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Infantile postural asymmetry and physical therapy: A randomized controlled trial

Background: Physical therapy is an acknowledged and frequently applied method for infantile postural asymmetry. However, there is not yet sufficient evidence for its effectiveness in pediatric treatment.

Objective: In a randomized controlled trial, the effect of Vojta therapy versus neurodevelopmental treatment (NDT) is assessed in infants with postural asymmetry.

Methods: 65 infants with postural asymmetry were recruited. 37 infants aged six to eight weeks (mean 7.38) were found to be eligible and randomly assigned to two groups, with 19 receiving Vojta therapy and 18 NDT. Using a standardized and blind video-based assessment, restriction in head rotation and convexity of the spine in prone and supine position before and after therapy were documented. A reduction of at least four points (range of scale 20 points) in postural asymmetry was regarded as a clinically relevant change.

Results: A four point reduction was achieved in both groups within eight weeks. A mean difference (pre-post) between the groups of -2.96 points (95% CI [-5.01; -.91]) in favor of Vojta therapy was observed (p=0.025). Improving attitude was more evident in the supine position than in the prone position.

Conclusion: While both NDT and Vojta therapy are effective in the treatment of infantile postural asymmetry and well applied by the parents, therapeutic effectiveness is greater within the Vojta group. Parental compliance was the same in both groups regardless the babies crying in the Vojta group.

Biography

Michael Jung has completed his PhD at the Medical Faculties of the Martin Luther University Halle-Wittenberg, Germany. He is the Dean of the Master program in Interdisciplinary pediatric therapy at the Carl Remigius Medical School in Frankfurt, Germany. He has published more than 35 papers in reputed journals and has been serving as an adhoc-reviewer in international journals.

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