

The Child Development Center of Colorado Springs, Inc. Newsletter

Spring 2007 Volume I, Issue 2

Torticollis News!

At the Child Development Center we are dedicated to providing high quality and effective treatment for children with torticollis. Torticollis, which describes an abnormal neck posture, is derived from two Latin terms, *tortis* meaning twisted, and *collum* meaning neck. The incidents of torticollis are reported to be .3% to 2% of all live births. It is the third most common congenital musculoskeletal anomaly after dislocated hip and clubfoot. True congenital muscular torticollis is a condition caused by unilateral fibrosis of the sternocleidomastoid muscles. The true etiology of sternocleidomastoid fibrosis is unknown. There are theories relating it to direct injury, ischemic injury based on abnormal vascular patterns, rupture of muscle tissue, infective myositis, a neurogenic injury, or heriditary factors.

Clinically, those children that do have the presence of a fibrotic tumor within the sternocleidomastoid generally developed this tumor within 2-3½ weeks of age. This tumor persists gradually disappearing in the 4-6 month age range.

Clinical features of congential muscular torticollis:

- Laterally flexed head with rotation of the head and neck toward the noninvolved side.
- Decreased neck range of motion.
- Tight banding of the sternocleidomastoid muscle or the tumor like tissue.
- Plagiocephaly or flattening of the occipital and parietal areas.
- Hemihypoplasia.

Clinically we have also observed children with the sternocleidomastoid contractures may also develop craniofacial asymmetries, scoliosis (most prominent in the upper thoracic region), shortening of other neck muscles (anterior/posterior regions of the neck), delayed large motor development, gait abnormalities, as well range of motion limits and delayed function on the involved side upper extremity. Feeding problems have also been noted.

Torticollis may reoccur or "reappear" depending upon the initial clinical severity, the degree of the fibrosis, and the child's growth patterns. The involved sternocleidomastoid is oftentimes unable to maintain a normal growth rate or lengthening.

Many times, the length of treatment is an initial question from the family. The length of treatment varies with the initial presentation, the degree of tightness or fibrosis within the sternocleidomastoid muscle, the degree of the range of motion limitations, and clinically correlates with the degree of restriction of cervical rotation to the involved side

If you have questions regarding your torticollis patients or would like an in-service for your staff on Torticollis, Assessment and Treatment, please do not hesitate to contact Banba Swicker-Lipton, PT at the Child Development Center of Colorado Springs, Inc. at 574-8300.

PROGRESSIVE STAGES OF TUMMY POSITIONING WITH SUGGESTED TUMMY TIME STIMULATION ACTIVITIES:

Baby Development 0-1 Months

At this stage, the baby keeps his weight very forward on his cheeks and upper body, putting a lot of pressure on his face, which will help develop feeding skills

As the baby becomes more alert, he begins lifting and turning his head.

TUMMY TIME STIMULATION ACTIVITY:

Place wakeful baby on tummy several times during the day.



Baby Development 2-3 Months

By this time, the baby's hips and legs are straighter and she begins to lift up, pushing down with her forearms.

The baby's activity increases. She is constantly lifting, turning, and bobbing her head, which helps develop eye tracking and coordination.

TUMMY TIME STIMULATION ACTIVITY:

While baby is on stomach, tuck her elbows in toward shoulders and place objects at and above eye level to encourage her to push into surface and lift head.



Note: A rolled up towel placed at nipple line is sometimes helpful.

Baby Development 4-6 Month

At 4-6 months, the baby's spine, back, and hips are more flexible and straight.

The baby increases his head control, shoulder and arm strength, and back flexibility every time he pushes up on his

TUMMY TIME STIMULATION ACTIVITY:

Place object in front of baby at eye level or above, encouraging pushing up on straight arms and reaching. **Note:** A rolled up towel placed at nipple line is sometimes helpful.



Baby Development

At 7-8 months, the baby's strength is increasing. The baby begins to roll stomach to back and back to stomach, may begin pulling forward on his tummy using arms, and on the tummy is able to weight shift and reach for a toy.

At 8-10 months, the baby assumes position on hands and knees, begins creeping forward with arms and legs in opposition.

TUMMY TIME STIMULATION ACTIVITY:

Continue to provide awake floor time. Place toys at a distance to encourage movement forward. Assist baby with moving forward to reach a toy.



While it is important for infants to sleep on their backs, it is also important for infants to lie on their stomachs during **SUPERVISED** wake times.

Experience Counts! We've Been Making a BIG Difference in Little Lives since 1988

We're on the Web!

See us at:

www.info@cdcpedsrehab.com

New Hours:

Monday

8 am - 6:00 pm.

Tuesday - Friday

8 am - 6:30 pm



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FUN FITNESS

Setting the Stage for Good Health in Adult Life

A fitness program developed for the overweight and under active child ages 8-12 years. *Fun Fitness* is designed to educate and encourage children and their families to develop healthy, active lifestyles. The *Fun Fitness*

INSURANCE

Do you have questions about your patient's insurance coverage? Call us! Our friendly and knowledgeable billing staff will be happy to help you program services are provided by licensed physical therapists. The program is .designed with an 8-week curriculum.

Could your child be at risk?

He or she regularly eats high calorie foods.
He or she is physically inactive.
There is a family history of overweight, obesity, heart disease or diabetes.

New Classes
Starting
Soon!

You can also send an E-mail with your question to:

geoff@cdcpedsrehab.com

The Child Development Center is a provider for most major insurance companies.

FUN FRIENDS

Fun Friends is a group for 7-10 year-olds that would like to learn how to **Be a Friend** and how to **Make Friends**.

The group will meet Monday through Friday, 5-6 pm, July 9-20, 2007. The first week will be at CDC. For the second week, the group will be held at community parks, pools, and playgrounds (weather permitting)

to encourage generalization of skills in natural settings.

During the hour we will start with a warm-up activity, move into a group game, and then participate in a snack before a short freetime. A sensory motor approach will be followed.

Friday's are **FUN WITH FAMILY AND FRIENDS DAY** when families are encouraged to

Participate for fun-filled frolicking.

Children with impaired social skills, sensory processing and/or modulation disorders, emotional or behavioral issues, and undeveloped coping skills are welcome.

A pediatric occupational therapist and an experienced therapy aide will facilitate the group of eight or less.

The cost is \$200.00. Call to register for this meaningful experience soon, as the group size is limited to eight.

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