

# Flat head syndrome linked to motor, language and cognitive delays

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Babies with flat head syndrome may be at heightened risk of developmental delays, a new study has found.

The research from The George Institute for Global Health and the University of Sydney highlights the need for early and prompt assessment and intervention.

The study by Associate Professor Alexandra Martiniuk, from The George Institute for Global Health at the University of Sydney, is the first, rigorous systematic review examining the link between [developmental delay](#) and flat head, which affects one in every five babies.

Associate Professor Martiniuk said: "Our study shows that positional plagiocephaly (or flat head) is associated with an increased risk of developmental delays, in particular [motor skills](#)."

"It is essential doctors, nurses and midwives monitor infants with flat head to ensure they receive appropriate assessment, early intervention and follow-up for developmental delays."

The review of 19 papers published in the *Journal of Developmental and Behavioral Pediatrics* found:

- Delays in motor skills, language and cognition were detected in infants as young six months old and remained for up to 3 years

- The most commonly reported delay was in motor skills - such as sitting up and crawling - followed by delays in language.

The number of children with flat head or positional plagiocephaly has risen significantly in recent years in part due to SIDS guidelines which began in 1992, which recommend placing babies on their backs to sleep.

Flat head can occur if the baby consistently holds his or her head a particular way when lying and causes the baby's head to have a flat spot or be misshapen.

Associate Professor Martiniuk said parents firstly should follow SIDS guidelines, which are effective in preventing sudden infant death.

Assoc Prof Martiniuk said: "If you do notice your child has flat head talk to your GP to see if any further treatment is needed. Parents should also make sure they provide tummy time whilst their child is awake and watched. Most delays will likely resolve over time."

"However there will be a smaller number of children who are at risk of longer term delays and these children need to be identified early and provided with access to proven treatments for their specific developmental delay."

As well as providing tummy time while supervised and awake, parents are advised to provide a variety of positions for their child while awake, including carrying, sitting or lying down - as this alternates their baby's head position and can also strengthen the neck muscles - all of which can help to avoid flat head or help it improve if already present.

Severe cases are often treated with an orthotic helmet however recent evidence shows these are not effective as initially thought.

**More information:** Emily O. Wakefield et al, Perceived Racial Bias and Health-Related Stigma Among Youth with Sickle Cell Disease, *Journal of Developmental & Behavioral Pediatrics* (2017). [DOI: 10.1097/dbp.0000000000000381](https://doi.org/10.1097/dbp.0000000000000381)

Provided by George Institute for Global Health

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