

Frequently Asked Questions Cleft Lip and Cleft Palate

What is a cleft lip and cleft palate?



Bilateral cleft lip



Unilateral cleft lip

A cleft is an opening in the lip, the roof of the mouth or the soft tissue in the back of the mouth. A cleft lip may be accompanied by an opening in the bones of the upper jaw and/or the upper gum. A cleft palate occurs when the two sides of a palate do not join together, resulting in an opening in the roof of the mouth. A cleft lip and palate can occur on one side or both sides. A child can suffer from a cleft lip, a cleft palate or both.

What causes clefting?

The exact cause is unknown. Cleft lips and cleft palates are congenital defects that occur early in embryonic development. Scientists believe a combination of genetic and environmental factors, such as maternal illness, drugs or malnutrition, may lead to a cleft lip or cleft palate. If one child in a family is born with a cleft, the risk increases by 2 to 4 percent that future children in the family will suffer from the same defect.

How frequently do cleft lips and cleft palates occur?

One out of 800 babies in the United States is born with a cleft lip or cleft palate – the fourth-most common birth defect in the United States. It is estimated that in the developing world, the number of babies born with this deformity is one in 500-600.

Does a cleft lip or cleft palate cause problems for a child?

Ear disease and dental problems occur frequently, as do problems with proper speech development. Children who suffer from a cleft lip and/or cleft palate may have difficulty eating. To address these issues, a child and family may work with a team of specialists – a pediatrician, a plastic surgeon, dental specialists, an otolaryngologist (ear, nose and throat specialist), a speech-language pathologist and audiologist, a geneticist and a psychologist/social worker.

Can clefting be prevented?

Scientists are researching methods to prevent cleft lips and cleft palates, but little is known to date. According to a recent study, mothers who take multivitamins containing folic acid before conception and during the first two months of pregnancy may reduce their risk of giving birth to a baby with a cleft. Other studies suggest that high doses of vitamin A may play a role in some birth defects, including cleft lips and cleft palates; women should not take more than the U.S. Recommended Dietary Allowance of 5,000 international units of vitamin A.

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Can cleft lips and cleft palates be repaired?



Yes. Surgery provides excellent results. A pediatrician and a plastic surgeon work with a child's parents to choose the best timing for surgery. Most surgeons agree that a cleft lip should be repaired by the time a baby is 3 months old. To repair the partition of mouth and nose as early as possible, a cleft palate generally is repaired between the ages of 12 and 18 months. Any surgical procedure is dependent upon a child's general health and the nature of the cleft lip or cleft palate.

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