Information for babies with right torticollis

Torticollis means ‘twisted neck’ and is caused by a swelling (tumour) in one of the muscles in the side of the neck. This is the sternomastoid muscle, which runs from behind the ear to the point of the collarbone and breastbone.

Any unusual lump or swelling in the body may be called a tumour: this does not mean that it is a growth like cancer.

An infant with torticollis lies with the head tilted to one side and rotated to the other.

In many cases, but not all, a nodule is evident in the belly of the muscle, becoming obvious in the second or third week of birth. If this condition is not treated early and consistently, the baby’s head will become moulded from lying in one position too much, making the face look lopsided. Later, as the child grows it would develop a curvature of the spine to compensate for the tilt of the head. It can take a year or longer to fully resolve as the child motor development is maturing.

When discovered early, and exercises and positioning are followed consistently, 80% recover completely with no long term effects. In some cases that do not respond to exercises by age 1, surgical release of the sternomastoid muscle may be required.

Exercises for RIGHT torticollis

In a child with right torticollis, the head is tilted to the right and the face is rotated to the left. Therefore when stretching you will need to tilt your child’s head to the left (left ear to left shoulder) and turn their face to the right (look over right shoulder).
The following exercises are best done with your child placed on the floor on their back. If you have help with the exercises, your assistant can stabilize the shoulders while you do the stretching exercises.

**Side bending**

Hold your child’s RIGHT shoulder down with your LEFT hand. Place your RIGHT hand on top of the RIGHT side of your child’s head and slowly bend their head towards their LEFT shoulder.

Hold for a count of 5

Repeat x 3

**Rotation**

Place your RIGHT forearm against your child’s LEFT shoulder, and cup your child’s head with the same hand. Use your LEFT hand to hold your child’s chin. Slowly rotate your child’s face to their RIGHT.

Alternatively, roll your child onto the RIGHT side. Keep their interest with a toy or eye contact. Gently roll your child’s body onto their back whilst keeping their head rotated to the RIGHT.

Hold for a count of 5

Repeat x 3

**Playing positions**

Place the child on their **tummy** with a small rolled up towel under their chest. Place toys so the child has to turn their face to the RIGHT. For a further stretch in this position, gently lift the child’s legs and hips off the floor. Build up the time they spend on their tummy gradually.

Do **not** put your child on their tummy to sleep
The position shown above is good for encouraging midline positioning of the head as well as interacting with your child.

Another useful play position is **side lying** which also facilitates midline head position.

When playing on their back you may need to use a rolled towel to maintain midline position of the head. Your physiotherapist will show you how to do this.

**Carrying**

Hold the child facing away from you, in a side lying position, with the child's RIGHT ear resting against your RIGHT forearm. Place your LEFT arm between the child's legs and support the child's body.

**Other advice**

- Hold toys so that your child has to look up and out to the RIGHT.
- Position your child in their cot so you approach them from the RIGHT.
- When holding your child across your shoulder, position them to face the RIGHT.
- When in their car seat, use a rolled up towel to correct their head position.
- Use a rolled towel for when the child is lying in their pram to correct the position of the head. Your physiotherapist will show you how to do this.

**DO NOT** use the peanut pillow when the child is sleeping or unsupervised

- Encourage the child to lie on either side to gain the midline position of the head.
• When the child is breastfeeding on the LEFT breast, gently position him so he has a stretch taking the LEFT ear to their LEFT shoulder.

• If bottle feeding, hold your child in your LEFT arm so that they have to turn to the RIGHT or midline to feed.

**If you think your baby is being caused discomfort by any of these exercises, stop doing them and contact your physiotherapist.**

**Contacts**

Remember your physiotherapist is always available for help and advice should you have any further concerns or queries about your baby.

Your physiotherapist is: ________________________________________________

Contact number: ______________________________________________________

Appointment: _______________________________________________________

*If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) [https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust](https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust)*

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