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CEREBRAL PALSY ETIOLOGY AND ITS DIAGNOSTICS

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Abstract: This article provides detailed information about cerebral palsy (CP), including its causes, symptoms, diagnosis, and treatment. Cerebral palsy is a neurological disease that occurs mainly in childhood and causes difficulties in controlling movements and maintaining balance. The development of the disease is influenced by various factors, such as perinatal injuries, lack of oxygen, infections, and sometimes genetic factors. The article details the main types of CP and their clinical symptoms, such as limitations in motor activity, muscle spasms, and difficulty walking. It also provides information on how the disease is diagnosed, including neurological tests, MRI and other imaging techniques. Various methods are used to treat CP, such as physical therapy, medications, and orthopedic aids. It also emphasizes the need to provide psychological support to families in helping children with the disease and supporting their development. Overall, the article gives a complete picture of the various aspects of cerebral palsy and ways to combat it.

Key words: cerebral palsy (CP), tremor, Premature birth, Fragile X syndrome, Bacterial meningitis, Viral encephalitis, CT, MRI.

The brain paralysis (CP) is a group of neurological diseases affecting the movement and balance of people. This is the most common type of childhood, which affects 1 of 345 children in the United States. Brain paralysis causes injury or injury to the movement, balance and control of the situation. Often, problems appear during pregnancy, but can also appear during childbirth or after childbirth. Often unknown. Risk factors are entered the effects of some infections or methyl methl mine methob, during pregnancy, and the first few travers of life during pregnancy. [1] New research shows that hereditary genetic reasons controlled 25% of cases, previously considered genetically identified in 2%. [5] [6] Small species are classified according to specific problems available. For example, those who are solid muscles have CP primary brain semi-paralyzing, movement weak coordination Ataxic brain paralysis and twisting movements are found in people with diskinetic brain. The diagnosis is based on the development of a child. Blood tests and medical images can be used to exclude other possible reason. [1] Although the problems of movement is the center of CP, the difficulties associated with thinking, learn, feel communication, communication, and behavior often occurs together. [16] [17] Most of the CP cases depend on the brain injury before birth or during birth: CP is more common than girls in boys; Brain paralysis has more influence on black children than other races; More than half of children with CP can walk independently; 75-85% of patients have the paralysis of finic brain, ie muscles are frozen and movements are affected; 28% has epilepsy, facing difficulties in communicating 58%, at least 42% have problems, and 23-56% have flaws [18]. In people with high muscle tones, muscle shrinks are usually derived from extreme activation. [19]. While most people with CP have faced problems with the muscle tone, some have a low muscle tone. The brain paralysis is characterized by an abnormal muscle tone, reflexes or by the development and coordination of the tool. Babies born with heavy brain is often have a messy state; Their body can be very soft or very hard. Sometimes with the CP,

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congenital flaws appear as a small jaw bone or a small head. Symptoms can appear as the child is grown or changed. Babies born with the brain paralysis do not immediately display symptoms [26]. Classically, CP baby is manifested when the baby reaches the growth phase of development between 6 months and moves [22].

Reasons. Early childbirth; complications that occur during childbirth; links to the hard umbilical cord. The pathologies of the components of the hard navel (twins, three twins or more); brain circulation in the fetus. The mother transmitted by the mother is infected during pregnancy; Mother has thyroid diseases and diabetes mellitus.giptenzia, consuming corostrertens and cards in the mother's absurities during the mother's disparities. Hemolytic disease of a newborn baby. Bad ecological conditions.Mic paralysis causes the misconception of the brain or the damage to the emerging brain. This usually happens before the child is born, but it can happen in birth or early infancy. Often unknown. Many factors can lead to changes in the brain development. Some include: gene changes in genetic conditions or genetic development. Material infections affected by a baby that is not. The blood vessel that stopped the blood supply of the emerging brain. Bleeding in the uterus or a newborn baby infections that cause tumors in or around. Traumatic head injury to a baby, such as a car accident, fall or physical injury. The lack of oxygen is related to hard work or birth, although this is less common than they have previously thought out.

