

## Effects of MNRI Visual Reflex Neuro-Training on Visual and tutorial Skills of kids with syndrome

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### Abstract :

The Masgutova Neurosensorimotor Reflex Integration (MNRI) Visual Reflex NeuroTraining (VRNT) program facilitates improvement in seeing, fixation, quality and saccades practicality in kids with syndrome Spectrum Disorder and supports their tutorial skills of reading, writing, and overall neurodevelopment. Objective: Our objective was to see the effectiveness of MNRI VRNT exercises on the attention following, ocular-vestibular and optokinetic visual reflex patterns (based on saccades) in kids diagnosed with syndrome (Study cluster, n=240). The analysis hypothesis was that coaching mistreatment these early visual sensory-motor patterns such as: visual modality and visual fixation, convergence/divergence, eye following, ocular-vestibular and optokinetic can improve seeing and process leading to a positive impact on tutorial skills notably reading and writing for kids with ASD. Study Design: A controlled trial setting and participants - 360 people diagnosed with ASD of moderate severity from seven to ten years ancient. kids attended the VRNT sessions at MNRI Family Conferences (Poland and USA). The study provided comparative analysis and correlation of leads to visual ability counting on specific visual reflex patterns. A comparison of the Study cluster and management cluster one and management cluster two was evaluated. Study cluster of kids diagnosed with ASD (n=240) enclosed boys (n=142); 7-8 year-old (n=58); 8-9 year-old (n=40); 9-10 year-old (n=44) and ladies (n=98); 7-8 year-old (n=33); 8-9 year-old (n=28); 9-10 year-old (n=37); verbal (n=91) and non-verbal (n=54), with partial ability to pronounce restricted quantity of words (n=95). 1. management cluster 1: enclosed kids diagnosed with ASD (n=120) enclosed boys (n=83); 7-8 year-old (n=28); 8-9 year-old (n=31); 9-10 year-old (n=24) and ladies (n=37); 7-8 year-old (n=12); 8-9 year-old (n=14); 9-10 year-old (n=11); verbal (n=47) and non-verbal (n=24), with a partial ability to pronounce a restricted quantity of words (n=49). 2. management cluster 2: enclosed typical kids (n=260) with boys (n=120); 7-8 year-old (n=43);

8-9 year-old (n=38); 9-10 year-old (n=28) and ladies (n=140); 7-8 year-old (n=52); 8-9 year-old (n=46); 9-10 year-old (n=42); verbal and with traditional neurodevelopment markers (n=260). At the primary stage of the study all participants diagnosed with ASD (n=360) within the Study cluster (n=240) and management cluster one (n=120) and management cluster two (n=260) of kids with typical development had pre- and postassessments of: a) Visual reflexes (seven patterns total): Binocular single vision and visual fixation, convergence, divergence, horizontal eye following, nystagmus, optokinetic and ocular- vestibular/vestibular-optic. (Children within the management teams didn't have the MNRI I Visual Reflex NeuroTraining.) b) Visual skills (Test): Convergence stability, radial asymmetry in perception, kind perception/processing, eye following (pursuits and saccades), accommodation (eye- focusing), visual- motor integration, visualisation, and other. c) tutorial talents of reading and writing: (Standard faculty Performance check - SPT) with age differentiation. At the second stage of the study MNRI VRNT was given to the youngsters within the Study cluster (n=240). At the third stage of the study a comparative analysis of results on visual reflex patterns and visual skills was evaluated considering faculty ability in reading and writing of kids diagnosed with ASD within the Study cluster and each management teams compared to instructional norms for reading and writing (SPT). Individuals diagnosed with syndrome Spectrum Disorder (ASD), initial delineated by Dr. Leo Kanner [1] as Associate in Nursing "inability to relate 'themselves' within the standard thanks to individuals and situations" area unit given this designation once "deficits area unit concerned into 2 following areas: 1) Social interactions and communications and 2) Restricted, repetitive patterns of behavior and interests.

### Keywords:

Vision: MNRI; Reflex; Autism; tutorial skills; Neurodevelopment; Eye following

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