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The accuracy of selection criteria for diagnosing children with developmental coordination disorder

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According to DSM-V, children with developmental coordination disorder (DCD) have motor coordination impairments and their motor abilities are substantially below their age and intelligence levels. The motor impairments are not due to medical or neurological disorder. Their motor difficulties negatively influence their life and cause medical and psychosocial problems. Identifying DCD and measuring its prevalence in society requires applying the inclusion and exclusion criteria. Therefore, ignoring one or more of these criteria would bias the results. There are many factors impact on the accuracy of diagnosing DCD like using valid assessment tools, reliable neurological examination, and co-morbidity with other disorders. Applying criteria A and B of the DSM-V requires valid standard assessment tools. A consultation held by the WHO reviewed several assessments of child development and found that not all the assessments were suitable for use in different cultures or in similar cultures with different societies. It was suggested that when using child development assessment or screening tools each country should have its own normative data. The DSM-V exclusion criterion is to exclude neurological disorders. However, not all children with minimal brain dysfunction due to low birth weight (LBW) and/or small for gestational age (SGA) show clear neurological problems that require examination or have been given a neurological disorder diagnosis. Therefore, children with mild Cerebral Palsy (CP) might be misdiagnosed with DCD. Furthermore, DCD overlaps with other developmental disorders like ADHD, LD, Autism, and SLD because of sharing etiology and/or symptoms. Their relations could be co-morbidity, co-occurrence or continuum.

Biography

Suad Alanzi has completed her PhD in 2011 from Curtin University and Post-doctoral studies from different institutes. She is the founder of Developmental Coordination Disorder Clinic in Kuwait, a co-coordinator of CP clinic in Sabah hospital and a head of Risk analysis Committee and active member of risk management committee. She has presented more than 15 papers in international conferences and has been serving as a reviewer member of Journals and conferences. Furthermore, she conducted several postgraduate workshops in the field of pediatric, evidence-based practice and ICF model nationally and internationally.

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