



## Plagiocephaly Awareness and Educational Materials Now Available

*Family Orthotics and Prosthetics Inc.*, specializes in providing cranial remolding orthosis treatment and acquiring clinical research data documenting deformational plagiocephaly and surgical procedures for craniosynostosis with the *STARscanner*<sup>™</sup> laser data acquisition system. There are currently more than 70 STARscanners located throughout the world, and now we are making this state-of-the-art technology available in *Nebraska*.

providers of



Because our facility is committed to providing the best possible cranial remolding orthosis treatment, we invested in the STARscanner laser data acquisition system. The STARscanner utilizes Type I, eye-safe lasers, and eliminates the need for the messy, and sometimes traumatic, casting process. The STARscanner takes less than 2 seconds to scan, and is the most accurate means of collecting 3-D head shape data for custom cranial remolding orthoses. In addition, the STARscanner's Comparison Utility Software compares scans of the patient's head throughout the treatment process, and is used to document and measure the changes in shape. These measurements are recorded and printed in a STARscanner Summary Report that can be distributed to referring physicians, parents, and insurance companies to illustrate positive clinical outcomes.



Family Orthotics and Prosthetics is dedicated to increasing awareness about plagiocephaly by providing pediatricians with free educational information that can be shared with your colleagues and patients. Please see the enclosed order form for more information on receiving a complimentary supply of these materials for your office.

Please feel free to call us if you have questions or would like more information about our Cranial Remolding Orthosis Program or STARscanner system. You can reach us at **(866) 338-3550**. Thank you for your time.

Sincerely,

*Kenneth M Vyvlecka, CO*  
*Family Orthotics and Prosthetics, Inc.*

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# Free Information Request Form - Fax To 800.638.9259



## TummyTime! Awareness Kit

Many parents have concerns about their baby's head shape. This awareness kit includes a wall poster and Tummy Time! brochures to educate parents about the importance of tummy time activities. The brochures have illustrated activities that families can incorporate into their daily routines.

- A 12" x 18" laminated wall poster with a clear lucite pocket to display Tummy Time! brochures. Includes 50 tri-fold brochures.



### Journal of Craniofacial Surgery Clinical Reprint

- A peer-reviewed clinical efficacy study on the use of the STARband and STARscanner

### A Caregiver's Guide to the Treatment of Deformational Plagiocephaly

- Color booklet, 8 pages



### A Clinical Guide to the Treatment of Non-Synostotic Positional Plagiocephaly

- Color booklet, 4 pages



### A Children's Guide to the Treatment of Non-Synostotic Positional Plagiocephaly—"My Brother Has A Crooked Head"

- Children's coloring book



### Repositioning Guide

- Helpful repositioning techniques to help educate parents about positional plagiocephaly (available in English and Spanish).



### Please send me a complimentary Plagiocephaly Awareness Kit that includes :

- Tummy Time Awareness Kit (poster and brochures)
- The Journal of Craniofacial Surgery Clinical Reprint
- Caregiver's Guide
- Clinical Guide
- Coloring Book
- Repositioning Guide

Company: \_\_\_\_\_

Name: \_\_\_\_\_

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*Providing Cranial Remolding Orthoses with the*



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## One Family's Experience...

Around five months of age, we started to notice our son's head becoming flat in the back on the left side. Lucas continually favored his left side while lying down and also while in his swing, car seat and bouncy seat. When we voiced our concerns to our pediatrician, she referred us to a neurologist specializing in pediatrics.

After the initial exam, the neurologist prescribed a STARband cranial remolding orthosis. We were concerned that Lucas would not tolerate wearing a helmet for 23 hours a day for 3 months. We were also concerned as his parents, how the stigma of Lucas wearing a helmet would affect us. We recognized the need for him to wear the helmet and knew it was the right thing to do in order for his head to form properly.

Our concerns quickly subsided when we met an orthotist who worked directly with Orthomerica, the manufacturer of the STARband. Everyone involved made us feel comfortable and answered any questions we had. They were especially nice and gentle to Lucas during the fitting process. After just a few outings with Lucas wearing his new "jungle print helmet", we were no longer concerned with how people would react.

