

Torticollis Evaluation & Treatment

Torticollis is a medical diagnosis in which a major muscle in the neck (called the “sternocleidomastoid) becomes tight. This muscle tightness causes babies to hold their heads in a tilted and rotated position. It becomes difficult for them to hold their heads up straight and to rotate their heads to the side they tilt toward.

Left untreated, it can lead to a permanent decreased range of motion on the neck, a permanent tilt to the head, and pain, discomfort, and facial deformities because of the pull of the muscles as the head grows.

Some babies do not have actual torticollis, but do have tight neck muscles, with a similar presentation in symptoms. Babies do NOT “grow out of” torticollis.

Torticollis and neck tightness have become more prevalent since the “Back to Sleep” program was initiated in order to prevent SIDS (Sudden Infant Death

Syndrome), and due to a variety of positioning devices which place babies on their backs. These



Infant before treatment.



After 4 months of treatment.

include car seats, swings, “bouncy seats,” and arched toys in which babies lie on their backs to play. The importance of “tummy time” when babies are awake cannot be stressed enough.

Torticollis can be effectively treated with physical therapy in 80% of cases if addressed in a child’s first year. Children’s Care has several physical therapists who are trained and experienced in treating infants with torticollis and muscle tightness.

Causes of torticollis:

- Intrauterine positioning (especially with multiple births)
- Traumatic birth
- Asymmetrical positioning
- Visual disturbances
- Bony anomalies of the spine
- Reflux
- Neurological syndromes
- Plagiocephaly (head is flattened in back or on one side)

Treatment options:

- Physical therapy plus a home program
- TOT collar (tubular neck collar)
- Botox injections to relax muscles
- Surgery (Seldom needed when patients are identified and treated early.)

Parents suspecting torticollis should ask their doctor for a physical therapy evaluation.

Call (605) 782-2379 for appointment or details.

(Toll-free, 800-584-9294, Ext. 4379.)



CHILDREN’S CARE
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Physical therapy at Children's Care

- Treatment plan includes parent instruction in a home program for stretching, strengthening, and repositioning, as well as monitoring gross motor development.*
- Depending on severity, initial treatment begins with direct treatment two to four times a month. As the patient demonstrates improvements and parents become comfortable and compliant with their home program, frequency of treatment typically decreases to one time per month.
- Duration of treatment usually does not go beyond six months
- Optimal results have been shown when babies begin therapy at a very early age—from weeks to early months old—due to the fact that young infants tolerate stretching and repositioning better and have not yet developed the asymmetrical motor patterns common in those with torticollis.

*Some babies with torticollis experience delays in gross motor development because of their tilted or rotated head position.