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Primitive Reflexes

Retained Primitive Reflexes have been found to cause neurological underdevelopment in some areas affecting learning, behavior, development, vision and sensory processing.

What are They?

Primitive Reflexes are the special reflexes that develop in the brain stem before birth. This

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set of involuntary Primitive Reflexes help the baby with positioning in the womb, birthing, the first breath of life, feeding, urination etc. Most of these Primitive Reflexes go away through the first year of life as higher functions of the brain and muscle control develop.

If the reflexes remain, they interfere with the neurological organization of the brain which causes learning, behavioral, social, sensory and health problems. These remaining reflexes are unnoticed muscle movements in older children and adults that would not normally be noticed if one did not know what to look for. They cause ongoing issues until they are solved through exercises.

Retained Symmetrical Tonic Neck Reflex (STNR)

Symmetrical Tonic Neck Reflex Exercises
The Symmetrical Tonic Neck Reflex is present at birth then disappears until about 6 to 9 months. It reappears for a few months to assist in learning to crawl.

You will notice it in a baby if you move their chin down toward their chest. The knees will bend. If you move the head up toward the back, the legs will straighten. Do not confuse

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this with the Landau Reflex. They are two separate reflexes.

If this does not integrate and disappear by about 11 months, it can cause motor learning and behavior disorders. Simple exercises can solve the problem.

Symptoms of Retained Symmetrical Tonic Neck Reflex

- Poor posture standing
- Sits with slumpy posture
- Low muscle tone
- Ape-like walk
- Problems with attention especially in stressful situations
- Vision accommodation and tracking problems
- Difficulty learning to swim
- Difficulty reading
- Usually skips crawling
- Sits with legs in a W position
- ADD
- ADHD
- Hyper activity or fidgety
- Poor hand eye coordination
- Problems looking between near and far sighted objects, like copying from a chalkboard
- Sloppy eater

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- Rotated Pelvis

Retained Tonic Labyrinthine Reflex

Tonic Labrynthine Reflex Exercises
Tonic Labyrinthine Reflex (TLR) is the foundation for head control. Baby needs it to roll, crawl, and later stand and walk. It develops in the womb and continues past the first year of life. It is usually integrated by 3 years. If not, it can cause problems.

When a baby is laying back and the head is tilted back, the baby will stiffen the legs, bend elbows, make fists or curled fingers, and the toes will point. This is normal for an infant. As the baby matures, starts to walk and gains control over the large muscles, the Tonic Labyrinthine Reflex will integrate and disappear.

If the Tonic Labyrinthine Reflex does not integrate, the functions that develop after do not organize correctly.

Retained Tonic Labyrinthine Reflex

Symptoms

- Poor balance and spacial awareness
- Tense muscles and toe walking

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- Difficulty holding still and concentrating
- Muscle tone issues
- Poor posture
- Difficulty paying attention when head is down (at a desk or reading)
- Dyspraxia
- Poor sense of rhythm
- Gets motion sickness easily
- Prefers to walk on toes
- Speech and Auditory difficulty
- Spatial issues
- Bumps into things and people more than normal

Retained Asymmetrical Tonic Neck Reflex (ATNR)

The Asymmetrical Tonic Neck Reflex, like the Spinal Gallant Reflex (SGR), helps the infant do their part of emergence through the birth canal and learn hand and eye control. You will notice it in an infant if you gently turn their head to one side. The arm and leg on the same side will straighten, while the arm and leg on the opposite side will flex. The Asymmetrical Tonic Neck Reflex develops at 18 weeks after conception and should be integrated and gone by about 6 months after birth. If not, it can cause motor issues, reading, math, and other learning problems.

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The connection between the hand and eyes help develop depth perception and eye-hand coordination. If the ATNR is retained the child will have difficulty walking normally when turning his head or problems writing and reading when head movement is needed, which is always. For example, writing while looking back and forth to the blackboard or a book.

Asymmetrical Tonic Neck Reflex Symptoms

- Reading Difficulties
- Hand eye coordination problems
- Awkward walk or gait
- Difficulty in school
- Immature handwriting
- Difficulty in sports
- Math and reading issues
- Poor balance
- Eye, ear, foot, and hand dominance will not be on the same side
- Difficulty in things that require crossing over the midline of the body
- Poor depth perception
- Shoulder, neck and hip problems

Retained Moro Reflex or Startle Reflex

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Moro Reflex Exercise The Moro Reflex develops about the thirteenth week of gestation. It develops to help protect the baby from danger sensed through the sensory system and take the first breath of life. When a newborn is startled or receives sensory input like a jarring, sudden light or sound, the arms will flail out, then baby quickly takes a deep breath, then curls up crossing both the arms and legs.

This is an involuntary reflex that is part of normal development and should disappear between 2-4 months of age. Because this reflex is triggered by the sensory systems, it can cause an array of problems if it remains longer.

Pediatricians will check this reflex at the baby's 6 week appointment to make sure it is present. They seldom check in later appointments to make sure it was integrated and gone. It is not part of the pediatric list of assessments done at later appointments.

Because of the changing environment, procedures, and lack of tummy time, more children are not integrating this reflex.

