

Common Problems of Newborns

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The area of the baby's head that leads the way out of the birth canal is the occipital area, the back of the head. It is the area that will take the brunt of obstruction if there is a delay in delivery.

When there has been a long delivery, perhaps sixteen, twenty or twenty-four hours for a first baby, or even after twelve hours for a later baby - and sometimes we find mothers who have been in labor for several days, or perhaps even more important, there has been a period of false labor before the real thing began. False labor can be particularly damaging because the contraction is occurring and the baby's head has nowhere to go because the birth canal is not opening. So the baby is being compressed from above and below. It is the occipital area that takes that impact. That is where the hypoglossal nerve to the tongue and the vagus nerve to the digestive tract pass out through the skull. These are the areas that are the first to show the stress of the birth.

One of the most important questions we can ask is, "Did your baby have any trouble vomiting, spitting up?" If the answer is "yes" then we know that there was some degree of a problem in this area at birth.

Within the occiput also is that large opening through which the whole brain stem becomes the spinal cord. All of the nerve pathways that go to every structure in your body below the base of the skull must pass out through that hole in the occiput. Therefore, if the occiput is deformed by such pressures as we have described, the injury to the nervous system may vary all the way from the child who has mild spitting up to the child who is hyperactive, the child who is uncontrollable, who is aggressive, who eventually goes on to have learning problems, behavior problems and the whole gamut. So this is a most critical area, the area that we always look at when we look at newborn babies.

Then we consider the skull as a whole. The skull is made up of some twenty-six bones. At this age some of those bones are in several parts. Therefore, the potential for compression in one or more areas is quite great if there was compression in the pelvis on the head during birth.

An osteopathic physician's hands are feeling hands, they are monitoring hands. They are not pushing things around. They are monitoring how that mechanism inside is working and how we can go with it to permit it to release areas of restriction.

The temporal bone, that bone which I mentioned as carrying the ear, may also be compressed because it is very close to the occipital area. It is not unknown to find that the baby has its first ear infection at a few weeks of age. When that is so it suggests that the problem may have arisen from the trauma of birth. When that mechanism begins to move freely then the child recovers from the recurrent infections.

When the head is compressed from the front backwards, a compressive force, which we will find particularly if the baby who was reversed in the birth canal. It was a posterior occiput rather than an anterior one. This sort of compression jams the skull at the center of its base.

At birth the occiput is not just one bone, as it is in the adult. In the infant the occiput is four bones because it is not yet fully developed. That large hole of the foramen magnum, through which the

brain stem passes, is circled by developing parts of the occiput.

The area of the base of the skull that becomes compressed is the area we are primarily concerned with in our small babies. The problems we find there may continue and cause difficulties later in life.

The sooner you treat the baby the easier it is, but you never say "there is nothing that can be done." No matter how much or how little progress is made, progress is worthwhile.

Life is always in motion. Life is always getting better or it is getting worse. We may not work as frequently; we may work for an intensive period to get over the major problem, then watch that the progress we have made is maintained, but let's go back again. What we do in the process of a treatment is just like unlocking the door so now those who are inside can move around. We have permitted progress to occur.

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<http://www.osteopathiccenter.org/common.html>