Normal Development and 'Red Flags'

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Does this look and sound familiar?

 My child is not developing normally please help!!!!



'Red flags'

• Awareness of normal

• Identify abnormal

• Refer to Paediatrician, Specialist

• Support

Outline

- Definition of Child Development
- History taking
- Physical examination

Child developmental mile stones and 'red flags'

- Gross motor
- Fine motor/vision
- Hearing/attention
- Speech/language
- Social development

Definition

 A process whereby an individual achieves physical, social and mental independence and finally can take responsibility for others

- Dependent on normality in:
- Hearing, vision, motor skills, cognitive ability, communication, physical, emotional

History taking

• Pre/Perinatal history

Pregnancy- maternal age, health, smoking, alcohol, recreational drugs, intrauterine infections (CMV, rubella, toxoplasmosis etc), poor fetal movement/polyhydraminous

Delivery- Prematurity, low birth weight, apgars Birth injuries

Neonatal/newborn-feeding/hypoglycaemia, infections,hyperbilirubinaemia, seizures, hypoxic ischaemic injuries

History

• Postnatal -Infections, injuries (NAI, accidental)

• Psychosocial- attachment, social deprivation

Family history- genetic, medical, learning disabilities

Physical examination (clues)

- Birth weight, head circumference, fontanelles
- Dysmorphic features
- Absent red reflexes/ nystagmus
- Skin pigmentations
- Tremors/spasms
- Abnormal startle reflexes, fisting
- Floppy baby/excessive head lag

Normal development and 'red flags'

• Gross motor skills

Newborn- complete head lag

- 4 weeks- head lag but beginning to develop some control
- 6 weeks- chin off couch
- 12 weeks- chest off couch
- 6 months- sits supported
- 8-10 months- sits unsupported, crawl
- 12-15 months- walks independently, creep upstairs

Describe the posture of the neonate



Reflexes

Significance of Reflexes



What is this reflex called?



New-born check

• Identify the normal and abnormal

What can you spot in this slide?



What's the name of this posture?



Is this a normal posture?



Red flags- gross motor -pathways awareness foundation)



Rounded back
Unable to lift head up
Poor head control



 Difficult to bring arms forward to reach out
 Arches back and stiffens legs □ Arms held back □ Stiff legs

Red flags- gross motor



Unable to take steps independently
 Poor standing balance, falls frequently
 Walks on toes

How old are they approx?

Sitting



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Crawling-variations

Variations





Preparation for walking

Further progress



Red flags....

- Late walker (bottom shuffler)
- Cerebral palsy- moro'sreflex beyond 2-3 months ,fisting, dragging foot behind when crawling, not using one hand, tip toe walking
- Muscular disorders- poor tone, excessive head lag, 'frog like' posture
- Bone and joint abnormalities

Fine Motor Skills and Visual Perception

- Fine motor skills refers to small and precise movements such as those of the hands. It can also include movements of the small muscles of the face and mouth.
- This domain also includes vision, as this is important in hand-eye coordination and social functioning.

INFLUENCES ON FINE MOTOR DEVELOPMENT



Fine motor

- Brings hands to mouth and watches the movements of his/her hands (0 to 3 months)
- Reaches, grasps and brings hands to midline (3 to 6 months)



Hands at Midline

Fine motor skills

Transfers objects hand to hand (6 to 9 months)

New communication intervener training

Uses a neat, tip to tip pincer grasp on small, pellet-sized items-9 to 12mos.

Pincher Grasp

- popping bubble wrap
- picking up small objects
- tying bows
- using pushpins
- sewing cards
- stringing beads
- putting pegs in pegboards
- putting clothespins on edges of cans or jars
- using an eyedropper
- putting coins through a small slot



Pincher Grasp

Fine motor skills

- Scribbles with a crayon using whole arm movements (12 to 18 months)
- Snips paper with scissors (18 to 24 months)
- Imitates a circle and vertical and horizontal lines (2 to 3 years)
- Stacks five to seven small blocks (3 to 4 years)
- Touches each finger to thumb (4 to 5 years)
- Writes first name (5 to 6 years)

New communication intervenor training

Red flags

- Using one side persistently
- Abnormal palmer/pincer grasp
- Unable to play with a variety of toys
- Difficulty with activities cutting, feeding, dressing, throwing etc
- Writing difficulties

Red flags

- Cerebral palsy
- DCD
- Muscular disorders
- Neurological disorders
- Joint/bone abnormalities

Progression of visual recognition



Visuo-motor skills



Vision- red flags

• Child not:

Focusing on main carer's face by 3 months

Following objects with eyes 4-5 months

Exploring surroundings 7-12 months. Move eyes and hands together e.g. stacking blocks 2months-2 years

Red flags

- Blindness -facial grimacing, eye boring, flapping of hands, bumping into things, holding toys close to eyes
- Squints, refractive error, colour blindness
- Attachment (postnatal depression)
- Autism -poor social interaction, restricted patterns of behaviour/play, bumping into things (poor spatial awareness/coordination)

Hearing/attention- red flags

- Child does not:
- Startle to loud sounds- 6-8 weeks
- Quieten to main care's voice- 3 months
- Turn towards sound source- 4 months
- Imitate sounds- 6-8 months
- Recognize name- 12 months

Red flags

- Does not respond to name
- Early babbling stops
- Talks loudly
- Poor attention
- Comes close to TV/increases volume
- In 'dream world'
- Fever/discharging ears/pulling ears

Red flags

- Deafness (congenital/acquired)
- Sensorineural
- Conductive ('glue ear')
- Family history of deafness
- ADD/ADHD? Short attention span, fidgetiness
- Associated medical conditions e.g. Allports syndrome, Usher's syndrome

Speech/language- red flags

- The child does not:
- Coo with pleasure- 3 months
- Babble 6 months
- Understands 'no', 'bye bye'- 9 months
- Understands own name, 1-2 words- 12 months
- 10-20+ words- 18 months
- 50-70% speech intelligible, 2 word phrases- 24 months

Red flags

- Stuttering, bilingual
- Selective mutism
- Semantic pragmatic deficit (ASD)
- Verbal dyspraxia (poor motor programming)
- Drooling/feeding difficulties- mechanical
- Neurological- dysarthia
- Genetic/chromosomal syndromes (Down's, Angelman's, Fragile X
- Acquired-head injury, epilepsy, landau-Kleffner, cerebral infections

Social skills- red flags

- Not smiling at by 6 -8 weeks
- Poor response to main caregiver
- Poor eye contact when fed
- By 18 months- failure to acquire pretend play and joint attention, social pointing
- Poor social interaction
- Poor pretend play, repetitive/obsessive behaviours
- Challenging behaviours (emotional, mental, ADHD, child abuse)

References

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- Bruner J (1983) Child's talk: learning to use language. W W Norton, New York.