



IHMA KERALA
WEBINAR HOPE 2020

IHMA

Indian Homoeopathic Medical Association

HOPE

HELPING ONE ANOTHER FOR PROFESSIONAL EXCELLENCE

UPHOLDING THE LOCKDOWN PROTOCOL AND AT THE
SAME TIME JUSTIFYING IT'S MISSION TO IMPART PREMIUM
KNOWLEDGE TO THE FRATERNITY,
IHMA PRESENTS A SERIES OF WEBINARS BY THE STARS WHO
ADORN THE GALAXY OF HOMOEOPATHY.

IHMA KERALA WEBINAR DAY 7

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IDENTIFICATION AND MANAGEMENT OF LD IN OUR CLINIC/IN KIDS/ DAILY PRACTICE



SPEAKER - DR REMYA R

BHMS FROM ANSSHMDK KURICHY, KOTTAYAM.
M.PHIL BEHAVIOURAL MEDICINE AND REHABILITATION
FROM SCHOOL OF BEHAVIOURAL SCIENCES, MG UNIVERSITY
KOTTAYAM.
OWN CLINIC "CHALLENGE" HOMOEOPATHY CHILD DEVELOPMENT
CENTER. AT THIRPUNITHURA
WORKING IN SCHOOLS AS PAEDIATRIC COUNSELOR SINCE LAST 4
YEARS.



HOPE

3.30 PM to 4.30 PM

EVENT HOSTED BY IHMA PALAKKAD DISTRICT

Call - 9847538487, 9447879271, 9961999102

Identifying Learning Disability in Clinic

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Dr. Remya R BHMS M.Phil
Behavioural Medicine And Rehabilitation

Can we improve learning by
taking medicines... is it a disease?

Why not ?

SET REACHABLE GOALS

L e a r n i n g

Learning is often **defined** as a relatively lasting change in behavior that is the result of experience.

- Intelligence - an IQ of 90-110
- Attention –sustained attention
- Language – to communicate
- Emotion - stability
- Memory – retention- shot term-long term
- Thinking- organization, problem solving, creative thinking, critical thinking etc

Information processing DIFFICULTIES

Takes in information

- Uses information
 - Stores the information in memory
 - Retrieves the information from memory
 - Expresses the information

WHO guidelines

- Specific learning disorders are a group of **developmental neurobehavioral disorders** coming under the mental health problems

How do LD cases present in clinic?

- Unidentified with common chronic cases.

Referred by Teachers/Parents/Fellow doctors

- Incomplete notes and absenteeism.
- Severe anxiety approaching exams/unable to complete exams
- School bunking.
- Resistance to learn
- AggressionDepression etc

Scholastic backwardness

- While case taking reveals the difficulty **ONLY** for learning..otherwise very intelligent very capable.

Intelligence and LD

MR?

