

PENATALAKSANAAN FISIOTERAPI PADA KASUS CEREBRAL PALSY SPASTIC DIPLEGIA DI KLINIK KITTY CENTRE

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Abstrak

Latar Belakang: *Cerebral Palsy* (CP) merupakan gangguan kontrol gerak dan postur non-progresif yang menjadi penyebab utama disabilitas motorik pada anak. Tipe *spastic diplegia* secara spesifik menyebabkan peningkatan tonus otot yang lebih dominan pada ekstremitas bawah, sehingga menghambat kemampuan fungsional seperti berdiri dan berjalan. Fisioterapi berperan penting dalam mengoptimalkan kemampuan motorik melalui berbagai intervensi fungsional. **Metode Penelitian:** Penelitian ini menggunakan metode studi kasus pada seorang anak laki-laki (An. C) berusia 3 tahun dengan diagnosis medis *Cerebral Palsy spastic diplegia*. Instrumen pengukuran yang digunakan meliputi *Gross Motor Function Measure* (GMFM-88), *Gross Motor Function Classification System* (GMFCS), dan *Modified Ashworth Scale* (MAS). Intervensi dilakukan sebanyak tiga kali pertemuan dengan protokol berupa *massage*, *stretching*, teknik inhibisi, stimulasi sensori, latihan kontrol postur, fasilitasi berjalan, serta penggunaan alat bantu *orthosis* (AFO dan *Splint*). **Hasil:** Setelah tiga kali intervensi, hasil evaluasi menunjukkan belum adanya perubahan signifikan pada postur, tonus otot, lingkup gerak sendi (ROM), maupun skor fungsional GMFM (tetap pada total skor 59,5%). Pasien tetap berada pada level GMFCS III. Hal ini dipengaruhi oleh durasi intervensi yang singkat, sifat kronis dari gangguan neurologis, serta kurangnya konsistensi pelaksanaan *home program* oleh keluarga. **Kesimpulan:** Dari studi ini mengindikasikan bahwa masalah utama pasien berhasil diidentifikasi melalui pemeriksaan fisioterapi, dan intervensi yang dilakukan ditujukan untuk mengatasi permasalahan fungsional yang ditemukan

Kata Kunci: *Cerebral Palsy*, *Spastic Diplegia*, Fisioterapi, GMFM, Stimulasi Sensori.

PHYSIOTHERAPY MANAGEMENT IN CASES OF SPASTIC DIPLEGIA CEREBRAL PALSY AT KITTY CENTRE CLINIC

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Abstract

Background: Cerebral Palsy (CP) is a non-progressive disorder of movement and posture control that serves as the leading cause of motor disability in children. The spastic diplegia type specifically causes an increase in muscle tone that is more dominant in the lower extremities, thereby hindering functional abilities such as standing and walking. Physiotherapy plays a crucial role in optimizing motor abilities through various functional interventions. **Research Methods:** This study utilizes a case study method focusing on a 3-year-old boy (An. C) with a medical diagnosis of spastic diplegia Cerebral Palsy. Measurement instruments used include the Gross Motor Function Measure (GMFM-88), Gross Motor Function Classification System (GMFCS), and the Modified Ashworth Scale (MAS). Interventions were conducted over three sessions using a protocol consisting of massage, stretching, inhibition techniques, sensory stimulation, posture control exercises, gait facilitation, and the use of orthotic aids (AFO and Splints). **Results:** After three interventions, the evaluation results showed no significant changes in posture, muscle tone, range of motion (ROM), or GMFM functional scores (remaining at a total score of 59.5%). The patient remains at GMFCS level III. These results were influenced by the short duration of the intervention, the chronic nature of the neurological disorder, and a lack of consistency in the implementation of the home program by the family. **Conclusion:** This study indicates that the main problem of the patient was successfully identified through physiotherapy examination, and the intervention was aimed at addressing the functional problems found.

Keywords: Cerebral Palsy, Spastic Diplegia, Physiotherapy, GMFM, Sensory Stimulation.