

APPROACH TO DEVELOPMENTAL DELAY

By Dr. Nazia Mukhtar

Definition:

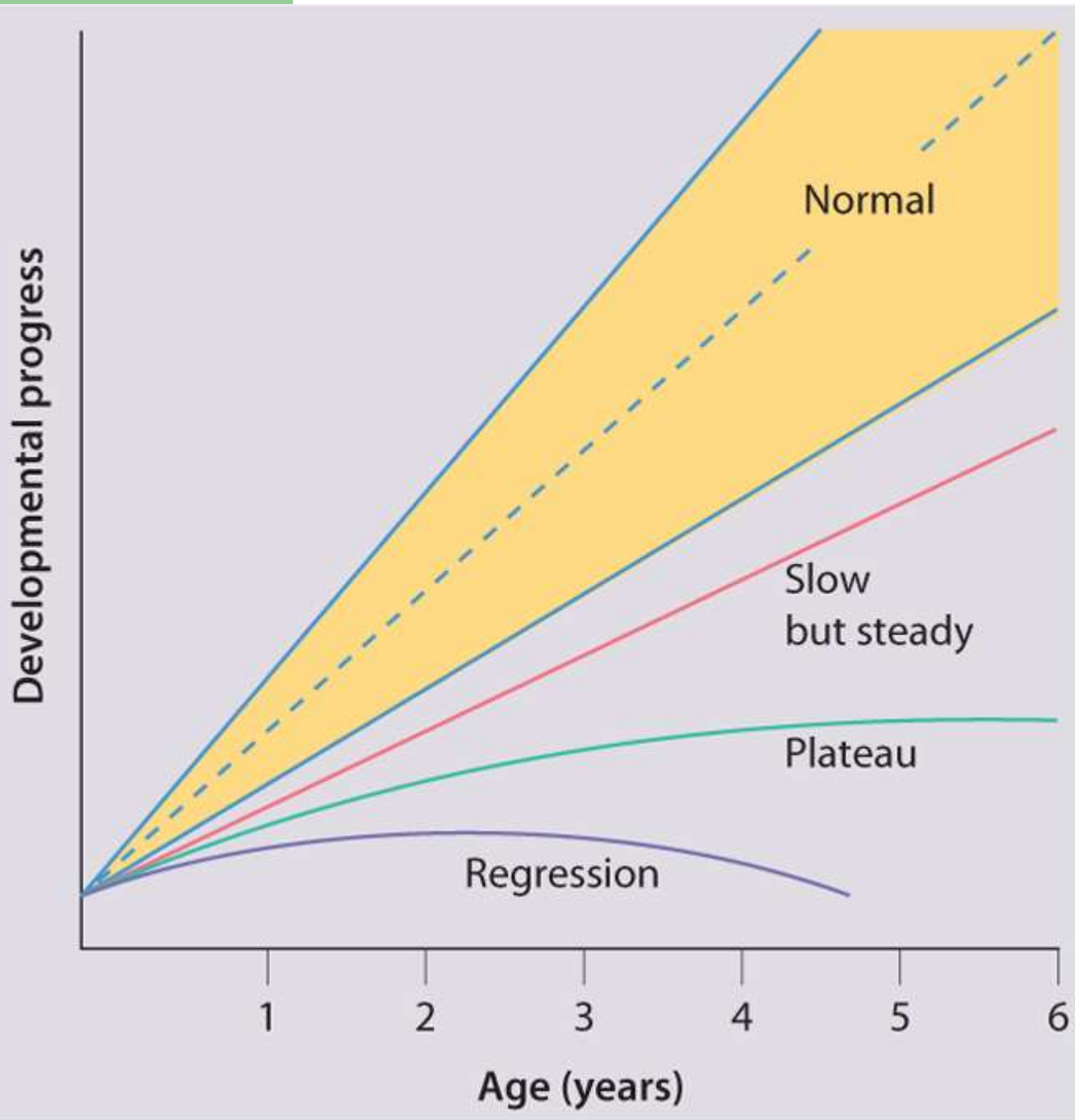
- Delay in the acquisition of developmental skills beyond limit age.
- Types:
 - Isolated
 - Global

ISOLATED DELAY

- Gross motor delay
- Impaired speech and language
- Impaired hearing
- Visual impairment
- Impaired cognition/learning difficulties
- Impaired social skills / Autism

GLOBAL DELAY

- Delay in acquisition of two or more skill fields.
- Presents within first two years of life



CAUSES:

- Gross motor delay:
 - Cerebral palsy
 - Neuromuscular disorders

Static Global delay:

- Chromosomal disturbances
- Maternal alcohol or drug abuse
- Cerebral malformations
- Hypoxic ischemic encephalopathy
- Intracranial hemorrhage
- Infection
- Brain tumor

Progressive global delay:

1. NEURO CUTANEOUS DISORDERS

Tuberous sclerosis

Neurofibromatosis

2. METABOLIC BRAIN DISORDERS

A. Gray matter disorders(without visceral storage)

Tay Sachs disease

Lipofuscinosis

Alpers disease

Menkes disease

Rett syndrome



B. Gray matter diseases (with visceral storage)

GM-1 gangliosidosis

GM-2 gangliosidosis(sandhoff)

Niemann-Pick disease

Gaucher disease

C. Diseases affecting white matter:

Galactosemia

Phenylketonurea

Maple syrup urine disease

Homocystinuria

Urea cycle defects

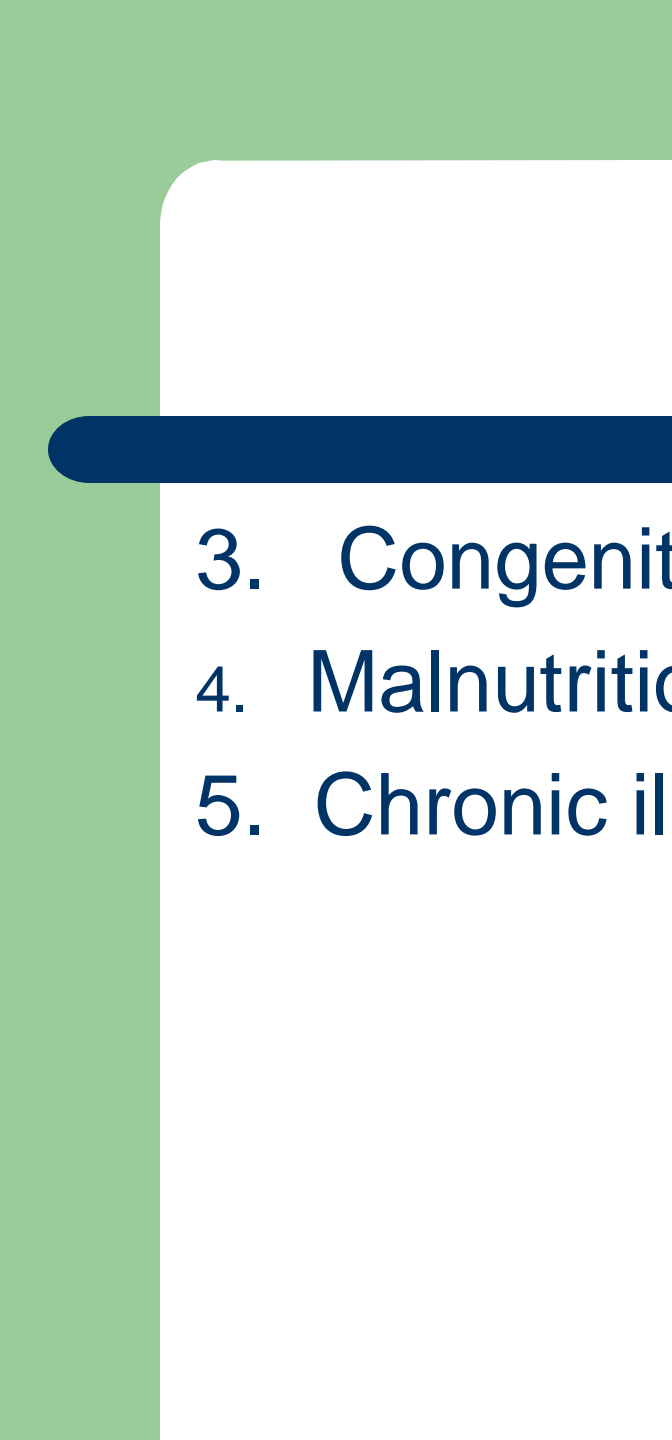


D. Diseases affecting white&Gray matter

MPS I,II,III,VII


Mitochondrial disorders

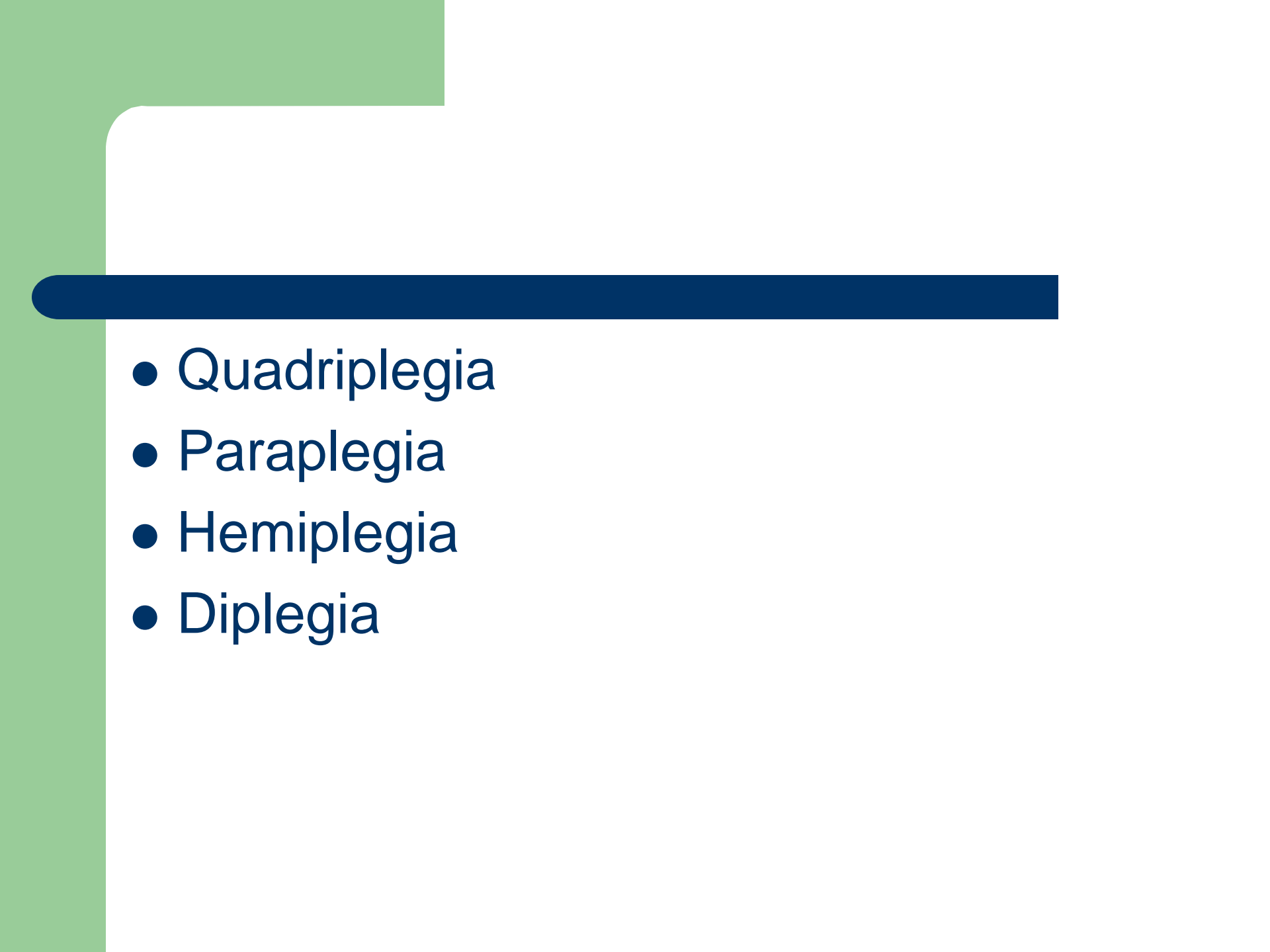
Peroxisomal disorders

- 
- A decorative graphic on the left side of the slide, consisting of a light green vertical bar and a dark blue horizontal bar with rounded ends.
3. Congenital hypothyroidism
 4. Malnutrition
 5. Chronic illness

