

Living with Cerebral Palsy:

Literature Review

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Living with Cerebral Palsy

Cerebral palsy is a lifelong condition that can affect movement, coordination, and sometimes cause learning difficulties (Badawi et al., 2018).

I want to begin by introducing my own experience with cerebral palsy. I have a younger sister with cerebral palsy. She was born with it and was not expected to live over the age of 4; however, she is now 36 years of age. This paper will touch base on preventative strategies for young mothers, how to make the best of the worst outcome, and lifelong methods of care. Overall, this assignment will reveal the best evidence-based practice on optimizing outcomes of patients with cerebral palsy. Cerebral palsy is not just one disease or one entity, but that it affects everything within the human body.

Neonatal interventions for preventing cerebral palsy: an overview of Cochrane Systematic Reviews

This article discusses the importance of how prematurity had the highest risk upon the future development of cerebral palsy (Badawi et al., 2018). Other impacts such as birth asphyxia, congenital disabilities, and adverse labor incidents contributed significantly to the future development of cerebral palsy, as well (Badawi et al., 2018). These other impacts suggest that the cause of cerebral palsy in the preterm infant is most likely multifactorial (CDC, 2017).

Key Points (note that the key points is flush to the far left)

Around 85% to 90% of cerebral palsy is congenital (CDC, 2017). Risk factors for congenital cerebral palsy may include low birth weight, premature birth, multiple births, infertility treatments, infections, kernicterus (jaundice), birth complications, and medical

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conditions of the mother (CDC, 2017). Cerebral palsy can also be acquired, and a small percentage of newborns acquire cerebral palsy after 28 days of life from infections, hypoxia, or head injury (CDC, 2017).

There are preventative measures young mothers can take to help reduce the risk of cerebral palsy before, during, and after the baby is born. There is strong evidence that shows the uptake of magnesium sulfate (MgSO₄) during preterm labor reduced rates of cerebral palsy by around 30% (Chang et al., 2018). Some other preventive measures young mothers can take to help reduce the risk of cerebral palsy are to get vaccinated, get early and regular prenatal care, and to practice hand hygiene (CDC, 2019).

Assumptions

The article does point out that the cause(s) of cerebral palsy are not entirely known, but that actions taken to help prevent cerebral palsy before and during pregnancy can significantly reduce the risk of infants developing it (CDC, 2017).

Although there is strong evidence that supports the risk factors mentioned, it does not mean that a child will develop cerebral palsy. This article provides a useful information source for educating patients who are pregnant and offers links to more information that can be beneficial.

Deficit/Conclusion

The overall conclusion of this article states that the majority of infants who have cerebral palsy have risk factors that cause brain injury during prematurity. Only a small percentage of cerebral palsy is acquired after 28 days of life. There are actions that pregnant mothers can take

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before and after pregnancy that help prevent the development of cerebral palsy, and treatments that help ensure a healthy pregnancy.

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Key Points

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Assumptions

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Key Points

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Conclusion

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References

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Review this citation of the source. The first line is NOT tabbed over, all other lines are.

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