Over the past two decades, the Institutes for the Achievement of Human Potential and their affiliates have made continuing claims for the efficacy of their methods of treatment for brain damage and other disorders. A number of organizations have issued cautionary statements regarding these claims, including a formal statement by a consortium of American and Canadian organizations published by the American Academy of Pediatrics on June 1, 1968. Recent media coverage and an increasing number of inquiries from parents and public officials dictate that the Academy review the current status of the controversy, update and modify the 1968 statement, and propose some recommendations.

The reasons for concern include the following:

- The promotional methods employed by the Institutes make it difficult for parents to refuse such treatment without calling into question their adequacy and motivation as parents.
- The regimens prescribed by the Institute are so demanding and inflexible that they may place considerable stress on parents and lead to their neglect of other family members' needs.
- Advocates assert that the child's potential will be reduced if therapy is not carried out as rigidly prescribed and that less than 100% effort is useless and is the cause of any failure of the treatment approach.
- Restrictions are often placed on age-appropriate activities of which the child is capable, such as walking or listening to music, although these restrictions are not supported by data or long-term results published to date.
- Claims are made for rapid and conclusive diagnosis based on a "Developmental Profile" utilized by the Institutes. However, no basis for the Profile has even been published, nor is there evidence of any attempt to validate it by comparison with any accepted methods.

Claims have been made for a substantial number of cures, and the claims have extended beyond therapy for disease states, asserting that the treatment can make normal children superior, ease world tensions, and possibly "hasten the evolutionary process.

Without supporting data, Doman and Delacato have indicated many typical child rearing practices as limiting a child's potential, thereby increasing the anxiety of already-burdened and confused parents.

Notwithstanding these dramatic claims, we are aware of only one study since 1967 that has suggested small functional improvements in some patients receiving patterning. The fact that virtually no new data have been presented since 1967 to support the Doman-Delacato treatment is by itself cause to question the extensive claims made for patterning.

THE THEORY

The theory, which is alleged to be universally applicable, is based largely on oversimplified concepts of hemispheric dominance and the relationship of individual sequential phylogenetic development. According to the theory, the great majority of cases of mental retardation, learning problems, and behavior disorders are caused by brain damage or "poor neurological organization," and all these problems lie somewhere on a single continuum of brain damage, for which the only effective treatment is that advocated by the Institute.

The information currently available does not support these contentions. In particular, the lack of uniform dominance or sidedness is probably not a significant factor in either the etiology or the therapy of these conditions.
Cultural and anthropologic differences have also been “explained” by the theory. For example, the lack of a written language in some primitive tribes is attributed to restrictions on crawling and creeping,\(^{39}\) a very narrow and questionable view.

One careful review of the theory has led to the conclusion that “the tenets are either unsupported or overwhelmingly contradicted when tested by theoretical, experimental, or logical evidence from the relevant scientific literature. As a scientific hypothesis the theory of neurological organization seems to be without merit.”\(^{22}\) Another review\(^{23}\) concluded that the theoretical rationale for the method was not consistent with generally accepted views about the nature of neurologic development.

**CURRENT STATUS OF CLAIMED THERAPEUTIC RESULTS**

Results published by or for the Institute have been inconclusive.\(^{15,31,32}\) Many reports of improvement in reading ability after treatment have been heralded as support for the theory,\(^ {18,33,34}\) but statistical analysis reveals few demonstrable benefits.\(^ {21,35}\) Controlled studies of the Doman-Delacato treatment with respect to claims have shown little or no benefit from the treatment.\(^ {36-39}\)

It has been pointed out repeatedly that some handicapped children who purportedly benefited from treatment had had their condition misdiagnosed or had been given unduly pessimistic prognoses. The course of maturation in these children is varied, leading to unwarranted claims that improvements were due to a specific form of treatment.\(^ {12,22,40,41}\) Some of the cases dramatically publicized by the Institutes have been children with traumatic brain damage or postencephalitis, who may make substantial gains without any special treatment.

Three years after a 1975 critique of an experimental evaluation of sensorimotor patterning,\(^ {42}\) investigators undertook a controlled study.\(^ {43}\) This study compared three groups of children, all of whom were severely mentally retarded and institutionalized. One group received patterning, a second was treated by motivational techniques, and a third received routine care. Using a wide variety of behavioral measures, the investigators observed that all three groups showed some improvement in performance during the study period; but there was no significant difference among the three groups. Based on this study and other reports, the investigators concluded that patterning cannot be considered superior to any other method of treatment.

Previous cautionary statements have emphasized the need for well-controlled studies of the effects of the treatment. Conducting a study of all aspects of the Institutes’ claims presents many theoretical and practical difficulties (B. S. Rosner, unpublished data, 1967). A well-designed, comprehensive study (supported by both federal and private agencies) was in the final planning stage when the Institutes reportedly withdrew their original agreement to participate.\(^ {44}\) With the failure of this attempt, the burden of proof for claimed results lies with the Institutes, particularly as a more recent, smaller controlled study\(^ {43}\) demonstrated no particular benefit from patterning treatment.

**SUMMARY**

The Institutes for the Achievement of Human Potential differ substantially from other groups treating developmental problems in (1) the excessive nature of their poorly documented claims for cure and (2) the major demands placed on parents in unswervingly carrying out an unproven technique to the smallest detail.

In most instances, improvement observed in patients undergoing this method of treatment can be accounted for on the basis of growth and development, the intensive practice of certain isolated skills, or the nonspecific effects of intensive stimulation.

Physicians and therapists should acquaint themselves with the issues in the controversy and the available evidence. Based on past and current analyses, studies, and reports, we must conclude that patterning treatment offers no special merit, that the claims of its advocates are unproven, and that the demands on families are so great that in some cases there may be harm in its use.

**REFERENCES**

17. Institutes for the Achievement of Human Potential: Statement of objectives, undated
18. Domän G, Delacato CH: Train your baby to be a genius. McCall’s 65:169, March 1965
31. Delacato CH: The Diagnosis and Treatment of Speech and Reading Problems. Springfield, IL, Charles C Thomas, Publisher, 1963
32. Delacato CH: Neurological Organization and Reading. Springfield, IL, Charles C Thomas, Publisher, 1964
42. Rosner BS: Final Report on Planning Grant: Treatment of Brain-injured Children. Read before the Vocational Rehabilitation Administration, National Association for Retarded Children, Given Foundation, 1967

812 DOMAN-DELACATO TREATMENT

Downloaded from by guest on August 16, 2017
<table>
<thead>
<tr>
<th>Updated Information &amp; Services</th>
<th>including high resolution figures, can be found at: /content/70/5/810</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplementary Material</td>
<td>Supplementary material can be found at: /content/suppl/2008/11/14/70.5.810.DC1.html</td>
</tr>
<tr>
<td>Citations</td>
<td>This article has been cited by 2 HighWire-hosted articles: /content/70/5/810#related-urls</td>
</tr>
<tr>
<td>Permissions &amp; Licensing</td>
<td>Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: /site/misc/Permissions.xhtml</td>
</tr>
<tr>
<td>Reprints</td>
<td>Information about ordering reprints can be found online: /site/misc/reprints.xhtml</td>
</tr>
</tbody>
</table>
The Doman-Delacato Treatment of Neurologically Handicapped Children

*Pediatrics* 1982;70;810

The online version of this article, along with updated information and services, is located on the World Wide Web at:

/content/70/5/810