

# Consensus-Based Care Recommendations for Children with Myotonic Dystrophy Type 1 (DM1)

A guideline created by the **Myotonic Dystrophy Foundation**, in collaboration with NMD4C investigator, **Dr Campbell**

## MYOTONIC DYSTROPHY TYPE 1

**Inherited dominant** neuromuscular disease

**Phenotypes** depending of age of onset and severity of symptoms

**Multisystemic** (mostly muscular and central nervous systems)

Estimated worldwide prevalence of **1:20 000**

**Shortened life expectancy** related to respiratory-cardiac involvements

## THE GUIDELINE



**AUDIENCE**  
Aimed towards **physicians** but useful for all healthcare professionals (i.e., physiotherapists, nurses, etc.)



**POPULATION**  
**Pediatric** population, more specifically children living with DM1 with either the congenital or childhood phenotype



**CONTENT**  
**General care** considerations, such as diagnosis, genetic counseling and neonatal care; and recommendations from a **system-based approach**

## FIVE THINGS TO KNOW

**1** **Diagnosis** should be considered not only in children with classic motor features but with other system issues such as gastrointestinal disorders, cardiac arrhythmias and developmental disorders

**2** **Referral to genetic counseling** is recommended for all patients with congenital and childhood onset and their parents

**3** Do not use CTG repeat numbers for **prognostication**; it may be an indicator of severity, but it does not provide sufficient information alone to predict mortality or ventilation dependence

**4** A high-risk obstetrician should provide **prenatal obstetric care** for mothers known or suspected to carry a child with DM1 and a pediatric/neonatal specialist should be present at delivery

**5** A child should be followed in a **multidisciplinary clinic** with monitoring for the manifold issues associated with DM1



*Dr Craig Campbell* is a pediatric neurologist and the medical director of the multidisciplinary neuromuscular clinic based at Children’s Hospital London Health Sciences Centre

To access the **complete** guideline, click [here](#) or scan this QR code!



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