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Homoeopathy: A choice in developmental milestones of child

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Abstract
Child's life are very important for his or her health and development. Healthy development means that children of all abilities, including those with special health care needs, are able to grow up where their social, emotional and educational needs are met. Having a safe and loving home and spending time with family—playing, singing, reading, and talking—are very important. Proper nutrition, exercise, and sleep also can make a big difference. Children develop at their own pace, so it's impossible to tell exactly when a child will learn a given skill. However, the developmental milestones give a general idea of the changes to expect as a child gets older. Homeopathy the quintessence of what holistic means is treating the individual as a whole and not just the different parts. Homeopathy looks at the root of the problem. If there is a behavioural issue the homeopath will first look at the circumstances that led to the behaviour Addressing this with homeopathic treatment may help reduce the behaviour and also help the child respond better to behaviour therapy.

Keywords: Homoeopathy, Child Development, Proper nutrition, Behaviour therapy

Introduction
The early years of a child's life are very important for his or her health and development. Healthy development means that children of all abilities, including those with special health care needs, are able to grow up where their social, emotional and educational needs are met. Having a safe and loving home and spending time with family—playing, singing, reading, and talking—are very important. Proper nutrition, exercise, and sleep also can make a big difference.

Skills such as taking a first step, smiling for the first time, and waving "bye-bye" are called developmental milestones. Children reach milestones in how they play, learn, speak, behave, and move (for example, crawling and walking).

Children develop at their own pace, so it's impossible to tell exactly when a child will learn a given skill. However, the developmental milestones give a general idea of the changes to expect as a child gets older.

Developmental Monitoring and Screening, which observes how child grows and changes over time and whether the child meets the typical developmental milestones in playing, learning, speaking, behaving, and moving. If a child has a developmental delay, it is important to get help as soon as possible. When a developmental delay is not found early, children must wait to get the help they need to do well in social and educational settings.

In Homeopathy the quintessence of what holistic means is treating the individual as a whole and not just the different parts. Homeopathy looks at the root of the problem. If there is a behavioural issue the homeopath will first look at the circumstances that led to the behaviour. For example if the child has temper tantrums it may be due to a hypersensitivity to the environment or some internal discomfort. Addressing this with homeopathic treatment may help reduce the behaviour and also help the child respond better to behaviour therapy. Homeopathy believes in restoring homeostasis or external and internal equilibrium and harmony. Homeopathic remedies act in a dynamic way by stimulating the natural defense mechanisms of the body. In homeopathic treatment the medicine just acts as a stimulus and the system heals itself by throwing out the disease force or in other words it provides the impetus needed for the system to recover.

Child Development
Is the period of physical, cognitive, and social growth that occur in human beings between birth and the end of adolescence. In which individual progresses from dependency to increasing autonomy. It is a continuous process with a predictable sequence, yet having a unique course for every child.

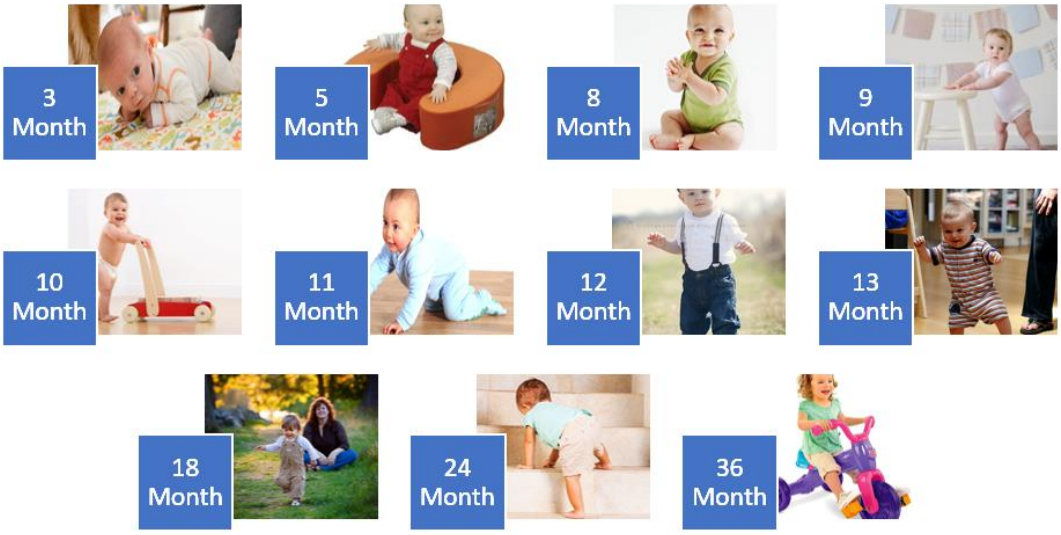
Developmental Domains
Gross motor - Locomotion.
Fine motor – Uses of hands.
Social / Emotional.
Speech and Language.

