

## Children's Therapy Services

# Obstetric Brachial Plexus Palsy (OBPP) Early Information and Advice A Guide for Parents



## Early information and advice

### What is OBPP

Obstetric Brachial Plexus Palsy (OBPP) or Erb's Palsy is an injury caused by stretching of the network or nerves that run between the baby's neck and the shoulder during a delivery with a large baby, breech presentation or a prolonged labour.



The nerves damaged control the muscles in the shoulder, arm and hand and relay sensations (touch, joint position and pressure).

There are 5 different nerves in the plexus (network), the muscles affected depend upon which of these nerves were damaged.

The mildest form of this injury is when the nerves have been stretched only. Tearing of the nerves along their length can occur.

### Symptoms

The symptoms at birth are the same for each type of injury with loss of sensation and an inability to move the arm. The infant may keep their arm down by their side sometimes turned in with a bent wrist and straight fingers. Sometimes the baby has a droopy eyelid on the side of the affected arm.

### Special considerations in the first week of life

The process of healing will begin straight away, you need to protect your baby's neck and shoulder and handle with great care. The Association of Paediatric Chartered Physiotherapists (APCP) recommend you do not move your baby's arm away from their side for at least 48 hours with a preference of not before 5 days. Do not stop your baby or worry if the baby moves their arm by themselves.

## Lifting and carry your baby

### **Never lift your baby from under their armpit by pulling on their arms.**

Aim to keep the upper arm of the affected side against their chest and their head fully supported and in the middle, i.e. avoid bending or twisting the head away from the affected side.

#### **Method 1**

Approach your baby from their affected side. Slide your arm under their affected shoulder, get down as close as you can bringing your baby in towards your chest, supporting their head with your upper arm; their upper arm tucked in against your body.

Slide your other hand under their bottom and back to take their weight. Keep their affected arm tucked in and head in the middle as you gently lift. Maintain the safe position to carry your baby. Put them down in exactly the same way but in reverse order.

#### **Method 2**

Approach your baby from their unaffected side. Slide your arm under their shoulder, get down as close as you can bringing your baby in towards your chest. Support their head in the crook of your elbow, or with your upper arm; their affected shoulder in the crook of your wrist, and their upper arm in your hand keeping it tucked in to their chest wall. Slide your other hand under their bottom and back to take their weight. Keep their affected arm tucked in and head in the middle as you gently lift.

## Positioning your baby

Position your baby on their back.

For the first five days position your baby's upper arm tucked into their side.

- \* Do not lay them on their sides
- \* Do not lay them on their tummy.
- \* **NB positioning on side lying and on their tummy will later play an important part in promotion your child's development. Your physiotherapist will tell you when to commence these activities.**

## Dressing your baby

- Choose slightly bigger clothes especially vest and coats; choose sleep suites that fasten down the front.
- When dressing always put your baby's affected arm into the sleeve first keeping their arm as close to their side as you can and supported with your free hand. A bigger vest will allow you to place it over your baby's head without having to twist and turn. Finally feed their unaffected arm through the corresponding sleeve and fasten.

## Bathing your baby

### Using Method 1

The aim again is to keep the upper arm to the affected side against their chest and their head fully supported and in the middle, i.e. avoid bending the head away from the affected side. Gently wash and carefully dry their affected armpit keeping the movement away from their chest wall to a minimum.

### Changing time

Remember when you are cleaning and changing their nappy, lifting their body high off the bed leaving the affected arm down is the same as passively moving their arm. So try to keep their bottom low for the first week

(APCP Obstetric Brachial Plexus Palsy: A Guide to Management, 2012).

Useful web side [www.erbspalsygroup.co.uk](http://www.erbspalsygroup.co.uk)

## This is only for children resident in Calderdale or Huddersfield.

If you have any comments about this leaflet or the service you have received you can contact :

NHS at Broad Street Plaza  
Northgate  
Halifax HX1 1UB  
Telephone No: 01422 261340

Children's Therapy Services  
Princess Royal Health Centre  
Greenhead Road  
Huddersfield HD1 4EW  
Telephone No: 01484 344299

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو  
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

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