

Pediatric Development Center



~ Newsletter ~
March
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We provide occupational therapy evaluation, treatment and consultation for children with developmental delays, autism/Asperger, cerebral palsy, Down's syndrome, sensory processing disorders, attention, behavioral concerns, handwriting, and other areas of weakness. Contact us for further information:

125 Presumpscot St.
Portland, ME.
(207) 699-5531

Good Resources:

www.integrationscatalog.com

Just Take a Bite by: Lori Ernsperger & Tania Stegen-Hanson

www.sensory-processing-disorder.com

Inclement Weather

Throughout the winter we will experience snow and ice. Our office is usually open unless the weather is extremely bad. It is unpredictable how the day will go, whether the roads will clear early or a storm will come in later. Your therapist or the office will contact you to determine the best route of action. In case of very severe weather we will list a clinic closing on WCSH 6. Also, please remember to call if your child is sick and will not be coming to the clinic.

Proprioceptive Sensory Information (and how it affects the "Resistant Eater")
Taken from Just take a Bite by: Lori Ernsperger & Tania Stegen-Hanson

Proprioception relates to the sensations we receive from our tendons, muscles, and joints. The proprioceptive system gives us information about joint position and movement.

The child with poor proprioception experiences difficulties interpreting sensations regarding the position and movement of her head and limbs. The child has a poor sense of body awareness, not having a mental picture of her own body parts and where they are in relation to each other. Motor planning is very difficult because she is unable to control and monitor her gross motor and fine motor muscles.

Ineffective processing of proprioceptive information can affect the resistant eater's mealtime participation and feeding skills in the following areas:

- * Child may have a problem with adjusting or grading the amount of jaw opening needed to bite foods of different thickness and in grading the power or force of the bite for chewing.
- * Child may hold and use eating utensils with too much or too little force.
- * Child may slump in the chair, unable to maintain an upright position.
- * Child may have difficulty knowing where her body is in relation to objects and people, frequently bumping into obstacles, knocking a glass of juice over, dropping utensils, or falling off the chair.
- * Child may not know how much pressure to exert when flexing and extending her muscles, spilling juice all over her face when she brings the cup to her mouth, or spilling soups and cereal when she scoops it with her spoon.



Decreased Taste Sensitivity vs Increased Taste Sensitivity

By: Lori Ernsperger & Tania Stegen-Hanson

A child with *decreased* taste sensitivity may:

- * Lick or taste inedible objects, such as play dough and toys
- * Prefer very hot or spicy foods
- * Prefer very hot or cold foods

A child with *increased* taste sensitivity may:

- * Object to certain textures of food (i.e. lumpy, mashed or chewy foods)
- * Object to certain temperatures of food (i.e. very hot, lukewarm, ice cold)
- * Gag often when eating

Who Needs a "Chewy?"

From Integrations Catalog, Bright Ideas

Chewys are most frequently used in two situations:

- * Individuals who use chewing to calm or refocus
- * Individuals with speech or eating related issues who need to make muscles stronger

How do you know which chewy to select?

The most important thing to remember is to pick a chewy the individual will most likely USE...each person's sensory system has preferences related to texture, pliability and shape. Also, choose a chewy that reaches to

muscles in the back of the mouth. Always choose a chewy that is safe for your child.

Some people like to keep a chewy with them at all times. Because of this tendency you want to choose a holder that is safe for the child. Be sure cords, necklaces or holders do not present a strangulation risk for the individual. Chewys should be used with adult supervision. If you are choosing a chewy for self-regulation or strengthening, the easier the access to the chewy, the more frequently it will be used.

Chewys...should you teach the child, or should the child teach you?

By: Cindy Andric

Handle this with kid gloves...the child always knows best. Provide a variety of oral sensory input with minimal directives and WATCH. Children with low sensory thresholds will gnaw, chew and grind. There may be some who will want to avoid the experience. Others' oral reflexes may be elicited by a bite or gag. Let their responses guide you to challenge and alert the oral cavity in other creative ways with food, oral-motor and respiration exercises.



Picky Eater "treatments" to try at home:

From: sensory-processing-disorder.com

- * Give your child multiple opportunities every day for oral-motor activities.
- * Allow your fussy eaters to explore and play with their food. This will allow him to experience different textures through the tactile system.
- * Once you find a particularly successful food, try introducing similar foods. For example, if your child likes a particular brand of frozen pizza, then try; other brands, other toppings on the preferred brand, another "style" (i.e., thin crust, French bread, stuffed crust etc.), or try a variety of homemade pizzas using different "crusts" (i.e., frozen bread dough, pre-made pizza crusts, refrigerated crusts, English muffins, bagels, or pita bread).
- * Try providing distractions while they are eating.
- * Set up a reward system.
- * Give your child as much control as possible....give him a choice.
- * Pay attention to textures.
- * When brushing his teeth, brush tongue and cheeks with just water, then brush teeth normally.