



## Notes on early childhood reflexes and dyspraxia

These pre-set neurological movement patterns normally are integrated into the central nervous system. If retained beyond this period they cause unnecessary stress in relation to movement, learning and behaviour.

Retained reflexes underlie many childhood developmental problems such as impulsivity, attention deficit, hyper- and hypo-activity, certain traits of Asperger's syndrome etc. But most commonly they cause the sorts of deficits that one sees in a child labelled with dyspraxia.

There are many people, myself included, who have grown up with these reflex issues and have managed to learn and achieve without any further assistance. It is mainly of significance during early learning, and in its effects on socialising. Yet, as noted above, there is no denying that these retained reflexes can have the potential of causing unnecessary stress - stress that can result in undue tantrums or sometimes the opposite - a tendency to switch into a form of withdrawal.

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**Have a look and see whether some of the phenomena listed below ring true:**

**Moro reflex** - a tendency to over- or under-react in situations of fear. Normally integrated into CNS 2 to 4 months after birth.

Potential effects:

- a tendency to over-react or under-react to fears
- problems conforming to rules
- eyes become fixed in the periphery and unable to come to the midline for near-point focus work such as reading or writing
- poor stamina - may have cycles of hyperactivity followed by extreme fatigue
- sensitive to allergies

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**Tonic labyrinthine (TLR)** - normally integrated into CNS by 3 years

Potential effects:

- auditory confusion, especially under stress (creating impatience)
- delayed response
- poor sense of timing
- speech problems

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**Asymmetric tonic neck reflex (ATNR)** - normally integrated into CNS by age 4 - 6 months

Potential effects:

- poor pencil skills
- problems with fine motor skills such as learning to tie shoe-laces, do up buttons

**Spinal gallant** - normally integrated into CNS 3 to 9 months after birth

Potential effects:

- affects the ability to sit still - fidgeting and wriggling
  - child does not like tight clothing - labels or waistbands may 'annoy'
  - sensitive back - child may not like back being touched
  - poor concentration and short-term memory - thus making it difficult to take in and process information
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**Symmetric tonic neck reflex (STNR)** - normally integrated into CNS by age 9-11 months

Potential effects:

- can hinder the ability to crawl
  - posture will be effected by any movement of the head - esp. forward and back may create tension in head and shoulders
  - "W" position when sitting on the floor
  - when sitting in a chair tends to stretch legs out and tip head back
  - rooting/sucking reflex - normally integrated 3 to 4 months after birth
  - difficulty in chewing and swallowing
  - tendency to protrude tongue when concentrating
  - likes being EXTRA close
  - often tired after eating - likes to just sit or lie down after a meal
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**Plantar/Babinsky** - normally integrated by age 12 to 24 months

Potential effects:

- poor gross motor skills
  - can affect the speed of running and walking
  - dislikes wearing shoes
  - fanning of toes when thinking
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**Palmar** - normally integrated into the CNS 1 to 3 months after birth

Potential effects:

- poor writing skills
  - speech difficulties especially articulation
  - may make movements with mouth or tongue when trying to write or draw
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**Ocular-motor** - begins to develop 4 weeks after conception - fully developed by 5 to 9 months after birth

Potential effects:

- poor posture when reading and writing
- fatigue after reading
- eyes water easily
- may screw up eyes when watching tv earlier than other people might

**Vestibular** - this has many traits that are similar to the reflex effects - begins developing 9 weeks after conception - present at birth - remains throughout life

Potential effects:

- gives up easily on tasks
  - makes 'silly' mistakes
  - poor organisational skills - scattered behaviour
  - difficulty in copying from the board or any activity that involves the rapid transition from near to far vision
  - may mask emotions but any small trigger might cause an outburst
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I know these are just lists, but they do help to provide a picture of the sorts of daily life activities that are influenced by the retention of these reflexes

So check these possibilities out, since it would be sad for everyone, in fact, if a child were judged and perhaps punished for 'bad behaviour'. These behaviours are involuntary and once we have become aware, things can change, without medication and further labelling. It may take some time, but there are exercises that really can change these patterns within a few months to a year.