Principle of Development
Cephalocaudal
Proximodistal
General to specific

Factors Affecting Development
Genetic factors
Prenatal/ Maternal
Postnatal

Developmental Milestones-Gross Motor

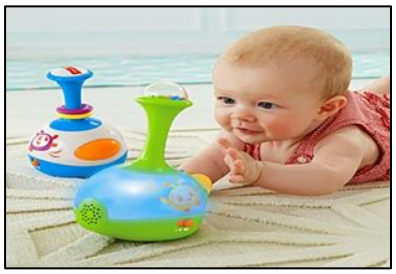
Age	Milestones
3 months	Neck holding
5 months	Sitting with support
8 months	Sitting without support
9 months	Standing with support
10 months	Walking with support
11 months	Crawling (creeping)
12 months	Standing without support
13 months	Walking without support
18 months	Running
24 months	Walking upstairs
36 months	Riding tricycle



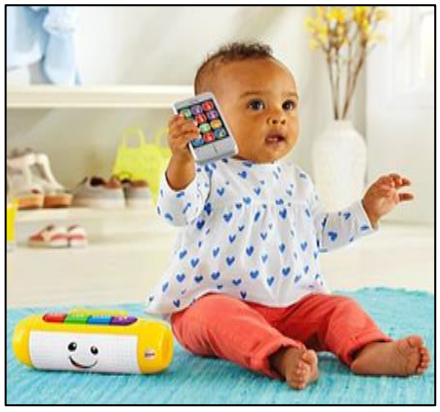
Development milestone-fine motor

Age	Milestone
4 months	Grasp a rattle or ring when placed in hand
5 months	Reaches out to an object and hold it (bidextrose grasp)
7 months	Holding objects with crude grasp from plam (Palmer grasp)
9 months	Holding small objects like a pellet between index finger and thumb (Pincer grasp)

4 months



5 months



7 months

9 months

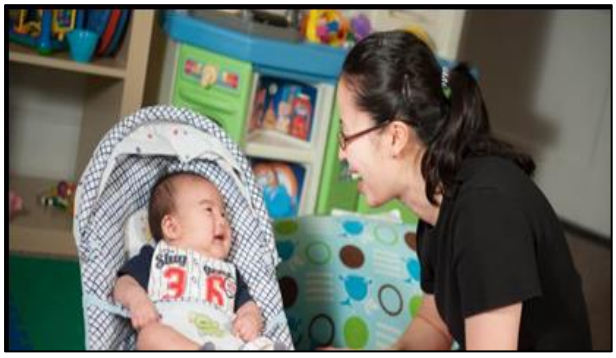
Development milestone: Speech & language

Age	Milestone
1 month	Turns head to sound
3 months	Cooing
6 months	Monosyllable
9 months	Bisyllables
12 months	Two words with meaning
18 months	Ten words with meaning
24 months	Simple sentences
36 months	Telling a story

