Constraint-Induced Movement Therapy Program A Fairmount Rehabilitation Program at Kennedy Krieger Institute

Who We Are

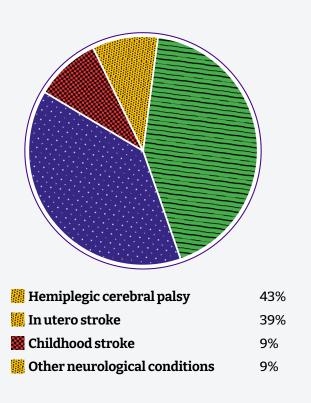
The Constraint-Induced Movement Therapy (CIMT) Program provides intensive therapy for children with hemiparesis. The program uses an evidence-based understanding of the brain's natural ability to form new connections to help increase functioning and independence in infants and children with hemiparesis. Our unique program combines traditional constraintinduced movement therapy with a period of intensive bimanual therapy to ensure carry-over of new skills.

Who We Serve

We offer both infant and traditional treatment models to serve children 8 months old through adolescence, as appropriate. Therapists collaborate with each family to choose the most appropriate program for each child.

Collectively, our patients come to us with hemiparesis caused by a variety of conditions, including:

- Hemiplegic cerebral palsy
 Other neurological
 - Other neurological conditions, including brain injury
- In utero stroke Childhood stroke





Our Team

Our interdisciplinary therapeutic team provides care to each patient and includes:

- Pediatric rehabilitation medicine provider
- Physical therapists
- Nurses

Occupational therapists
 We also routinely consult with speech-language

pathologists, neuropsychologists and other specialists.

Our Treatment Approaches

For children with hemiparesis, sometimes the greatest barrier to improvement is their better-functioning limb. During constraint-induced movement therapy, the child's preferred upper extremity is placed in a cast, and therapy is focused on promoting the use and functioning of their affected arm and hand. The casted extremity is carefully monitored for proper circulation and skin integrity. A few days before the program ends, the cast is removed and the child practices using both arms together for everyday activities.

While the child's arm is casted, caregivers will need to provide greater assistance with self-care activities at home. Therapists teach families the best ways to assist

their children during this time. To help children maintain the progress they have made during therapy, therapists work with families to develop a customized home therapy program.



Traditional CIMT Treatment Model

Traditional CIMT treatment consists of up to three hours a day of combined occupational and physical therapy for a total of 23 weekdays (about five weeks). A long-arm waterproof cast is typically worn 24 hours a day, seven days a week, on the better-functioning arm.

Candidates for this program must:

- Have a diagnosis of hemiplegia
- Be walking independently
- Have one clearly dominant hand with age-appropriate functioning
- Be seizure-free for at least six months before starting therapy

This program is not appropriate for children who have:

- Severely limited movement in both arms and hands
- Self-injurious behavior Severe vision limitations
- An inability to follow simple commands
- Contractures that would limit participation

Infant CIMT Treatment Model

Infant CIMT treatment consists of one hour of physical or occupational therapy a day for 20 weekdays (about four to five weeks). A removable short-arm thermoplastic hand splint or cast is used on the child's preferred arm as a constraint during therapy sessions, and for additional time at home during structured home program activities. These children do not wear a cast for more than one hour at a time.

Candidates for this program must:

- Be under 2 years of age and not yet walking
- Have a diagnosis of hemiplegia
- Be medically stable

"Thanks to the Constraint-Induced Movement Therapy Program, my son now has increased movement and use of his left hand, and he has much more self-confidence."

- Katherine Wilkerson, parent

Summer Programs

As children get older and prepare to enter school, we offer an intensive bimanual therapy program during the summer, without casting. Children are seen in a small group with peers of similar age and ability. The focus of therapy is on school readiness skills. Children learn ways to use their affected arm and hand during common classroom activities, including writing, coloring, cutting, gluing, opening snack packages, carrying trays, and putting on and taking off jackets. They also focus on balance and coordination to improve the gross motor skills needed for jumping, running, throwing and catching a ball, and navigating playground equipment.

CONTACT US

Constraint-Induced Movement Therapy Program at Kennedy Krieger Institute

For more information about this program or to schedule an appointment, email us at STPReferrals@KennedyKrieger.org or call 443-923-4587, or call toll-free at 888-554-2020. TTY users, please contact us at 443-923-2645, or dial 711 to make a Maryland Relay call.

KennedyKrieger.org/Rehabilitation

Physicians and Healthcare Professionals To make a referral, email us at FindASpecialist@KennedyKrieger.org or call our Physician Referral Line at 443-923-9403.

Program Location 1750 East Fairmount Avenue Baltimore, MD 21231

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