

The Pesky Pacifier

It's vital to pull the plug sooner rather than later

By Dianne Lazer, MA, CCC-SLP/COM®

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Pacifiers satisfy a baby's natural sucking desires and help calm and regulate their emotions. Parents love the "quieting effect" that helps them bond and share

loving moments with their newborn baby.

However, prolonged use of the pacifier often cause significant harm after six to 12 months of age.

Babies develop their oral muscle skills rapidly during their first four to six months of age. During this period, they start to integrate the suckling-to-sucking reflex they are born with and learn to gain more voluntary control over the muscles of their mouth. When babies learn to move their tongue and lips more productively, this helps them transition from swallowing only liquids (nursing and/or bottle feeding) to eating table foods. To increase its ability to deal with solid foods, the child must learn to move its tongue effectively in important ways, such as:

- Retracting the tongue in the mouth
- Lateralizing the tongue side-to-side to the back molar region
- Elevating the tongue tip to the roof of the mouth
- Elevating the middle section of the blade of the tongue to the hard palate

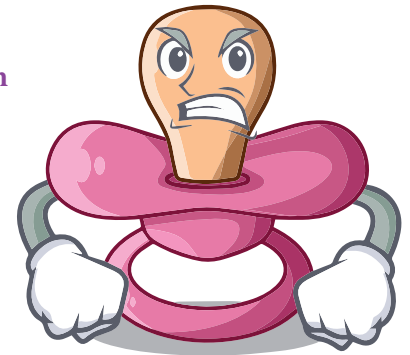
Learning these movements takes time, requiring step-by-step practice throughout the day starting at about four months of age. ***Prolonged pacifier use interferes with the practice of these muscle movements, which can retard the infant's oral motor skill development and interfere with the ability to eat age-appropriate foods, and develop age-appropriate speech and language skills.***

Over-use of pacifiers is likely to cause a host of issues that many parents may not be aware of. For example:

1 It adversely affects infant dentition and respiration, causing open bites and high, narrow

palates. This results in difficulty biting and chewing textured foods and/or breathing through the nose easily. When the palate is high and vaulted, the child begins to open the lips at rest to breathe. This is called an open-mouth rest posture. When the mouth rests open, the child may experience structural issues with the bones in the face, causing expensive future orthodontic work that can be avoided if the pacifier use is not unduly prolonged. In addition, this type of breathing is not healthy, since the nose helps clean the air we breathe and regulates the amount of air we use (breathing too much air causes its own harm).

2 It is associated with an increase in ear infections. Ear infections (or fluid in the middle ear) can interfere with hearing acuity and lead to attention and possible central auditory



processing disorders when the child enters school, such as attention difficulties that interfere with the child's ability to hear sounds in words. This affects articulation and language skills in the classroom.

3 It can cause physiological changes. Pacifier use triggers a calming chemical called beta endorphin that attaches to the opiate receptors in a child's brain. The pleasurable feeling creates an addictive-like experience that makes it difficult for children to stop. The sooner the parent resolves the pacifier overuse issue, the easier it is to relieve the habit and circumvent the addictive and psychological behaviors that come with it in later years.

Bottom line, children should be weaned from pacifiers at four to six months. This is when mouthing, chewing and spoon feeding begin. Soon thereafter, cup/straw drinking and chewing should be introduced.

The Pesky Pacifier (continued)

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By six months, babies do not need non-nutritive sucking to soothe. Instead, there are many other sensory experiences that should be used to soothe infants at this age, such as sound and touch. If pacifier use is prolonged, babies start to depend on it. When a physiological and psychological attachment occurs, the habit is harder to break.

Specialists in infant mouth development like to see 4-13 month-old babies exploring teething toys and practicing other motor skills with the mouth, such as retracting the tongue, moving the tongue side to side, chewing and puckering and retracting the lips to name a few as parents wean the child off the pacifier during this time.

Sticking a pacifier into a baby's mouth for too long may be convenient for a parent in the short run, but there is often a steep a price to pay for both the parent and the child down the road.

Dianne Lazer, MA, CCC-SLP/COM® is a speech-language pathologist certified by the American Speech-Language-Hearing Association (ASHA), and the International Association of Orofacial Myology (IAOM) and is a Buteyko Phase II educator.

You can read more about her educational and clinical background and the services she provides on her website:
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T'zuna Bria Publishing Company, LLC & Speech and Feeding Services publishes a series of children's books that addresses healthy eating habits in a fun and meaningful way. They are an excellent teaching tool that help parents and professionals facilitate the treatment of numerous GI and "picky eating" issues.

Designed for the four- to eight-year old age group who desperately need to change their eating patterns, the books are colorful, child-friendly and informative.

Many GI problems can be easily resolved once children and parents are given a better understanding of how the foods they eat can contribute to their poor growth and development and might also be the cause of a host of disorders including: reflux, chronic congestion, constipation, and learning disorders, to name a few.

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This informative series of books can be ordered from our office (20% discount when you mention this article) or diannelazer.com.

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