

KNOW BEFORE YOU KNOCK



TORTICOLLIS

Every child and family has unique aspects of their situation, experience, and diagnosis. This page is intended to provide a general overview, but is not attempting to represent every situation or child you encounter. Every family deserves your expertise to assess and adapt your prior knowledge. This resource is best viewed electronically.

DEFINITION

“Torticollis is the tightening of the sternocleidomastoid (SCM) muscle in the front of the neck, which results in the head tilting toward the side of the tight muscle while rotating away from that side (for example, if the child's left SCM is tight, their head will tilt to the left and rotate to the right).” (1)



TORTICOLLIS

NATIONAL/STATE ORGS

[Congenital Torticollis - Symptoms, Diagnosis and Treatment BMJ Best Practice US](#)

While there is no national or state organization to support children and families dealing with a diagnosis of torticollis, this resource gives a thorough overview of its definition, causes, treatment, and more.

TOP RESOURCES

Remember to use interventions you are trained in and fall within your scope of practice:

- St. Jude's Handouts: [Right](#) and [Left](#)
- [Physical Therapy Guide to Torticollis | Choose PT](#)
- [Physical Therapy Management of Congenital Muscular Torticollis: Clinical Practice Guideline](#)

PREVALENCE

1 in 250 newborns (3)



CONSIDERATIONS

THAT MAY IMPACT SERVICES

- The earlier you start treatment (tx), the quicker tightness will resolve:
 - If tx begins <1 month old = 1-2 months of tx
 - after 12 months of life = 10-11 months of tx (7)
- Severity of tightness
- Kind of torticollis (Congenital vs Postural vs SCM Mass)
- Bony anomaly (refer back to MD)
- Associated diagnosis: Hip dysplasia, Sandifer syndrome, acid reflux, brachial plexus (nerve) injury
- Muscle tone- torticollis can relate to both hypotonia (low muscle tone) and hypertonia (high muscle tone) (5)

DIFFERENCES

THAT MAY BE PRESENT

- Significant risk of a delay in early motor milestones such as rolling, sitting, crawling - primarily related to decreased tummy time tolerance. (4)
- Other areas of tightness - arms, spine, hips
- “Plagiocephaly” (flat head)
- Trouble bringing their hands to the middle of the body
- Problems with motor planning
- Inner ear or balance problems
- Decreased awareness of the arm and hand on the side opposite of the tight muscle
- Decreased or limited protective responses during a loss of balance to the tight side” (5)
- Differences in vision (can be a cause or an effect of torticollis) (6) (5)
- Feeding difficulties - sometimes tongue tie (1) (5)
- Attachment - some parents report feeling like their baby does not want to look at them prior to knowing about diagnosis

LANGUAGE TO USE/AVOID

Torticollis is named for the “skull side”. For example, if they are looking to their left, they have right side torticollis (5)

SUPPLEMENTARY TESTS

THAT COULD BE USED OR SEEN IN MEDICAL RECORDS

- Can use an [Arthrodiagonal Protractor](#) to measure tightness
- Can use a [Cranimeter](#) to measure and monitor head shape



REFERENCE LIST

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