

# Common Therapy Options for Children with HPE

**Augmentative communication**, sometimes referred to as alternative communication (AAC) is a method of communication used by children and adults with severe speech and language disabilities. The methods of AAC will vary and be personalized to meet the needs of the individual. Tools used may range from a basic picture communication board to a dedicated, high-level electronic speech generating device (SGD). Some simple AAC programs can now be found on most smartphones.

**Developmental therapy** is a kind of guided play for children creating learning environments and activities to promote skills in all areas of a child's development. Much of the therapy is child-directed, meaning the therapist follows the child's lead. Therapists also show parents techniques for behavior management and modeling within the context of everyday experiences and environments.

**Hippotherapy** is a specialized form of physical therapy which uses a horse as a therapy tool to address movement disorders. A hippotherapy treatment is conducted by a licensed and specially trained health care provider, most often a physical or occupational therapist or speech language pathologist. For the child with HPE and low muscle tone or poor motor control, the horse offers a movement experience that cannot be

replicated in any clinic. The symmetric movement of the horse mimics human gait and provides neuromuscular information to the child's nervous system.

**Pediatric feeding therapy** is a combination of treatments that help children who have difficulties related to eating or drinking. There are many different types of feeding problems, and the therapy is individualized for each child.

**Pediatric occupational therapy** focuses on a child's sensory and motor skills, emotional development, self-care abilities and play skills to help improve successful functioning in the home, at school and in the community. An Occupational Therapist (OT) is skilled at assessing a child's level of function in areas such as fine and gross motor, visual perception, visual motor, self-cares/ activities of daily living, feeding and sensory processing. In addition, he/ she is trained in assessing the need for adaptive equipment and technology, and making the proper recommendations.

**Pediatric physical therapy** is a health care specialty that evaluates, diagnoses, and treats disorders of the musculo-skeletal system in children. Physical therapy (PT) is provided by physical therapists, who are licensed health care professionals with a master's or doctorate degree in physical therapy. A physical therapist assesses

areas concerning joint motion, muscle control, strength, coordination, balance, movement patterns, sensory issues, mobility, gait and equipment.

**Pediatric speech and language therapy** provides assessment and treatment of a child's communication skills including speech, language, play and social interaction development. The focus of treatment may be on improving oral-motor skills, developing alternative means of communication, and improving language and cognitive skills.

**Vision therapy** is an individualized treatment program designed to correct visual-motor and/or perceptual-cognitive deficiencies. Vision therapy trains the entire visual system which includes eyes, brain and body. However, it is important to understand that vision therapy is a form of neurological training or rehabilitation (it can be compared to some forms of occupational therapy or physical therapy). The goal of vision therapy is to train the patient's brain to use the eyes to receive information effectively, comprehend it quickly and react appropriately.

**Other less common therapy options** include: Art Therapy, Music Therapy, Play Therapy and Water Therapy.