



## Pacifiers: In or Out? And What about those Bottles?

Babies have an intense need to suck, and some have more intense needs than others. Babies even suck their thumbs in the womb. Next to holding and feeding, sucking is the most time-tested comforter.

However, the question asked most frequently by parents, Toddler and Preschool teachers is:

***Does prolonged use of the pacifier or bottle affect speech development?***

From a Speech Pathologist view, here are several interfering factors we have encountered with prolong pacifier or bottle usage:

- 1) Studies have shown that in children less than two years of age, pacifier use increased the average number of annual ear infections from 3.6 to 5.4 episodes. In children between two and three years of age, pacifier use increased the number from 1.9 to 2.7 ear infections per year. In response to ear infections, studies have also indicated that if a child experiences more than 2 ear infections within a year before the age of 2, it can significantly affect adequate speech development and perception of auditory information. Excessive sucking when a child has congestion can force mucus into the Eustachian tube which can result in ear infections.
- 2) Prolonged pacifier use can lead to crooked teeth. The hard palate is still forming along with the teeth alignment. If the pacifier or bottle is resting in the top of the mouth, it can form a high narrow palate rather than one that should be formed by the tongue. The tongue is actually the strongest muscle in the body and helps to form appropriate palatal structure. A narrow palate can often

hinder correct development of swallowing and speech sounds.

- 3) Often the pacifier is used for nurturing. Always relying on an alternative peacemaker lessens the buildup of baby's trust in the parent and denies the parents a chance to develop baby-comforting skills. Pacifiers are meant to satisfy intense sucking needs, not to delay or replace nurturing. A person should always be at the other end of a comforting tool. If you find yourself by reflex, reaching for the pacifier instead of reaching for your baby, pull the plug- and lose it.
- 4) Sippy cups are also contributors to excessive sucking. The child is still sucking and slurping when they ought to be swilling and gulping. The consequence: a lazy tongue that produces sloppy "s" sounds, at least temporarily. Some pediatric dentists say they are beginning to see more cavities among children who use sippy cups as if they were baby bottles – sucking milk, juice and other sugary drinks for hours at time, sometimes even while they sleep.
- 5) Plugging the mouth can often delay appropriate verbalizations and expressive language development. The child can choose to "plug" himself and point to obtain wants and needs, instead of attempting sounds or words.
- 6) There are no studies that show benefits of prolonged use of pacifiers or bottles. A child needs to find comfort from interaction with others and within themselves instead of from extraneous sources. You never hear a person say they had emotional problems from their parents "pulling their plug."

Overall, the swallow begins to mature around 1 year of age in most children. They begin to drink out of a cup and chew food that promotes

movement of the tongue into an appropriate mature swallow rather than one of sucking liquids.

The next big question: *When is the best time to eliminate bottle and/or pacifier use?*

- 1) As previously stated, as soon as the child can hold a cup and is eating solid foods. This usually occurs around 12 to 18 months of age.
- 2) As a child becomes more independent, around 2 years of age, they start to develop habits and exert their own demands. This makes the elimination of dependencies more difficult. The elimination of patterns before they become habits and/or demands will help the child's overall development. They learn internally that it is the parent they can rely on to comfort them and provide them with a secure environment. Remember who is in control and they will appreciate you more for it!

*For suggestions on how to eliminate the pacifier:*

- 1) Avoid putting the child to bed with a bottle or pacifier. Help the child to find other methods to comfort itself. (ie: a blanket, stuffed animal, or a "lovey" of some sort). When a child is lying down, sucking can pull mucus towards the Eustachian tube that can possibly cause ear infections. The sucking also teaches the tongue to rest in a downward position instead of on the palate which can often hinder adequate articulation development. Also if they lose the pacifier or bottle during the night, it can cause them to wake unexpectedly and break good sleep patterns.
- 2) Do not let the child walk around with a bottle or pacifier. Teach them they can use it while sitting down or in stressful situations, like going to the doctor. Most toddlers are going to want to wander around, but if they are taught they must sit with their bottles or pacifiers, they may give them up on their own.

Remember your child will love and respect you more if you provide boundaries for them.

- 3) Replace bottle-feeding with cup feeding. It is best to implement this at a time when you anticipate the least amount of change in your life.
- 4) For older children, you might gather them up and take them to the toy store for the child to trade in for the toy of their choice. For most kids it will be easier to deal with the pacifier issue now rather than waiting until they become more attached and the habit becomes more ingrained.



Many children are "late bloomers" as far as speech goes. Patience and encouragement will usually be rewarded. However, there are certain signs that call for early evaluation:

- No understandable speech by 2 years;
- High-pitched or nasal quality to utterances
- Dull look as the child tries to speak;
- No rhythm of communication, or turn taking;
- Evident inattention when the child is spoken to or looked at;
- Nonstop repetition of adult speech without variations on the child's part.

If you notice any of these problems, talk to your child's doctor about referring them to a specialist.



Judy Davison is a Licensed Speech Pathologist who specializes in Early Intervention. She has offices located at Campbell Rd., Chapelwood School, St. Lukes Methodist, and Big, Little School. She has been servicing children in the Spring Branch and Memorial Area for the past 16 years.