




ILCA's INSIDE TRACK

a resource for breastfeeding mothers

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Helping Your Baby With Torticollis

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What is torticollis?

Torticollis is another name for “twisted neck.” It sounds like “tōr’ti-kol’is” when you say it out loud. Sometimes babies are born with their necks twisted more to one side than the other. Other times this can happen after birth. In either case, the neck muscle on one side is tighter or shorter than usual. (It is not a bone problem. Your baby’s bones are normal.)

We don’t really know for sure why some babies have torticollis. It can happen if a baby is lying a certain way when he is inside his mother. Or it can happen during birth. The cause might be uneven pressure on the neck muscles while baby is being born.

A newer idea is that sometimes torticollis happens from babies lying on their backs a lot. In this position some babies don’t move much. This may cause torticollis and sometimes a flat head (“plagiocephaly”). We know that for safe sleep it is important to put babies to sleep on their backs. So while awake, babies should be in other positions: on their stomach, on their sides or upright.

How do I know if my baby has torticollis?

Torticollis is noticed either soon after a baby is born, or in the first months of a baby’s life. Often it is noticed when your baby goes to the clinic for a well baby visit.

Signs that your baby might have torticollis:

- Your baby always seems to be looking to the same side.
- Your baby’s chin seems to be pointing to the side instead of in the center.

- Your baby has a lump in the muscle on one side of the neck. (This is not dangerous, and doesn’t hurt.)
- One shoulder looks higher than the other.
- Your baby always lies on his back in the same exact position.
- One ear may look a very different shape than the other ear.
- Your baby always looks in the same direction when held on your shoulder.
- Your baby likes being held in one position more than any other.
- Your baby doesn’t like it when you try to put him in a new position, or quickly moves back to the position he likes best.
- When placed belly down, your baby just cries.
- When placed belly down and your baby pushes up, it looks like one shoulder is closer to the neck or ear on that side.

As well as the above signs, you might notice that:

- Your baby feeds much better on one side.
- Your baby can’t latch onto one of your breasts.
- Your baby can only latch on and feed in a certain position.

How does torticollis affect feeding?

Most babies do well coming to the breast with their necks slightly tilted back and their mouths wide open. A baby with torticollis may find this hard to do. He may latch in a way that causes you pain. He may have trouble sucking well. Muscles in the neck connect with



the tongue muscle. This can make it hard for your baby to use his tongue well. Because of this he may not be able to get enough milk.

How to help your baby when breastfeeding:

- Find a way to hold your baby that he likes. If he fusses and does not like a certain position, try a new one. Do not force him to feed in a position that makes him unhappy.
- If he can only latch on in one position that's comfortable for both of you, use that one for now.
- Your baby might breastfeed better if his body is resting and supported in the same way on both sides. For example, if your baby nurses well in a cross-cradle position at your left breast, try the football or side/clutch hold, at your right breast. This way his neck and shoulders feel the same on each side. Your baby can relax and feed better. Support his head from the side while he is feeding. Pillows or towels rolled up may help support your arm.
- Try breastfeeding in a laid-back position. This may allow your baby to find a position he likes for feeding. To do this: lie back with baby tummy to tummy with you. Allow him to find the nipple on his own. Use a pillow behind your back, for comfort.

How to help your baby during other activities:

- Place your baby on his back to sleep. Try to gently position him with his head turned

differently each time. For example: For one nap, place him on his back and turn his head slightly to the left. At the next sleep time, turn his head a little to the right.

- Your doctor might also teach you some gentle exercises to help stretch and strengthen the tight muscle.
- All babies need to spend some awake time on their tummies every day. Start with a few minutes. Do longer times if baby likes it.
 - Lay your baby on his tummy on top of your tummy.
 - Put him on his tummy on a surface near you. This might be a changing table, couch or floor. (Remember that a baby should never be left alone on a high surface or couch.)
 - Lie face to face with him on the floor.
 - To encourage him to lift his head and look around, talk, sing, or hold up an interesting toy.
 - Move your body to the side so that baby follows.
- Wear your baby in an upright soft carrier or hold him upright on one shoulder, then the other.
- Limit the amount of time your baby spends in a car seat (unless he's in a car) or infant seat.

CranioSacral therapists and chiropractors often help babies with tight muscles, especially if they are having trouble breastfeeding. If your baby still has difficulty after a few weeks of treatment, the doctor may refer your baby to a physical therapist (PT or "physio") or occupational therapist (OT) for more help.

Find Help Fast

An IBCLC is an "International Board Certified Lactation Consultant:" someone with special training to help breastfeeding families. Go to "Find a Lactation Consultant" at www.ilca.org, to locate a lactation consultant in your area. You can also ask your doctor or a nurse at your hospital.

Your local lactation consultant: