

If you have concerns about the shape of your baby's head, please speak with your child's primary care doctor.

Learn more at [NationwideChildrens.org/positional-plagiocephaly](https://www.nationwidechildrens.org/positional-plagiocephaly)

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Guide to Understanding Positional Plagiocephaly



What is Positional Plagiocephaly?

When babies are born their skulls are soft, which helps them pass through the birth canal. It can take 9-18 months before a baby's skull is fully formed and all the bones are joined together. During this time some babies develop positional plagiocephaly. This means that there is a flat area on the back or side of the head.

What causes Positional Plagiocephaly?

Most commonly a misshapen head is caused by repeated pressure to the same area. It usually happens when a child prefers to lay his or her head on the same spot. Other causes include:

- Baby's position in the womb that puts pressure on the head
- More than one baby in the same pregnancy
- Spending too much time laying on his or her back
- Torticollis a tight muscle on one side of the neck, which can cause the head to tilt one way or make it hard to turn the head

Please note: you should always put your baby to sleep on their back. Putting your baby on his or her back is one of the best ways to prevent SIDS (Sudden Infant Death Syndrome).

What should I do if I'm concerned about my baby's head shape?

During well visits your child's primary care doctor will check your baby's head shape. The doctor will watch your baby to see whether the shape of his or her head improves over time, or if treatment is needed.

If you have specific concerns, please speak with your child's doctor.

How is Positional Plagiocephaly treated?

In many children the flattening is corrected as the child becomes more mobile and lies less on the affected area. Other effective techniques include:

- When your child is on his or her back, gently turn the head to the side that is not flat. This is the "non-preferred side". Changing sides takes pressure off the flat spot. Do not use anything to hold the head in place.

- Place a toy or Velcro a wrist rattle to your child's left or right hand to encourage him or her to look toward their non-preferred side and take pressure off of the flattened side of the head. You can also hold toys at the non-preferred side to encourage looking in that direction.
- When awake, limit the time your baby spends in swings or baby carriers. If your child is able to sit up, it will take the pressure off the back of the head and builds neck strength.
- In infants that cannot sit for long periods, increase the amount of supervised tummy time when the child is awake.
- When you hold your baby make sure there is no pressure on the flattened side of the head.

In some cases these methods will not help the head to round out. In these instances your child's primary care doctor will discuss with you the pros and cons of using a custom-made helmet or band. These devices work by applying gentle pressure to areas of your baby's head, and are typically highly effective.

Will my child need to see a specialist?

In rare cases, when other treatments are not effective, the primary care doctor will recommend a consultation with a specialist.