

University of British Columbia

CAREGIVER BURDEN AND COPING STRATEGIES IN PRE-SURGICAL INFANT TREATMENT FOR CLEFT LIP AND PALATE

Travis Gibson*, Jolanta Aleksejuniene

Introduction: Pre-surgical infant orthopedics (PSIO) in cleft lip with or without cleft palate (CL/P) refers to treatment provided prior to lip closure surgery at 3-6 months of age. Goals of PSIO include improving nasal morphology and decreasing cleft size prior to surgery. Recent systematic reviews have noted a potential positive effect on nasal symmetry, but failed to detect significant benefits in motherhood satisfaction, feeding, speech, facial growth, maxillary arch dimensions, occlusion, or nasolabial appearance from PSIO as compared to no treatment. It has been suggested that the limited benefits provided by PSIO may not justify the increased burden. However, proponents suggest that objective measures of burden are not appropriate as PSIO may relieve caregiver anxiety and promote positive coping. This study aims to assess burden of care and coping strategies in parents and caregivers of children with CL/P prior to lip surgery.

Methods: Prospective inclusion of all consenting primary caregivers of infants with CL/P being treated at BC Children's Hospital. Caregiver burden and coping strategies will be assessed subjectively using a questionnaire constructed from the following validated metrics: Maternal Confidence Questionnaire, Stress Scale for Parents with CL/P, Coping Response Inventory, and Parenting Stress Index 4th Ed. Questionnaires will be administered after completion of any PSIO treatment, and before lip closure surgery. Objective measures of burden, including number of PSIO appointments and length of PSIO treatment, will be provided by the treating orthodontist.