

Physiotherapy Information for Parents & Carers

Left-Sided Congenital Muscular Torticollis

What is it?

The word torticollis comes from the Latin for “twisted neck”. You may also hear it called “wry neck”. In the young baby this is due to a fibrosis (or hardening) within one of the long neck muscles (sternocleidomastoid muscle) on the left 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.
- Carry out treatment with the baby secure on your lap or on a flat surface.

Treatment for a LEFT Torticollis

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

Lie your baby on his/her back and support the head in both hands. Gently position the baby's head in the middle, looking straight up (as well as you can). Keeping the baby's shoulders still, gently turn his/her head towards the left.



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 shoulders and turn his/her body very slowly onto the tummy.



Stretch 2. Tilt to right 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 left shoulder to keep it still. Tilt the baby's head to the right.



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 baby's shoulders and lift his/her body up very slowly.



Other Activities

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



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

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



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.