

Peacock Center for Cerebral Palsy and Movement Disorders

We have the largest spasticity program in the region.

Children with cerebral palsy often cannot walk, due to spasticity in their legs. The Children's Peacock Center for Cerebral Palsy and Movement Disorders is led by neurosurgeon Peter Sun, MD, orthopedic surgeon Scott Hoffinger, MD, and Rehabilitation Medicine physiatrists Jacob Neufeld, MD, MSPH, Christine Aguilar, MD, and Robert Haining, MD.

Warwick Peacock, MD, the modern pioneer of selective dorsal rhizotomy in the U.S., has chosen Children's Hospital Oakland to continue his innovative work in the treatment of spasticity. The center bears his name in recognition of this distinguished honor.

PROCEDURES FOR TREATING CEREBRAL PALSY (CP) AND SPASTICITY

Selective dorsal rhizotomy surgery (SDR) was popularized in North America by Children's Hospital Neurosurgery consultant Warwick Peacock, MD. Dr. Peacock taught the operation to the neurosurgeons who now perform the majority of rhizotomies in the U.S.

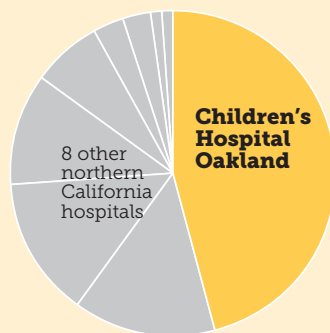
Rhizotomy reduces spasticity in the lower extremities of children with spastic diplegia. Combined with intensive rehabilitation and subsequent orthopedic surgery, rhizotomy enables some children with spastic diplegia to become lifetime walkers, instead of being confined for life to a wheelchair.

Another procedure for patients with cerebral palsy involves surgical placement of a pump to deliver Baclofen to the intrathecal space in the spine. Baclofen reduces spasticity and pain, improving the patients' quality of life, and allowing them to be cared for more easily.

INPATIENT SPASTICITY CASES, 2008-09

Children's treated nearly half of all of northern California's pediatric spasticity cases in 2008-09.

Primary & Secondary Service Areas (Alameda, Contra Costa, Marin, San Francisco, San Joaquin, Santa Clara, Solano, Sonoma, Stanislaus); Ages 0-17; ©2010 Children's Hospital & Research Center Oakland



CASE STUDY: Creighton, 9

Overview: Born premature at 25 weeks with cerebral palsy.

Treatment: Surgery corrected the spastic diplegia by selectively cutting dorsal nerve rootlets determined to be improperly balancing the brain and muscle signals to Creighton's legs.

Outcome: Following eight weeks of intense physical therapy, Creighton can now walk on his own without using a cane.

Testimonial: Creighton's mother says, "We had a year to digest whether SDR surgery was a good decision for us. Taking into account how much we valued Dr. Sun's skills and opinions, I was ready to follow him anywhere."



Dr. Peacock with Creighton