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DO WE HARM CHILD'S DEVELOPMENT WITH THE USE OF A PACIFIER?

When a baby cries, it is often easier to quiet the baby by giving a pacifier and solving our immediate need for quiet and the child's need for comfort, but are we harming our child's development in the long run?

At birth, survival depends on the stimulation of the lips and tongue, allowing instinctive sucking. Sucking provides nourishment and soothes the infant, providing physical and psychological comfort. This sucking reflex continues to about age of 3 to 3 1/2. By the age of 6 to 7 months, a child learns to get nutrients through food and the need for sucking is greatly reduced. If a young child is seeking calories and is instead provided with a pacifier, a pacifier is a nonnutritive device. Pacifier use should be greatly decreased after 6-7 months age. The ideal time to stop this nonnutritive sucking is during the second to third year of life to prevent its harmful effects on an infant's growth.

Studies show that pacifier use beyond 36 months led to an open bite with the front teeth, constricted growth of upper arch and expanded lower arch, developing tongue thrust (habitual protruded tongue position) and malocclusion (upper and lower teeth do not occlude properly). It has also been speculated that bottle fed babies are more prone to stimulus of pacifiers compared with the breast fed babies. Multiple studies have shown detrimental effects of pacifier use during the first week of life, reducing exclusive and overall time spent breastfeeding by a significant amount. Studies have also shown pacifier use from birth to 12 months as a risk factor associated with middle ear infection. Pacifiers have been implicated in death from asphyxia, due to its lodgment in the pharynx. Cords attached to pacifiers may cause strangulation. A symmetrical nipple with large shield with ventilation holes and minimum dimension of 43 mm pacifier should be selected for use to prevent rash and lodging in the pharynx. Babies who sleep in their parents' bedroom and are offered pacifiers do not sleep as deeply as those sleep in a separate bedroom without a pacifier.

Pacifier use may be protective against SIDS (sudden infant death syndrome). Pacifiers should be offered for nap or nighttime sleep for all children up to one year of age to include the peak ages of SIDS when an infant's need for sucking is highest. Finger or thumb sucking habits usually last longer than pacifier sucking and it is more difficult to correct the detrimental effect of finger sucking.

Pacifier use should be delayed until infant is at least one month old. Duration of pacifier use should be controlled. For babies who suffer from middle ear infection, pacifier use should be restricted. Pacifier use should be reduced after 6-7 months age and should be ceased by 24-36 months to avoid harmful effects to oral and facial growth. Cessation of the habit is usually more of a challenge for parents than for the infant. Parent perception that the child requires the pacifier is the final issue that must be overcome. Abrupt permanent removal by parent is the most effective method for eliminating the habit. Sometimes, cutting the nipple shorter or piercing it with an ice pick to reduce sucking satisfaction may work to break the habit.

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