

# BLT treatment for the newborn

Studenten versie na de cursus

# Treating the newborn

- Getting in contact with the baby
- Baby decides, adjust your position
- You're not doing anything in the beginning
- Be neutral
- Let the baby know, that you understand what happened during birth
- When treating do the thing most necessary at that moment!
- Baby cries what to do?

# Case

- Girl, 1,5 years old, not taking weight on her left foot. Parents worry about delay in standing and walking.
- What is your differential diagnosis? Med and ost.
- What is your plan of action?

# Case

## Medical DD:

### Soft tissue:

- Trauma
- Toe nail problem
- Inguinal lymfeadenitis
- Infectious eczema on leggs

### Bone:

- M. perthes,
- coxitis fugax
- malignancy
- Epifysiolysis femur
- Avascular necrosis
- Osteomyelitis
- Rachitis

### Muscles:

- Cramps
- Growth pains
- Trauma
- Effect of injection
- Seldom: muscle dystrofia

### Tendon and ligaments:

- Contusion
- Short achilles tendon
- Inflammation achilles tendon

### Neurological:

- Cerebral Palsy

# Case

## Osteopathic DD:

- **Mechanic:** Intra osseus problem pelvis or lower extremity due to
  - intra-uterine cause
  - birth trauma
  - trauma
  
- **Neurological:** L4-L5-S1
  
- **Respiratory/circulatory:** fluid stagnation of lower limb
  
- **Biopsychosocial:** secondary gains
  
- **Bioenergetic:** -

# Case

Baby, 6 weeks old, preferential rotation left and asymmetric skull



- Gravity: no specialties
- Labour: Aav (OA), long dilatation phase, after sedation stop of contractions, got oxytocine; contraction storm and precipitate labour.
- APGAR 9/10
- First Cry: powerfull
- At birth no signs of asymmetry in the skull
- Postnatal: no specialties

# Case

- Show your differential diagnosis medical and osteopathical
- What are your points of attention during examination of the cranium and cervical spine

# Case

## Medical DD:

### Bone:

- Craniosynostosis
- Clavicula fracture
- Block vertebrae
- Abduction hips
- Stance difference feet
- Cervical spine aptitude disorder
- Hip luxation/ dysplasia

### Postural:

- Torticollis postural problem (PT)
- TAC (turned head, adduction hip, curved trunk)
- Scoliosis (structural)
- Postural newborn scoliosis

### Neurological:

- Chiari Malformation
- Neurological problem
- Brachial plexus leasion (obstetrical)
- Erbs palsy

### Senses:

- Visual problem
- Auditory problem
- Occulomotoric problem

### Soft tissue

- Tumor head, neck or throat
- Inflammatory throat/mouth

### Muscle:

- Torticollis muscular problem (CMT)
- Pseudotumor m. SCM



# Case

## Osteopathic DD:

- Mechanic: mobility problems C0-C1-C2, Strain SBS, mobility problems cervical spine, top of thoracic outlet, diafragma, pelvis, hips
- Neurological: dura, ATNR dominance
- Respiratory/circulatory: -
- Biopsychosocial: -
- Bioenergetic(metabolic): digestive problems/food intolerance

# Points of attention during examination

## Inspection:

- Head
  - Front view: asymmetry forehead, face, ears, eyes
  - Above: fore head, nose, symmetry fore head-back of the head, ears, widening of temporals
  - Posterior view: ears, back of the head symmetry, mastoid portion
  - Lateral view: vertical growth of the skull

## Examination:

- Cranium:
  - Palpation of anterior and posterior fontanel
    - Open-Closed
    - Size
    - Shape
    - Fullness: convex, concave, at level, to bomb
  - Palpation of the sutures; ridges, widening
  - Looking at the shape
  - SBS
- Cervical spine

# Case

- Diagnosis reflux: Which signs and symptoms can occur?
- What is your differential diagnosis medically and osteopathically?
- What are your specific points of attention during examination and treatment?

# Reflux



This baby was born vaginally, face forward.

Suffers from reflux .

What signs and symptoms come to mind?

# Signs and symptoms

- Hawk and breathes heavily
- Sometimes apnea
- Cries a lot, difficult to comfort
- Overstretching
- Hoarse voice
- Breath smells sour
- Furred back of the tongue
- Has trouble drinking
- Moro reflex/ ATNR +++
- Baby is fidgety
- Cries everytime laying down
- Often chokes / vomiting a lot
- Has trouble burping / often hiccups
- Catches colds and otitis easily
- Has trouble sleeping
- Reduced weight gain

# Case

## Darm:

- M. Hirschsprung
- Necrotiserende enterocolitis
- Intestinale atresie/stenose
- Meconium ileus
- Inflammatory bowel disease
- Appendicitis
- Koemelkeiwit allergie of intolerantie
- Koliek
- Obstipatie

## Neurological:

- Hydrocephalie
- Subduraal hematoom
- Intra craniele bloedingen
- Massa lesie
- Epilepsie

(niet verwarren met Sandifer syndroom)

## Algemeen

- Hartfalen
- Infectie
- Braken icm andere symptomen;
- Sepsis
- Urineweginfecties
- Hersenvliesontsteking
- Middenoorontsteking
- Hepatitis
- Gastro-enteritis
- Longontsteking
- Astma
- Vreemd voorwerp aspiratie
- Slikstoornis

## Nieren

- obstructief uropathie
- Nierinsufficiëntie
- Vergiftiging: Lood, ijzer, vit. A of D, Drugs

## Aangeboren stoornissen metabolisme:

- Pancreatitis
- Cystic fibrosis

## Maag:

- Pylorus stenose
- Malrotatie en volvulus
- Intussusceptie
- Maagzweer
- Achalasia
- Gastroparese
- Hernia (verpakt)

# Specific points of attention during examination and treatment

## Inspection:

- Hyperextension body
- Extreme crying
- Hypertonia belly
- Tense baby
- Saliva formation
- Restless ness

## Examination: in the 5 systems

- Vagal function
- ANS sympathics
- Function diaphragm & ribs
- Function mouth floor
- Peritoneal hanging structures
- Gastric region
- Pyloric function
- Flexura DJJ
- Function of Lower Eosophageal sphincter (LES)

# Literatuurlijst

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Heb je nog specifieke vragen over deze module: mail ze gerust naar:

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Antwoorden kan wel eens even duren, maar ik zal proberen zsm te antwoorden.