



**YOUTUBE
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The Spinal Galant Reflex

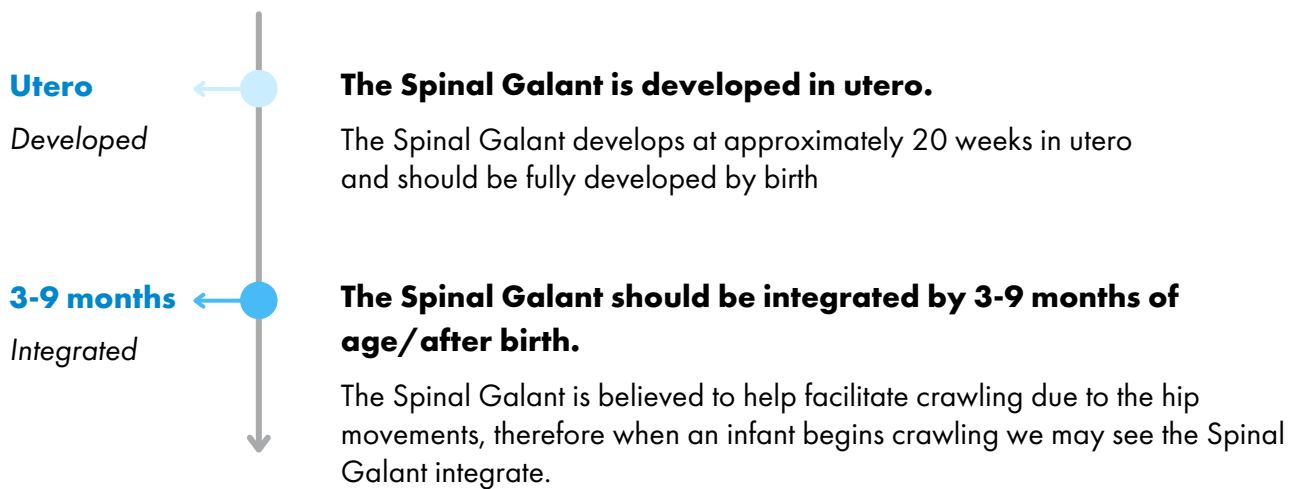
What is the Spinal Galant Reflex?

- The Spinal Galant is triggered by stimuli to the back.
- This can be done by stroking down one side of the spine (while the infant is laying on their stomach), facilitating hip movement away from the stimuli.
- This can also be done while the child is in quadruped (on all fours).
- The Spinal Galant Reflex contributes to the development of the inner ear, which facilitates the process of hearing and balance.
- It supports development of the posterior chain, i.e. muscles on the back of the body.
- It prepares the child for crawling, standing, and walking by supporting gross motor skill development and coordination.
- Urination is frequently associated with a retained Spinal Galant Reflex. It has also been observed in adults suffering from IBS.
- If both sides of the spine are stroked simultaneously from pelvis to neck, the Pulgar Marx reflex is elicited, which consists of both legs moving into flexion, lordosis of the spine, elevation of the pelvis, arm flexion, lifting the head, crying, and emptying of the bladder.
- This is why we often see night-time bed wetting in older children when this reflex is retained.
- The Pulgar Marx Reflex should be integrated by 2-3 months.
- The Spinal Galant Reflex also plays a role in developing the vestibular system and is connected to the Asymmetrical Tonic Neck Reflex (ATNR), which also plays a role in the birth process.
- During labor, contractions stimulate the lumbar region (the lower back), which causes movement in the hips, thus helping the baby move down the birth canal.
- Additionally, "it also contributes to the development of the range of movements of the hips needed for crawling and walking."

Source:
Reflexes, Learning and Behavior



Spinal Galant Integration:



Special Notes on Integration:

Special Note #1

If a child has successfully integrated their primitive reflexes, a sudden or chronic bout of trauma, stress or injury can re-activate these reflexes.

Special Note #2

While there is no guarantee for reflex integration, there are contributing factors to consider if your child has an unintegrated Spinal Galant.

Special Note #3

Because of the connection between the ATNR and the vestibular system, if a child has an unintegrated Spinal Galant, it is likely that they will have challenges with vestibular processing as well as a retained ATNR.

Source:

journals.plos.org/plosone/article?id=10.1371/journal.pone.0214548

What an unintegrated Spinal Galant looks like:

Because the Spinal Galant is directly related to the vestibular system and the ATNR, and consists of a physical reaction, it has a direct impact on movement, balance, muscle tone, and coordination.

As stated earlier, it also facilitates urination when both sides of the spine are stimulated simultaneously.

In the classroom, a child will significantly struggle with sitting still for long periods of time. They often look as though they have 'ants in the pants,' as they wiggle and change positions constantly.

Additional symptoms of a potentially retained Spinal Galant:

- Excessive fidgeting
- Bed wetting beyond the age of 5 years
- Hypersensitivity to clothing and tactile input
- Challenges with sustained attention
- Potential for scoliosis and poor posture
- Dyslexia
- Poor concentration
- Middle ear infections
- IBS (Irritable bowel syndrome over 4 yrs)
- If retained on one side more than the other, it can affect:
 - Motor skills such as rolling and crawling
 - Gait / walking patterns
 - Hip rotation to one side while walking
 - Balance and coordination