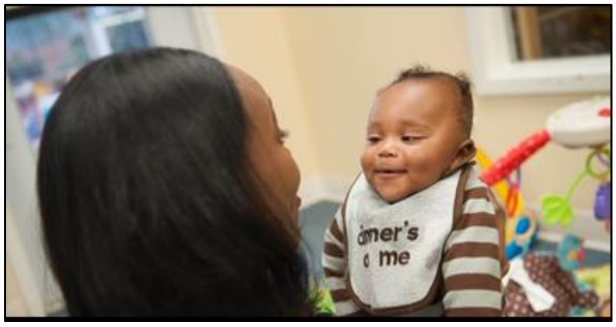
3 months: Cooing

Development milestone: Social & emotional

Age	Milestone
2 month	Social smile
3 months	Recognizing Mother
6 months	Recognizes strangers stranger anxiety
9 months	Waves bye-bye
12 months	Comes when called, Plays a simple ball game
24 months	Asks for food, drink & toilet
36 months	Share toys, knows full name, Knows gender
4 years	Plays in groups, goes toilet alone
5 years	Helps in household tasks, dressing and undressing

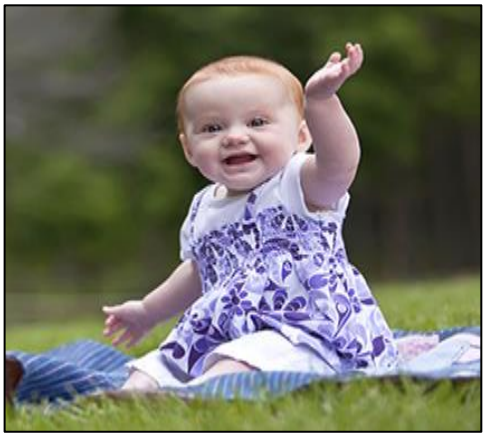


2 months

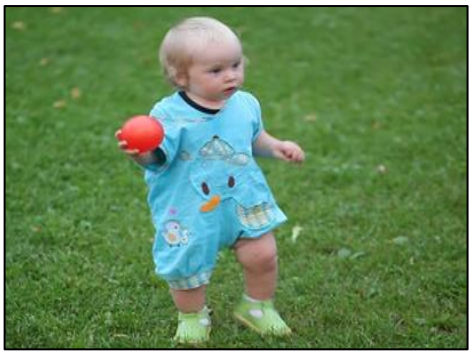


3 months

6 months



9 months



12 months

36 months

4 years

Homoeopathic Management

Calcarea carbonica infants

Mental/emotional characteristics

Children expend a great deal of energy on growth and therefore often need remedies that correspond in symptomatology to growth difficulties. During these times the thyroid gland and calcium metabolism are inextricably tied together. It is then no wonder that Calcarea carbonica, a remedy that cures problems of the thyroid and calcium metabolism, is so frequently needed. Illness for these children may begin when either system is stressed, as may be the case during dentition, growth spurts, learning to walk, and bone injuries.

Slowness

A child who is delayed in developing mental as well as physical skills. With babies, this manifests as a delay in walking or talking.

Introversion

Calcarea carbonica children discover early in life that they are slower than others their age. During play, they find themselves slow at games and sports—perhaps to the extent that other children taunt and laugh at them. To avoid this ridicule, they may become quiet, withdrawn loners who play by themselves and do not seek out friendships with others.

Cautiousness

The child is cautious and refuses anything new for a length of time until he can assimilate the new information and then structure and categorize it in his mind.

Closure/inflexibility

Extra time is also needed to finish tasks the child has begun. When parents, looking in on the child, think she seems to be pleased, enjoying herself with her projects, the child is actually hard at work trying to finish what she started. Anything left undone nags at her consciousness; she feels compelled to finish it. As a result, it may seem to the parent at times that the child is deliberately disobeying or being obstinate.