CEREBRAL PALSY

- Disorder of tone and posture due to nonprogressive lesion of the developing brain
- Often associated with impaired speech, hearing and cognition.

- 
- A decorative graphic on the left side of the slide, consisting of a light green vertical bar and a dark blue horizontal bar with rounded ends.
- Birth history: asphyxia, prematurity
 - Developmental delay
 - Seizures
 - Microcephaly

- 
- Quadriplegia
 - Paraplegia
 - Hemiplegia
 - Diplegia

- Spasticity
- Hypotonia & ataxia
- Dyskinetic



Neuromuscular disorders:

- Anterior horn, nerves, NMJ & muscle
- SMA
- Myotonias
- Myopathies
- Myasthenia gravis



Chromosomal disturbances

Most common---
trisomy 21

Typical facies

Hypotonia

Congenital heart
disease

Karyotyping



- Edward syndrome(trisomy 18)
- Developmental delay
- Rocker bottom feet
- Finger overlap



- Fragile X syndrome
- Prominent forehead
- Large ears
- Macrocephaly
- Large testes
- Karyotyping



Hypoxic ischemic encephalopathy

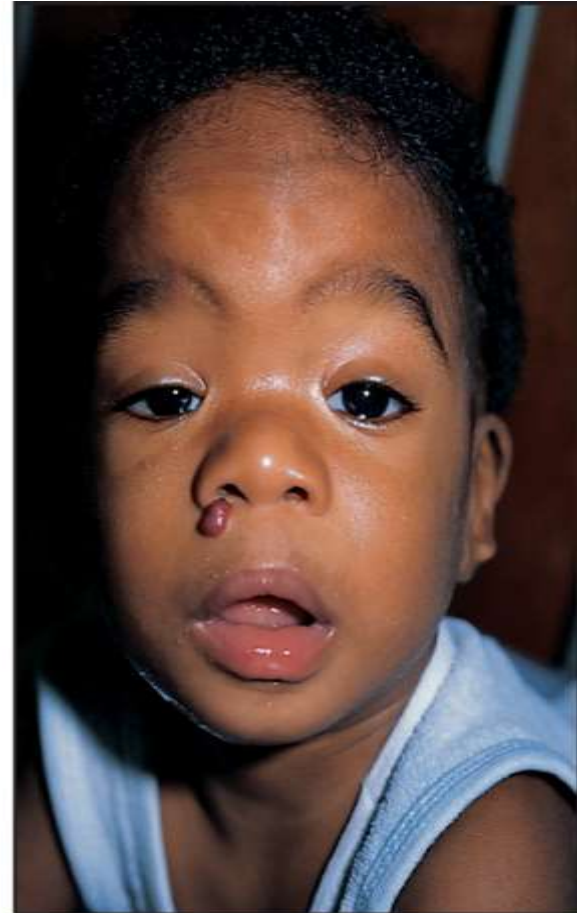
- Motor ,cognition ,seizures
- Perinatal asphyxia
- Cardiopulmonary disease
- Meningitis
- Head trauma
- Status epilepticus
- CT/MRI



