Cerebral palsy (CP) describes "a group of permanent dis- orders of the development of movement and posture, causing activity limitation, that are attributed to nonpro- gressive disturbances that occurred in the developing fetal or infant brain. The motor disorders of cerebral palsy are often accompanied by disturbances of sensation, percep- tion, cognition, communication, and behaviour, by epi- lepsy, and by secondary musculoskeletal problems [1]."Siebes et al [29] identified an improvement in the methodological quality of the therapeutic intervention studies during the last decade, and Kunz et al [30] found the quality of PT tri- als to be better than their reputation.Previous reviews have addressed the effectiveness of PT interventions for children with CP focusing on neurodevelopmental ther- apy (NDT) [7–9], strength training [10,11], conductive education [12–15], various PT interventions [16–19], or orthotic devices [20,21].More recent sys- tematic review topics included focused interventions, such as constrained–induced movement therapy [22], pos- tural control [23], passive stretching [24], hydrotherapy [25], hippotherapy [26,27], and orthotic devices [28].Methods Literature searches We searched Medline, the Physiotherapy Evidence Data- base PEDro [31], CINAHL (a database for allied health and nursing), and the Cochrane Controlled Trials Register from 1990 to February 2007.The .reference lists of the identified studies and reviews were screened for addi- tional references