Concentration

This individuality combined with slowness can benefit the Calcarea Carbonica child as it often leads to very deep and lengthy concentration, even in the very young. Babies only several months old can play by themselves for long periods of time. My wife and I saw an eighteen-month-old boy during a social engagement a week after Calcarea carbonica was prescribed for him. In a room full of active children and loud adults, the child managed to remain intensely focused on his play, apparently unaware of anything around him.

Physical generals

Calcarea carbonica children show a poor assimilation of calcium as well as malfunctions of the thyroid gland, which lead to slow mental and physical development. These children tire easily and seem malnourished, sometimes to the point of rickets or marasmus.

Many symptoms may develop when metabolism changes, such as during dentition or learning to walk. The hair, nails, and bones often grow poorly and the glands enlarge and indurate easily. Children may become anemic and chilly as they age, and characteristically perspire even though they are cool.

Medorrhinum infants

Serious illnesses that begin from birth help point to this remedy. Medorrhinum infants may have difficulty falling asleep, being too restless to relax. Babies wake up often from the abdominal pains of colic. This is especially seen in infants with other characteristic digestive symptoms. Toddlers sleep very warmly and roll out from under the covers. They favor sleeping on their stomachs with their knees tucked under their chests and their buttocks in the air. Eyes are susceptible to conjunctivitis (recurrent pinkeye) accompanied by swelling, redness, and an excoriating, thick, green discharge. Frequent colds extend to the ears. Babies have frequent snuffles and colds with thick, yellow-green mucus that crusts outside the nostrils. Faces may have spider hemangiomas. Chest colds may occur from birth. These are especially brought on by dampness. The coughs that accompany these colds are wet sounding, noted especially at night. During chest colds toddlers may lie in the knee-to-chest position, which helps prevent coughing. Infants and toddlers may also develop chronic chest colds that eventually lead to asthma, which is ameliorated by the same position. They may be classified as having failure to thrive with a big appetite. Babies vomit milk just swallowed; such milk often has yellow mucus in it. Babies will like juice, especially orange juice. The perineum of boys and girls may show characteristic redness and blistering, which can be due to various conditions. Diarrhea from birth can be found in children who have failure to thrive. The stool is a mucous yellow-green and excoriates the anus. The urine can be very acidic and cause a recurrent, persistent red rash of the surrounding tissue. Boys may also develop recurrent phimosis. Vaginal infections can occur in infants and toddlers. The discharge stains the diapers yellow and may be offensive in odor and very excoriating, making the surrounding area red and raw. Toddlers bite their nails, including their toenails. Eczema can develop from birth. The rash may begin or be worst in the perineal area. Eczema may alternate with bouts of asthma. Toddlers are warm and like to wear as little clothing as possible. Infants have a family history of this miasm. Infants often appear stunted physically, emotionally, and/or mentally.

Natrum muriaticum infants

These infants are by far the rarest of the eight common childhood remedies. I have the least information about these infants of the types here presented. I notice that children seem to be about four to six years of age before Natrum muriaticum pathology begins. What may be found as clues in infancy are few. Infants and toddlers with Natrum muriaticum tendencies are reserved at home as well as in the doctor's office. They cry little, talk little, or try to keep communication to a minimum. They may like to be alone and not wish to be interfered with. They dislike being handled and fondled. Their desire for cleanliness may begin early; toddlers of seventeen months may toilet train themselves. They may like to wear bibs and are the cleanest eaters of all the eight types. Canker sores and aphthae of the mouth are common. They dislike milk; it causes nausea, vomiting, colic, and diarrhea. Diarrhea may also be caused by eating wheat products, resembling celiac disease. The diarrhea may be chronic. It is characteristically odorless and projectile, and usually occurs in the morning. A great deal of flatus may accompany diarrhea. This syndrome is noted especially in small babies

who eat well but do not gain weight normally. Infants can be overly thin and late learning to walk and talk. They dislike heat and perhaps sunlight, and appear pale and anemic.

