Critical Review:

Effectiveness of oral motor interventions (OMIs) for improving feeding/swallowing outcomes in infants/children with swallowing problems

Kathrine MareA literature search of computerize

Infants and children

with feeding and swallowing problems are at a higher risk of experiencing health-related complications (Arvedson, 2000). In addition, the presentation, etiology, and severity of these swallowing problems vary greatly across this population (Arvedson, 2000), which leaves clinicians with the difficult task of determining the most appropriate approach to intervention when presented with these infants/children.

A large amount of the previous research on swallowing problems has been done in the area of adult dysphagia rather than the area of paediatric feeding and swallowing (ASHA, 2001). Evidence-based research for the treatment of paediatric feeding and swallowing is more difficult to find and evidence-based approaches to intervention from adult studies may not necessarily be directly translatable to the paediatric population (ASHA, 2001). In fact, developmental differences across the lifespan warrant consideration of these relationships in multiple age groups.

Oral motor skills necessary for feeding represent a progression/development of movement patterns, which require a high level of practice. Infants and children with swallowing problems often experience disruptions in the ability to practice oral motor movements. This can result in reduced development of these essential oral motor skills, impa

hand search of references could impact the ability of someone to successfully replicate the search. All of the studies included were appraised for methodological quality using blinding across 2 raters, and adequate

reviewed separately and not grouped together into one population.

Although the use of OMI/OME with infants/children with swallowing problems makes intuitive sense to many clinicians, at this time the evidence is not favourable. Some studies show positive outcomes with this type of treatment, whereas others do not. In addition, there is a lot of variability in many of the treatment approaches, which makes it difficult to determine how to best implement this type of intervention.

Conclusion