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題目 (Title):

先天性肌肉斜頸之物理治療處置：美國物理治療學會的兒童物理治療專科學會2018年實證臨床執業指引

Physical Therapy Management of Congenital Muscular Torticollis: A 2018 Evidence-Based Clinical Practice Guideline From the APTA Academy of Pediatric Physical Therapy.

摘要中文翻譯**背景：**

先天性肌肉斜頸（congenital muscular torticollis，CMT）為一出生後隨即可見的姿勢變形，其典型特徵為因單側胸鎖乳突肌較短，而導致頭部會側彎至同側，且頸椎/頭會轉向對側；可能伴隨其他的神經或肌肉骨骼問題。患有CMT的嬰兒一旦確診，應該盡速地轉介給物理治療師，以治療這些姿勢的不對稱。

目的：

此為2013年CMT臨床執業指引（clinical practice guideline，CPG）的更新版本，提供臨床工作者與家庭相關訊息，包括了誰應該被監測、治療、與/或轉介，何時介入和何種治療。它連接了17個行動聲明，每個都具有嚴謹、明確評斷的證據，以及如何將CMT的臨床執業指引付諸實踐的專家建議。

結果/結論：

此臨床執業指引陳述了以下的內容，包括預防教育、轉介、篩檢、檢查與評量、預後、首選與支持性之介入、諮詢、直接介入之中止、再評估與結束介入、施行與遵循審計（compliance audits）、以及研究建議。已更新轉介管道的流程與CMT嚴重程度的分類。

Original Abstract

BACKGROUND:

Congenital muscular torticollis (CMT) is a postural deformity evident shortly after birth, typically characterized by lateral flexion/side bending of the head to one side and cervical rotation/head turning to the opposite side due to unilateral shortening of the sternocleidomastoid muscle; it may be accompanied by other neurological or musculoskeletal conditions. Infants with CMT should be referred to physical therapists to treat these postural asymmetries as soon as they are identified.

PURPOSE:

This update of the 2013 CMT clinical practice guideline (CPG) informs clinicians and families as to whom to monitor, treat, and/or refer and when and what to treat. It links 17 action statements with explicit levels of critically appraised evidence and expert opinion with recommendations on implementation of the CMT CPG into practice.

RESULTS/CONCLUSIONS:

The CPG addresses the following: education for prevention; referral; screening; examination and evaluation; prognosis; first-choice and supplemental interventions; consultation; discontinuation from direct intervention; reassessment and discharge; implementation and compliance audits; and research recommendations. Flow sheets for referral paths and classification of CMT severity have been updated.

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