Phosphorus infants

Phosphorus infants are good-natured and happy from birth. Affection runs both ways easily; they like to give love as well as receive it. They are expressive, and they like to be picked up and hugged. They fear sudden loud noises, such as thunderclaps. Infants and toddlers often hate to sleep alone and may fuss until a parent lies down with them. They wake up refreshed, though perhaps hungry. Toddlers may awaken at night thirsting for a drink. Babies are born with long eyelashes and brilliant eyes. They may develop subconjunctival hemorrhages easily. Toddlers contract ear infections accompanied by a very bloody discharge. Coughs, bronchitis, and pneumonia are all common ailments. More serious infections happen with greater frequency to malnourished or very thin Phosphorus children. Pneumonia causes the nostrils to flare with labored breathing and is accompanied by a red face. Acute infections anywhere in the body often lead to vomiting and diarrhea. Diarrhea often recurs. It may accompany any illness and may last for a long time after the illness is resolved. Infants are typically fine skinned, fine featured, and thin. Robust toddlers may suddenly develop chronic diarrhea or another problem that causes them to lose weight dramatically and become gaunt. Also, infants can seem healthy yet fail to gain the amount of weight appropriate for their height; therefore they often appear too thin.

Tuberculinum infants

The remedy Tuberculinum should be considered for the congenital anomalies that seem to be increasingly plaguing humanity. Besides major skeletal deformities, there are deformities of the extremities, cleft palates, strokes in utero; and neonatal pneumonia, hydroceles, hernias, and many other defects, especially those that may be traced to problems with calcium metabolism or thyroid function and those that are midline anomalies. Toddlers who respond to the remedy Tuberculinum may have had a sibling who was born anencephalic.

Irritability is common in babies and toddlers, especially during dentition, when waking up in the morning, and when hungry. The irritability may lead to nasty behavior in young children. Some may bite others, while some may show it by putting up a fuss and preventing parents from changing the diapers. Babies and toddlers burrow their heads into the pillow, grind their teeth, and perspire at night. Babies are often born with long hair on the scalp and along the spine, and have long eyelashes. Teeth erupt too soon. Teething is painful and causes fevers, respiratory tract infections, and irritability. There are many problems with the number and position of the teeth. Babies grind their teeth as soon as they erupt, and some infants are born with already erupted teeth. There are many respiratory tract infections of the ears, nose, throat, and lungs. Infants may be born with or develop fluid in the lungs or pneumonia in the first few days of life. Respiratory infections occur especially when weather changes to cold and wet and after drinking milk. With such infections they perspire profusely at night, have fevers that increase in the afternoon, develop diarrhea, and become brightly red faced and irritable. Toddlers have many swollen and indurated cervical glands. They like milk. Diarrhea accompanies many illnesses, especially in the lactose intolerant who drink milk. They often lose weight with diarrhea, even if they nurse and eat often. Tuberculinum babies are typically born thin or are born plump and suddenly thin down in early childhood to become tall, frail, anemic children, even if they eat as much as adults. It is hard for these children to gain weight. They may grow quickly and gain height easily, but they wind up paying for it with bones that cannot keep up with this fast-paced growth; the unfortunate children may suffer from scoliosis, rickets, or Osgood-Schlatter disease, and often from "growing pains." These thin, wiry, anemic children may be hyperactive, but they tire more easily than do Medorrhinum or Sulphur hyperactive children. The opposite is also true: they may also grow very slowly and remain small in stature, fail to develop teeth on schedule, or have a fontanelle that remains open too long. Perspiration is characteristically profuse, and in the congenitally ill child, cadaverous and sour smelling. In general, infants may be retarded in all their mental acquisitions and have large and misshapen heads, swollen glands, bone anomalies, and constant upper respiratory tract infections.

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