

## **THE NATURE OF FEEDING IN INFANTS WITH UNREPAIRED CLEFT LIP AND/OR PALATE COMPARED WITH HEALTHY NONCLEFT INFANTS**

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**Objective:** Feeding difficulties are reported widely in infants with cleft lip and/ or palate. There is, however, a paucity of objective information about the feeding patterns of these infants. This study compared patterns of feeding in infants with unrepaired cleft lip and palate with healthy noncleft infants of a similar age.

**Setting:** North Thames Regional Cleft Centre. The noncleft cohort was recruited from West Middlesex University Hospital, a general hospital with similar demographics.

**Participants:** Fifty newborn infants with nonsyndromic complete unilateral cleft lip and palate or a cleft of the soft and at least two thirds of the hard palate who were referred to the North Thames Regional Cleft Centre participated. Parents of 20 randomly selected, noncleft infants agreed to participate.

**Main Outcome Measures:** Feeding patterns were rated using the Neonatal Oral Motor Assessment Scale. Additional objective information was collected using the Great Ormond Street Measurement of Infant Feeding (Masarei et al., 2001; Masarei, 2003).

**Results:** Infants with nonsyndromic complete unilateral cleft lip and palate or a cleft of the soft and at least two thirds of the hard palate had less efficient sucking patterns than their noncleft peers had. They used shorter sucks (mean difference, 0.30 second;  $p < .0005$ ), a faster rate of sucking (mean difference, 34.20 sucks/second;  $p < .0005$ ), higher suck-swallow ratios (mean difference, 1.87 sucks/swallow;  $p < .0005$ ), and a greater proportion of intraoral positive pressure generation (mean difference, 45.97% positive pressure;  $p < .0005$ ).

**Conclusions:** This study demonstrated that the sucking patterns of infants with nonsyndromic complete unilateral cleft lip and palate or a cleft of the soft and at least two thirds of the hard palate differ from those of their noncleft peers.