Dental Care for Children with Cleft Lip and Palate

When should my child see the dentist?
According the AAPD, your child should be followed by a pediatric dentist within 6 months of the eruption of the first tooth, but no later than **12 months of age**. If your child has not been seen for nasoalveolar molding, the dentists on the craniofacial team will perform a preliminary evaluation on your child at around 1 year of age. Your child should be seen by the dentist every 6 months thereafter.

Will my child’s teeth be affected by cleft lip/palate?
Clefts of the lip and/or palate can cause a number of dental problems. The teeth most commonly affected are those in the area of the cleft, usually the lateral incisors (“side front teeth”) or canines (“eye teeth”). The cleft can affect both the baby and permanent teeth. The affected teeth are often missing. If a permanent tooth is missing, it can either be replaced by a prosthetic tooth (bridge), a dental implant and crown, or by moving a natural tooth into position with orthodontics (braces). There can also be extra teeth in the area of the cleft. Additionally, the teeth may be present, but poorly formed with an abnormally shaped crown or root. Lastly, the teeth can be present, but displaced and only partially erupted. The dental team will evaluate each case individually and discuss all treatment options available.

How should I care for my child’s teeth?
Children with cleft lip/palate require the same regular preventive and restorative care as children without clefts. However, since these children may have special issues relating to missing, malformed and malpositioned teeth, excellent oral hygiene is of the utmost importance.

Brushing
You should begin brushing your child’s teeth **two times per day** (morning and night) for 2 minutes as soon as their teeth erupt with a soft toothbrush. The AAPD recommends using a “rice-sized” amount of fluoridated toothpaste for children under 3 years old, and a “pea-sized” amount for children older than 3. You should also floss the child’s teeth before brushing and rinse with a fluoride mouthwash twice daily. Your dentist will assess
the child’s fluoride intake through water and may recommend a fluoride supplement if necessary.

You will likely need to supervise your child to make sure they are taking good care of their teeth and keeping them clean. Children with cleft lip/palate often have poorer self-esteem and tend to brush less. They need your help to ensure they are keeping their mouths healthy!

Diet
Nutrition also plays an important role in oral hygiene. Do not let your child take a bottle to bed with milk or juice, and keep sugary, sticky snacks to a minimum. The AAPD recommends no fruit juice before 1 year old, and children should only have at most 4 ounces of juice per day from ages 1-3, through a regular cup at meal time only. Toddlers should not be given juice from bottles or easily transportable “sippy cups” that allow them to consume juice easily throughout the day. The excessive exposure of the teeth to carbohydrates can lead to tooth decay.

Resources:
http://www.aapd.org/media/policies_guidelines/e_cleftlip.pdf