

Cleft Lip and Cleft Palate

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What is cleft lip and cleft palate?

Cleft lip and cleft palate occurs when the lip and/or palate of a baby do not “fuse” or grow together, leaving a hole in the roof of the mouth (cleft palate) and/or a split in the upper lip (cleft lip). This condition occurs early in pregnancy during the first trimester and can occur on one side only (unilateral cleft lip/palate) or on both sides (bilateral cleft lip/palate).

What causes cleft lip and cleft palate?

Cleft lip and cleft palate is the fourth most common birth defect in the United States. Over 5,000 babies are born each year with cleft lip and/or cleft palate. Research indicates that combination of genetic and environmental factors may be the cause of this birth defect. Cleft palate/lip can occur as the result of a syndrome or can occur alone without the presence of any other anomalies. This defect occurs most often among those with Asian ancestry and certain Native American groups. It occurs least among African Americans.

What problems can occur as a result of cleft lip and cleft palate?

Problems associated with cleft lip and/or cleft palate directly relate to the location and severity of the cleft. Usually, the most immediate concern with cleft palate is feeding since the baby is unable to suck. As the baby grows and develops, other issues may arise such as ear infections, delayed speech development, and dental/orthodontic problems.

What is the treatment for cleft lip and palate?

Treatment for cleft lip and palate usually begins at a very young age and continues throughout the child’s development. Ideally, an interdisciplinary team consisting of a plastic surgeon, dentist/orthodontist, and speech pathologist will work together to determine the best course of treatment and carefully monitor the child’s progress over time. Surgeons can repair the cleft lip from the first few days of life to several months of age. Repair of the palate must come later, from several months of age to several years old. Often, the child with a cleft palate will require careful monitoring by a dentist/orthodontist to assess and evaluate dental, facial, and jaw growth and development. As the child develops, speech therapy services may be necessary to help the child with producing speech sounds correctly.

What is the long-term prognosis?

Understandably, the parents of a child with cleft lip/palate usually have many concerns about their child’s physical appearance, as well as social, emotional, academic, and speech development. The good news is that most surgical repairs of the palate and lip are virtually undetectable. Also, with proper intervention and care, a child with cleft lip and/or palate can develop normally in every aspect of his/her life.

Where can I find more information?

Here is a list of helpful web sites for more information to help parents seek the best care for their child:

Cleft Palate Foundation

<http://www.cleftline.org/>

Wide Smiles: Cleft Lip and Palate Resource

<http://www.widesmiles.org/>

Smiles

<http://www.cleft.org/>

American Society of Plastic Surgeons

http://www.plasticsurgery.org/public_education/procedures/CleftLipPalate.cfm

Kids Health for Parents

http://kidshealth.org/parent/system/surgical/cleft_lip_palate.html

