Cleft Lip and Palate

Some children are born with cleft lip, cleft palate or both. This may affect feeding and the development of speech and language. Surgery may be needed, as recommended by your doctor, to repair the cleft. Speech therapy may be needed to improve the child’s ability to feed and develop speech and language.

What Is Done During Treatment?

Treatment is recommended based on the nature of the speech or language problem. The type of treatment will also be determined by this. Our Speech Therapist may recommend treatment aiming to improve the strength of the mouth muscles, teach your child how to produce different sounds correctly, play games to facilitate language development or advise on safe or more effective ways to feed your child.

For enquiries and appointments, please contact us at:

Department of Physical Medicine and Rehabilitation
Speech Therapy Service

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Saturday: 9:00 am - 1:00 pm
Closed on Sundays and Public Holidays

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Speech therapists can assess and provide therapy to help children with speech and language problems. Appropriate assessments can determine whether your child's speech and language abilities are developing normally for his or her age, and ascertain his or her strengths and weaknesses. Tailor-made therapy can then be planned with the aim of maximising your child's communication.

**Common Childhood Speech and Language Problems: When to See a Speech Therapist?**

**Articulation (Phonological) Disorders**

Children master speech sounds in stages, from simple to complex. When a child cannot produce particular sounds or groups of sounds by a certain age, he or she may have an articulation (phonological) disorder. A child with an articulation (phonological) disorder may:

- have difficulty pronouncing certain sounds
- substitute one speech sound for another e.g. may say “dope” for “soap”
- delete speech sounds from words e.g. may say “arm” for “farm”, or “hay” for “hate”
- people, other than those familiar with your child, may have difficulty understanding your child’s speech

**Developmental Language Delay or Disorder**

Some children have problems understanding or talking, and may appear to lag behind peers of the same age. Developmental language problems may have no apparent cause or may be due to reasons such as a lack of a facilitative language environment, a global developmental delay, autistic spectrum disorders, hearing impairment, or damage to the brain. Children who exhibit the following signs and symptoms may have a language delay or disorder:

- have difficulty following directions
- unable to name common objects and pictures
- do not take turns while talking
- unable to put words together into sentences
- have difficulties starting a conversation or keeping a conversation going

**Stuttering**

Stuttering, or dysfluent speech, usually begins during childhood and may last throughout life. Stuttering may affect a child’s self-esteem, educational, or social participation. A child who stutters may speak with:

- part or whole word repetition e.g. “h-h-hi there”
- sound prolongation e.g. “sss...see that?”
- interjections (empty fillers) e.g. “I can...um...um...you know...meet you”
- facial grimaces/tension in body when speaking

**Dyslexia**

Some children may have difficulty reading and writing. They may have problems relating shapes and sounds to the meaning of the word. They may also frequently make mistakes when writing letters of the alphabet (e.g. may write “d” as “b”).

**Other Problems Children May Have: Can Speech Therapy Help?**

Apart from common developmental speech and language problems, children may also have problems with their feeding and swallowing problems, voice, or a combination of many of these problems.

**Feeding and Swallowing Difficulties**

Feeding and swallowing problems may occur in infants and young children for various reasons. These may be due to medical problems present at birth (e.g. malformations present at birth such as cleft lips and palate), or may be due to prematurity or damage to the brain. Children with swallowing problems are at risk of poor nutrition, dehydration and aspiration (food or liquid entering the airway). Children with a feeding or swallowing disorder may:

- have difficulties sucking
- refuse to be fed
- have difficulties chewing
- drool excessively
- cough or choke during meals

**Voice Problems**

Like adults, children may have problems with their voice. Children with voice problems may:

- persistently speak with a hoarse voice
- lose their voice on a regular basis
- not speak with a voice which sounds normal for their age and sex