A major factor that made us feel even more comfortable was that the STARband did not bother Lucas. From the first time he put it on, he never tried to take it off and he was quickly wearing it 23 hours a day with no problems. Right away, we decided as a family that we would be dedicated to following the program. After three months of wearing the STARband, we were so very pleased when the neurologist told us that Lucas' head was corrected, and he no longer needed to wear it. Now at almost eight months old, no one would know that he had a problem with his head.

As a pediatric nurse, I am well aware of the benefits of early intervention. As a mother, I understand the concerns parents face in caring for a child with this condition. Thanks to our orthotist and Orthomerica for making our experience a pleasurable one.

*Elyse and Paul Davis*



Manufactured by

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### Efficacy Of STARband Cranial Remolding Orthoses

A study published in the Journal of Craniofacial Surgery from researchers at Children's Healthcare of Atlanta studied the effectiveness of the STARband using the STARscanner for shape acquisition and documentation. This study also documented 16 infants diagnosed with deformational plagiocephaly whose families declined treatment. All but three of the untreated subjects only changed in parameters related to growth and did not improve significantly in symmetry or proportional variables. The 206 infants treated with the STARband demonstrated significant improvement in all 25 variables including those related to cross sectional measurements and volume comparisons between right and left anterior, posterior and overall symmetry ratios.<sup>29</sup>



Before STARband® Treatment



After STARband® Treatment

### Can STAR Cranial Remolding Orthoses Help Resolve The Deleterious Effects Of Head Shape Deformities?

The more rounded occipital portion of STAR Cranial Remolding Orthoses allows the infant's head to turn more freely instead of resting on the flattened area of the occiput. The bossed area no longer acts as a barrier to rolling, allowing the infant to turn easily—facilitating the development of more advanced motor skills. The orthosis also provides space in the affected flattened areas to prevent further deformity at night when the baby is supine and when the infant is positioned for protection in the car seat. In both of these positions the infant has more neck mobility in the STAR orthosis because the more rounded occipital area allows symmetrical turning and midline positioning. Many caregivers report that their babies begin to roll and are more active after they begin orthotic treatment. No study has ever documented that cranial remolding orthoses interfere with skill development although there is certainly clinical evidence that prior to any intervention, babies with deformational plagiocephaly may have developmental issues<sup>30,31,32</sup>, visual tracking problems<sup>33</sup>, mandibular asymmetry<sup>34</sup>, and auditory issues.<sup>35</sup>

Since 2000, over 40,000 infants have benefited from the STAR Cranial Remolding Orthosis Program. The child's physical appearance is transformed by the treatment process as the head is gently re-shaped to improve symmetry and proportion. Perhaps even more importantly, STAR Orthoses help normalize the position of the skull plates and frontal bones to ensure that the child's rapidly expanding brain can process sensory information from a more normal mid-line orientation. This well-documented and successful treatment program provides non-invasive intervention that positively impacts a child's development for a lifetime.

## Team Rehab

ORTHOTIST | THERAPIST | PHYSICIAN | PATIENT

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# Repositioning Techniques For Your Infant

## EARLY INTERVENTION FOR POSITIONAL PLAGIOCEPHALY

Positional plagiocephaly and torticollis are more commonly diagnosed in today's infants than in previous years and should be evaluated and treated by medical professionals. While many factors contribute to the development of these conditions, a decrease in severity may occur with careful and continuous attention to repositioning of the infant during both sleeping and waking times. The purpose of this flyer is to provide helpful hints in repositioning attempts to prevent positional plagiocephaly.

Evaluate your infant's head for any areas of flatness. The goal of repositioning is to encourage the infant to rest the head on the non-flat areas as well as to encourage weight distribution over all surfaces of the sides and back. Also, stretching of the neck muscles occurs by rotation of the infant's head.

