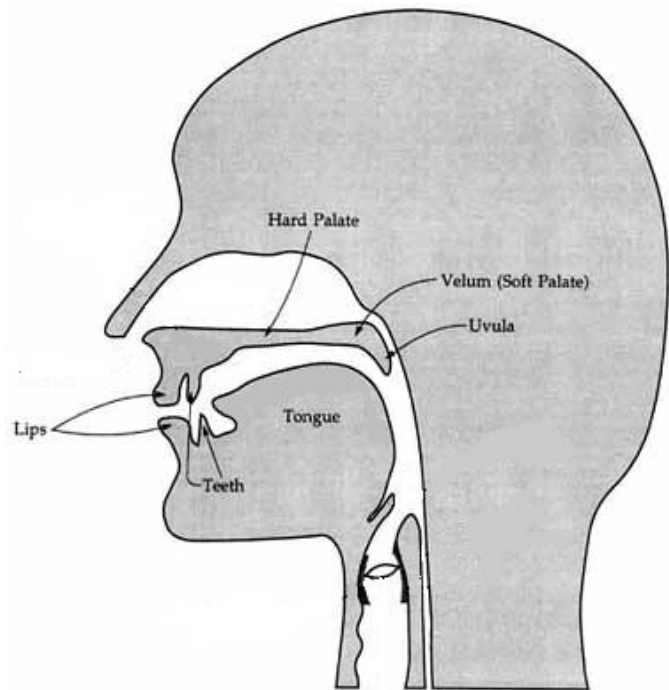


## What is your palate?

The palate forms the roof of your mouth and separates the nose and the mouth. The back of the palate, towards your throat is known as the 'soft palate' and the front, towards your teeth is known as the 'hard palate'.

Palatal movement is important for speech as the muscles help it to lift up to close against the back wall of your throat. This is necessary for sounds that are made in your mouth e.g. 'b' 't' and 'g' so that the air does not escape up into your nose. Air is then directed into your mouth when it travels up from your lungs.



The palate also lifts in this way when you swallow so that food and drink passes down into your food pipe, not up into your nose.

## Nasal Sounds

Sometimes children can mislearn how to say sounds and produce them in their nose instead of their mouth. This is common in children who have had a cleft palate but can occur when there are no structural difficulties present.

The air is directed into the child's nose as the palate does not lift up and close against the back wall of the throat. A 'rustly' sound made in the nose may be heard if a child is not achieving palatal closure. Your speech therapist may refer to this as a 'nasal fricative'. Nasal fricatives are often heard on 'hissy' sounds such as 's' 'f' 'sh' and 'z'.

It is not possible to improve the movement of the palate by doing repetitive exercises. Speech and language therapy may be needed to help your child learn how to say certain sounds they are producing in their nose.

Guidance for use of this leaflet:

This leaflet is designed to be used with parents/carers to help explain palatal function. If the child has active nasal fricatives or phonological errors this leaflet can be provided to parents/carers.

Following assessment, if you think that non cleft velopharyngeal dysfunction is indicated it is important to refer the child to a regional Cleft Team for further assessment. In this case, you can use this leaflet to help explain palatal function to parents and highlight that the Cleft Team will be able to assess how well the palatal muscles are working for speech. You can also explain that the assessment may indicate that the structure is fine but the speech errors you are hearing may be caused by mislearning speech sounds.

It is important to let the parents/carers know that although they are being referred to the 'Cleft Lip and Palate Service' it does not automatically mean that their child has a cleft palate and they should not go away and research this further online! You can assure them that the referral is the appropriate due to the team being specialists in this area of anatomy.