Sensory Integration Disorder

Sensory Integration is the process where our brain and nervous system process the information that comes to us through our senses. The disorder is where one is unable to process the information that is received through the senses. It occurs in about 5% of the population, often with another developmental disability. The most common senses involved are the sense of touch, the sense of body position (proprioception) and the sense of movement (vestibular). It may have a variety of symptoms complexes, usually 2 of the 3. These symptoms complexes are listed below:

- **Sensory Avoidance of Sensory Defensiveness** - their nervous system is too sensitive to the input from their senses. They often withdraw or become aggressive if they are touched or stimulated too much. They fear movements. They do not like new things or novel situations. They cannot tolerate loud places and dislike many smells. They can be picky eaters because of the way food feels in their mouths or because of the way it looks or smells.

- **Sensory Seeking** - these children’s nervous system needs more stimulation and input to function. They are typically hyperactive and seek out loud chaotic environments. Often are unaware of painful sensations. Often they touch too much and will get too close to someone’s space.

- **Motor Skill Problems or Dyspraxia** - they are often clumsy, awkward and accident-prone. They cannot interpret the location of their limbs, hands and feet correctly. They frequently have trouble with balance and sequence of movements. Their handwriting often is difficult to read.

The senses are listed below:

- **Sight** – for SID children they are overly sensitive or under sensitive to light. They might complain about the sun or might even not tolerate a regular light bulb shining light on them. Flashing lights might disturb them.

- **Hearing** – for SID children often they are sensitive to specific noises, maybe not just loud noises, but only certain types of noises. They may be under sensitive and need everything to be extremely loud and blaring.

- **Touch** – many children with SID cannot be touched. They are very ticklish. They may not like hugging. Other issues with touch might be that they must be touching constantly, hands all over someone just to touch them. Oral touch is an issue in itself. Many SID children will only eat certain foods because of the way those foods feel in their mouth.

- **Smell** – overly or under sensitive to smells. Some children with SID will smell everything, even things that most of us would not feel has any smell to it. Eating also can be affected by smell;
some SID children will not eat things because the smell is too strong.

- **Movement** – the SID child is just as likely to be very sensitive to movements as seeking out spinning, jumping and being hyperactive. It is about not being able to regulate the movement in either direction.

- **Body Position** – because they often cannot clearly know where body parts are, they seem clumsy. They may go into your space and linger too close because they do not have good perception of location of their bodies.

- **Taste** – though eating problems have been mentioned in both smell and touch, clearly many children with SID have problems with particular foods themselves for a number of reasons. Often certain foods have such a strong sense of taste that they are unable to consider eating them. Medication also can be a huge problem for children with SID

Having difficulty with transitions and new circumstances is more of a combination of several of the senses. Certainly movement and body position are involved as the sense of touch. Because many transitions involve noise levels and different sights it can involve these senses. Most children with SID have issues with transitions and novel situations.

An example of a child with Sensory Integration Disorder might go like this. This child is sitting at the family room trying to do some easy homework. His mother is cooking in the kitchen close by and other sibling is watching TV on the other side of the room. He suddenly has a melt down because his sensory system has been overloaded. He begins to cry and scream and cause quite a ruckus. The smells of dinner distract him, the TV is too loud and pages of the book he is trying to use feel bad to his hands. The evening goes from bad to worse.

So what can one do about Sensory Integration Disorder? An Occupational Therapist who is trained in dealing with children with SID will be the most valuable place to get your child assistance. They will use desensitizing techniques to assist the child in tolerating the sensory overload that he or she has. Not all Occupational Therapists treat SID, so you may have to call to inquire.

Parents can use the same sort of methods at home as well. Trying to prepare the child for things that may seem unpleasant and gradually allow the child to accept and become accustomed to the sensory input that is bothering him or her. Parents are very good once they understand the disorder, in helping their children cope. Sometimes psychotherapy is used to allow the child to learn techniques to cope as well, particularly if he is older. The best news of all is that most SID issues will improve with age.

SID is often a co-morbid condition. 90% of children with an Autism Spectrum Disorder will have SID. 30-40% of children with learning disabilities will have some degree of Sensory Integration issues. ADHD can also be accompanied by SID. Premature babies have been shown to have more problems with SID as are children with anxiety disorders. Treating the co-morbid condition is extremely important in helping with SID.

One final note, some people use the term **Sensory Processing Disorder**; they are synonymous.