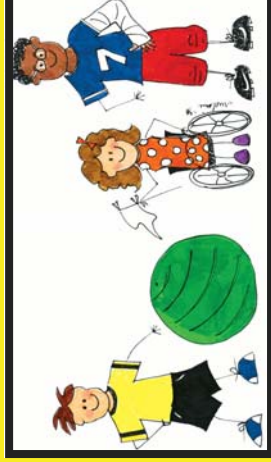


Things a parent can do:

- ◆ Consider the way the baby is sleeping. If tolerated, altering the orientation of her head through the night will lead to a prolonged stretch.
- ◆ Always facilitate midline. The baby can be propped to middle in car-seat, high chairs, or infant seats. Use of towel rolls or receiving blankets is helpful. Boppy pillows also encourage midline.
- ◆ Simply encouraging the baby to use his own muscle strength to rotate the head by visually tracking toys is beneficial.
- ◆ A thorough stretching and strengthening program should be outlined and explained by a physical therapist.



Melanie Massey Physical Therapy, Inc.

107 Summer Lane
West Monroe, LA 71291

396-1969
West Monroe

232-1969
Ruston

Graphics & Design: MMPT
Information provided by: Melanie Massey, PT
Model: Abby



Melanie Massey Physical Therapy

What is Torticollis?



Torticollis is a diagnosis typically specific to infants and young children. It may be diagnosed as early as birth and generally is recognized at 3-6 months of age. It is characterized by an asymmetrical posture of the head and neck. The baby's head tends to tilt to one side and is most commonly first recognized by her maintaining head rotated to the opposite direction of the tilt. Often the baby totally avoids turning head in opposite direction due to the stretch imposed by the motion. The position of the neck may become increasingly "stuck" due to shortening of muscles on one side of the neck and weakening of the stretched muscles of the other side. This, in turn, has the potential of interrupting normal development, such as rolling over, sitting, or pushing up on belly.

What causes Torticollis?

If recognized at birth, Torticollis may be a result of cramped intrauterine space, particularly in the case of a large baby. Some babies are simply weak and decide to use what has been learned (through normal development of a 2 month old) by continuing to rotate head to make head control more stable. Although normal for the 2 month old, the inability to hold head in middle for a 3 month old is inappropriate. This asymmetry at 3-4 months should be a red flag for a mom to watch out for potential problems related to this muscle imbalance. There are other potentially more serious causes (i.e. spinal malformation, muscular tumors, etc.) that must be ruled out by the physician through special tests.



What can be done?

If treated early, modification of environment (direction baby looks for feedings, parents' orientation to child, or position in which she sleeps) may be sufficient to help child develop normally. If she is diagnosed later, physical therapy may be prescribed to educate the parents regarding passive stretching of neck, as well as age-appropriate positions for play that can facilitate strengthening of neck muscles that can facilitate strengthening of neck muscles.

If you have concerns regarding your child's development, call for a physical therapy evaluation. Remember, the earlier the better.

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