What is an alveolar cleft bone graft?

Some children who are born with both a cleft lip and a cleft palate also have a problem with the alveolar bone. The alveolar bone makes up the gum ridge where teeth are located in the front portion of the mouth. This bone forms around the roots of the upper teeth under the gum tissue.

When there is a cleft in the alveolar bone, it means there is a missing area of bone in this area of the mouth. The cleft in the bone and gums prevents teeth from developing properly. The alveolar bone graft repairs the hole in the gum ridge and stabilizes the bone arch. This provides better support for the base of the nose, and new bone for the roots of the teeth to develop into.
How is an alveolar cleft bone graft done?
The doctor usually takes a piece of bone from the iliac crest (the upper ridge of the hip bone).
To do this, the doctor makes a 1 to 3-inch cut in the skin just over the hip bone to remove the inner portion of the bone.
This part of the bone is soft and pasty and is shaped to form the area that will close the gap in the alveolar bone.

The doctor closes the gum tissue inside the mouth around the bone and places stiches to hold the tissue in place as it heals.

Will my child have pain after surgery?
Your child will likely have pain in their hip and mouth after their procedure. We will prescribe medications to prevent and relieve pain as much as possible.
Your child’s health care provider will order a pain medicine that your child can take by mouth at home. This medicine works best if your child takes it at the
same time each day for the first 1 to 2 days after surgery. This works much better than waiting to see if your child is in pain. The pain will get better in time, usually in 3 to 5 days for most children.

Even after the pain gets better, your child might still have a sore hip when they walk. This may last for a few weeks. When your child's pain gets better, you can stop giving your child the narcotic pain medication that we ordered, and continue giving your child Tylenol and/or Motrin as needed.

Many prescription pain medicines can make it hard for your child to have a bowel movement. This will be less of a problem if you make sure that your child drinks plenty of water and fruit juice. If you give your child fruit juice, it is best if it is 100% fruit juice with no added sugar.

**How do we care for the incisions in my child’s mouth?**

Your child should rinse their mouth gently with water after eating to keep the area clean. We will also order a special mouthwash for your child to use 2 to 3 times a day to help keep things clean. You can also encourage salt water rinses throughout the day. It is important to be gentle while brushing the teeth, so your child should use a toothbrush with soft or extra soft bristles. A parent or caregiver should watch your child or brush their teeth for them for the first few weeks after surgery to help them avoid the incisions and the area around them.

**How do we care for the incision on my child’s hip?**

You can take off the clear bandage before or after the first shower. Your child may shower 1 to 2 days after surgery, but they should not soak in a bathtub for 3 weeks. We also strongly discourage swimming in pools until 4 weeks after surgery and swimming in lakes or rivers until 6 weeks after surgery. Wash the hip area gently with soap and water and pat dry. Most children will have small pieces of tape, called Steri-Strips, glued over the surgical site. It is okay to get
these wet. If the edges curl up, you can trim them with scissors. You can leave the Steri-Strips in place until they fall off.

**What can my child eat after surgery?**
After surgery, your child can begin drinking clear liquids. For the first 4 weeks after surgery, your child must not chew. They must eat pureed or very soft creamy foods such as yogurt, hot cereal, mashed potatoes, soup, milkshakes or smoothies. Anything that can be squished easily between the fingers is okay. Your child should not eat anything hard or crunchy for 6 weeks after surgery. Your child *must not* use a straw to eat until cleared by the doctor.

**What activity can my child participate in after surgery?**
After surgery, it is a good idea for your child to walk a few times every day. Standing up without help may be uncomfortable at first, but will help your child’s hip to heal. Activities to avoid after surgery include:
- Sports, gym class or very active play (for at least 6 weeks after surgery)
- Swimming in pools (for 4 weeks after surgery)
- Swimming in lakes or rivers (for 6 weeks after surgery)
- Sports that may hit them in the mouth (for 6 weeks after surgery)
- Playing instruments (for 6 weeks after surgery)

**When should I call the oral surgeons office?**
It is important to call us if:
- Your child has a temperature higher than 100.8 Fahrenheit
- The surgical site on your child’s hip or in their mouth gets red or more swollen, or starts draining white, yellow or green fluid or foul-smelling drainage from the scar
- Signs of dehydration, including lack of energy, sunken eyes, dry mouth, or not urinating enough
- Your child injures their hip or mouth
- Your child has pain not controlled by the medicine prescribed

**What is the contact information for the clinic?**

- Contact the Pediatric Oral and Maxillofacial Surgery clinic from 8:00am-5:00pm Monday through Friday at (734) 232-6975.
- If you have urgent issues after 5:00pm or on the weekends call the hospital at (734) 936-4000 and ask the operator to page the “On-call pediatric oral surgeon.”