Characterists. Signs of procurement and coordination may include: solid muscles and exaggerated reflexes are called CP asthitis. Changes in muscle tone, the regular reflex of reflex, called solid by hardness, called. The otherwise impurities are called impurities. People with brain paralyzes can drown on their toes or walk in their way. They can also walk like a scissors by crossing their knees. Or they may have extensive walks or non-sustainable walks. These symptoms may appear related to the sensitive and nutritions such as: delays in the development of speech. Auctions, chewing or nutrition issues, to the leak or absorption of the way. Speech and lingual disorders - In more than 75 percent of people with CP, there are speech and language disorders such as forming words and speaking clearly. Excessive sweating - Some people with CP flows through their saliva because they cannot control the muscles, mouth and language muscles. Incompinse - the possible complications of the CP is to keep themselves incorrect as a result of the bad control of the bladder muscles. The difficulty associated with feelings and sensations - Some people suffering with CP are experiencing pain or feeling difficult to feel simple feelings as touch. The difficulties in the study - CPLi children may face difficulties in processing specific types of spatial data and hearing data. Infections and long-term diseases - Many adults with CP are heartbreaks and lung diseases and pneumonia risk. Contracts - muscles can be formed painfully to positions called contracture, which can strengthen the deformation of the CP and joints of muscles in patients with CP. Incorrect nutrition - the problems with swallowing, suction or feeding problems can make it difficult for many people affected by CP, especially babies, cut or storage. Dental problems - Diseases of the toothks and gaps development because many children with CP do not follow the dental hygiene. Inaction - Many children with CP will not be able to participate in the level of intensity and other activities to develop and maintain physical fitness. Inactive adults with CP often increase the severity of the disease and reduce the person's mineral density, and people with CP are more likely to risk development, depression, and development of social and emotional problems.

Diseases that significantly increase the risk of brain semicity in the newborn is: bacterial menite. This bacterial infection leads to a swelling around the brain and the spinal cord. Viral

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Endingfalite. This viral infection also leads to swelling in membranes around the brain and the spinal cord. Jaundice. Yellow is manifested as a yellow and eye turnout. The situation occurs when some additional products of "used" blood cells are not filtered from bloodstream. Blood transfusion. This is usually due to the baby's womb or an early infancy. Some children of the brain is the following symptoms of development: delays in achieving important stages of motor skills such as sitting or crawl. The study flaws. are tested, leads to a small amount, smaller than expected.Is of injury may lead to other neurological symptoms, such as Tovenants with signs of epileptica. Brain-falsely children can diagnose epilepsy. Changes in hearing. The problem of feeling feelings like the chance and touches of the eye. Right and intestinal problems, including the abduction of constipation and urine. The state of mental health, such as emotional conditions and behavioral problems.

Diagnostics. The diagnosis of brain paralysis is historically based on human history and physical examination and is usually assessed in their youth. It seems the most clear evaluation of general efforts to measure spontaneous actions in children up to four months [28], [29]. More heavierly affected children are more felt and early diagnosed. The continuation of the delayed muscle tone, the development of delayed tool and primitive reflexes are the main stages of CP. Although symptoms and diagnoses usually appear in two years [31], if the light forms of brain semicles are, if it is not in puberty, it may be over five. when finally diagnosed [32]. Cognitive assessment and medical observations are also useful to confirm the diagnosis. In addition, the child's mobility, speech and assessment of the ability to hear, walk, eat, and digestion of food is also useful to determine the degradation level [31]. If a person is diagnosed with brain semicles, subsequent diagnostic tests are voluntary. The person is guaranteed if the person does not specify the person's cerebral paralysis using CT or MII. Mri is better than KT because of diagnostic efficiency and safety. If it is unnatural, the evidence obtained from neurotaspers may indicate the time of the initial harm. CT or MRI, as well as hydrosefalitis, arteryovenosis malformations, subdural hematoes and hygrases and show that this shows that this is 5-22% in cases. In addition, anomalies identified by Neurotascus may indicate the highest likelihood of diseases such as epilepsy and mental weakness . The exact MRI facilation is a small threat to calming the children [32] .CP is important young diagnosis, but medical professionals do not agree about the best age to diagnose. How early CP is diagnosed, the ability to provide physical and educational assistance in the child, can be more likely to confuse CP with another problem, especially if the child is 18 months or less. Infirts can be temporary problems with muscle tones or control, which can be confused with a permanent CP [30].

