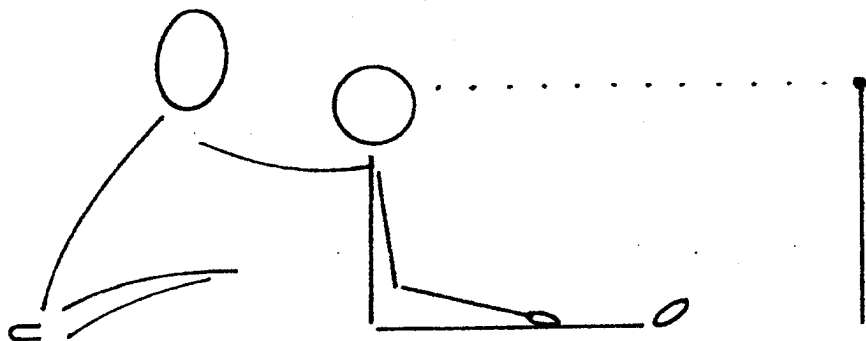


14 OCULO-HEADRIGHTING REFLEX

Emergence: 2-3 months neonatal
Not inhibited.



Test Position

Subject seated on floor, legs straight in front, arms resting on thighs.

Test Procedure

1. Subject fixes eyes on an object at eye level.
2. Tester sits behind subject and slowly tilts the subject to the left in 3 stages, pausing for 2 or 3 seconds at each stage. Pauses are made at 15°, 30° and 45°. *Note the position of the subject's head at each degree of tilt.*
3. Return the subject to the upright sitting position, again in the 3 stages.
4. Repeat procedure to the right, return to the midline and then repeat the procedure backwards and forwards, ensuring that the subject keeps the eyes fixed on the object at eye level.

Observations

Head should automatically correct itself to the midline (vertical to the ground) as the body position is altered in all four directions. Any flopping of the head or over-compensation in the opposite direction upon return to the midline position suggests an absent or under-developed oculo-headrighting reflex. Also note any extension of the leg on the side to which the subject is tilted — this may be an indication of a retained asymmetric tonic neck reflex (ATNR) in the leg.

Scoring

0. Head corrects to the vertical midline position throughout the test.
1. Head slips slightly from the vertical.
2. Head follows direction of the tilt in line with the body.
3. Head leans below the line of the body.
4. Head drops in direction of the tilt.

Lack of headrighting forwards/backwards could indicate underlying tonic labyrinthine reflex (TLR).