

# Ergotherapy in pediatrics

Ergotherapy in pediatrics primarily involves therapy after injuries or congenital birth defects. Others include psychological disorders. It is necessary to adapt the therapy to the child's stage of development (regression or mental retardation may be present), forms of **playing** are used most often. Just like with other groups, the most important thing is to focus on self-sufficiency, so that the child could grow into **an as much independent adult as possible** (it is important to think about education, employment, relationships, etc.). Hospitalized children experience stress from unknown surroundings - to minimize stress, the hospital's environment (decor) is adjusted or contact with family members is enabled (most of the times, it is possible for the mother to stay in the hospital ward). One of the methods is basal stimulation.

## Ergotherapy

- Use of games and creativity;
- Educating and supporting the parents;
- Selection of compensatory aids and training of correct use;
- Providing an overview of suitable leisure activities.

## Selected diagnoses

- Cerebral palsy in children
- Duchenne muscular dystrophy
- Myelodysplastic syndromes
- Mental disabilities (Intelligence and its disorders)
- Anorexia nervosa
- Bulimia

## Links

### Used literature

- VOTAVA, Jiří. *Ergoterapie a technické pomůcky v rehabilitaci*. 1. edition. Technická univerzita v Liberci, 2009. ISBN 978-80-7372-449-8.
- KLUSOŇOVÁ, Eva. *Ergoterapie v praxi*. 1. edition. Národní centrum ošetřovatelství a nelékařských zdravotnických oborů, 2011. ISBN 978-80-7013-535-8.