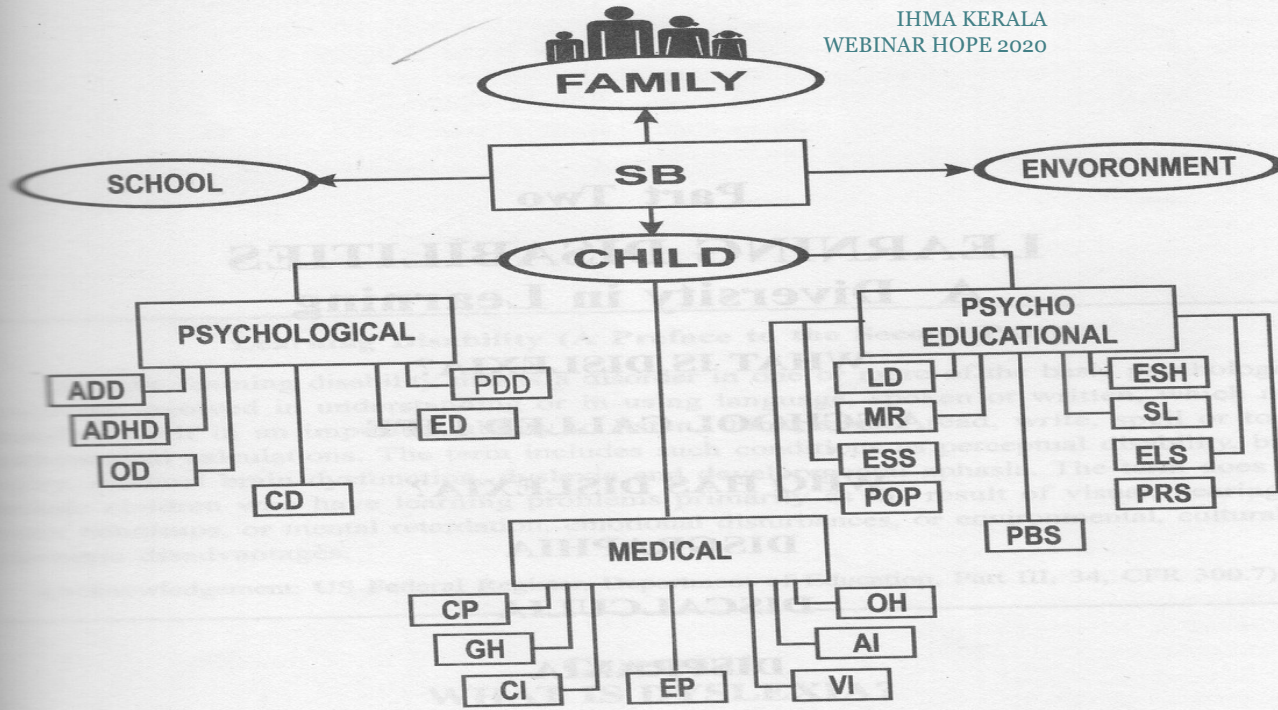
Slow learners 80-90

LD 90-110 **NORMAL**

ADHD

ASD

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- | | |
|--|---|
| ADD - Attention Deficit Disorder | VI - Visual Impairment |
| ADHD - Attention Deficit Hyperactivity Disorder | AI - Auditory Impairment / Speech Impairment |
| OD - Obsessive Disorders | OH - Orthopaedic Handicap |
| CD - Conduct Disorder | LD - Learning Disabilities |
| ED - Emotional Disorder | MR - Mental Retardation |
| PDD - Pervasive Developmental Disorders | ESS - Erratic Study Skills |
| CP - Cerebral Palsy | POP - Poor Opportunities |
| GH - General Health | ELS - Erratic Learning Style |
| CI - Chronic Illness | SL - Slow Learner |
| EP - Epilepsy | ESH - Erratic Study Habits |
| | PBS - Poor Basic Skills |
| | PRS - Poor Readiness Skills |

Figure 34

MR

- **Draw a man test**

Show the difficulty in all spectrums not learning alone

- MR --boderline
 - **Mild 70-80**
 - Moderate
 - Severe
-
- They need special education, can be made to learn and earn a living by themselves.

WHAT IT ISN'T SLD

- **NOT** visual, hearing, or motor disabilities/impairment.
- **NOT** mental retardation or lower IQ
- **NOT** DUE TO emotional disturbance
- **NOT** DUE TO, environmental cultural, or economic disadvantage.

