PENATALAKSANAAN FISIOTERAPI PADA KASUS CEREBRAL PALSY ATAKSIA DI KLINIK SPECTRUM TREATMENT CENTER

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Abstrak

Latar Belakang : *Cerebral palsy* merupakan gangguan permanen pada perkembangan gerak dan postur tubuh yang bersifat non-progresif akibat kelainan atau cedera otak yang terjadi selama masa perkembangan. Pada tipe ataxia, gangguan utama berupa penurunan koordinasi gerak, keseimbangan, dan kontrol postural yang berdampak pada keterbatasan aktivitas fungsional anak sehari-hari. **Tujuan :** Mengetahui penatalaksanaan fisioterapi pada kasus *cerebral palsy* tipe ataxia, mengidentifikasi permasalahan yang dialami pasien, serta mengevaluasi efektivitas intervensi yang diberikan di Klinik *Spectrum Treatment.* **Metode :** Studi kasus ini dilakukan pada seorang anak dengan diagnosis *cerebral palsy* tipe ataxia di Klinik *Spectrum Treatment* selama tiga pertemuan. Intervensi yang diberikan meliputi massage, joint approximation, dan sensori integrasi. Evaluasi dilakukan menggunakan instrumen palpasi, pemeriksaan sensorik, ROM, GMFCS, GMFM, SARA, serta *Gait Analysis*. **Hasil :** Setelah pemberian intervensi, terdapat peningkatan yang bermakna pada Skor GMFM tedapat peningkatan paling signifikan pada dimensi D sebesar 23,08% dan dimensi E sebesar 18,06%. Skor SARA menunjukkan penurunan dari 20 menjadi 18 poin, mengindikasikan berkurangnya keparahan ataxia. Pada pemeriksaan sensorik, fungsi taktil menunjukkan perbaikan dari hiposensitivitas menjadi normal, meskipun sistem vestibular dan proprioseptif belum mengalami perubahan yang signifikan. Analisis gait menunjukkan kemunculan kembali fase *mid-swing* pada segmen pelvis, yang menandakan perbaikan koordinasi ayunan kaki. Sementara itu, ROM, status GMFCS (Level II), dan *tightness* otot ekstremitas bawah belum menunjukkan perubahan yang signifikan. **Kesimpulan :** Pelaksanaan fisioterapi pada anak cerebral palsy tipe ataksia di Klinik Spectrum Treatment Center dilakukan sebanyak 2 kali per minggu selama kurang lebih 8 bulan dengan 3 kali evaluasi. Pemeriksaan fisioterapi dilakukan secara komprehensif dan ditemukan permasalahan berupa gangguan sensoris, keseimbangan, koordinasi gerak, dan keterbatasan ROM. Intervensi yang diberikan meliputi massage, joint approximation, stimulasi vestibular, balance board, dan stair climbing. Evaluasi dari kondisi awal hingga akhir menunjukkan intervensi fisioterapi efektif dalam meningkatkan kemampuan motorik kasar, keseimbangan, dan koordinasi gerak pasien secara bertahap.

Kata Kunci : *Cerebral palsy* ataxia, Sensori integrasi, SARA, Gait Analisis, Koordinasi motorik.

PHYSIOTHERAPY MANAGEMENT IN CASES OF ATAXIA CEREBRAL PALSY AT CLINIC SPECTRUM TREATMENT CENTER

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Abstract

Background: *Cerebral palsy* is a permanent, non-progressive disorder of movement and postural development resulting from abnormalities or injury to the brain occurring during the developmental period. In the ataxic type, the primary impairments include reduced movement coordination, balance, and postural control, which significantly impact children's daily functional activities. **Objective**: To determine physiotherapy management in cases of ataxic *cerebral palsy*, identify the problems experienced by the patient, and evaluate the effectiveness of interventions provided at Spectrum Treatment Clinic. **Methods**: This case study was conducted on a child diagnosed with ataxic *cerebral palsy at Spectrum Treatment Clinic* over three sessions. Interventions included massage, joint approximation, and sensory integration. Evaluation was performed using palpation, sensory examination, ROM assessment, GMFCS, GMFM, SARA, and Gait Analysis. **Results**: Following the interventions, significant improvements were observed in GMFM scores, with the most notable increases in Dimension D (23.08%) and Dimension E (18.06%). The SARA score decreased from 20 to 18 points, indicating a reduction in ataxia severity. Sensory examination revealed improvements in tactile function from hyposensitivity to normal, although the vestibular and proprioceptive systems showed no significant changes. Gait analysis demonstrated the reappearance of the mid-swing phase in the pelvic segment, indicating improved limb swing coordination. Meanwhile, ROM, GMFCS status (Level II), and lower extremity muscle tightness showed no significant changes. **Conclusion**: Physiotherapy for the child with ataxic *cerebral palsy* at *Spectrum Treatment Center* was conducted twice weekly for approximately eight months with three evaluation sessions. A comprehensive physiotherapy assessment identified impairments in sensory function, balance, movement coordination, and ROM limitation. Interventions included massage, joint approximation, vestibular stimulation, balance board training, and stair climbing. Evaluation from initial to final assessment demonstrated that physiotherapy interventions were effective in progressively improving the patient's gross motor ability, balance, and movement coordination.

Keywords: Ataxic *Cerebral Palsy*, Sensory Integration, SARA, Gait Analysis, Motor Coordination.