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題目 (Title):

先天性肌肉斜頸症的物理治療：美國物理治療學會小兒組所發展出的實證臨床指引

(Physical Therapy Management of Congenital Muscular Torticollis: An Evidence-Based Clinical Practice Guideline: From the section on Pediatrics of the American Physical Therapy Association)

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背景 (Background):

先天性肌肉斜頸症 (CMT) 是一種出生後不久即被發現的原發性姿勢異常，典型的特徵是由於一側的胸鎖乳突肌太短，造成頭部會傾向同側且轉向對側。CMT 可能伴隨其他神經或肌肉骨骼系統疾病。

(Congenital muscular torticollis (CMT) is an idiopathic postural deformity evident shortly after birth, typically characterized by lateral flexion of the head to one side and cervical rotation to the opposite side due to unilateral shortening of the sternocleidomastoid muscle. CMT may be accompanied by other neurological or

musculoskeletal conditions.)

重點 (Key Points):

有 CMT 的嬰幼兒常被轉介給物理治療師矯正姿勢的不對稱。此篇實證臨床指引提供哪些嬰幼兒應接受追蹤、治療與/或轉介，以及物理治療介入時機與內容的指引。基於文獻的嚴格評讀和專家意見，訂出 16 項針對篩檢、檢查、介入與追蹤的行動方針，並連結至明確證據層級。實證臨床指引說明轉介、篩檢、檢查與評估、預後、最佳選擇與補充治療、諮詢、結案、追蹤、執行與遵從度確認建議、轉介路徑流程圖與 CMT 嚴重度分類，並提出研究相關建議。

(Infants with CMT are frequently referred to physical therapists (PTs) to treat their asymmetries. This evidence-based clinical practice guideline (CPG) provides guidance on which infants should be monitored, treated, and/or referred, and when and what PTs should treat. Based upon critical appraisal of literature and expert opinion, 16 action statements for screening, examination, intervention, and follow-up are linked with explicit levels of evidence. The CPG addresses referral, screening, examination and evaluation, prognosis, first-choice and supplemental interventions, consultation, discharge, follow-up, suggestions for implementation and compliance audits, flow sheets for referral paths and classification of CMT severity, and research recommendations.)

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