

# UNDERSTANDING OF KLIPPEL FEIL SYNDROME: A CASE REPORT

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**Background:** Klippel Feil syndrome was first described by Maurice Klippel and Andre Feil in 1912 in patient with congenital fusion of cervical vertebrae. Classical clinical triad of Klippel- Feil syndrome is lower posterior hair line, short neck and restriction of head and neck movements.

**Case report:** A 35 year old young female directly presented to outpatient department of physiotherapy with complain of pain in neck and morning stiffness. While examined there was clinical triad i.e. lower posterior hair line, short neck and biomechanical alteration in cervical spine range of motion were noted. Still she did not have any neurological complaints. Single level cervical fusion was reported on radiological investigations.

**Conclusion:** Axial symptoms neck pain, neck stiffness and neck range of motion restriction are the predominant symptoms in symptomatic KFS patient. The present case fitted in KFS Type II patients who present with a single fused cervical segment.

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