DSM-V

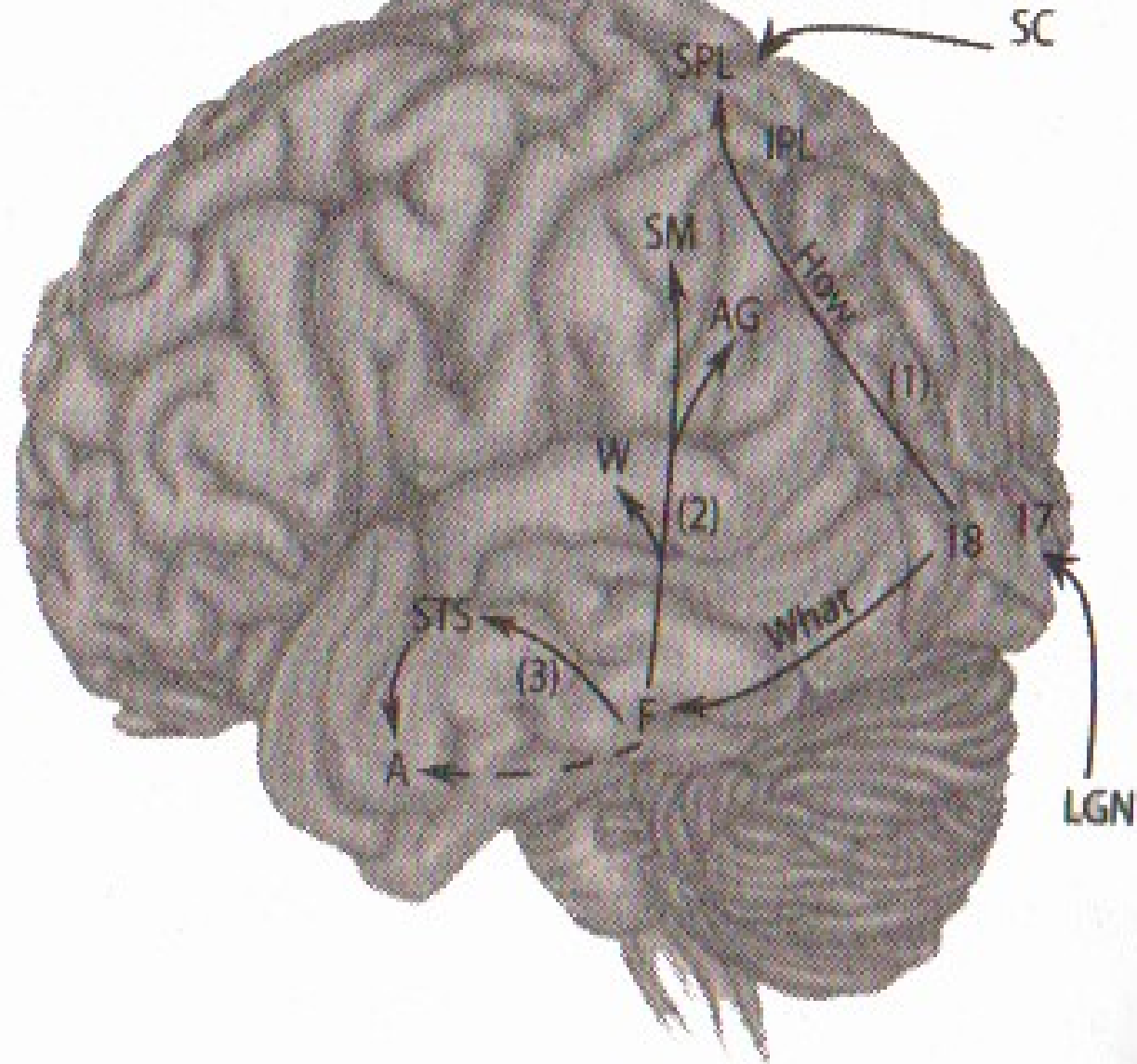
Specific learning disorder are deficits that impact academic achievement.

The diagnosis requires persistent difficulties in reading, writing, arithmetic, or mathematical reasoning skills during formal years of schooling.

- Current academic skills must be significantly below the average range of scores in culturally and linguistically appropriate test of reading, writing, or mathematics.

Characteristics of SLD

- **Visual Processing**
- Auditory Processing
- **Processing Speed**
- Receptive Language difficulties
- Expressive language disorders



Different kinds of information travel through different parts of the brain. That's why some information is learned quickly and easily while other information is much more difficult.(The Tell Tale Brain, Dr Ramachandran)

So where do SLD stand
One-sided disease

They are purely functional
deficits... No doubt
homoeopathic medicines
can cure functional errors

Symptoms

Inaccurate or slow and effortful reading... **dyslexia may be accompanied with poor written expression, and written expression without **clarity****

It may include difficulties remembering number facts, or inaccurate mathematical reasoning... **dyscalculia**

