# **Guide for Identifying Disabilities**

This chapter has a chart, 7 pages long, to help you find out **what disability a child possibly has,** and **where to look up that disability in this book.** 

In the **first column** of the chart, we list the more noticeable signs of different disabilities. Some of these signs are found in more than one disability. So in the **second column** we add other signs that can help you tell apart similar disabilities. The **third column** names the disability or disabilities that are most likely to have these signs. And the **fourth column** gives the page numbers where you should look in this book. (Where it says *WTND* and then a number, this refers to the page in *Where There Is No Doctor*.)

If you do not find the sign you are looking for in the first column, look for another sign. Or check the signs in the second column.

This chart will help you find out which disabilities a child might have. It is wise to look up each possibility. The first page of each chapter on a disability describes the signs in more detail.

**IMPORTANT:** Some disabilities can easily be confused. Others are not included in this book. When you are not sure, try to get help from someone with more experience. At times, special tests or X-rays may be needed to be sure what the problem is.

Fortunately, **it is not always necessary to know exactly what disability a child has.** For example, if a child has developed weakness in his legs and you are not sure of the cause, you can still do a lot to help him. Read the chapters on disabilities that cause similar weakness, and the chapters on other problems that the child may have. For this child, you might find useful information in the chapters on polio, *contractures*, exercises, braces, walking aids or wheelchairs, and many others.

**Sometimes it is important to identify the specific disability.** Some disabilities require specific medicines or foods—for example, night blindness, rickets, or hypothyroidism. Others urgently need surgery—for example, spina bifida or cleft lip and palate. Others require special ways of doing *therapy* or exercises—for example, cerebral palsy. And others need specific precautions to avoid additional problems—for example, spinal cord injury and leprosy. For this reason, it helps to learn as much about the disability as you can. Whenever possible, seek information and advice from more experienced persons. (However, even experts are not always right. Do not follow anyone's advice without understanding the reasons for doing something, and considering **if** and **why** the advice applies to the individual child.)



In addition to this chart, 2 other guides for identifying disabilities are in this book: GUIDE FOR IDENTIFYING CAUSES OF JOINT PAIN, p. 130. GUIDE FOR IDENTIFYING AND TREATING DIFFERENT FORMS OF SEIZURES (EPILEPSY), p. 240.

## **GUIDE FOR IDENTIFYING DISABILITIES**

#### SIGNS PRESENT AT OR SOON AFTER BIRTH

IF THE CHILD HAS THIS	AND ALSO THIS	HE MAY HAVE	SEE PAGE
born weak or 'floppy'	<ul> <li>often a difficult birth</li> <li>delayed breathing</li> <li>born blue and limp</li> <li>or born before 9 months and very small</li> </ul>	<ul> <li>cerebral palsy</li> <li>developmental delay</li> </ul>	87 277
slow to begin to lift head or move arms	<ul> <li>round face</li> <li>slant eyes</li> <li>thick tongue</li> </ul>	<ul> <li>Down syndrome</li> <li>hypothyroidism</li> </ul>	279 282
	small head, or small top part of head	microcephalia (small brain) mental slowness	278
$C^{-0}$	none of above	developmental delay for other reasons	289
does not suck well or chokes	<ul><li>pushes milk back out with tongue</li><li>or will not suck</li></ul>	cerebral palsy	87
on milk or food	<ul> <li>cannot suck well</li> <li>chokes or milk comes out nose</li> </ul>	<ul> <li>check for cleft palate</li> <li>possibly severe mental slowness</li> </ul>	120 277
one or both	no other signs	club foot	114
feet turned in or back	<ul> <li>hands weak, stiff or clubbed</li> <li>some joints stiff, in bent or straight positions</li> </ul>	arthrogryposis	122
wind been	dark lump on back	spina bifida	167
'bag or dark lump on back	<ul> <li>clubbed feet</li> <li>or feet bend up too far</li> <li>or feet lack movement and feeling</li> </ul>	spina bifida (sometimes no 'bag' is seen, but foot signs may be present)	167
head too big; keeps	may develop:	hydrocephalus (water on the brain)	169
growing	<ul> <li>eyes like</li> <li>'setting sun'</li> <li>increasing mental</li> </ul>	At birth, this is usually a sign of spina bifida.	167
	<ul><li>and/or physical disability</li><li>blindness</li></ul>	in an older child, possibly tapeworm in brain, or a brain tumor	<b>WTND</b> 143
upper lip and/or roof of mouth incomplete	<ul> <li>difficulty feeding</li> <li>later, speech difficulties</li> </ul>	cleft lip (hare lip) and cleft palate	120
birth deformities, defects, or missing parts	(may or may not be associated with other problems)	See birth defects amputations Down syndrome developmental delay	119 227 279 287
abnormal stiffness or position	<ul> <li>from birth</li> <li>some muscles weak</li> <li>some joints stiff</li> <li>head control and mind normal</li> </ul>	arthrogryposis	122
J. V	<ul> <li>Muscles tighten more in certain positions.</li> <li>may grip thumb tightly</li> </ul>	spastic cerebral palsy Note: muscle tightness (spasticity) usually does not appear until weeks or months after birth.	89

