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## Prevalence Of 'Flattened Head' In Infants And Young Children Appears To Be Increasing

Posted on April 6, 2011 by Heidi

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**Editor's Note:** This study is yet another reason to promote 'Tummy Time' to the parents and guardians of your kiddos. Be sure to read the comment at the foot of our blog by Amanda Krupa of [Pathways Awareness](#) and [Tummy Time Central](#).

[Source: [ScienceDaily.com](#)]

The prevalence of plagiocephaly, a condition marked by an asymmetrical, flattening of the skull, appears to be increasing in infants and young children, according to a report posted online today that will appear in the August issue of Archives of Pediatrics & Adolescent Medicine, one of the JAMA/Archives journals.

"Plagiocephaly is characterized by unilateral flattening of the head either in the frontal or occipital [rear] region," the authors write as background information in the study. "The presence of plagiocephaly has reportedly increased since 1992 while the American Academy of Pediatrics (AAP) recommended that infants be put to sleep on their back to reduce the risk of sudden infant death syndrome, although the plagiocephaly is then an acquired and not congenital condition."

Reviewing data from the Texas Birth Defects Registry, Shane U. Sheu, M.P.H., from the Texas Department of State Health Services, Austin, and colleagues tracked reported cases of plagiocephaly from 1999 to 2007. During this time, reported cases of plagiocephaly increased more than 9-fold, from three cases per 10,000 live births to 28.8 cases. This resulted in 6,295 total cases with a definite diagnosis and was equivalent to an average annual increase of 21.2 percent per year. A large portion of the increase came from the Dallas/Fort Worth region where the prevalence of plagiocephaly increased 23.2 times, from 2.6 cases per 10,000 live births in 1999 to 60.5 cases in 2007.

[Read the Rest of this Article on Science Daily.com](#)

**2 Responses to *Prevalence Of 'Flattened Head' In Infants And Young Children Appears To Be Increasing***

1. [Heidi](#) says: [April 6, 2011 at 2:38 pm](#)
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Here is a great argument for more Tummy Time, don't you think?

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2. [Amanda Krupa](#), says: [April 6, 2011 at 2:54 pm](#)
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At Pathways Awareness, we are currently working on an initiative to create a more balanced message for the Back to Sleep, Tummy to Play campaign. Since the inception of the Back to Sleep campaign, a notable concern has also been an associated rise in positional plagiocephaly and torticollis. In 1974, plagiocephaly was estimated to have occurred in one out of every 300 live births. Following the Back to Sleep campaign, the occurrence of plagiocephaly increased to one in every 60 children in 1996.[i] Referrals for treatment of cranial asymmetry during the 2-year period after the AAP's recommendations increased six-fold compared with the previous 13 years.[ii] As a result, the AAP released a report specifying guidelines regarding the prevention of cranial asymmetry related to positioning issues that suggests a parent alternate the head position of an infant sleeping in the supine position (on the back).[iii] Plagiocephaly and torticollis should be evaluated by a healthcare provider to determine the cause and whether treatment is required. If treatment is necessary, a referral should be made for pediatric therapy. Treatment is more effective when symptoms are addressed early on.

The more time infants spend on their tummies, the better the chance of stopping plagiocephaly from getting worse, allowing natural correction to begin. Tummy time also helps strengthen muscles to overcome torticollis and enable an infant to turn their head from side to side. Additional preventative interventions include limiting the time an infant spends in car seats, swings, bouncy chairs and other infant seats, changing the infant's head position during sleep, and periodically changing the orientation of the infant.

[i] Kennedy E, Majnemer A, Farmer JP, et al. (2009) Motor development of infants with positional plagiocephaly. *Physical & Occupational Therapy in Pediatrics* 29(3): 222-35.

[ii] Kennedy E, Majnemer A, Farmer JP, et al. (2009) Motor development of infants with positional plagiocephaly. *Physical & Occupational Therapy in Pediatrics* 29(3): 222-35.

[iii] Persing J, James H, Swanson J, et al. (2003) Prevention and management of positional skull deformities in infants. *Pediatrics* 112: 199-202.

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