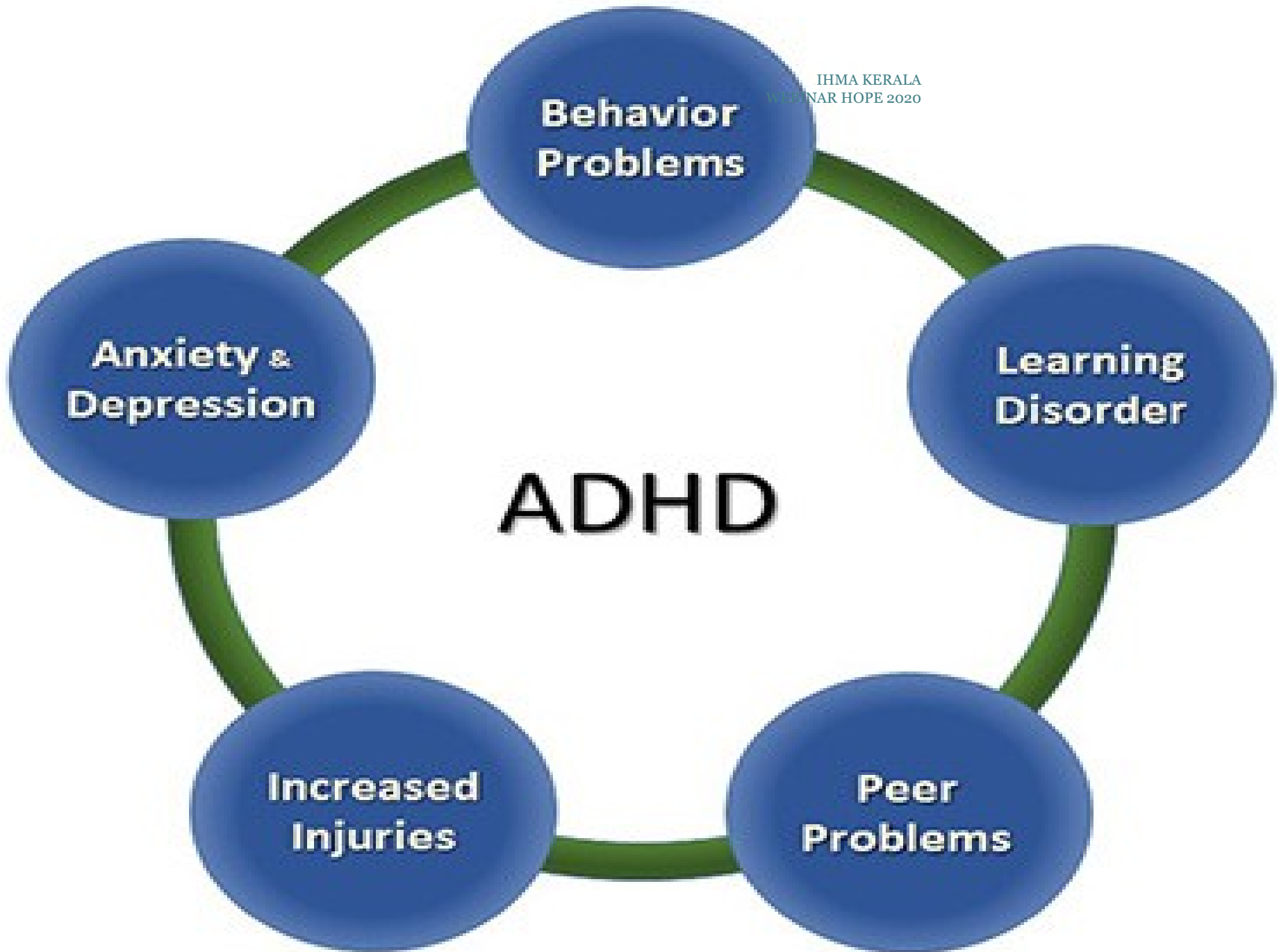
- Unable to write better or faster. Difficulty copying from board. Confuses or reverts letters. May make mistakes in spelling, miss letters or add letters . Unable to keep in lines.
....**dysgraphia**

Unable to freely move in space. Bump on someone or something usually. Gross motor coordination **affected...dyspraxia**