Retained Moro Reflex Symptoms

- Easily Distracted
- Hypersensitive to sensory stimuli like light and sound and touch.
- Over sensitivity to motion causing car sickness
- Or under sensitivity to sensory stimuli
- Overreacts
- Impulsive and aggressive
- Emotional immaturity
- Withdrawn or timid and shy
- ADD
- ADHD
- Autism Spectrum
- Asperger's
- Sensory Disorders
- Difficulty making friends
- Depression
- Health Problems
- Allergies and Asthma
- Anger or Emotional Outbursts
- Poor Balance and Coordination
- Poor Digestion and Food Sensitivities

Retained Landau Reflex

The Landau Reflex is one that develops a few months after birth and remains until about 12 months old. It is useful in helping the child develop posture. If the Landau Reflex does not

integrate (go away), it can cause posture, motor, and memory issues later on.

Symptoms of Retained Landau Reflex

- Low Muscle Tone
- Poor Posture
- Poor Motor Development
- Short Term Memory Difficulty.
- Tension in the back of legs, toe walker.
- Lack of Stimulation in the pre frontal cortex causing attention, organization and concentration problems.
- Weak upper body
- Difficulty swimming the breast stroke.
- Struggles to do a summersault.
Knees buckle when head tucks under.

Retained Palmar Reflex or Grasp Reflex

Palmar Reflex The Palmar Reflex aka Grasp Reflex is seen when an infant grips around an object that touches their palm. This is normal and helps the baby learn to grip and hang on to things with their hands. The Palmar Reflex develops in the third month of gestation and should disappear at around 3-6 months of age

as they gain hand control. It is needed for hand-eye coordination, proper vision, and direction/distance judgement. If it isn't properly integrated it can contribute to an array of problems.

Retained Palmar Reflex Symptoms

- Poor handwriting
- Poor pencil grip
- Poor fine muscle control
- Poor dexterity
- Poor fine motor skills
- Poor vision coordination
- Slumpy posture when using hands
- Back aches when sitting
- Sticks tongue out when using hands
- Poor pencil grip
- Poor ability to put thoughts to paper
- Dysgraphia
- Speech and language problems
- Anger control issues

Retained Spinal Galant Reflex

Spinal Galant Reflex Exercises
The Spinal Galant Reflex develops in the womb at about 20 weeks gestation. It helps the baby develop the Vestibular System. In Infancy, the Spinal

Galant Reflex, along with the Asymmetrical Tonic Neck Reflex (ATNR), are necessary to help the unborn infant descend down the birth canal. It also helps the baby urinate after birth. You will see the reflex in an infant if you gently stroke down one side of the lower part of the spine. The baby's arms and legs will sway toward the direction of the stroke almost like being ticklish. If both sides of the spine are stroked at the same time it induces urination. This is normal. However, the Spinal Galant Reflex should be gone by 3-9 months as higher muscle control develops. This is called 'integrating'. If not properly integrated, it can cause many subtle issues.

Retained Spinal Galant Reflex Symptoms:

- Fidgety, Hyper Activity, especially if clothes or chair brush their back.
- If active down only one side, can cause scoliosis, rotated pelvis and lower back pain.
- Poor concentration
- Attention problems
- Bedwetting long after potty training
- Short term memory issues
- Fidgeting and wiggly "ants in the pants"
- Posture problems

- Hip rotation on one side/possibly scoliosis
- Low endurance
- Chronic digestion problems

Retained Rooting Reflex

The Rooting Reflex is important in helping an infant locate food and breast feed. It develops during pregnancy and continues until the baby is about 4 months old. You will notice the Rooting Reflex in a newborn if you brush your finger down one side of the mouth. The baby will turn toward the stroke and open the mouth. This is normal but should integrate (disappear) by about 4 months. If it is not properly integrated, it can contribute to problems in speech, writing, eating disorders and Thyroid problems. Be sure to do the Retained Rooting Reflex Test shown below on your child.

Children with eating disorders aggravated by a Retained Rooting Reflex will have a constant urge to have something in their mouth, yet are often sensitive to textures. These ones end up being the ones that are always chewing on something plastic, drools, or struggles to form their words properly. The Retained Rooting Reflex can cause the tongue to lie too far forward in the mouth. This can cause

difficulty swallowing and chewing their food.

Retained Rooting Reflex Symptoms

- Tongue lies too far forward
- Hyper sensitive around mouth
- Difficulty with textures and solid foods
- Thumb sucking
- Speech and articulation problems
- Difficulty swallowing and chewing
- Dribbling
- Hormone imbalance
- Thyroid problems and autoimmune tendency
- Dexterity problems when talking

Retained Rooting Reflex

What Can Be Done?

If any of them remain past 12 months, they are called Retained Primitive Reflexes and they are a problem. There are simple exercises that can solve each one. This process is called Integrating Primitive Reflexes. Once they are integrated through these little exercises, many Learning Disabilities, Behavioral, Sensory Disorders, and health issues disappear or are greatly improved. You need to check for each of them, even if your child is

not displaying the usual symptoms. If one remains unnoticed, it slows improvement in cognitive function.

Retained Babinski Reflex

Babinski Reflex The Babinski Reflex can affect developmental disabilities and learning disabilities.

The Babinski Reflex is a Primitive Reflex that is part of normal development. When the pad of a babies foot is pressed, their toes will curl down. This later integrates into the Palntar Reflex which spreads the toes when stroked down the side of the foot.

Symptoms when Primitive Reflexes Remain:

Because Primitive Reflexes start at the base of the brain. Functions that try to develop above them don't wire properly. It can cause or contribute to:

Autism

Autism Spectrum Disorders

Asperger's

Hemispheric Imbalance

Sensory Disorders

Hyper Activity

ADHD

Speech Disorders

Social Disorders

Asthma

Dyslexia

Dysgraphia

Dyscalculia

Immune Problems

Other Health Issues

Other Learning Disabilities

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