EPICENTER THERAPY SERVICES

VOLUME 2, ISSUE 2

EPICENTER NEWS

APRIL-JUNE 2009

TORTICOLLIS

Example of baby with left torticollis

What is Torticollis? Torticollis, also known as "wryneck," is a condition in which your child's head is tilted. The chin points to one shoulder, while the head tilts toward the opposite shoulder. Therefore the child's head is held in an asymmetrical position. Due to these asymmetries present with torticollis the child will automatically be putting increased pressure on one side of the back of their heads versus the other side. This may cause a noticeable flat spot on the side with the increased pressure. Treatment is necessary to prevent your child's face and skull from growing unevenly and to prevent limited motion of the head and neck. The limited range of motion may also delay the child's gross motor skill development.

Torticollis is usually congenital, which means a condition that is present at birth. This occurs when the neck muscle that runs at an angle up from the sternum toward the back of your child's ear (sternocleidomastoid muscle) is shortened. This is what pulls your baby's head down and to one side.

Experts don't know what causes the shortened neck muscle. Some experts believe that the muscle may sometimes be stretched or torn during the baby's birth or be due to how your baby was positioned in the womb. Some cases of congenital torticollis are caused by a bone problem in the neck portion of the spine. This is known as a congenital malformation of the cervical spine. Torticollis may also occur later in life; however, this is not congenital torticollis and is much less common.

How Is Torticollis Treated? Congenital torticollis is treated through consistent stretching of your child's neck. Your physical therapist will teach you how to stretch your child's neck on your own, and then you will stretch your child's neck several times a day at home. You will also learn how to play with your child in ways that encourage stretching their neck into the desired direction. Holding and placing your child in certain positions will also help stretch and strengthen the neck. Other activities that may take place during therapy sessions or at home are massage and heat to the affected muscle. In severe cases, where stretching does not resolve the torticollis, the child may be fitted for a helmet to help shape the child's head. Overall, physical therapy and conservative treatment methods have a high success rate and often children have no lasting effects from their torticollis!

For more information or inquiries you can contact Epicenter at 522-3722 .

UPCOMING EVENTS

Yoga Group Schedule (will be 6 weeks long):
instructed by Holly Kassner, COTA

June 17th-Aug 5 Wed 3:30-4:30

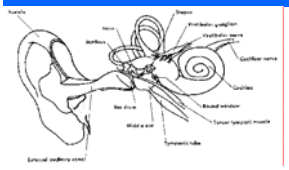
Handwriting Group (will be 4 weeks long):
instructed by Holly Kassner, COTA

July 9th –July 30th Tuesdays and Thursdays 10:30-11:30.

FREE SCREENS

Free initial screenings for PT, OT and SLP will be given at the beginning of the school year. Call for more information or to schedule.

CONTINUING EDUCATION COURSES ATTENDED



Lindsey Anderson, MOTR/L, attended **Vital Links Therapeutic Listening®: Listening With the Whole Body and Astronaut Training: A Sound Activated Vestibular-Visual Protocol.** Therapeutic Listening is a protocol that combines modulated music in conjunction with sensory integrative activities to create a comprehensive program that is effective for populations with sensory processing difficulties. Therapeutic Listening can have an impact on sensory modulation, attention, behavior, postural organization, and speech and language difficulties. Therapists are trained to develop programs for clients to use in homes, schools, and clinics. Astronaut Training: A Sound Activated Vestibular-Visual Protocol is a program that provides precise input to all five vestibular receptors, along with auditory and visual input to create a comprehensive program that integrates the sensory system. It is through these exercises that assist the client in developing an adaptive response to sensory input, which allows for greater organization of the clients sensory system.

Sheri Simkins, PT co-authored an article titled "A Dynamic Seating System for Children with Cerebral Palsy", which was published in the Journal of Musculoskeletal Research, Vol.12, No. 1 (2009). The study's aim was to determine the initial effects of a dynamic seating system as a therapeutic intervention in children with cerebral palsy. At study initiation the experimental group received a wheelchair with dynamic seating components that allows limited range of motion in the hip and knee, and the control group received a static positioning wheelchair. Participants were evaluated for range of motion, muscle spasticity, motor function, and level of disability at study initiation, 3 months and 6 months post intervention.

Spotlight

Brandon Renkin is a 16 year old sophomore at Gardiner High School in Gardiner, MT. He has been coming to Epicenter for therapy since he was 9 months old. He says therapy helps him feel stronger, and he gets massage which feels good! He likes to play floor hockey, video games, he is his class's vice president, and he attends school proms. His favorite subject is PE because he gets to use his speed (with his power wheel chair)! Brandon plans to attend college to be a computer programmer, and he wants to be a professional race car driver (he has been using his power chair since he was 2 years old). His favorite movie is Talladega Nights, his favorite sports teams are the Pittsburgh Penguins and the Pittsburgh Steelers. His favorite drink is Mountain Dew and food is spaghetti.

OUR GOAL IS TO PROVIDE THE BEST FOR THE CHILDREN WHO NEED THE MOST