A pathogenetic model of infantile cerebral palsy caused by maternal antiphospholipid (APS) syndrome has been elaborated. Thirty-two children with cerebral palsy born to mothers with clinical signs of APS have been studied. The basic clinical feature of cerebral palsy in children was the prevalence of the double hemiplegic form, the absence of severe cognitive disorders, global muscular hypotrophy, rapid contracture formation and a tendency to frequent respiratory diseases. A seropositive APS variant was found in 42% of mothers examined, the seronegative one—in 58%. Such factors as (1) fetoplacental insufficiency and hypoxia caused by vascular infarctions of the placenta; (2) transplacental passage of antiphospholipid antibodies from a mother to a child; (3) intracerebral hemorrhages and periventricular leucomalacia in infants play the key role in the pathogenesis of cerebral palsy in children born to mothers with APS.