IF THE CHILD HAS THIS	does not move the arm much	HE MAY HAVE	SEE PAGE ↓ 127
in strange position	holds it like this	shoulder during birth) hemiplegic (one-sided)	
	leg on same side often affected	cerebral palsy	90
dislocated hip at birth	On opening legs like this, leg 'pops' into place or does not	dislocated hip from birth loften both hips) may be present with:	155
differently, shorter; flap covers part of vulva	open as far.	<ul> <li>spina bifida</li> <li>Down syndrome</li> <li>arthrogryposis</li> <li>Also see p. 156.</li> </ul>	167 279 122
slow to respond to sound or to look at things	(may be due to one or a combination of problems)	Check for signs of: • developmental delay • cerebral palsy • blindness • deafness	290 87 243 257

## SIGNS IN CHILDREN

slower than other children to do things (roll,	slow in most or all areas:	Developmental delay, check for signs of:	287
sit, use hands, show interest, walk, talk)	<ul> <li>round face</li> <li>slant eyes</li> <li>single deep crease in hand</li> </ul>	Down syndrome	279
	<ul> <li>movements and response slow</li> <li>skin dry and cool</li> <li>hair often low on forehead</li> <li>puffy eyelids</li> </ul>	hypothyroidism	282
	has continuous 🦷 🎢	cerebral palsy	87
	strange movements or positions, and/or stiffness	also check for: • blindness • deafness • malnutrition	243 257 320
does not respond to sounds, does not begin to speak by age 3	may respond to some sounds but not others Check for ear infection (pus).	<ul> <li>Check for</li> <li>deafness</li> <li>severe developmental delay (with or without dealness)</li> <li>severe cerebral palsy</li> </ul>	257 283 87
does not turn head to look at things, or reach for things until they touch her	Eyes may or may not look normal.	<ul> <li>blindness and/or</li> <li>severe mental slowness</li> <li>severe cerebral palsy</li> </ul>	243 277 87
Eyelids or eyes make quick, jerky, or strange movements.	Check for one or a combination of these	<ul> <li>blindness</li> <li>seizures</li> <li>too much medicine</li> <li>cerebral palsy</li> <li>other problems affecting or damaging the brain</li> </ul>	243 233 15 87 14

DISABLED VILLAGE CHILDREN

IF THE CHILD HAS THIS	AND ALSO THIS	HE MAY HAVE	SEE PAGE
All or part of body makes strange, uncontrolled movements.	<ul> <li>begins suddenly, child may fall or lose consciousness</li> <li>child is normal (or more normal) between seizures</li> </ul>	epileptic seizures (Pattern varies a lot in different children—or even in the same child.)	233
	slow sudden, or rhythmic movements; fairly continous (except in sleep); no loss of consciousness	athetoid cerebral palsy ( <b>Note:</b> Seizures and cerebral palsy may occur in the same child.)	89
Body, or parts of it, stiffens when in certain positions: poor control of some or all movements.	<ul> <li>different positions in different children</li> <li>Body may stiffen backward and legs cross.</li> </ul>	spastic cerebral palsy	89

