**Cerebral Palsy (CP)**

**What is Cerebral Palsy (CP)?**
Cerebral palsy, commonly called CP, is the name used to describe a group of conditions that cause problems with movement. CP is a permanent condition and is the most common cause of physical disability in children. 1 in 500 Australian babies will be diagnosed with CP. Children with CP may also have problems with talking, eating, seeing, hearing, and learning.

**Causes of Cerebral Palsy**
CP can be caused by problems with early brain development or damage to the brain during pregnancy, during birth, or in the first few years of life. For many children there is no known cause. Babies born prematurely or with small birth weight, infections, birth defects, lack of oxygen or severe jaundice, are at increased risk of CP. There are also some rare genetic conditions that are linked to CP.

**Types of Cerebral Palsy**
CP can be described by the type of movement problem, what parts of the body are most involved and how severely it affects children’s ability to carry out daily activities (function).

Movement is affected because the brain has difficulties in sending messages to the muscles. Common types of movement problems include:

- **Spasticity**
  This is the most common movement problem. Muscles are stiff, which can make movement difficult.

- **Dyskinesia**
  The most common type of dyskinesia is Dystonia, which is seen as slow twisting or repetitive movements, or abnormal sustained postures. Other dyskinesias are Chorea, (abrupt jerky movements), and Athetosis (slow writhing movements.)

- **Ataxia**
  Ataxia is seen as unsteady shaky movements or tremor. It is the least common movement problem.

Every child with CP is different. Some children may have mixed CP and show a combination of the types mentioned above. Knowledge of the type of CP helps with deciding appropriate treatment options (refer to the Fact Sheet on Treatments for CP).

**Key points:**
- CP is the most common cause of physical disability in children.
- Not every child with CP is the same.
- Currently there is no known cure, however active management from an early age is recommended to achieve your child’s best potential.
- Management requires a team approach from parents/carers, therapists, doctors and nurses.
CP can be described according to the **parts of the body affected** (see figure 1). These include:

**Hemiplegic CP:** One side of the body is affected.

**Diplegic CP:** Both sides of the body are affected, but more often just the legs.

**Quadriplegic CP:** Both arms and legs are affected.

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**Early Goals**

Children with CP and their families benefit greatly from therapy introduced as early as possible. This may include physiotherapy, occupational therapy and speech pathology. Education and support for families to care for their child with CP is also beneficial. Early services help children to learn and practice new skills, such as encouraging activity. The goals and focus for therapy may include sitting, walking, playing, dressing, toileting, eating, and talking. Early service provision helps children with CP to reach their full potential.

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For more information on Cerebral Palsy here are some website addresses you may find helpful:

**Cerebral Palsy Alliance**: a provider of therapy and support services in NSW and ACT  [www.cerebralpalsy.org.au](http://www.cerebralpalsy.org.au)

**CP Register**: a database that collects information about people with CP that helps with research into CP  [www.cpregister.com](http://www.cpregister.com)

**Better Start for Children with Disability**: initiative providing funding for early intervention services  [www.betterstart.net.au](http://www.betterstart.net.au)

**Cerebral Palsy Australia**  [www.cpaustralia.com.au](http://www.cpaustralia.com.au)