

When Your Baby Has Positional Plagiocephaly

What is positional plagiocephaly?

- Positional plagiocephaly is when your baby has an atypical head shape. There is a flattened area on one side of the back of the head (see Figure 1).
- Plagiocephaly:
 - is caused by outside pressure on the skull
 - can happen quickly
 - develops most often in the first 6–8 weeks after a baby is born

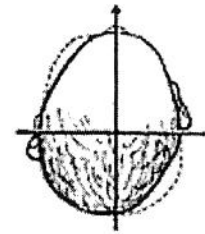


Figure 2

Will plagiocephaly affect other parts of my baby's head or face?

- If your baby has plagiocephaly, you might notice these changes on the same side of the head that is flattened:
 - the ear might look like it is shifted forward
 - the forehead might stand out more
 - your baby's face might not look the same on both sides (the cheek might look fuller and the eye might look wider)

What causes plagiocephaly?

- Most often, positional plagiocephaly is caused by sleeping on the back and always turning the head to the same side.
- Plagiocephaly might develop because of tightness and/or weakness in the neck muscles.
- Positional plagiocephaly can develop before birth if:
 - the baby sits low in the pelvis
 - there is less room in the uterus than normal (e.g., twins or triplets)
- There are more babies with plagiocephaly because of positioning in:
 - baby swings
 - infant carrier car seats
 - overhead baby gyms
 - the “Back to Sleep” campaign, which recommends your baby sleep on the back to prevent sudden infant death syndrome (SIDS)

What are the best ways to position my baby?

- When your baby has plagiocephaly, position your baby off the flattened area as much as possible. This will create counter pressure on the side that is not flat, which can help reshape the head.
- Your healthcare provider will show you what positions are best when your baby:
 - feeds
 - plays
 - sleeps
 - has a diaper change

What about positioning when my baby is asleep?

- When your baby is asleep:
 - position your baby on the back (until at least 12 months old) to decrease the risk of SIDS
 - position the head at the end of the crib so your baby will look away from the flattened side and towards the door (or out into the room)
 - put crib bar toys in a place where your baby has to look away from the flattened side of the head to see
 - turn (with your hands) your baby's head away from the flattened side (only do this when you are awake, you don't need to wake up during the night to do this)
- **Do not:**
 - use hanging mobiles
 - use positioning devices and/or towel rolls while your baby is asleep
 - let your baby sleep in a car seat, bouncy seat, or swing (unless your doctor tells you to)

What is the best position for my baby during play?

- When you are with your baby for playtime, try these positions:
 - lay your baby on the side that is not flattened. Use a rolled towel behind the back and a small rolled towel in front of the tummy for support. This puts pressure on the more prominent side of the head, which helps the head to reshape.
 - position your baby on the stomach (tummy time) for a few minutes, several times a day
 - limit the time your baby spends in a car seat, bouncy seat, or swing
- Always try to position your baby's seat so any stimulation (e.g., siblings) is on the side that you want your baby to turn towards. Do this when your baby is in a:
 - play seat
 - bouncy seat or swing (if your healthcare provider says it is okay to use)
 - high chair
 - standing entertainment centre
 - jumper
- When in the car, encourage your baby to turn away from the flat side by:
 - putting any backseat passengers on the side opposite the flat area
 - put window stickers/decals, colourful blankets, or mirrors in a place that your baby has to turn away from the flattened area on the head to see

What do I need to know about feeding my baby?

- When bottle feeding, hold your baby on the side of the head that is not flattened. The arm you use will depend on whether your baby wants to turn and look at you or look into the room.
- Feed your baby from the side of the head that is not flattened in a highchair.

What do I need to know about diaper changes and baths?

- Always stand on the side opposite to the flattened area of the head.

This material is for information purposes only. It should not be used in place of medical advice, instruction and/or treatment. If you have questions, speak with your doctor or appropriate healthcare provider.