

## DO NOT wait to refer.

The opportunity to correct any deformities is optimal before sutures fuse.



### —tiny-k Early Intervention—

- Has FREE, in-home support and resources to families and children 0 to 3, with special needs.
- Focuses on the Family's priorities for their child through a "Primary Coach" approach.
- Staff are licensed professionals: Physical and Occupational Therapists, Speech-Language Pathologists, Early Childhood Special Education teachers, Social Worker, Registered Dietitian, as well as others.



Bright Beginnings for Douglas County Kids  
2619 W. 6th Street, Suite B  
Lawrence, Kansas 66049  
[www.douglascountytinyk.org](http://www.douglascountytinyk.org)  
**785-843-3059**

# What do you see?



An absolutely beautiful baby who also happens to have **Torticollis**, tight neck muscles, and **Plagiocephaly**, flattened or misshapen head.

**Help parents learn how to detect these conditions EARLY!**



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Congenital Muscular Torticollis is a condition that affects the sternocleidomastoid muscle and can result in head tilt and inability to rotate the head freely from side to side. Untreated torticollis will result in plagiocephaly 80-90% of the time for these infants. Torticollis and plagiocephaly can and do occur separately.



### Did You Know?

- Torticollis can be easily resolved with early detection. Children should be screened at every check up and referred at the first sign of tightness.
- Torticollis is estimated to occur in 1 infant in 300 live births.
- Torticollis is more likely to occur in boys.
- Torticollis occurs on the right side in 75% of the cases.
- Torticollis is more prevalent in multiple births.
- Torticollis can be caused by:
  - Restrictive intrauterine environment.
  - Prematurity and birth trauma (forcep delivery)
  - Back sleeping
  - Too much time in
    - Car seats
    - Carriers
    - Bouncy seats

### Educate Parents by Emphasizing These Simple Prevention Tips:

- Provide supervised tummy time at least 10 times a day while awake.
- Put the baby in different positions, side-laying, prone on parent's chest, supported on shoulder, prone over forearms, throughout the day that allow head movement.
- Frequently reposition the head to midline or other side during sleep time.

### Treatment Options

- Stretching exercises must be implemented with the child to lengthen the sternocleidomastoid muscle. These exercises must be done as many as 3 to 8 times per day depending on the level of tightness. An early interventionist can show the parent or caregiver the stretches and offer support as needed.
- Positioning ideas also improve the infant's chances of lengthening the muscle passively, and will help keep the baby off the back of their head.
- Advanced plagiocephaly may require a prosthetic helmet to be worn by the child to help round out the head. These helmets are currently **NOT** covered by Medicaid or private insurance in Kansas. Helmets cost \$2,500.
- Surgery may also be required in advanced cases.

### Prevention and Early Detection is Key.

An infant's growth and development can be seriously impacted by untreated torticollis and plagiocephaly. Conditions can include: misaligned eyes and ears, migraines, TMJ, and social and emotional issues.