ADD

- Silent disability

Underperformance without aggression or expression



**Behavior
Problems**

**Learning
Disorder**

**Anxiety &
Depression**

ADHD

**Peer
Problems**

**Increased
Injuries**

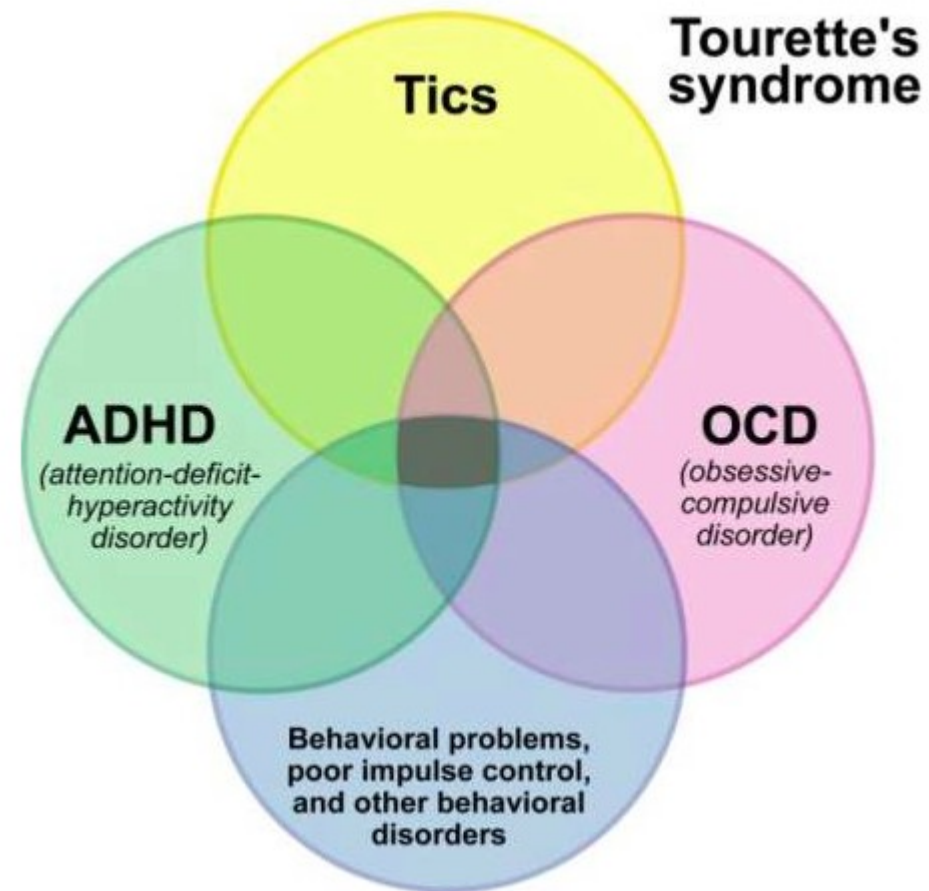
Oppositional Defiant Disorder

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Tourette Syndrome

This usually appears in childhood, and is characterized by **multiple physical (motor) tics and at least one vocal (phonic) tic. These nervous tics and repetitive mannerisms** may include eyeblinks, facial twitches, grimacing, or frequently clearing the throats. Although this syndrome is rare, it is common for people with Tourette syndrome to have ADHD and/or LD.



autism SOS

SOCIAL AVOIDANCE
OBSESSION & REPETITION
SPEECH DELAYS

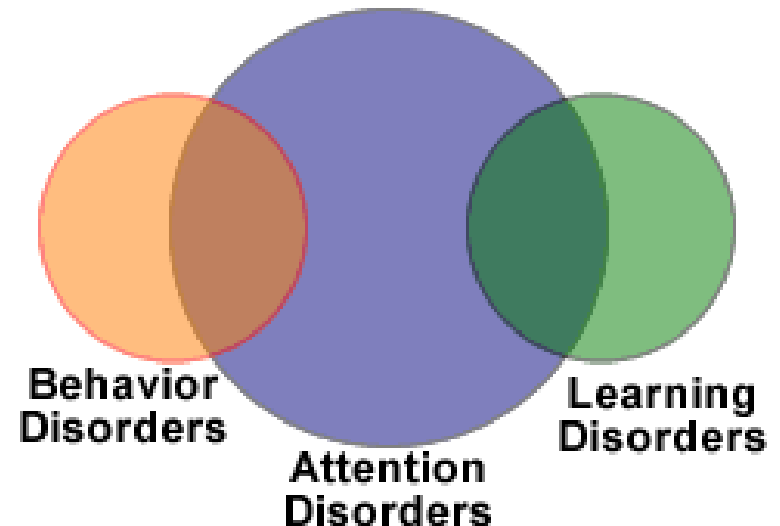
See signals? Start screening.