Maternal drugs/alcohol

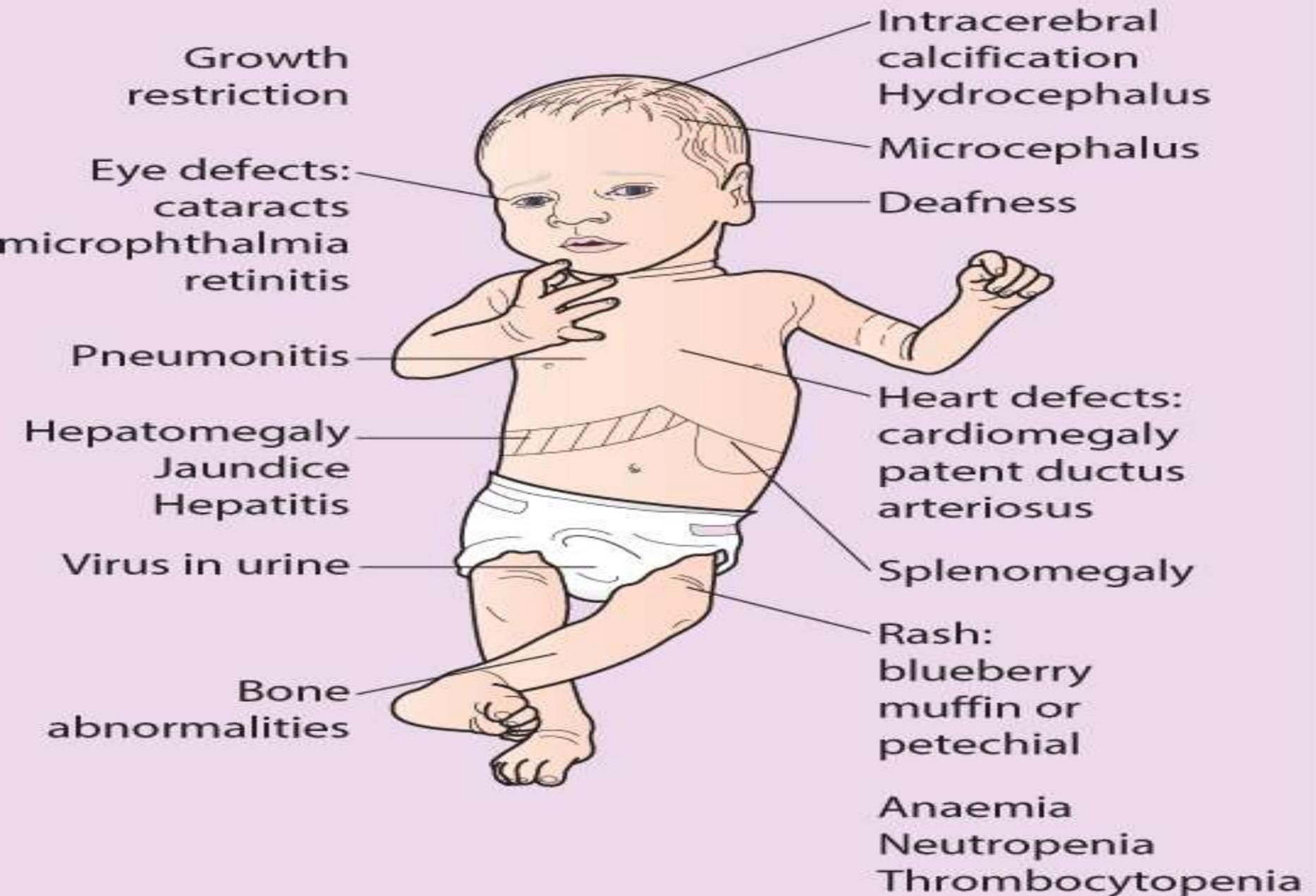
- Alcohol ---- fetal alcohol syndrome
- Cocaine ---cerebral hemorrhage & infarction
- Anticonvulsants ---- cerebral malformations& dev delay

