

Children with flat heads – Helmets or other alternatives.

Several months ago I was contacted by a concerned mother about her three month old daughter who had started to develop a flat spot to the back of her head. Her mother had also observed that her daughters' left eye was larger and appeared more round than the right and that her one cheek was fuller than the other. Her other concern was that it sounded like her daughter was always congested. The mom, who was breastfeeding, also said that it was a lot easier to feed her on one side than the other as her daughter wouldn't turn her head to the right.

After observing the little one for myself I told the mom that her daughter had typical findings of what we term torticollis. A medical term to describe the condition where there is a shortening of the muscles that support the neck and this causes the head to be held in a tilted position. Because the child would hold her head in this distorted position uneven pressure would be applied to the back of the head and in so doing result in a flattening to the skull.

I asked the mom about her daughter's birth and she told me that it had been a very hard delivery, eventually requiring the use of vacuum extraction, even after attempting a forceps delivery. Her daughter had been in a breech position for weeks before delivery but had finally turned just prior.

I explained to her that the incidence of torticollis increases exponentially whenever there is a breech position. This is due to extreme pressures that are exerted onto the neck of the infant by the uterine walls, forcing the head into an unnatural position. The result is a twisting of the neck with resultant vertebral joint disruption and uneven muscular development. The consequences of this are that the infant will favor holding their head to one side more than the other. With this then comes the development of the flat head, or plagiocephaly – medical term for “a bizarre distortion of the shape of the skull”. Further, with the use of vacuum extraction, or forceps delivery there is a greater risk of the soft tissue structures (muscles, ligaments, joint capsules, discs, etc.) of the neck being traumatized because the neck is used as a point of leverage.

The skull itself is made up of a number of bones and is a dynamic structure in that there is, and needs to be motion between these bones. One way of looking at it is that the bones of the skull come together like a set of gears. The understanding is that if one gear is misaligned and doesn't move freely it will affect the motion of the other gears. If one area of the skull is affected it will have a ripple effect throughout this structure. Thus flattening to the back of the skull usually results in a bulging to the forehead on the opposite side, and if left unchecked can ultimately have effects on the palate and nasal passages, as well as facial structure. This, I told the mom could be why her daughter always sounded congested. The whole effect is a torque type pattern to the skull from back to front. Further this torque pattern affects the internal soft tissues of the skull and can produce altered intra cranial pressures with headaches, migraines, and ringing in the ears as potential symptoms.

The mom wasn't sure whether she wanted to put her daughter in an orthopedic helmet as recommended by her pediatrician but she wanted to know what the chiropractic options for her daughter might be. I explained to her that unfortunately in our Hollywood driven society the cosmetic outcome becomes the focus. We want a round, perfectly symmetrical beautiful head. We can put the child in an orthopedic helmet which functions to restore “roundness” to the skull by applying constant opposing forces to the misshapen head. The chiropractic perspective on the other hand, is not only do we want to restore normal shape to the head but also to restore full functionality to the neck. This is achieved by looking at both what has happened to the vertebrae and also the associated muscles. Correct alignment of the vertebrae making up the neck is absolutely necessary to provide firstly, maximum rotation and mobility to the neck and to decrease the likelihood of prolonged soft tissue damage, and secondarily to remove any pressure being exerted on the nerves that control the muscles of the neck so that they can relax and function appropriately. Research has show that it only takes seventy-two hours for degenerative changes to start to occur when the normal biomechanics of a joint are altered. We want the child to be able to move their head around.

Once cranial distortion (flattening) has occurred chiropractic care is directed at removing the distortion pattern to the skull by ensuring that there is proper motion at all joints of the skull, and that there is no overriding of one bone over another. Then with the application of gentle pressure in specific directions the cranial bones are encouraged to assume a normal shape. I explained to her that this was the exciting part as she and her husband, or any other caregivers, would be required to participate in a hands- on fashion in their child's recovery. They would need to practice these “exercises” daily with their daughter, in order to achieve a positive outcome. They would actually become their daughter's helmet. I also mentioned that my past experience has shown that co treatment of this condition between physical therapists, who address the muscular component – stretching out the shortened muscle and working to restore stability, and chiropractors, who work to restore proper motion at the spinal and cranial joints results in a very positive outcome. The sooner a program of care is started the better for the infant. As the child develops so the structure of the bones change from being made up mostly of cartilage to structures that are more rigid, and so are less pliable.

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