If repositioning and stretching exercises are unsuccessful in promoting symmetrical head growth by four months, the infant may benefit from a cranial remolding orthosis such as a STARband™. The STARband™ is a custom molded plastic and foam orthosis that gently reshapes the infants head. It is most effective for infants 4-18 months and is available by prescription through your physician and a local orthotist.

### *Sleeping*

- Infants should always be placed on their backs to sleep. Modify their sleeping position by placing the infant's head at opposite ends of the crib on alternate nights.
- Rearrange the furniture in the infant's nursery. Even very young infant's are attracted to a light source and will try to turn their heads toward a window.
- If your infant prefers sucking a thumb over a pacifier, encourage him/her to suck the thumb on the opposite side of head flatness by covering the hand on the side of flatness.
- After your infant has fallen asleep, move the head to the non-preferred side (i.e., away from the flattened area).

### *Play Time*

- Supervised tummy time—The more time your infant can spend playing on his/her tummy... the better! Many infants resist this position at first but only because they are unfamiliar with it and most learn to enjoy it over time. Get down on the floor at your infant's eye level and play peek-a-boo, etc., and choose toys that are stimulating for the infant when they are on their tummy.
- Reduce the amount of time the infant spends in carseats, carriers, swings or any other device that allows the child to rest on the back of the head.
- Stretch and massage—Neck tightness (also called torticollis) should be evaluated and treated by a medical professional. Home exercises are often given to assist in the treatment process.

*These positioning techniques are not a substitute for medical advice. Please contact your health care provider to receive treatment and ongoing medical attention.*

### *Feeding*

- Alternate the arm in which the infant is held for both bottle and breast feeding.
- When feeding, encourage the infant to turn their head opposite the preferred side.

### *Changing Diapers*

- Diapers can be changed from the side so that the infant is encouraged to turn the head to look at the caregiver.

### *Travel*

- Carseats—Towels can be rolled to position the head on one side or the other, and soft foam materials can be placed underneath the cloth liner of the carseat to create additional padding for the head. Move the carseat to the side of the car that encourages the infant to turn their head toward the window and away from the side of tightness on the neck.
- Front carriers (i.e., pouches)—These allow your infant to be close to you without unnecessary forces to the head.
- Carriers (i.e., buckets)—Time spent in this type of carrier should be kept to a minimum.
- Pillows—Several companies manufacture specially designed pillows to help hold the infant's head in the preferred position.



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# Técnicas de Recolocación para su infante

## La intervención temprana para la plagiocefalia de posición

La plagiocefalia de posición y la tortícolis son diagnosticados más comúnmente en los infantes de hoy día que en años previos, y deberán ser evaluados y tratados por profesionales médicos. Mientras que muchos factores contribuyen al desarrollo de estas condiciones, una disminución en la severidad puede ocurrir con la atención cuidadosa y continua a la recolocación del infante durante ambos los ratos de dormir y los de descansar. El propósito de este panfleto es el proveer sugerencias de ayuda para los intentos de recolocación para prevenir la plagiocefalia de posición.

Evaluar la cabeza de su infante para ver si hay áreas planas. La meta de la recolocación es fomentar que el infante descanse la cabeza sobre las áreas no planas al igual que fomentar la distribución del peso sobre todas las superficies laterales y traseras. Además, el estiramiento de los músculos del cuello ocurre con la rotación de la cabeza del infante.

Si la recolocación y el estiramiento no son exitosos en promover la simetría del crecimiento de la cabeza a los cuatro meses, el infante puede beneficiarse del uso de un ortosis de remodelamiento craneal tal como una STARband™. La STARband™ es una ortosis ligera de plástico y hule espuma hecha de una impresión en un molde que suavemente remodela la cabeza del infante. Es más efectiva en los infantes de entre 4-18 meses y está disponible por receta médica por medio de su médico y de su ortóastico local.

