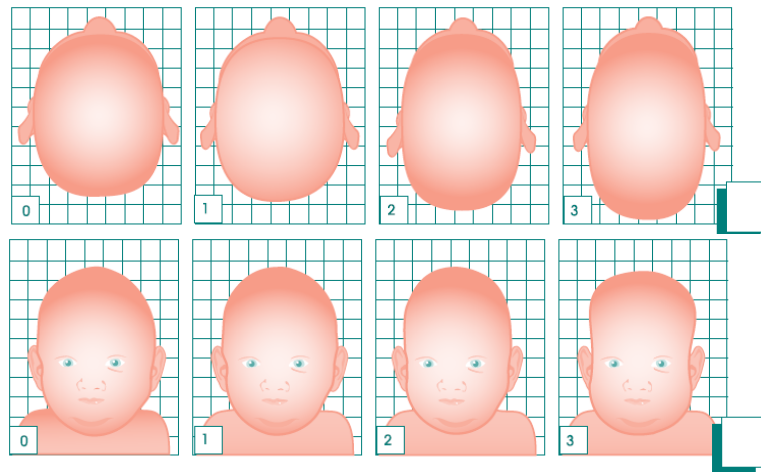


Head Shape Deformities

Infants who have an extended stay in the NICU are susceptible to the development of head shape deformities. This is due to several factors such as: premature infants have a more fragile and thin skull than full term infants; long term head positioning to the side due to feeding tubes, ventilators, shunts, etc. Other risk factors can include restrictive intrauterine environment (such as multiple birth or unusual position), assisted vaginal delivery, prolonged delivery, positioning to the same side during feeding/diapering, positioning preference of head, not enough tummy time when awake, and increased use of infant carriers, bouncers, and swings.



Severity scale images courtesy www.cranialtech.com

What to look for?

- Asymmetry or flattening of your baby's head or face
- One ear may appear to be pushed forward
- Neck fold asymmetries
- Baby tends to favor looking in one particular direction

How to prevent and manage head shape deformities?

- Tummy time when your baby is awake and supervised-work up to greater than 3x/day and greater than 5 minutes each day
- Minimize time in car seats (when not a passenger in a vehicle), strollers, infant seats, swings, or other seating devices that maintains positioning on infant's back
- Change the position of your baby in crib-so baby's head is where foot of crib is and vice versa every 1-2 weeks
- Alternate position of your baby when bottle feeding (unless otherwise advised by doctor or therapist)
- Provide visual and auditory stimulation to the unaffected side by use of toys, mobiles, mirrors, and activity in the room
- Neck exercises/stretchers if recommended and instructed by your baby's Physical or Occupational Therapist