



Title **The Scientific Knowledge Base for Treatment of Patients with Cleft Lip, Alveolus and/or Palate**

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Aim

To present the evidence base for the effectiveness of interventions in treatment and follow-up of patients with cleft lip, alveolus, and/or palate.

Except for a meta-analysis of results from one comparison, we prepared a descriptive summary of the data.

Conclusions and results

The evidence base for current practice in treatment and follow-up of children and adults with cleft lip, alveolus, and/or palate is low or very low. This does not mean that current practice is poor. It means that existing research is too uncertain to provide good evidence for conclusions about the relative effectiveness of different interventions, sequencing, and optimal times for cleft lip and palate surgery, of the effectiveness of interventions for maxillary protraction, and of the different follow-up and habilitation interventions.

Recommendations

- Intercenter cooperation to recruit patients to large, multicenter, randomized controlled trials.
- Continuing systematic evaluation of each center's treatment results and comparison with other centers, eg, as done in the Eurocleft project.

Methods

The systematic review was performed in accordance with the handbook of the Norwegian Knowledge Centre for the Health Services. We conducted a thematically broad search for references about cleft lip, alveolus, or palate or velocardiofacial syndrome. The search was then limited to systematic reviews and primary studies with a prospective, controlled design. We imposed no language restrictions. The Cochrane Library, MEDLINE, EMBASE, CINAHL, ERIC, and Norart (a Norwegian database of Nordic journal articles) were searched. Two persons independently assessed the methodological quality of the included articles. Likewise, two persons decided which data to extract and present in result tables. In instances where data were presented for different follow-up periods, we emphasized the last reported data.