## PARTS OF BODY WEAK OR PARALYZED

floppy or limp weakness in part or all of body no loss of feeling in affected parts no spasticity (muscles that tighten without control)	<ul> <li>usually began with a 'bad cold' and fever before age 2</li> <li>irregular pattern of parts weakened. Often one or both legs—sometimes arm. shoulder, hand. etc.</li> </ul>	polio	59
normal at birth	<ul> <li>begins little by little and steadily gets worse</li> <li>about the same on both sides of body</li> <li>often others in the family also have it</li> </ul>	<ul> <li>muscular dystrophy</li> <li>muscular atrophy</li> </ul>	109 112
		tick paralysis	not in book
	<ul> <li>Paralysis starts in legs and moves up; may affect whole body.</li> </ul>	Guillain-Barré paralysis (usually temporary)	62
	• or pattern of paralysis variable	paralysis from pesticides, chemicals, foods (lathyrism)	15
	lump on back (See p. 57.)	tuberculosis of spine	165
floppy or limp weakness usually some loss of feeling	<ul> <li>one or both hands or feet</li> <li>develops slowly in older child. Gets worse and worse.</li> </ul>	leprosy	215
	<ul> <li>born with bag on back (Look for scar.)</li> <li>feet weak, often without feeling</li> </ul>	spina bifida	167
	<ul> <li>usually from back or neck injury</li> <li>weakness, loss of feeling below level of injury</li> <li>may or may not have muscle spasms</li> <li>loss of bladder and bowel control</li> </ul>	spinal cord injury paraplegia (lower body) quadriplegia (upper and lower body)	175
	injury to nerves going to one part of body	hand weakness sometimes caused by using crutches wrongly	393
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IF THE CHILD HAS THIS	AND ALSO THIS	HE MAY HAVE	SEE PAGE
weakness usually with stiffness or spasticity of muscles no loss of feeling	usually affects body in one of these patterns 1. 2. 3. 3. one side both legs whole body	<ul> <li>1: cerebral palsy (or stroke, usually older persons)</li> <li>2 and 3: cerebral palsy</li> <li>occasional other causes</li> </ul>	87
	Muscles tighten and resist movement because of joint pain.	JOINT PAIN (many causes—see below)	130

#### JOINT PAIN

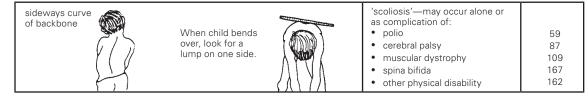
one or more painful joints	<ul> <li>begins with or without fever</li> <li>gradually gets worse, but there are better and worse periods</li> </ul>	juvenile arthritis	135
		other causes of joint pain See chart on joint pain.	130

## WALKS WITH DIFFICULTY OR LIMPS

dips to one side with each step	one leg often weaker and shorter	Check for: • polio • cerebral palsy • dislocated hip	59 87 155
	<ul><li>usually begins age 4 to 8</li><li>may complain of knee pain</li></ul>	damaged hip joint	157
walks with knees pressed together	<ul><li>muscle spasm and tightness</li><li>upper body little affected</li></ul>	spastic diplegic or paraplegic cerebral palsy	87
stands and walks with knees together and feet	feet less than 3" apart at age 3	normal from ages 2 to 12	113
apart no other problems	feet more than 3" apart at age 3	knock-kneed	114
walks awkwardly with one foot tiptoe	muscle spasms and poor control on that side. Hand on that side	hemiplegic cerebral palsy	90
	often affected.	(stroke in older persons)	not in book
walks awkwardly with knees bent and	<ul> <li>jerky steps, poor balance</li> <li>sudden, uncontrolled movements that may cause falling</li> </ul>	athetoid cerebral palsy	89
legs usually separated	<ul><li>slow 'drunken' way of walking</li><li>learns to walk late and falls often</li></ul>	<ul> <li>poor balance (ataxia)— often with cerebral palsy</li> <li>Down syndrome</li> <li>hypothyroidism</li> </ul>	90 279 282
walks with both feet tiptoe	<ul> <li>weakness, especially in legs and feet</li> <li>gradually gets worse and worse</li> </ul>	muscular dystrophy	109
	legs and feet stiffen (spasticity of muscle)	spastic cerebral palsy	89
	no other problems	normal? (some normal children at first walk on tiptoes)	292

