

CONGENITAL MUSCULAR TORTICOLLIS



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WHAT IS IT?

- Congenital Muscular Torticollis (CMT) is caused by tightness and shortening of the sternocleidomastoid (SCM) on one side of the neck
- Infant laterally flexes toward short SCM and rotates away
- Fibrotic mass in muscle = pseudotumor
- Increased rotation can lead to flattening of the head on the side of the rotation due to the flexibility of infant's skulls = plagiocephaly
 - Sutures and fontanelles open for first 12 months of life
 - Left CMT = right back of head flattening
 - Right CMT = left back of head flattening



SPECIAL TESTS



- Observation, posture, ROM assessment
- Limitations
 - Unable to maintain head in midline (head tilt and rotational preference)
 - AROM/PROM deficits in lateral flexion and rotation

DIFFERENTIAL DIAGNOSIS

- Red flag: acute or sudden CMT onset
 - Infection, Arnold Chiari, posterior fossa tumor
- Ocular torticollis due to vision abnormalities: strabismus, nystagmus, imbalance in ocular muscles
- Neurological issues: atypical muscle tone
- Structural asymmetry: fusion of vertebrae, vertebral abnormalities, scoliosis
- Sandier's syndrome: hiatal hernia + GERD
 - Postural response to right laterally flex and right rotation of neck to avoid reflux



TREATMENT EXAMPLES

- Environmental adaptations in reposition head to non-preferred side
- Neck stretching (active, passive) = promote symmetry
- Educate parents on symmetrical alignment and movement of neck
- Decrease amount of time infants are in positioning devices (bouncing seats, swings)
- Increase tummy time
- Supplemental treatments: soft tissue mobilization, kinesiotaping, microcurrent, myokintetic stretching, cervical orthoses/collars

EXAMPLE QUESTION

A 4 month old infant presents to your clinic due to parent's concern that he is not looking to his right. The infant has limited cervical AROM and PROM in right rotation and limited PROM cervical lateral flexion to the left. There is a flattening on the back left of his skull. What is the most appropriate course of action?

- A. Stretch into left lateral flexion, right rotation
- B. Stretch into right lateral flexion, left rotation
- C. Cervical Collar
- D. Soft tissue mobilization to the right SCM



Answer: A