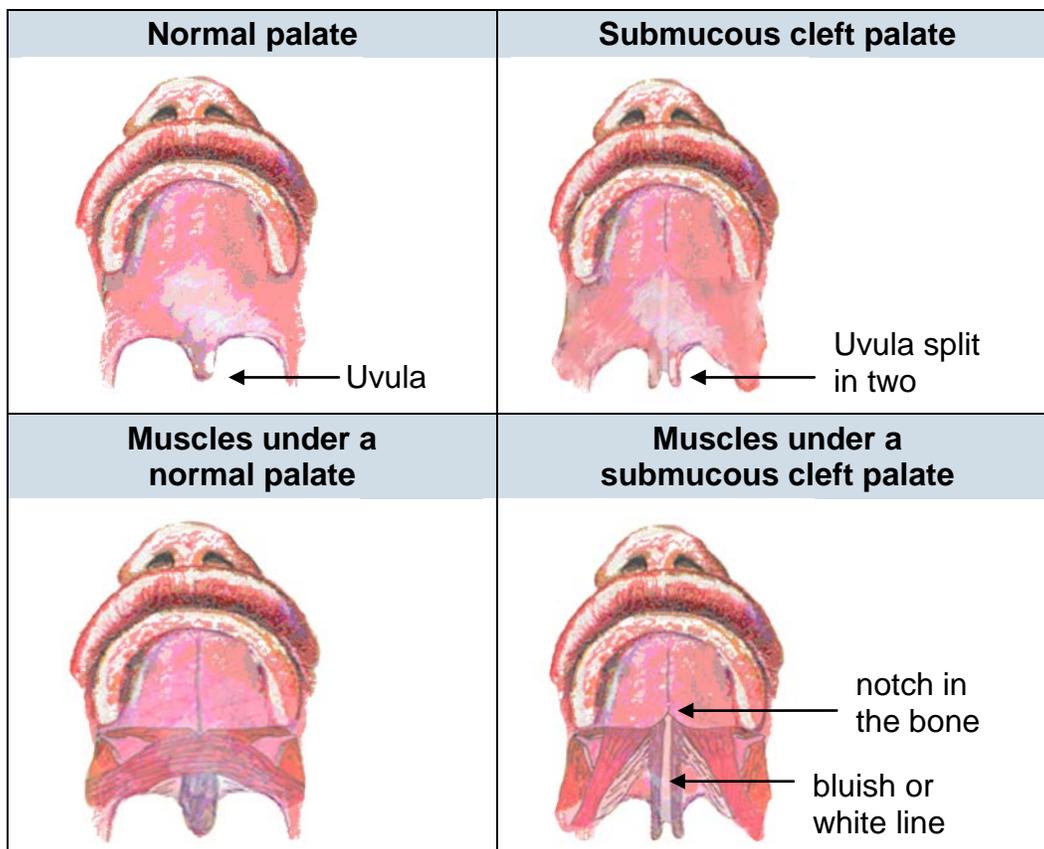


# Submucous cleft palate

## What is a submucous cleft palate?

A submucous cleft palate means there is a split or separation in the roof of the mouth, under the surface of the skin. This can be hard to see. Although the palate looks normal, there are changes in the muscles and/or bones under the skin.



## How do you know my child has a submucous cleft palate?

It can be very difficult even for skilled clinicians to detect some submucous clefts. The diagnosis is sometimes made when the clinician examining your child's mouth can see or feel these signs:

- The uvula (the part that hangs down at the back) is split in two.
- There is a notch in the bone of the hard palate.
- There is a bluish or white line in the middle of the soft palate.

## How often does this happen?

We do not know for sure. As many as 9 out of 10 children with submucous cleft lip do not have any problems, so the condition is not diagnosed.

## What problems can it cause?

Submucous cleft palate does not usually cause any difficulty at all. However, some problems are possible.

- **Feeding:** Some babies have difficulty getting good suction while feeding. They may take a long time to feed and may gain weight slowly.
- **Speech:** Some children have difficulty moving air through their nose or mouth. This affects how they make sounds and speak. They may have trouble with certain speech sounds or have a nasal sounding voice.
- **Ear problems:** Some children develop more ear infections and have hearing loss at times. This happens because the muscles of the palate control the opening and closing of the eustachian tube, which keeps air in the middle ear.

## What can be done?

- Babies do not usually need any treatment for submucous cleft palate. If your baby is not gaining weight well, a special bottle can make feeding easier.
- A speech and language pathologist will assess your child as he or she learns to talk. Speech and language therapy may help if your child has difficulty with speech sounds or a nasal voice.
- In addition to therapy, some children benefit from surgery to reposition the muscles of the palate. If your speech-language pathologist feels your child would benefit from surgery, he or she will discuss this with you.