

SPINA BIFIDA

Spina bifida is a condition affecting the spine. It is usually seen at birth. The backbone that protects the spinal cord does not form and close the way it should. As a result there is damage to the backbone and nerves. Spina bifida can happen anywhere along the backbone. Its severity depends on the size and location of the opening on the spine and to what extent the backbone and nerves are affected.

In most cases children with spina bifida have no intellectual problems hence they can go to a normal school like any other child and have a fulfilled life when grown adult.

Spina bifida is not contagious. One cannot catch it.

SPINA BIFIDA

Spina bifida ni hali inayoathiri uti wa mgongo. Hali hii huonekana kwa mtoto anapozaliwa. Mifupa inayolinda uti wa mgongo hukosa kukua vyema na hivyo kukosa kuinga uti wa mgongo inavyostahili na hii husababisha madhara kwa uti wa mgongo na mishipa yake ya hisia. Hali hii ya spina bifida yaweza kuathiri sehemu yoyote ya uti wa mgongo. Makali ya hali hii hutegemea na sehemu ya uti wa mgongo iliyoathirika na kina cha uharibifu kwenye sehemu hiyo.

Mara nyingi, watoto wenye hali hii ya spina bifida, huwa hawana shida zozote za kiakili na wanawea kuhudhuria masomo kwenye shule za kawaida.

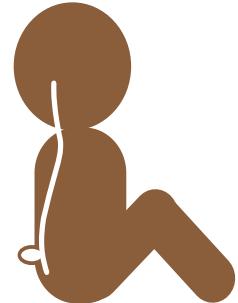
Spina bifida haiambukizwi.

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SPINA BIFIDA

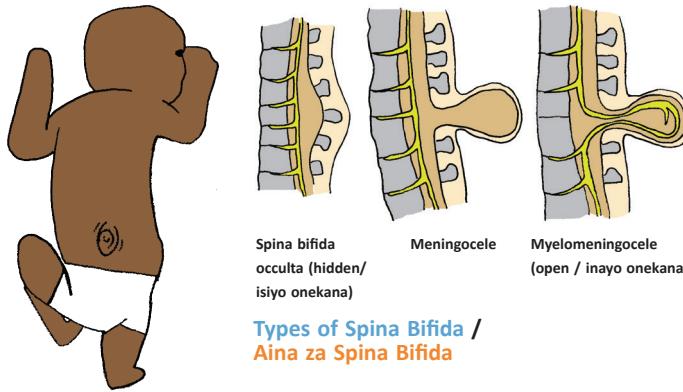
SPINA BIFIDA

All SEP Brochures

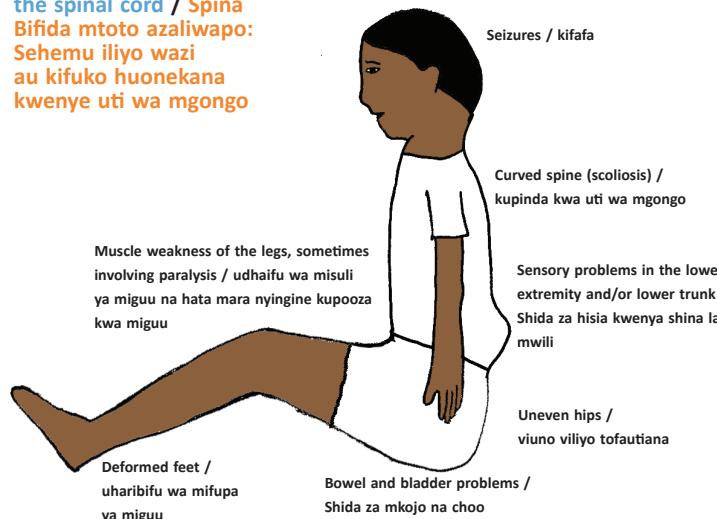
- Autism Spectrum Disorder (ASD)
- Cerebral Palsy
- Communication Disorder
- Down Syndrome
- Hydrocephalus
- Learning Difficulties
- Rickets
- Rights for Children with Disabilities
- Spina Bifida

SEP Brochures Zote

- Autism
- Cerebral palsy
- Chirwa
- Down syndrome
- Maji kichwani
- Haki za watoto walemaruvu
- Shida za kusoma
- Shida za mawasiliano
- Spina Bifida



Spina Bifida at birth: an open spot or sac along the spinal cord / **Spina Bifida mtoto azaliwapo:** Sehemu iliyo wazi au kifuko huonekana kwenye uti wa mgongo



Chanzo cha Spina Bifida

Spina bifida inaweza kusababishwa na hali ya kimaumbile, mazingira au lishe. Hata hivyo, sababu kuu ya spina bifida ni upungufu wa vitaminii B aina ya ‘folic acid’ kwenye lishe ya kina mama wenye uja uzito haswa katika miezi yao ya kwanza.