IF THE CHILD HAS THIS	AND ALSO THIS	HE MAY HAVE	SEE PAGE
walks with hand(s) pushing	week thich musels		▼
thigh(s) or with knee(s) bent back	difficulty lifting leg	<ul> <li>polio</li> <li>muscular dystrophy</li> <li>arthritis (joint pain)</li> <li>other causes of muscle weakness</li> </ul>	59 109 135 112
Foot hangs down weakly (foot drop).	Child lifts foot high with each step so that it will not drag.	<ul> <li>polio</li> <li>spina bifida</li> <li>muscular dystrophy</li> <li>muscular atrophy</li> <li>nerve or muscle injury</li> <li>other cause opf weakness</li> </ul>	59 167 109 112 35 139
dips from side to side with each step	due to muscle weakness at side of hips, or double dislocated hips, or both	<ul> <li>polio</li> <li>cerebral palsy</li> <li>spina bifida</li> <li>Down syndrome</li> <li>muscular dystrophy</li> <li>child who stays small</li> <li>arthrogryposis</li> <li>dislocated hips (may occur with any of the above)</li> </ul>	59 87 167 279 109 126 122 155
walks with one (or both) hip, knee, or ankle that stays bent	joints <b>cannot</b> be slowly straightened when child relaxes (see page 79).	<ul> <li>contractures (shortened muscles)</li> <li>joined or fused joints may be secondary to:</li> <li>polio</li> <li>joint infection</li> <li>other causes</li> </ul>	77 80 59 131 231
	Joints <b>can</b> gradually be straightened when child relaxes.	spasticity, often cerebral palsy	89
Knees wide apart	under 18 months old	often normal	113
when feet together (bow legs). Waddles or dips from side to side (if he walks).	<ul> <li>Any combination of these:</li> <li>Joints look big or thick.</li> <li>Child is short for age.</li> <li>Bones weak, bent, or break easily.</li> <li>Arms and legs may seem too short for body, or 'out of proportion'.</li> <li>Belly and butt stick out a lot.</li> </ul>	Consider: • rickets (lack of vitamin D and sunlight) • brittle bone disease • children who stay very short (dwarfism) • hypothyroidism • Down syndrome • dislocated hips	125 125 126 282 279 155 113
	no pain or other problems	normal in many children	113
flat feet	<ul><li>Pain may occur in arch of foot.</li><li>Deformity may get worse.</li></ul>	may be problems in: • cerebral palsy • polio • spina bifida • Down syndrome	87 59 167 279

#### **BACK CURVES AND DEFORMITIES**



IF THE CHILD HAS THIS sway back	AND ALSO THIS • belly often sticks out • may be due to contractures here, or weak stomach muscles	HE MAY HAVE 'lordosis'—may occur in: • polio • spina bifida • cerebral palsy • muscular dystrophy • Down syndrome • hypothyrodism • child who stays small • many other disabilities	SEE PAGE ↓ 59 167 87 109 279 282 126 161
hard, sharp bend of or bump in	<ul> <li>starts slowly and without pain</li> </ul>	<ul> <li>'kyphosis'—often occurs with:</li> <li>arthritis</li> <li>spinal cord injury</li> <li>severe polio</li> <li>brittle bone disease</li> </ul>	136 175 59 125
backbone	<ul><li>often family history of tuberculosis</li><li>may lead to paralysis of lower body</li></ul>	tuberculosis of the spine	165
dark soft lump over backbone	<ul> <li>present at birth</li> <li>sometimes only a soft or slightly swollen area over spine</li> <li>weakness and loss of feeling in feet or lower body</li> </ul>	spina bifida ('sack on the back')	167