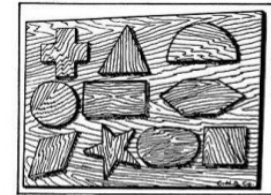
© 2011 by the American Academy of Pediatrics
www.aap.org

ASSESSMENT DRIVES TREATMENT

- ASSESSMENT OF **STRENGTHS** AND WEAKNESSES
- **NEUROCOGNITIVE**
- **PSYCHOSOCIAL**



ASSESSMENTS



- IQ TESTS, draw a man
- Seguin form board
- DST- Developmental screening test
- VSMS- Vineland social maturity scale
- NIMHANS Index for Specific Learning Disability
- DSM V, ICD10 criteria
- ADHD checklist
- Gillmann autism checklist

MANAGEMENT OF SLD a multimodal approach

Screening, Prevention, Early detection ,
Remediation by Homoeopathic
Medicines, Supportive Therapies like
speech, OT, BMT & Remedial Education..
VAKT LEARNING

Remedial measures

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- Individualized remedial protocol
 - Level of intervention has to be assessed first
 - Start from present level of child
 - Life skills training
 - Awareness of alphabets
 - Phonemic awareness training
 - Training to blend alphabets to words
 - Training in syllabication
 - Reading practice

ESPECIALLY FOR **ESL** KIDS

Remedial measures

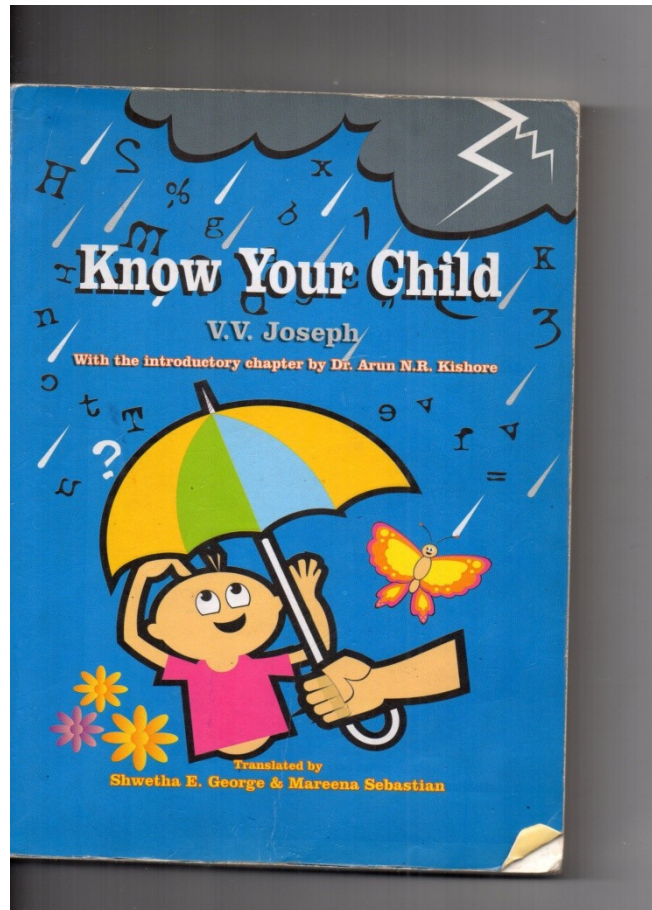
- Fine motor coordination exercise
- Activities to form number concepts
- Activities to enhance computational skills
- Exercises to improve attention
- Yoga therapy to improve attention and concentration
- Speech therapy skills to improve language

PSYCHOLOGICAL INTERVENTIONS

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Acceptance & unconditional positive regards to the child

- Firmness while dealing with the child
- Clarity of expression
- Clear instruction
- Give responsibilities to child
- Give him winning experience
- Keep realistic expectations
- Be a model for the child
- Listen to child when he talks
- Counseling of parent, child, sibling



Reading

1. Is he reading slowly and by tracing his finger on the page?
2. Is he reading each word separately?
3. Does he omit words or letters consistently?
4. Does he insert random words or letters consistently?
5. Does he substitute words or letters consistently?
6. Does he read words as they are written? For eg: 'But' is pronounced the same way as 'put'.
7. Does reversal of letters occur?
8. Does he omit punctuations?
9. Does he get confused with letters of similar shape?
10. Does he find it difficult to grasp the meaning of what he's read?
11. Does he get confused when reading new words?