Aina za Spina Bifida

Kuna aina tatu maarufu za spina bifida:

- Spina bifida occulta (isiyo onekana): hali hii ya spina bifida haitambuliki kwa urahisi na haiathiri mtoto kwa kiwango kikubwa. Inatokana na kutofungika vyema kwa sehemu ya nje ya uti wa mgongo.

Causes of Spina Bifida

Genetic, environmental and nutritional factors can cause spina bifida. Insufficient intake of vitamin B (folic acid) in the mother’s diet during early pregnancy is thereby a key factor.

Types of Spina Bifida

There are three main types of spina bifida:

- Spina bifida occulta (hidden spina bifida): for this mild type of spina bifida, the outer part of the backbone is not completely closed. Many people do not know it as a condition.
- Myelomeningocele (open spina bifida) is the most severe type of spina bifida. It is the one people usually mean when they use the term spina bifida. The spinal cord does not form properly and a portion of it protrudes through the back. A sac containing cerebrospinal fluid and blood vessels surrounds the protruding cord. As the sac is usually not covered by skin, the nerves and tissues are exposed. Between 70 and 90 percent of infants born with myelomeningocele also experience hydrocephalus.
- Meningocele is a rare form of spina bifida. The meninges (membrane surrounding the spinal cord) protrude through the opening causing a lump or sac on the back, while the spinal cord is undamaged. The child therefore has no neurological problems and can live a normal life.
- Myelomeningocele (spina bifida inayo onekana): hali hii ya spina bifida ndio inayotambulika kwa urahisi sana na ni hali inayoathiri mtoto kwa kiwango kikubwa. Inatokana na uti wa mgongo kukosa kukua vyema na hata kupelekeea sehemu moja ya uti wa mgongo kutoka nje. Sehemu hii iliyotoka nje huzingirwa na kijifuko chenye maji ya uti wa mgongo na mishipa ya kusafirisha damu, ambacho hukosa kufunikwa na ngozi na hivyo kuning’inia kwenye hatari. Kati ya asilimia sabini na tisini (70-90) ya watoto wanaozaliwa na hali hii ya myelomeningocele pia hupatwa na hali ya hydrocephalus (maji kichwani).
- Meningocele ni aina nadra ya spina bifida. Hali hii hupatikana wakati utandio wa uti wa mgongo hutoka nje na kusababisha kuonekana kwa kijifuko mgongoni. Hali hii haiathiri uti wa mgongo kwa vyovoyote vile. Watoto wenye hali hii huishi maisha ya kawaida sawia na wenzao wasio na hali hii.

Matibabu ya Spina Bifida

Matibabu ya spina bifida hutegemea na kina cha hali yenye. Mara nyingi, spina bifida aina ya occulta huwa haiitaji matibabu yoyote.

Management of Spina Bifida

Spina bifida treatment depends on the severity of the condition. Spina bifida occulta usually does not require treatment at all.

Surgery helps minimize risks of infections of the exposed nerves and protects the spinal cord from additional trauma. Myelomeningocele requires surgery, usually within 24 to 48 hours after birth. Meningocele can be repaired through surgery at any time during infancy with little or no nerve damage.

Therapy: Paralysis and bladder control problems often remain after surgery. Treatment should begin soon after birth. Babies with myelomeningocele may also start exercises that prepare their legs for walking with braces or crutches later in life. Most children living with spina bifida need a wheelchair or appropriate walking aids to increase their level of independence.

If spina bifida occurs with deformed feet, specific management is necessary (therapy, surgery). Children with seizures need medical treatment.

Upasuaji wa mapema husaidia kupunguza kuambukizwa kwa mishipa ya hisia iliyotoka nje na pia kuzuia athari zaidi kwenye uti wa mgongo. Hali ya spina bifida aina ya myelomeningocele huhitaji upasuaji kati ya masaa ishirini na nne na arobaini na nane (24-48) ya mtoto kuzaliwa. Hali ya meningocele pia yaweza kutibiwa kwa njia ya upasuaji kwa watoto wachanga wasio na madhara kwenye mishipa yao ya hisia.

Matibabu ya mazoezi: Mara nyingi, shida za mkojo na kupooza husalia hata baada ya upasuaji. Kwa hivyo, matibabu yanafaa kuanza pindi tu mtoto anapozaliwa. Watoto walio na hali ya myelomeningocele wanaweeza kuanza mazoezi ya kuwatayarisha kutembea kwa kutumia vifaa maalum katika maisha yao ya baadae. Watoto wengi wenye hali hii ya spina bifida huhitaji viti ya gurudumu au vifaa maalum vya kuwasaidia kutembea ili waweze kupata uzoevu wa kujitembeza wenyewe.

Ikiwa spina bifida itatokea pamoja na ulemavu wa miguu, matibabu halisi ya itahitajika (mazoezi, upasuaji). Watoto ambao wanaugua kifafa wanahitaji matibabu.