

The Importance of Starting Treatment Early for Torticollis and Plagiocephaly

Early Intervention personnel, especially independent evaluators and service coordinators, should be aware of the importance of starting intervention for torticollis and/or plagiocephaly as early as possible.¹⁻⁹ These two diagnoses often co-exist, as a tight muscle in the neck (congenital muscular torticollis) can cause a misshapen head (plagiocephaly).¹⁻⁴ Conversely, a misshapen head can cause tight muscles in the neck.^{2-4, 9} Studies show that as many as 90% of children with torticollis also have plagiocephaly.^{1, 2, 4, 9} Starting physical therapy as early as possible (optimally before 3 months of age) has been found to be a critical factor in assuring the best outcomes for children with torticollis and/or plagiocephaly.¹⁻⁸

When left untreated, torticollis and/or plagiocephaly have a significant risk of resulting in early motor delays,^{2-4, 7-9} feeding issues,^{2-4, 7} and impacting facial symmetry,^{1-4, 6, 7} ear alignment,^{1, 2, 4} and difficulties interacting freely with the environment.^{2-4, 7} All of these concerns are caused as a result of the infant's inability to turn his/her head freely to see and hear things in the world around him.^{2, 3} These challenges, which limit interactions with the environment, can lead to preferential use of one side of the body over the other,^{2-5, 8} muscle weakness,^{1, 2, 4} and delayed whole body awareness.² If left untreated, these restrictions lead to a reinforcement of altered movement patterns^{2, 3, 7, 8} and developmental delays.^{2-4, 7-9} In more severe cases, they can also contribute to a scoliosis of the spine.^{1, 2}

Pediatric physical therapists can coach parents in strategies to resolve tight neck muscles with stretches, massage, and developmental activities integrated into the family's routine.¹⁻⁸ They can also teach positioning techniques within the family's routines at home to help reshape the infant's head (if they are started before the infant's skull bones begin to fuse).^{1-4, 6}

"Waiting to see" if the torticollis and/or plagiocephaly may resolve without treatment places the child at significant risk for developmental delays.^{1-5, 9} Research shows that the sooner treatment for torticollis and/or plagiocephaly is started, the faster the torticollis and plagiocephaly will resolve, and the greater the likelihood of completely eliminating these issues.¹⁻⁵ Starting intervention early can negate the need for more invasive interventions such as surgery for torticollis¹⁻⁷ and helmet therapy for plagiocephaly.⁴

The American Academy of Pediatrics published an article stating that children who start treatment prior to 1 month of age have a 98% chance of complete resolution of the torticollis within 1.5 months.¹ Waiting until after 6 months of age to begin physical therapy may require 9-10 months of treatment, and fewer infants have complete resolution of the torticollis.¹

Torticollis and/or plagiocephaly are diagnoses that have good outcomes, including complete resolution in most cases, if physical therapy is started early enough (optimally before 3 months of age).^{1-4, 7} By starting therapy early, the child and family may not have to experience the developmental delays, facial asymmetries and other long-term impacts that may result if treatment is delayed.¹⁻⁹

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