

# **Myoreflextherapy for Children**

**Kurt & Reiner Mosetter**

An important indication for the Myoreflextherapy is the treatment of children with physical and/or mental disorders or with special abnormalities. It can be stated, that the most types of neurologic and motoric bradygenesis as well as retardations in speech development can via this neurologic regulation therapy be decisively influenced in their course and prognosis.

Background of many accessory results, but also central focus of manifold and complex symptoms are very frequently symmetrical disorders of the spine and of the muscular system. Especially wrong position of the head joints, the mandibular joints and the iliosacral joints can be found in almost every examination. Deep muscular structures as that of the iliopsoas or the scalene muscles are mostly contract in this connection, other groups of muscles seem at the same time to be suspended and show a muscle weakness. As an immediate result derive functional cerebral as well as peripheric circulation disorders.

Abnormalities in the course of pregnancy, malpositions as breech presentation or forefoot position and birth trauma are in principle more or less connected with dysbalance of myotonus and joints especially in the region of the cervical spine. so there often exist direct correlations to differently strong distinct torticulli, scoliosis, innervation disorders, perception disorders and hyperactivity. Muscle induced dysregulations in the head and in the area of the head joints further lead to periorbital symptoms, to asymmetries and difficulties in synchronization in the function of the eye muscles. The smallest disorders can already lead to delays of focus, which are very hard to diagnose. Considering this background makes it significant to examine children with attention deficit syndrome more closely.

Especially the attention deficit syndrome, but also describing terms like dyslexia or dyscalculia in their multiplicity should always be reconsidered as well, according to the perspective of functional and neuro-muscular laws. Etiology and genesis, but also prognosis and course are often interconnected with the „corner pillars“ geometry of movement and muscle system. Muscle induced miss-strain leads to postural anomalies, which, in a vicious circle, lead to asymmetries of the joint posture, fixing it. Myoreflextherapy as a supporting therapy already offers enormous possibilities. Long termed therapy programs are to be developed for premature children, and children who have suffered cerebral bleeding, infections and genetic defect. But also complex diseases as cri-du-chat syndrome, Down's syndrome, hereditary deformations and dysplasia can be influenced at large. In that line it can be stated that also children with rare syndromes like Marfan's syndrome, Noonan's syndrome, Crouzon's syndrome, cleidocranial dysplasia or muscular dystrophy with unclear genesis have made great improvements with the Myoreflextherapy.

For the therapist does not only work on the periphery of the muscle or joint through a neuromuscular feedback control system, but addresses and interconnects central programs, so that in a way it can be considered as an

opening and new installation of alternative networks. That goes especially for diseases as lissencephaly, porencephaly or hydrocephaly.

Through integration of organ science and acupuncture systems of the traditional Chinese medicine in context of the treatment, decisive influence is possible on vegetative accessory symptoms and on the immune status. Especially sleeping behaviour, hyperactivity, concentration and attention disorders, respiration function, appetite, digestion, spastic fit, anxiety attacks and crying fit regulate mostly quite impressive.

Particularly under the aspect, that working with children and disabled people requires a lot of intuition, the basics and settings shall be summarized as follows.

1. Treatment happens manually with normally weak palpatory pressure without manipulation.
2. The playful cooperation of the child is the basic central pillar of the therapy.
3. The treating finger „serves“ the child as help to feel and perceive their body-self and to regulate their body scheme in the distinction of inner and outer world.
4. In a non-verbal dialogue the sensory and sensorimotor systems are the main aim of the Myoreflextherapy.
5. Following the rhythm of the child, the family doesn't experience therapy stress, neither in the course nor respecting the frequency of the sessions.
6. The basics of early childhood development and sensorimotor system are in their significance also practical starting points of the treatment concepts.
7. All children will be respected in their wholeness and in their partly very high emotional intelligence, their attention will be eagerly sought and not estimated, but individually sponsored.
8. Classifications like normal or abnormal, sick or healthy patterns of development, of things, children should be able at a certain age to be able to or not to be allowed to, will be put in the background for the benefit of individual peculiarities and resources.
9. Unproductive conditioned role assignment in the family system and relating patterns of behaviour can be disconnected and regulated in their intricacy.
10. There are often hidden talents behind the attention disorder syndrome: complex perception on several levels at the same time, high artistic ability, the capability to see mental pictures deliberately three dimensional and walk around them in their imagination, a high creative potential and creativity. It should be a main task, to advance these talents.