

Helping your child



Are retained reflexes holding your child back? Could neuro-developmental therapy help? We talk to therapist and mum Jo Rodhouse BSc(Hons), of Marlow Bottom

Q. Who are the families you help?

"Nowadays more and more children are being labelled with autistic spectrum disorders (ASDs), attention deficit hyperactivity disorder (ADD and ADHD), dyslexia, dyspraxia, sensory processing disorders etc. Meanwhile, many children struggle with non-specific difficulties such as classroom learning, movement control, social interaction, concentration and emotional maturity. Many of these 'labels' have a medical reference, which some people find helpful, however the terms merely describe a set of symptoms. In my work there is very often a simple explanation for these difficulties and that is the presence of 'retained reflexes'. I help both adults and children."

Q. What are retained reflexes and why do they have such an impact?

"In the womb and early stages of life, we are equipped with a number of reflexes that not only aid the birthing process, but also serve to ensure the survival and safety of the newborn into early infancy, for example, grasping and sucking. As the newborn develops, the brain begins to mature and take control, so these early reflexes are no longer needed and must inhibit. This is an essential stage of normal development. If, however, these reflexes fail to inhibit they can have a huge impact on appropriate function and therefore a child may display immature patterns of behaviour – lacking appropriate emotional, social and behavioural responses, difficulty in classroom learning and physical balance and co-ordination issues, and explains why a seemingly intelligent child struggles to learn and thrive as others do."

Q. What signs of retained reflexes would I have seen as a parent?

"It's often evident at the early key stages of development when the child has deviated from norm. We often see difficult or delayed birthing, feeding or latching issues,

failure to crawl, delayed teething or speech, being easily startled, unusual sleep patterns, fussy eating, thumb-suckers, toe-walkers, late in becoming 'dry' or bedwetting. The most common feedback we get from parents is 'I could always tell something wasn't quite right' – after all there is no better expert than a parent."

Q. What is the treatment?

"I offer a non-intrusive, drug-free Neural Stimulation Programmes designed to stimulate and then inhibit the reflexes that are hindering development. During the initial one-hour consultation, we take a case history and use standard neurological tests to look for evidence of retained reflexes and assess the function of the central nervous system. If there is sufficient evidence that the reflexes have been retained, then we put in place a programme of either skin stimulation techniques or movement exercises. These are performed at home, normally twice daily and should take no longer than five minutes. We then review progress and update the programme on a six-weekly basis. Change is often evident almost immediately."

Q. Why have I never heard about this before?

"I discovered NDT from personal experience after my five-year-old daughter was 'diagnosed' as dyslexic. She was really struggling to keep up at school and began to experience severe anxiety and upset tummies. The impact on our family was pretty devastating. At the time I was a practising homeopath, so began to explore our options. I came across NDT having been recommended by a cranial osteopath. The results were dramatic, immediate and life-changing..."

● Jo runs clinics in Thame and Marlow Bottom. To find out more, call **07802 614735**, email jo@jo-rodhouse.co.uk or visit www.jo-rodhouse.co.uk