Metabolism violation or tumors in the nervous system may seem to be CP; Metabolic diseases can cause brain problems that look particularly like CP in MRISA [1]. CPZM and vulnerability problems can be mistaken with CP if they appear at the beginning of life . However, these disruptions deteriorate over time and no CP (although it can change in character). During a childhood, it is possible to say the difference between them . In the UK 8 months old, the lack of independent sitting is regarded as a clinical sign for subsequent monitoring. Fragile X syndrome (cause of autism and mental illness) and common mental impairment should also exclude . Before the diagnosis of the brain Palaizist John, the child recommends waiting for 36 months old, as it is easier to evaluate the child's paralysis, to identify other diseases that may exist simultaneously with the brain semicity.

Treatment Therapy therapy is an important part of treatment immediately after the child is immediately diagnosed. This type of treatment can also be determined before the diagnosis, depending on the characteristics of the child. Dasrums can help heal some symptoms of the

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brain paralysis and prevent complications. For example, the anti-cmpazodias and muscle relaxations can relax hard (CPASIC) muscles and help to increase the action interval. Helps to improve the movement of limbs or reduce drool. Other drugs can also be used by symptomatic treatment . Continue the current treatment and add new treatment when it is necessary. Therapy therapy that helps to be as mobile as possible. This also helps prevent surgery need. If the child has passed surgical treatment, then intensive exercise therapy may be required for 6 months or more. The treatment of medicines should be constantly controlled, or dorsal insatomy (muscle, muscle and joints) or dorsal rhizomes. Therapy helps the child find ways to communicate with his peers, and this is also part of treatment. As a child suffering, if he is grateful, if it is grateful, it may be a little better or orthoped surgery. People with CP may contain cognitive disorders or not at all. The full intellectual potential of a child born with CP is often not known until the child starts school. In people with CP, people are more likely to disrupt learning but a normal intelligence. The intellectual level of people suffering from the CP, as in the ordinary population, varies from the genius to intellectual disabled and stressed the importance of giving all the opportunities to not diminish and learn the capabilities of the person affected by CP [29]. Pursianing in adults with brain paralysis can be early or late. The delay in puberty is considered to be the result of the lack of food .There is no evidence that CP will affect the birth of the CP, although some secondary signs affect sexual desires and work. Adults of CP were less likely to cross the screening of reproductive health since 2005. Gynecological examinations may be subject to anesthesia due to CPASISITE and the tools are often not available. Your breasts can be hard to check, so the partners or guardians can do it. The men with CP have a high level of cryptophidism at the age of 21. CP, depending on the severity of its condition and the quality of the assistance provided to them, significantly reduces human life expectancy. 5-10% of children with CP die, especially when ecoing and mental weakness affects the child. Due to an outpatient, round and self-feeding ability to increase life expectancy . Although there are so many changes in CP to affect people, it was found that "independent gross motor functional functionality is a very strong stability factor." According to the Australian Statistics Bureau, in 2014, he had died of 104 Australian brain paralyzed paralyzes . The most common causes of death in the CP are related to the causes of breathing, but middle age is more reflected in middle-age cardiovascular problems and neoprastic diseases [30].

In conclusion, (CP) as a general name for the motor disorders caused by the infection of the neurological system, this disease often develops due to congenital or perinatal injuries. The article highlights the physiological and genetic basis of the CP, as well as its diagnosis and rehabilitation processes. Different forms of CP and its weight, as well as individual appearance of the disease, have a multilateral approach and individual therapy plans to succeed. Physical therapy, orthopedic interventions, and pharmacological agents play a key role in improving the condition of patients. Also, rehabilitation measures play an important role in restoring patients with others, along with their daily activities.Chu, facilitating the consequences of early diagnosis and treatment of the CP and improving the quality of the patient. In the future, through the help of genetic and neuroplastic research, more effective methods of disease prevention and treatment are expected to be developed.

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