## **OTHER DEFORMITIES**

missing body parts	born that way	born with missing or incomplete parts	121
	accidental or surgical loss of limbs (amputation)	amputations	227
	gradual loss of fingers, toes, hands, or feet, often in persons who lack feeling	<ul> <li>osteomyelitis (bone infections)</li> <li>sometimes seen with:</li> <li>leprosy (hands or feet)</li> <li>spina bifida (feet only)</li> </ul>	159 215 167
hand problems (For hand problems from birth, see p. 305.)	<ul> <li>floppy paralysis (no spasticity)</li> <li>without care may lead to contractures so that fingers cannot be opened</li> </ul>	<ul> <li>may occur with:</li> <li>polio</li> <li>muscular dystrophy</li> <li>muscular atrophy</li> <li>spinal cord injury (at neck level)</li> <li>leprosy</li> <li>damage to nerves or cords of arms</li> <li>All may lead to contractures.</li> </ul>	59 109 112 175 215 127
	<ul> <li>uncontrolled muscle tightness (spasticity)</li> <li>strange movements or hand in tight fist</li> </ul>	spastic cerebral palsy may lead to contractures	89
	burn scars and deformities	burns	231
clubbing or bending of feet	may begin as floppy weakness and become stiff from contractures, if not prevented	may occur with many physical disabilities, including:	89
(For club feet from birth, see p. 114.)		<ul> <li>polio</li> <li>cerebral palsy</li> <li>spina bifida</li> <li>muscular dystrophy</li> <li>arthritis</li> <li>spinal cord injury</li> </ul>	89 87 167 109 139 175

## DISABILITIES THAT OFTEN OCCUR WITH OR ARE SECONDARY TO OTHER DISABILITIES

Developmental delay:	caused by slow or	often seen in:	
child slow to learn to use her body or develop	incomplete brain function or by severe physical disability, or both	<ul> <li>mental slowness</li> <li>cerebral palsy</li> <li>severely or multiply disabled children</li> </ul>	277 87 283
basic skills	caused by overprotection: treating children like babies when they could do more for themselves	some delay can occur with almost any disability	287
Contractures joints that no longer straighten because muscles have shortened Joints will not straighten.	<ul> <li>usually due to muscle weakness or spasticity</li> <li>Often, muscles that pull a joint one way are much weaker than those that pull it the other way (muscle imbalance).</li> </ul>	often secondary to: polio cerebral palsy spina bifida arthritis muscular dystrophy Erb's palsy amputations leprosy	59 87 167 135 109 127 227 215
	sometimes due to scarring from burns or injuries	burns	231
Behavior problems	may come from: • brain damage • difficulty understanding things • overprotection • difficult home situation	<ul> <li>behavior problems common with:</li> <li>mental slowness</li> <li>seizures (epilepsy)</li> <li>cerebral palsy</li> <li>and for emotional reasons,</li> </ul>	277 233 87
Cura Cura Cura Cura Cura Cura Cura Cura	(Some children with epilepsy from brain damage may pull out hair, bite themselves, etc.)	with: • spinal cord injury • muscular dystrophy • deafness • learning disability	175 109 257 365
Slow to learn certain things only; otherwise intelligent.	<ul><li>often over-active or nervous</li><li>sometimes behavior problems</li></ul>	learning disability	365
Speech and communication problems	<ul> <li>often, but not always, due to deafness or mental slowness (or both)</li> <li>Some children can hear well and are</li> <li>but still cannot speak.</li> </ul>	may occur with: • deafness • developmental delay • cerebral palsy • Down syndrome • hypothyroidism • children who stay small • brittle bone disease • cleft lip and palate (Deafness may occur together with these and other disabilities.)	257 287 87 279 282 126 125 120
other problems that sometimes occur <b>secondary</b> to other	Main disability	Common secondary disabilities <ul> <li>blindness</li> </ul>	243
disabilities	cerebral palsy	<ul> <li>deafness</li> <li>seizures</li> </ul>	243 257 233
(Some of these we have already included in this chart.)	• many disabilities with paralysis	• spinal curve	161
	<ul> <li>persons who have lost feeling: leprosy, spinal cord injury, spina bifida</li> </ul>	<ul> <li>pressure sores</li> <li>osteomyelitis (bone infection)</li> <li>loss of urine and bowel control</li> </ul>	195 159 203