Cleft lip and cleft palate-Birth Abnormalities

Introduction

Openings or cracks in the upper lip, the palate, or both are known as cleft lip and cleft palate, respectively. When a developing baby's facial tissues don't fully seal, it can lead to cleft lip and cleft palate.

The most prevalent birth malformations are cleft lip and cleft palate. Although they most frequently manifest as solitary birth abnormalities, they are also linked to a variety of inherited genetic diseases or syndromes.

Although having a child with a cleft can be upsetting, cleft lip and palate can be fixed. In the majority of infants, a series of operations can achieve a more normal appearance and restore normal function with little scarring.

Symptoms

A split (cleft) in the lip or palate is typically obvious from birth. The symptoms of cleft lip and palate include:

- One or both sides of the face may be affected by a split in the lip and palate (roof of the mouth).
- A lip split that only looks like a tiny notch in the lip or that extends through the upper gum and palate and into the base of the nose
- A gap in the roof of the mouth that has no impact on facial appearance

Less frequently, a cleft only affects the soft palate muscles (submucous cleft palate), which are in the back of the mouth and protected by the lining of the mouth. This kind of cleft is frequently undetected at birth and may not be identified until later when symptoms manifest. Submucous cleft palate symptoms and signs can include:

- Having trouble eating
- swallowing issues that could cause food or fluids to leak out of the nose
- speaking with a nasal tone
- persistent ear infections

When to see a doctor

Your doctor may begin coordinating care when they discover that your child has a cleft lip and palate, which is typically discovered at birth. Make an appointment with your baby's doctor if they notice any of the signs and symptoms of a submucous cleft palate.