Cerebral Palsy shares pathophysiologic mechanisms with stroke, demyelinating disorders, and traumatic brain injury. Advances in for treating CP, using methods such as neural protection, neural repair, and neurorehabilitation will impact all diseases of the brain.

By definition, Cerebral Palsy (CP) is a brain injury (caused by stroke, hemorrhage, infection or trauma, among other causes) in the developing brain, as early as in utero or before the age of 2-3 years. The child grows up with some degree of weakness and muscle tightness in any or all limbs, and may or may not have other neurological complications such as sensory deficits, intellectual, psycho-social, and epilepsy. One in nine children have symptoms of autism; many have learning disabilities; yet more than half have normal or superior intelligence and can achieve professional, financial and social independence—if given the optimal support and access to opportunities. Most children with Cerebral Palsy now live into adulthood, and they often have accelerated onset of age related conditions such as diabetes and atherosclerosis.

Cerebral palsy and related developmental disabilities such as autism have a commonality: they begin in early childhood and effect a lifetime. Research focused on new approaches for preventing the initial damage, repairing that damage and treating the neurological symptoms and their consequences is underway. The goal: to promote long healthy, productive and participatory lives.

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