: <20 weeks (corrected)**

- General Movements Assessment. 95% predictive.

**Age 6-12 months**

- Developmental Assessment of Young Children (DAYC). 83% predictive.
- Hammersmith Infant Neurological Assessment (HINE). Helps predict severity. 90% predictive.

**Assess Neuroimaging**

- Abnormal Neuroimaging
  - Periventricular white matter injury: **19%**
  - Cerebral malformation: **11%**
  - CVA: **11%**
  - Grey matter injury: **22%**
  - Intracranial haemorrhage: **3%**
  - Infection: **2%**
  - Non-specific: **19%**
  - Normal: **13%**

**LIFE-­‐LONG**

Cerebral palsy is a life long disability. Disability may increase with age, and ageing may occur earlier.

**PAIN, BEHAVIOUR AND SLEEP DISORDERS** in people with cerebral palsy are under-­‐recognised. Assess and treat.

**SEVERITY**

Predictions of severity are most accurate at 2 years of age.

**ASSOCIATED CONDITIONS AND EVIDENCE-­‐BASED TREATMENT**

CP is almost always accompanied by a number of associated conditions and these can be as disabling as the physical condition.

**PAIN**

- **3 in 4**
  - Treat to prevent sleep & behavioural disorders

**INTELLECTUAL DISABILITY**

- **1 in 2**
  - Poorer prognosis for ambulation, continence, academics

**NON-­‐AMBLANT**

- **1 in 3**
  - Independent sitting at 2yrs predicts ambulation

**HIP DISPLACEMENT**

- **1 in 3**
  - 6-­‐12 monthly hip surveillance using x-ray

**NON-VERBAL**

- **1 in 4**
  - Augment speech early

**EPILEPSY**

- **1 in 4**
  - Seizures will resolve for 10-­‐20%

**BEHAVIOUR DISORDER**

- **1 in 4**
  - Treat early & ensure pain is managed

**BLADDER INCONTINENCE**

- **1 in 4**
  - Conduct investigations & allow more time

**SLEEP DISORDER**

- **1 in 5**
  - Conduct investigations & ensure pain is managed

**BLINDNESS**

- **1 in 10**
  - Assess early & accommodate

**NON-ORAL FEEDING**

- **1 in 15**
  - Assess swallow safety & monitor growth

**DEAFNESS**

- **1 in 25**
  - Assess early & accommodate

**World Cerebral Palsy Day worldcpday.org**

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The content for this infographic was drawn from: