

## **Myoreflextherapy for Children with Attention Deficit Syndrome**

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The Myoreflextherapy offers a wide range of therapeutic attachment for infants, who offer at the same time very motivated cooperation.

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 them. Myoreflextherapy as a supporting therapy already offers enormous possibilities.

Background of many accessory results, but also central focus of manifold and komplex symptoms are very frequently symmetrical disorders of the spine and of the muscle 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.

Muscle induced disorders of symmetry of the spine and chronic miss-strain can result in manifold symptoms. They lead to disorders in postural symmetry, postural asymmetry, conditions of pain- but they can also effect the vegetative system, causing sleep disorders, stomach disorders, general unrest and much more.

Through consequent treatment there first is the possibility of reorganisation processes of „defect“ regions in the brain, respectively brain regions which are switched off for reintgration. Further it is possible that other brain regions take over the function of such a switched off area.

Apart from the multiple representation there are mainly new alternative interconnections which bridge the shortage.

In the multiplicity of the „learning processes“ itself and it's different approaches and their interconnections there are inexhaustible possibilities. Stimulation of the right half of the brain and construction of non verbal learning processes make possible a plurality of new approaches.

Muscle induced dysregulations in the area of head and head joints also lead to periorbital symptoms and to asymmetries and difficulties in synchronisation concerning the function of the eye muscles. Smallest irritations frequently lead to focus delays.

Considering this background makes it significant to examine children with attention deficit syndrome more closely.

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 an alternative network.

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.

Literature:

Mosetter, K. & Mosetter, R. (2005). Die neue ADHS-Therapie. Den Körper entstressen. Ein Übungsbuch. Düsseldorf, Zürich: Walter/Patmos.