



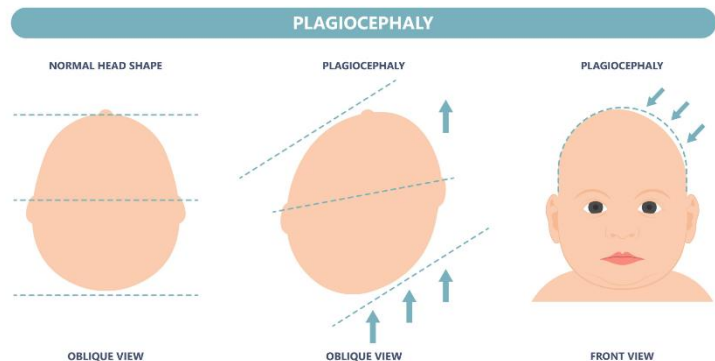
The Association of Paediatric Chartered Physiotherapists

APCP Information – Head Turning Preference and Plagiocephaly Information for parents and carers



When your baby is born, labour can cause their head to become misshapen. This is normal and corrects within the first few weeks after birth. If you have noticed that your baby is developing a flat spot on the back or side of his head, it could be due to a head turning preference and a sign of plagiocephaly.

Plagiocephaly is the medical term for head flattening which is produced by pressure on the baby's skull when lying in the same position for prolonged periods of time. New born babies have very soft skulls which are susceptible to being moulded or flattened.



It should be noted that this is cosmetic and does not cause any pressure on the brain or any developmental problems.

Possible Causes

- Head turning preference to one side-this maybe baby's preferred sleep position.
- Tight neck muscles which limit them turning their head fully- your baby may need stretches to their neck muscles which will be taught by your physiotherapist.
- Position in utero or after a difficult labour.
- Lack of tummy time- although it is recommended that all babies sleep on their backs, it is essential that they experience tummy time regularly throughout the day.
- Prematurity-babies born too soon have softer skulls, which are more prone to moulding especially when they have been too poorly to be moved.

Intervention

The sooner intervention starts the better the outcome. As your baby learns to move and the pressure is taken off the flattened area of the skull, the head shape can start to improve. This can take months and may correct fully. In more severe cases, a degree of flattening may remain but not enough to notice when older.

Simple Steps to Try

Repositioning your baby during both sleep and awake times will encourage your baby to rest their head on the non-flat area to promote more even weight distribution and remodelling.

Sleeping

- Always place your baby on their back to sleep. Alternate which end of the cot you place your baby to sleep each night, this will encourage them to face both directions.
- Rearrange nursery furniture. Babies are attracted to look at light sources and may try to turn their head towards a window.
- After your baby has fallen asleep, gently move their head to the non-preferred side, to take the weight off the flattened area.

Playtime

- Tummy time is very important. It is a good position for your baby to practise lifting their head, develop strength in their back and neck muscles and take weight through their arms. A small roll under their chest may help them maintain this position. Try a little and often approach.
- Reduce the amount of time your baby spends in one position where there is uneven pressure on their head, e.g. baby bouncer chair, car seat. Place your baby in a variety of positions to play.
- Encourage active head turning away from their preferred side using bright and interesting toys, sounds or people's faces.

When awake and lying on their back position their head in the middle using a towel, pillow or blanket (only when awake and supervised).



Positioning equipment

When your baby has good head control and is just beginning to sit up, but still needs support, consider a short time in a floor seat. This will increase the time when their head is not always resting in the same position.

Feeding

If bottle feeding alternate the arm in which you hold your baby and encourage them to look away from their preferred side.

Holding and Carrying

Hold your baby facing away from you with their ear resting in the crook of your elbow and your other arm between their legs for support, you can do this to either side.



Hold your baby close to your chest with their head turned to their non-preferred side.

Travel

- Try to minimise the use of car seats to when your baby is in the car. Using a sling is a good alternative to a buggy when you are out and about.
- If possible, position the car seat so that turning to look out of the window is turning away from their preferred side.

Helmets

Physiotherapy is recognised as the main intervention for plagiocephaly. There are no recognised benefits to helmet therapy - https://ebi.aomrc.org.uk/wp-content/uploads/2023/03/Helmet_therapy_0421.pdf

If you are still concerned and your baby is not improving, please speak with your health provider.

This leaflet has been produced by the APCP committee after a review of literature and where there is a lack of evidence, a consensus of expert opinion is agreed, correct at time of publication. For information about references and evidence searched, please visit our website. APCP <https://apcp.csp.org.uk> V1 published June 2020 V1 review June 2024 V1 Review June 2029.



The Association of Paediatric Chartered Physiotherapists (APCP) is one of the CSP's largest Professional Networks and continues to thrive with a membership of over 2,900 paediatric members. We encourage our members and support staff to work together to enhance the quality of life, wellbeing and independence of babies, children, and young people that we deliver care to.

The Chartered Society of Physiotherapy (CSP) is the professional, educational and trade union body for the UK's 64,000 chartered physiotherapists, physiotherapy students and support workers.



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