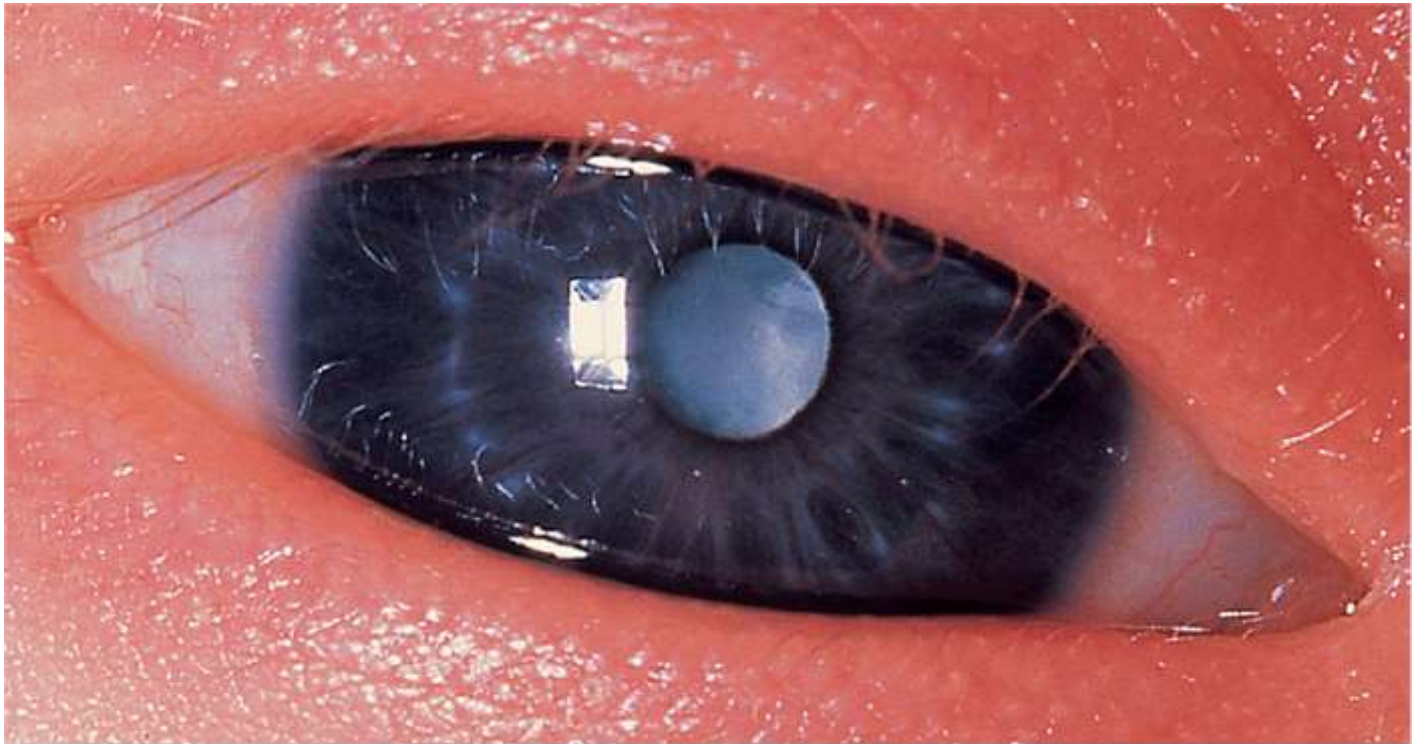
- FETAL ALCOHOL SYNDROME:
microcephaly, thin upper lip, flattened midface.
brain dysfunction, dev delay, poor memory



Congenital infections

- Toxoplasmosis
- Rubella
- CMV
- Herpes simplex
- Syphilis





© Elsevier. Lissauer & Clayden: Illustrated Textbook of Paediatrics 3e - www.studentconsult.com

Brain infections

- Bacterial /tuberculous
- Herpes encephalitis
- Seizures
- Motor&cognitive impairment
- language dysfunction
- Deafness& blindness.

NEUROCUTANEOUS SYNDROMES

- Neurofibromatosis

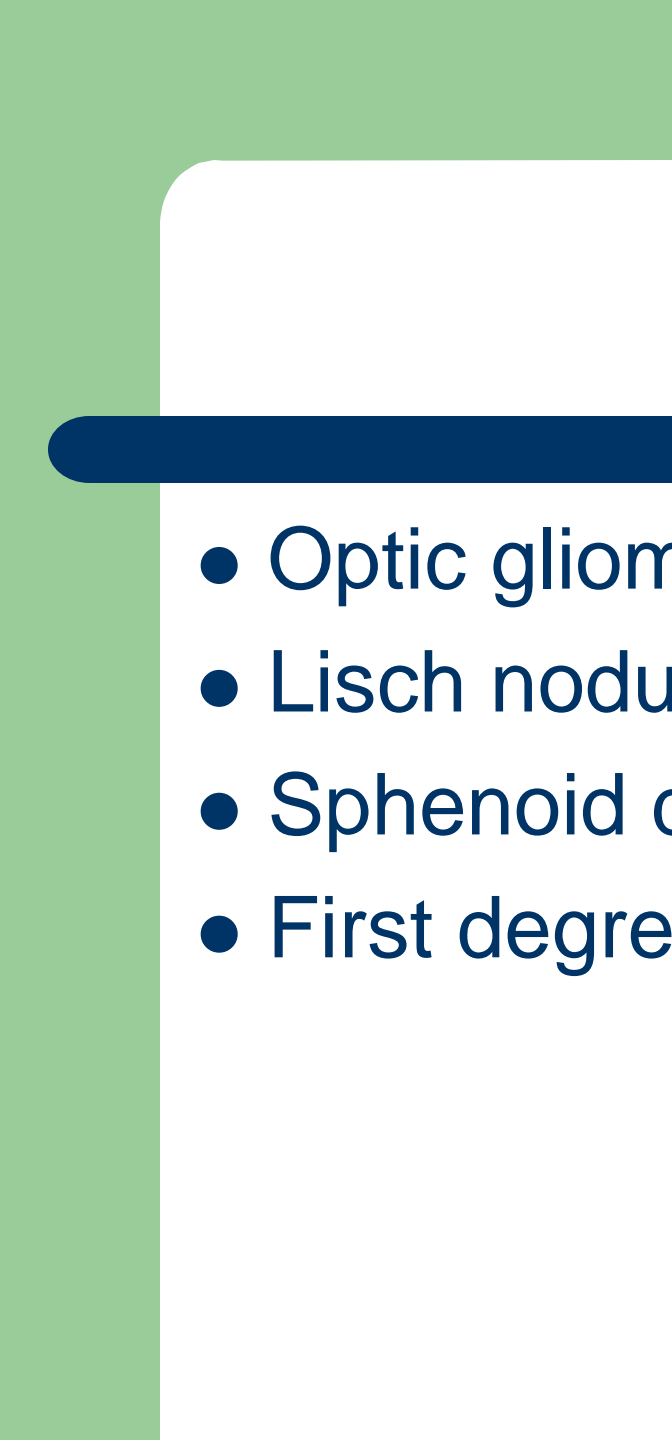
Autosomal dominant... 1 in 3000

Diagnostic criteria (2 or more)

6 or more café-au-lait spots >5mm

>1 neurofibroma

axillary freckles

- 
- A decorative graphic on the left side of the slide, consisting of a light green vertical bar and a dark blue horizontal bar with rounded ends.
- Optic glioma
 - Lisch nodule of iris
 - Sphenoid dysplasia
 - First degree relative with NF1.



Tuberous sclerosis

- Autosomal dominant.....1 in 9000
- Cutaneous features:
 - ash leaf patches(depigmented)
 - shagreen patches(roughened skin)
 - adenoma sebaceum on face
(angiofibromata)



Sturge webber syndrome

- Port wine stain
- Seizures
- Learning disability
- Hemiplegia



GM2 Gangliosidosis(tay sach disease)

- Autosomal recessive
- Deficient Hexosaminidase
- Onset 3 – 6 mo
- Abnormal startle reaction
- Developmental delay
- Cherry red spot
- Enzyme analysis in cultured leukocytes

Mucopolysaccharidosis(I,II,III,VII)

- Lysosomal enzymes deficiency
- AR (except II...X linked)
- Coarse facial features,
- Hepatosplenomegaly
- Dysostosis multiplex
- Corneal clouding (except II&III)



Congenital hypothyroidism

- Developmental delay
- Mental retardation
- Coarse features
- Neonatal jaundice
- Constipation
- Umbilical hernia





Diagnostic approach

HISTORY

- Antenatal history (maternal infections, cardiovascular diseases, vaccination)
- Birth history
- Prematurity
- Fever, jaundice
- Feeding