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Writing

1. Does he make mistakes in letters of same shape?
2. Does reversal of letters happen?
3. Does he find it difficult to hold pencils?
4. Is he unable to draw neatly in spite of using scale and pencil?
5. Does he omit words while copying them?
6. Does he find it difficult to write similar-sounding words during dictation?
7. Does he add words or letters while copying?
8. Does he substitute words while copying or during dictation?
9. Does he get confused between writing capital and small letters?
10. Is his handwriting illegible?

Mathematics

1. Is he unable to comprehend mathematical concepts?
2. Do numbers get swapped while he writes them down?
3. Does he get confused with the direction of doing calculations?
4. Does he make mistakes while transferring the answers from the working column to the main column?
5. Does he make mistakes with left and right?
6. Does he add or omit numbers?
7. Is he unable to work out steps in a mathematical problem?
8. Is he unable to recollect and apply multiplication tables and formulae?
9. Time, date, week and concepts of yesterday and tomorrow – is he having confusion with these?
10. Does he find it difficult to recognize shapes?
11. Is it difficult for him to imagine 3-D shape of two dimensional pics?

Spellings

1. Reversal, eg: b-d.
2. Transpositions, eg: was-saw.
3. Insertion, eg: tiger-tieger.
4. Omission, eg: lovely-lovly.
5. Inversion, eg: f-t.
6. Substitution, eg: horse-house.
7. Uneven spacial arrangement between letters and words.
8. Erratic letter-size relationship.

Check List 5

Questionnaire C

	Yes	No	
1. Does he have difficulty in recognizing letters?			
2. Can he recognize the sounds of the letters?			
3. Does he have difficulty in reading unfamiliar words?			
4. Does he read slowly, word by word?			
5. Does he make any of the following mistakes while reading in any language?			
a. Addition of letters			
b. Omission			
c. Substitution			
d. Reversal of words or letters.			
6. Does he find it difficult to grasp the meaning of what he's read?			
7. Is he disinterested in reading?			
8. Is his standard of reading below than that of a child of his age and intelligence?			
9. Does he make spelling mistakes repeatedly?			
10. Does he write according to the sounds produced?			
11. Is his standard of spelling below than that of a child of his age and intelligence?			
12. Is his handwriting illegible?			
13. Is he unable to write on the line?			
14. Does he find it difficult to understand mathematical concepts?			
15. Is his standard of arithmetics below than that of a child of his age and intelligence?			
16. Does he show difficulties in writing-related activities?			
17. Is he unable to recognize different shapes?			
18. Is he more skillful with his left hand?			

	Yes	No	Not Sure
19. Can he use both his hands with equal ease?			
20. Do numbers get reversed when he writes them? (18-81)			
21. Is he unable to understand sounds during dictation? (pig-big)			
22. Is he unable to memorise date, time, month and year?			
23. Is he unable to recollect the multiplication tables?			
24. Did he speak late?			
25. Is he unable to recollect and apply grammar rules?			
26. Is he unable to understand oral instructions?			
27. Does he have speech disorders?			
28. Does he show inattentiveness in studying?			
29. Is he unable to complete activities that he started?			
30. Does he keep changing from one activity to another?			
31. Is he easily distracted by external stimuli?			
32. Does he start acting without planning often?			
33. Does he make mistakes often by reacting impulsively?			
34. Do you feel that he has low self-control?			
35. Is he a child with low self-esteem and self-confidence?			
36. Does he have difficulties in using pencil and scale?			
37. Does he have difficulties in kick, throw or catch the ball?			
38. Does he have difficulties in recognizing through touch?			
39. Does he have difficulties in tying shoelaces or putting buttons?			
40. Does he make a mess while eating?			
41. Does he get confused when writing compound letters (kootaksharam) in Malayalam?			
42. Does he find it difficult to use symbols in Malayalam?			

Medicines that helped

Potency that helped is mostly higher one like 1m, 10m, 50m etc

Chronic case taking+ LD assessment

I never repeated it too frequently..unless I see a relapse.

Mental and physical Generals and characteristics taken.

Nosodes like tuberculinum, medorrhinum, carcinocinum,

Calc carb, Baryta carb, Silicia, Aethusa, Agaricus, Lac can,

Nux vomica, Lycopodium, Pulsatilla, Ignatia, Sulphur,

Thyroidinum helped a lot.

Everyday I am learning day by day from my seniors...

THANK YOU