BREASTFEEDING YOUR BABY WITH A CLEFT LIP/PALATE

When a baby with a cleft lip/palate is born the feelings of disappointment are greatly heightened for many mothers when they are told breastfeeding may not be possible. Many mothers take for granted the ability to breastfeed their child and find it very distressing to realise it may not be possible for them.

BASIC MECHANICS OF BREASTFEEDING

The baby should have opened his mouth widely enough, and be positioned close enough to the breast to take a large mouthful of it. He should have taken the nipple and part of the areola into his mouth. The top lip should be pressed to the breast, not pinching in at the base of the nipple. The baby then draws the nipple to the back of his palate using suction. By compressing the milk ducts (under the areola with his gums) he moves the milk along the ducts and then milks the breast with his tongue.

FEEDING

How a baby feeds has a lot to do with looking after children with clefts. The cleft is something, which interferes with the normal process of getting the milk from the breast. Breastfeeding or using your breastmilk for a cleft/lip palate baby may be possible if you have:

- Time
- Support
- Resources
- Practical help from family and friends

The type and severity of the cleft will largely dictate how successfully you can breastfeed your baby.
Incomplete cleft lip alone – normal breastfeeding can occur if a lip seal can be achieved.

Small soft palate cleft – sometimes the baby can achieve some suction or milk the breast using his gums and tongue with the mother helping the milk let down by expressing before feeding and holding the nipple in place.

Larger soft palate cleft, unilateral or bilateral cleft – in this case it is usually necessary to express milk and feed the baby using a supply line, periodontal syringe or squeeze bottle as the baby cannot form enough suction to enable him to milk the breast effectively himself.

If you wish to breastfeed once your baby has had his palate repair you must continue to express to maintain your milk supply. This practice is very time consuming and requires a large amount of dedication and support if it is to succeed.

Some babies benefit from using a specially designed orthodontic plate that fits into the mouth over the cleft. This allows the child to achieve better suction. The appropriateness and possibility of having your baby fitted with one of these could be discussed with your surgeon. Make sure you discuss this with your surgeon or orthodontist before you leave hospital.

Other things which may help when breastfeeding include:-

- Feeding your baby frequently (every 2-3 hours during the day and at least once at night). The baby will tire easily and may not get enough milk to last 4-5 hours. This will also stimulate your supply.
- A well-supported upright position will assist your baby to feed.
- Use a warm washcloth on your breasts just before you feed to stimulate milk flow or express some milk first using a pump to enlarge your nipples.
- Support your breast with four (4) fingers underneath and your thumb on top and lightly support his chin while feeding.
- Dribble some expressed breast milk down your breast using a syringe or supply line to encourage suckling.
- Experiment with different feeding positions to find one, which suits you and your baby.

Problems which may occur:-

- Poor grasping and suckling by the baby – experiment with positions.
- Engorgement and/or inadequate milk supply – feed more frequently and/or express at the end of each feed.
- Slow weight gain or weight loss – feed more frequently and express at the end of each feed and feed this milk to your baby.

Finally

Babies (without clefts) born early often have immature sucking, at about term the suck becomes mature and the baby suddenly easily latches to the breast.

Cleft babies similarly may have an immature suck if born early. In this case the lack of attachment is unrelated to the cleft.
You will experience many highs and lows and find you and your baby will be constantly adjusting to changes. Breastfeeding your baby is a wonderful commitment and you will need to seek advice and support from family, friends and knowledgeable people who can help you. However, breastfeeding is not always possible and it is always best to remain open minded when listening to advice from specialists.

If you decide that the above methods do not suit you, the QLD Squeeze Bottle & Chu Chu Teat combined with today’s formulas are a great alternative.

The QLD Squeeze Bottle & Chu Chu Teat are available from Cleftpals.