

Flat Head Syndrome - How Babywearing Can Help

Flat Head Syndrome also known as 'Plagiocephaly' literally means 'oblique head' (from the Greek: plagio = oblique, and cephalo = head). The condition is not uncommon. Many studies have associated the recent, dramatic increase in the number of children with flat-head with the 'back sleep campaign'. Since more children sleep on their backs, more have some flattening of the back of their heads. This can be worse on one side if a child preferentially sleeps with that side down. 'Flattened Head Syndrome' results from preferentially lying on one side of the head.

Prior to 1992, the risk factors associated with Plagiocephaly were considered to be a result of uterine environment and congenital muscular torticollis. In 1992, after the American Academy of Pediatrics recommended infants sleep only on their backs to reduce the incidence of SIDS, craniofacial centers began to see a dramatic increase in Plagiocephaly. By 1996, studies documented the relationship between back sleeping and Plagiocephaly. The AAP now recommends frequent rotation of a child's head as well as tummy time.

Slightly flat-headed babies, however, are a small price to pay for the 55% drop in Sudden Infant Death Syndrome since 1992, when AAP first recommended that babies be put to sleep on their backs. 'Back to Sleep' is credited with saving thousands of health infants from sudden, unexplained deaths.

It has also been noticed in recent years that extended use of car seats, infant swings, and bouncy seats also contribute to Plagiocephaly. In these devices, the back of the head is often against an unyielding surface. While normal use is not a concern, extended use, especially allowing infants to sleep in them, increases Plagiocephaly.

External/Positional formations can be prevented and treated with frequent **repositioning therapy** of a newborn's head in the following ways:

- Alternate the direction in which your baby is placed in the crib. Alternate the hip or arm with which you carry and feed your baby. Rotate position of toys in the crib, stroller and car seat
- Provide supervised 'tummy time' while your baby is awake. Tummy time is an important activity and needs to be part of a baby's daily routine.
- Changing visual stimuli so the baby isn't always looking in one direction when awake and offer tummy time whenever the baby's not sleepy

Other Repositioning Techniques

by Kevin M. Kelly, Ph.D - excerpt from www.plagiocephaly.org/support/repotech.htm

Dramatically reduce the amount of time baby spends on his back. This means cutting time in car seats, swings, bouncy seats, etc. to a minimum. We all know how busy life can be, and obviously these need to be used from time to time, but using them as little as possible can help. Car seats should be used only for transporting your infant safely and babies should not be left in them to sleep. **Try using a baby carrier when out and about rather than using a car/seat carrier combo. Use the carrier at home, too, as an alternative to the bouncy seat/swing. Babies benefit by being carried and LOVE to be carried as Attachment Parenting research has shown.**