ALTERNATING HEMIPLEGIA OF CHILDHOOD (AHC)

What is AHC?

- A brain-related disorder that has episodes of paralysis (hemiplegia) on one side of the body
- These episodes can:
 - Occur with uncontrolled muscle and eye movements
 - Last for a few days to a few weeks
 - Occur multiple times in a month
- Hemiplegic episodes can lead to lifelong difficulties with motor skills, communication, behavior, and learning.

Delays and Difficulties

Children with AHC are mildly-moderately delayed in reaching their developmental milestones when compared to their typicallydeveloping peers in these areas*:

- Gross motor skills
- Fine motor skills
- Cognitive skills
- Speech and language skills

* please refer to the next page for more detailed information on each area of development

Characteristics of AHC

- Episodes typically begin occurring before 18 months of age
- Paralysis is most often on one side of the body, but can also be on both sides.
- Episodes of one-sided paralysis can transition to full-body paralysis.
- Episodes often include:
 - Repetitive, uncontrolled movements
 - o Misalignment of eyes
 - o Sudden shortness of breath
 - Spasms or uncontrollable muscle movements
- Symptoms may go away if the child falls asleep, but return soon after waking up.
- As a result of these episodes, children with AHC often have developmental delays (e.g., motor, speech-language) and/or have a learning disability.

One of the first steps in supporting a child with Alternating Hemiplegia of Childhood is to seek early intervention services. Talk to your pediatrician for referrals to the appropriate specialists.

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For more information, visit: http://ahckids.org/

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More Information on Delays and Difficulties

As previously mentioned, children with AHC may have delays in their gross motor, fine motor, speech and language, and cognitive development. This section aims to describe <u>specific</u> skills in these areas that can be delayed.

Gross motor skills:

- Head and Neck Support
- Trunk Support (e.g. sitting up independently)
- Crawling and Walking
- Feeding and Swallowing

Cognitive abilities:

- Attention
- Memory
- Executive Functioning (ability to think through decisions)

Fine motor skills:

- Pointing, Reaching, and Gesturing
- Holding objects (such as a spoon or toy)

Speech and language production:

- Babbling
- First words
- Putting multiple words together
- Vocabulary
- Reading
- Articulation (the way we move our mouth to make speech)
- Phonology (the way sounds go together to create words)

Treatment

A *transdisciplinary approach*, where clinicians from multiple fields plan treatment and work together to address similar issues, is the best way to help a child with AHC.

The following professionals are likely to work as a team to help a child with AHC:

- Physicians (pharmacology)
- Physical therapists
- Occupational therapists
- Speech-language pathologists
- Board-certified behavioral analysts
- Special education teachers
- Parents!

Class & Home Modifications

At school:

- Give clear and concise directions
- Repeat instructions often
- Use a consistent, predictable schedule or provide a visual representation
- Provide concrete (visible, physical) objects to support abstract concepts

At home:

- Speak in simple, but <u>grammatically</u> <u>correct</u> sentences
- Read picture books with your child and ask him or her questions about it
- Give your child choices for meals and play
- Encourage your child to use full sentences

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