Purpose:
Determine benefits of individualized intensive model of therapy on children with neurological and physical disabilities.

Intervention:
An 11-year-old child with spastic diplegia cerebral palsy, GMFCS level II, participated in intensive therapy. He received 4 hours of physical and occupational therapy per day, 5 days per week, for 3 weeks. His individualized treatment plan included traditional occupational and physical therapy with the use of modalities such as NeuroSuit, Body Weight Support System, and Whole Body Vibration.

Outcomes:
The patient made significant improvements in his strength, balance, posture, and endurance, as evidenced by a 3.5% increase in his GMFM-88 score from 86.94% to 90.4%.

Implications:
The mean amount of improvement over the course of 12 months for a child GMFCS level II over 6 years of age is 1.55% with a standard deviation of 7.06%. (68% of children will show a change of -5.51 to 8.61%). This child’s progress of 3.5% over the course of 3 weeks therefore represents a remarkable improvement. It is twice the mean improvement over one year of children in the same age group and GMFCS level.

This case demonstrates that the potential for improvement persists throughout childhood and even into adolescence. Three factors that make the intensive model of therapy so successful are the dosage (time and duration) of treatment, the use of diverse and innovative modalities, and the skill and consistency of specially trained therapists. Interdisciplinary collaboration and shared passion in a team-like environment also play important roles.