### Dormido

- Los infantes siempre deberán colocarse en la espalda para dormir. Modifique su posición de dormir por medio de colocar la cabeza del infante en lados opuestos de la cuna en noches alternadas.
- Reacomode los muebles del cuarto del bebé. Aún los infantes muy jóvenes son atraídos por una fuente de luz y voltearán la cabeza hacia una ventana.
- Si su infante prefiere chupar su dedo gordo más que un chupón, animelo a chupar el dedo gordo del lado opuesto de la parte plana de la cabeza por medio de cubrir la mano del lado de la parte plana.
- Después de que su hijo ya se haya dormido, mueva su cabeza al lado no-preferido (v.g., lejos del área plana).

### Tiempo de Juego

- Supervise el tiempo que el infante está sobre el estómago. Mientras más tiempo su hijo puede pasar jugando sobre su estómago... ¡mejor! Muchos infantes resisten esta posición al principio pero solamente porque no están acostumbrados a hacerlo y la mayoría aprenden a gozarlo con el tiempo. Bájese Ud. al piso al nivel de los ojos de su bebé y juegue a esconderse los ojos, etc., y escoja juguetes que estimulan al infante mientras está sobre el estómago.
- Reduzca la cantidad del tiempo que el infante pasa en asientos de seguridad de automóviles, cargadores, columpios o cualquier otro aparato que permite que el niño descanse sobre la parte trasera de la cabeza.
- Estire y masajée. La tensión del cuello (también llamado tortícolis) deberá ser evaluada y tratada por un profesional médico. A menudo se le dan ejercicios caseros para ayudar al proceso de tratamiento.

*Estas técnicas de colocación no son un sustituto para el consejo medico. Por favor póngase en contacto con su proveedor de cuidado de la salud para recibir tratamiento y atención médica continua.*

### La Alimentación

- Alterne el brazo sobre el cual el bebé se alimenta para ambas la alimentación por biberón y por pecho.
- Al alimentarlo, anime al infante a voltear la cabeza al lado opuesto a el lado preferido.

### El Cambio de Pañales

- Los pañales se pueden cambiar desde el lado para que el infante se anime a voltear la cabeza para ver a quien lo cuida.

### Viajar

- Los asientos de seguridad de automóviles. Las toallas pueden enrollarse para colocar a la cabeza en un lado o en el otro lado, y materiales de hule espuma suaves pueden colocarse debajo del forro de tela del asiento de seguridad para crear acojinamiento adicional para la cabeza. Mueva el asiento de seguridad al lado del coche que anime al infante a voltear la cabeza hacia la ventana lejos del lado de la tensión del cuello.
- Cargadores frontales (v.g., bolsillos). Estos permiten que su hijo esté cerca de usted sin fuerzas innecesarias en la cabeza.
- Cargadores (v.g., tipo cubeta). El tiempo que se pasa en este tipo de cargadores deberá de ser mínimo.
- Almohadas. Muchas compañías manufacturan almohadas diseñadas especialmente para ayudar a sostener a la cabeza del infante en la posición preferida.



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# Tummy! Time!™

Tummy Time provides parents with ideas and activities to make sure your baby gets enough time on his tummy throughout the day, while he is awake and supervised. These activities include handling, carrying, diapering, positioning, feeding and playing with your baby.

Increasing the amount of time your baby lies on his tummy promotes muscle development in the neck and shoulders; helps prevent tight neck muscles and the development of flat areas on the back of the baby's head; and helps build the muscles your baby needs to roll, sit and crawl.



Ask your healthcare provider for a copy of Tummy Time!

## What is a STARband® and how can it help my baby?



Some infants develop flattening or asymmetry of their heads (deformational plagiocephaly), even after a developmental program as active as Tummy Time!

If your baby's head shape does not improve after 4 months of age, your pediatrician may refer you to a doctor who specializes in the skull or suggest that you see a professional called an orthotist, who can create a custom-molded STARband to help shape your baby's head. This special band is called a cranial remolding orthosis. It is worn 23 hours a day and gently guides the baby's head into a more normal shape.



Before STARband® Treatment



After STARband® Treatment

For more information, visit [www.starbandkids.com](http://www.starbandkids.com) or contact:



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