- **FAMILY HISTORY:**

- consanguinity

- other siblings

- developmental delay

- death of siblings

- Developmental history:
 milestones achieved &
 at which ages.
 unAchieved milestones

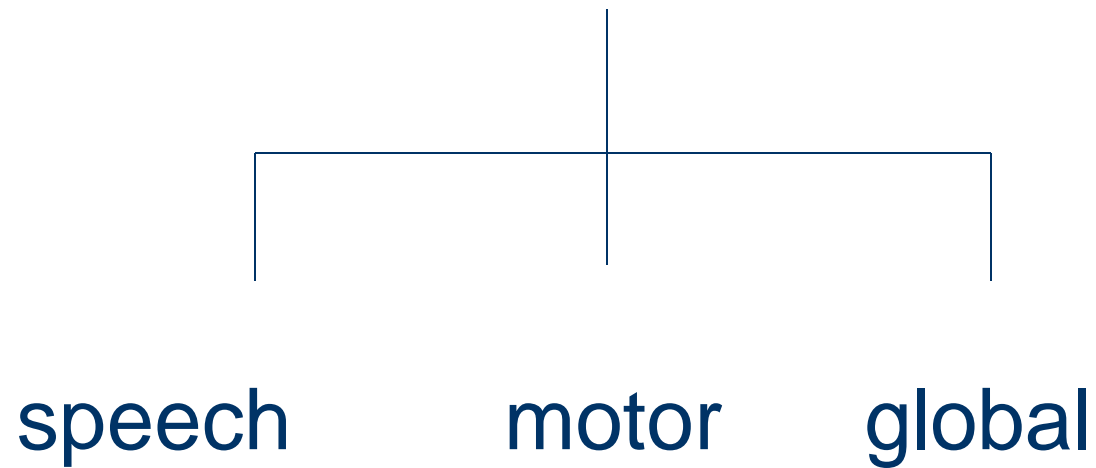
- Chronic complaints
 - fever
 - cough
 - vomiting
 - diarrhea
 - recurrent ARI
 - cyanosis & fatigability
- Seizures

EXAMINATION

- Anthropometry
- Developmental assessment
(Denver dev. Screening test)
hearing, vision, fine&gross
motor, primitive reflexes.

- Neurological examination
- Abdominal examination
- Eye examination
 - shape, opacities, cataracts, cherry red spot.
- Neurocutaneous stigmata

- **Developmental Delay**





- Delayed Speech

hearing loss

autism

pseudobulbar palsy



GLOBAL DELAY

DYSMORPHISM

NO

YES

H/O birth asphyxia, infection, trauma, drugs

CT/MRI

CP

```
graph TD; A[DYSMORPHIC] --> B[CT/MRI]; B --> C[NO]; B --> D[MALFORMATIONS]; C --> E[Chromosomal analysis];
```

DYSMORPHIC

CT/MRI

NO

MALFORMATIONS

Chromosomal analysis

CHROMOSOMAL ANALYSIS



VISCEROMEGALY

NO

YES

CUTANEOUS
STIGMATA

COARSE FACIES
T4/TSH



```
graph TD; A[VISCEROMEGALY] --- B[COARSE FACIES]; B --- C[NO]; B --- D[YES]; C --- E[REDUCING SUBSTANCES IN URINE]; D --- F[MUCOPOLYSAC-CHRIDURIA]
```

VISCEROMEGALY

COARSE FACIES

NO

REDUCING SUBSTANCES
IN URINE

YES

MUCOPOLYSAC
-CHRIDURIA

REDUCING SUBS IN URINE

NO

YES

GAUCHER CELLS

GALACTOSEMIA

YES

GAUCHER
DISEASE

NO

ENZYME ANALYSIS

Other tests

- Audiologic testing
- Ophthalmologic evaluation
- EEG
- EMG ,Nerve conduction studies,muscle biopsy

A decorative graphic in the top-left corner consisting of a light green square partially overlapping a white rounded rectangle, with a dark blue horizontal bar extending from the white shape across the top of the page.

THANK YOU.