

**Right-Sided Congenital
Muscular Torticollis
Physiotherapy Service**

What is it?

The word torticollis comes from the Latin for “twisted neck”. In the young baby this is due to a fibrosis (or hardening) within one of the long neck muscles (sternocleidomastoid muscle) on the right side of their neck. This is the long muscle which goes from the skull just behind the ear diagonally down to the front of the neck. It is attached to the clavicle (collar bone) and sternum (chest bone). The exact cause of torticollis is not known.

What happens to the muscle?

A hardening appears in the muscle, usually within the first few weeks of life. This hardening may enlarge over the next month. After three to four months it usually disappears. If left untreated, the muscle may shorten and cause a head tilt and limited movement of the neck.

In more severe cases the shape of the head and face can be affected. However, if managed early in life with advice from a physiotherapist, the muscle should recover. The baby should then be able to hold his/her head straight and turn it equally in both directions.

How is it treated?

- The aims of treatment are to stretch the tight muscle and help the neck muscles work normally.
- The physiotherapist will show you how to gently stretch the tight muscle several times a day.
- It is important for the baby to be fed and happy when doing the stretches and both baby and parent to be relaxed. Treatment will not harm the baby, but it may be uncomfortable and he / she may protest at being held still. Singing during stretches may help.
- Carry out treatment with the baby secure on a flat surface.

Treatment for a RIGHT Torticollis

Your baby tends to hold his / her neck with the right ear down to the right shoulder, and turning to look to the left. This is due to tightness in the sternocleidomastoid muscle in the right side of the neck. The baby needs to be encouraged to hold his / her head straight and to look towards the right, as below:



Stretches

Hold each stretch for ____ seconds, as demonstrated by your Physiotherapist, and do ____ times. Do at each nappy change if possible (or at least 4 times a day).

Stretch 1 – Turn to right side

Lie your baby on his / her back and place their head straight (not tilted down towards their right ear). Encourage them to turn their head towards the right to look at something (e.g. a noisy toy). Place one of your hands on their chest (not just on their shoulder) to stop their body twisting. Put your other hand on the left side of the baby's head and using gentle pressure help them turn a little further towards the right. It may be helpful to sing to your baby while doing this.



Or: Sit with your knees touching the settee. Lie your baby on his / her left side with the head resting on the settee and the body on your lap. Hold the shoulders and turn his / her body very slowly onto the tummy.



Stretch 2 – Tilt to left side

Gently position your baby's head in the middle (as well as you can). Cup the top of his / her head with one hand. Place your other hand on the right shoulder to keep it still. Sing or talk to the baby to encourage them to look at your face. Tilt the baby's head to the left, so their left ear goes towards their left shoulder.



Or: Sit with your knees touching the settee. Lie your baby on his/her right side with the head resting on the settee and the body on your lap. Hold the baby's shoulders and lift his/her body up very slowly.



Other Activities

1. Cuddle your baby so his / her head turns towards the right.



2. Encourage your baby to turn his / her head to the right to look at people, and place toys to his / her right.

3. Carry your baby in this position with his / her head tilted to the left.



4. When lying on his / her back to play, try using a V pillow to position your baby's head straight.
5. Encourage supervised play lying on his / her tummy, but your baby should sleep lying on the back.
6. When sitting in a car seat or baby chair try using a rolled up towel to support the baby's neck in a straighter position.

If you have any questions or concerns please ask your Physiotherapist.