

Planning for What to Expect After Your Child's Cleft Palate Repair/Revision

We do cleft palate repair between the ages of nine and 18 months in order to allow time for your child's facial structures to grow. Waiting leads to a better overall repair of the bones and muscles that help your child speak.

The information in this handout will help you plan for what to expect as your child recovers from surgery.

Your surgeon's repair of your child's palate involves the floor of the nasal passage, the reconnection, and repair of the muscle on the top of the mouth (velopharyngeal muscle) and the roof of the mouth. This will close the cleft, allowing the development of speech and improving feeding abilities.

Appearance

All the parts necessary to repair the palate are present in your child. The tissue on either side of the cleft on the roof of the mouth is divided and moved to the center.

Because a layer of tissue has been moved, it might look like the defects have moved to the side of the cleft. These will look like grooves on either side of the palate. But since these defects don't go through all the layers of the palate as they did before, this will fill in as the palate heals.

The area around the incision (the cut your surgeon makes) will swell as it heals. The swelling will be the worst the day after surgery and then will gradually go away. You'll be able to see the sutures (stitches used to close up the site where surgery was done) in your child's mouth. These will dissolve on their own and do NOT need to be removed.

Nutrition

You might need to use new feeding equipment or start a new diet after your child's surgery. After the palate repair or revision, your child can start eating as soon as he or she is comfortable. But because the incision is still delicate, it is best to keep nipples, pacifiers and other objects out of your child's mouth as much as possible. For infants, this means using an open cup, or a sippy cup with a soft, flexible spout. We also can give you a squeeze bottle with a straw. (The bottle gets milk into a baby's mouth without them having to suck.)

Older infants or children who are normally on a diet that includes solid foods should be put on a full liquid diet for 10 to 14 days. This means your child should be fed only pureed solid foods so small bits of food don't damage the incision. You'll receive more information about this diet when you leave the hospital. After two weeks, you should be able to feed your child soft foods, such as pastas and cooked vegetables and fruits, as appropriate. After two weeks of solid foods, your child's normal diet may be resumed. Your surgeon will discuss this with you at your follow-up appointment.

Wound Care

There is no special rinsing or incision care required for a cleft palate repair.

Activity

You need to prevent your child from rubbing or scratching the incision. We'll provide you with no-no sleeves for you to use when you aren't able to watch your child. The sleeves keep children's hands away from their mouths. If your child is still able to scratch at the incision, you might have to stop using the sleeves and watch your child closely. You'll likely be able to stop using the no-no sleeves after a week.

Child Care

Use your best judgment to decide when your child should return to child care. Infants can usually return once they are back on a regular feeding schedule and are comfortable. Your child needs to be in an especially safe and clean environment while his or her incision is healing.

Your nurse or doctor will give you more instructions when you leave the hospital.

Make An Appointment

[651-290-8707](tel:651-290-8707)

Refer a Patient

[651-325-2200](tel:651-325-2200)

This information is for educational purposes only. It is not intended to replace the advice of your health care providers. If you have any questions, talk with your doctor or others on your health care team.

If you are a Gillette patient with urgent questions or concerns, please contact Telehealth Nursing at [651-229-3890](tel:651-229-3890).