Prader Willi Syndrome

Daisy has always loved school. She participates in all areas of the curriculum with varying levels of support. She has always loved all of her teachers and had a good relationship with them. Each one ... [has] given her time and listened to her ... Daisy has a great big and fantastic personality.

Educating my daughter Daisy, Sharon Cliff, mother and teacher, taken from http://pwsa.co.uk/main.php

Caused by an abnormality on chromosome 15, this syndrome is congenital and is generally physically characterised by obesity, narrow-shaped eyes, small stature, and small hands and feet. Symptoms such as decreased muscle tone and delayed motor development are also associated with the syndrome.

It ought to be remembered that each student with Prader-Willi syndrome is an individual and any one student with the syndrome will have different strengths and needs from another. Most students have some degree of general learning disability, usually in the mild range. A minority of students have been noted to have an IQ (Intelligence Quotient) of 100 or above on standardised IQ tests. Students’ reading and writing skills are often better than number skills and abstract thinking. Short-term auditory memory can be weak. However, long-term memory is considerably better.

The student will often excel at sedentary activities such as computer work and colouring. Difficulties can present emotionally and socially. It is important to understand that the student’s behaviour is part of the syndrome and not usually intentional. Poor co-ordination and balance may also be observed. Affected students have an intense craving for food and may go to extreme lengths to get it. This results in uncontrollable weight gain.

Atypical Prader-Willi Syndrome: some students may have a diagnosis of Prader-Willi syndrome but will not have the typical physical features.

Acquired Prader-Willi Syndrome: symptoms associated with Prader-Willi syndrome can be ‘acquired’ by damage to, or a dysfunction of, the hypothalamus (the hypothalamus is the part of the brain that controls body temperature, cellular metabolism, and functions such as eating and sleeping). In these cases, the student will not have any of the genetic abnormalities and few of the physical characteristics of the syndrome; however, the behavioural and appetite problems that are associated with the syndrome may present. Learning and teaching techniques effective with students with true Prader-Willi syndrome can also be helpful when working with students with acquired Prader-Willi syndrome.

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