WINNERS COMING BACK TO THE 'HERE AND NOW'

Luke: Change and Growth

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Introduction

y grandson Luke, now 18 years old, was born extremely premature at 27 weeks, 15½ ounces, 10½ inches. His early deficiencies were many and we were given no treatments to help him. This is his story.

Basic Information

As a preemie, Luke had severe intrauterine growth retardation; pneumonia at six weeks; hernia repair at two months; G-tube placement due to failure-to-thrive; two eye surgeries for strabismus; and six surgeries for hypospadias. His diagnoses were PDD-NOS, autism, mental retardation, Cerebral Folate Deficiency, and seizure disorder. Luke's physical growth was delayed and his motor coordination was limited by rigidity in his joints, lack of postural control and balance, limited eye movements, and myopia. He was easily irritated, in-

teracted little, had eating problems, poor facial muscle control affecting speech and vocalization, and high tactile defensiveness. His eye tracking, convergence/divergence, and ocular-vestibular and optokinetic reflex patterns did not allow him to focus. With such poor visual perception, Luke remained mostly in his own inner world, ignoring the world around him. He could barely tolerate being outdoors: a slight breeze or sunshine was overwhelming. His hands would drip with perspiration.

Luke's expressive speech was also very limited. Questions resulted in a delayed "yes" or "no" but no conversation. He mostly repeated scripted phrases he had memorized from oftenwatched videos or gave echolalic responses.

At age 11 he began having tonic-clonic seizures two/three times weekly. His eating disorder required a feeding tube, and he had multiple developmental delays: auditory processing disorder; fine motor delay; gross motor delay; receptive and expressive language delays; obsessive-compulsive disorder; sensory integration dysfunction; and a visual processing disorder.

Luke has been on a casein-free, gluten-free diet for 12 years. He eats slowly due to his oral hypotonia, so in order to maintain enough caloric intake we supplement with formula via feeding tube. In 2006, after 40 hyperbaric dives his sense of smell seemed to materialize along with more tolerance to outdoors. Luke has attended a six week Boost-Up Plus program each sum-



Luke, right, with his cousin, Zachary Brown.



PORTAL TO NEURODEVELOPMENT AND LEARNING

mer for the past three years along with hippo-therapy and music therapy. His exceptional MD, Dr. Dan Rossignol, has helped him through many issues (hyperbarics, IVIG, cerebral folate deficiency, gastro/gut problems, methyl B12 injections), and, along with forward-thinking local MDs and an amazing naturopath (glutathione IVs, heavy metal chelation), have accommodated his medical needs locally. He receives an hour of occupational therapy a week and has had speech therapy and auditory listening therapy.

At age 16, Luke was introduced to MNRI® and received an evaluation from Dr. Masgutova. He started two hour weekly sessions with a MNRI® therapist, then months later added another two hours with another MNRI® therapist. Months after that, I learned to give Luke home exercises for an additional two hours weekly.

Dr. Masgutova set forth a substantial, very workable regimen for Luke. Her MNRI[®] program has allowed him to organize, awaken, and blossom! There are other therapies



Luke, right, with his brother, Spencer.

available as well but Luke cannot engage in them until some of these basic, fundamental connections, via MNRI[®], come together. Luke is definitely 'in process!' His reflex patterns are now more developed and we are hopeful they will mature even more, serving to connect his body, mind, and soul!

Results

Luke's vision skills are much improved: he is more present, aware, and interested in the world around him. He is quick to notice a movement or a sound or a sigh, and even watches facial expressions.

One example of MNRI[®]'s impact was Luke's response to the Babinski Foot Reflex. Just after the session, he took off his socks off and ran outside to walk barefoot on the ground. This was so abrupt and out of character; it seemed he was connecting with the ground for the first time ever and liking the feeling. Shortly thereafter, he climbed up on the hood of the car and wanted to jump way down to the ground. Feeling natural sensations in his own feet gave him such joy! Luke's physical movement has become more relaxed and coordinated; his shuffling walk is changing to a more mature cross-lateral gait.

Luke can now interact more spontaneously, both physically and socially. He has become less mechanical and comprehends humor more. He imitates characters from stories, sounds, and music. Luke is opening up to others verbally and physically: more touching and non-mechanical chatter. He is not as defensive to sensory/ tactile stimulation and no longer vulnerable to emotional reactivity like lashing out with hitting or scream-



Luke's high school graduation photo.

ing. He is more relaxed and fluent with words and language and is more able to share information than he ever could in the past. He frequently wants to know what words and phrases mean. As his receptive language and understanding deepens, his cognitive skills continue to develop.

Oral sensitivity is also no longer a big problem: he can tolerate the hair dryer, lip balm being applied to his dry lips, and three years of braces and the ensuing adjustments.

At a recent MNRI® session, Luke became more aware of his therapist's feelings and was empathetic with her. We feel his sensory system is reorganizing. He responds extremely well to Pavlov Orientation Reflex repatterning. This exercise, in which he is blindfolded and uses his hands to "feel" different qualities, has helped Luke with unlearned elementary concepts: differences between hard and soft, round and square, smooth and rough. Now that he is comfortable with these basics, a cascade of new awareness seems to be coming forth. He reads at grade level 2 or 3; does simple two-column math

REFLEXES OF THE **B**RAIN

addition and subtraction, which makes us proud of him. He has had no seizures at since March, 2012.

Recently Luke's dad, Ragnar, brought home a used VCR that he had found at a garage sale on a Friday. Luke's eyes lit up when he saw it (he loves videos and VCRs). Dad said he would hook it up on Sunday when he returned from running in Grandma's Marathon in Duluth, MN. Sunday they would decide if it worked or not. While the parents were gone for the weekend, Luke rummaged out in the garage, found the VCR, brought it into the house, dismantled his current working VCR, and hooked up the 'new' garage sale VCR. The parents were flabbergasted that it was hooked up and running. Luke had it all figured out and wired up prior to their return. He was quite pleased with himself.

Summary

I think how beneficial MNRI[®] would have been to Luke if he had started it when he was small. I believe his progress would have been much more rapid. For infants born under stressful conditions like premature birth and loss of oxygen, it is critical to their neuro-developmental well-being to receive reflex integration without delay. Although Luke began MNRI[®] at age 16, he is benefitting greatly. MNRI[®] can make all the difference in the life of each child.



The changes in Luke – his increased presence, focusing, communication, enhanced sensorymotor integration, and physical strength and skills – are just amazing! We congratulate Luke and all his family, his grandparents and parents, for such great results! – Minnesota MNRI® Team