

Treatment of children diagnosed ADHS with CLT (Sprinter/Skater coordination)

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Introduction:

The main impairments of these children in their psychomotoric development are less coordination and balance, loss of fine motoric, loss of visual and auditive sensation, loss of balance of hyper and hypo tone in muscles.

Purpose:

3 questions were asked:

1. Is CLT feasible for children with ADHD ?
2. Can CLT achieve an improvement in coordination performance?
3. Can the coordination performance be additionally improved with CLT following a sports program?

Method:

Standardized CLT concept worked with sprinter & skater coordination and functions we use in gait.

- 7-10 year old children with medically diagnosed ADHS
- 2 groups were treated, 9 with CLT and 7 sports + CLT
- 30 min. unit over a time period of 5 weeks
- each child was treated identically in side lying, sitting and standing
- using static and dynamic techniques of the CLT concept.

4 pre tests and post tests were taken :

- coordination- Körperkoordinationstest (KTK) nach KIPHARDT & SCHILLING (1974)
- fine motoric- MOT 4-6 nach ZIMMER & VOLKAMER (1987)
- hand-eye coordination - Diagnostisches Inventar motorischer Basiskompetenzen (DMB) nach EGGERT (1993)
- concentration- Differentieller Leistungstest zur Konzentrationserfassung (DLKE) nach Kleber & Kleber (1974)

Results:

All post tests were significant better and show that with CLT these children can overcome their deficits. They have understood the task, responded adequately to stimuli, the required concentration applied, they were motivated to cooperate.

Conclusion: After a sports program, CLT can improve fine coordination.



Key words: CLT, ADHS