

What is Oral Hypersensitivity/Food Aversion?

Hypersensitivity or aversive reactions are stronger than normal responses to touch, taste and/or temperature in the mouth or around the face. An infant or child may frown, fuss, cry, turn away, or even gag when touched around the face or mouth, or when given food. These behaviors may limit your child's ability to eat normally.

What Causes Oral Hypersensitivity/Food Aversion?

- 1) Prematurity and immature neurological development
- 2) Previous medical procedures around the face or mouth that may have been uncomfortable (i.e., tubes down the throat)
- 3) Long term tube feeding resulting in limited experience with feeding by mouth
- 4) An overall sensory problem with handling/touch.
- 5) Chronic illness
- 6) Delays in introducing oral feeding (not only liquids, but solids & cup drinking)
- 7) Abnormal muscle tone and movement development

What Can be Done to Help Get Your Child Ready?

- 1) Ensure your child is calm and alert before starting any "oral play".
- 2) Monitor how your child responds to what you are doing. Begin where your child is comfortable and not reactive. Build slowly to the point where she/he is aversive; then backtrack slightly.
- 3) Make sure your child is well positioned. Infants under 6 months may need to be swaddled or held so arms or legs are close to their body. Children should be seated upright with the hips and feet positioned at 90 degrees, not slanted. Your child's feet should rest on a firm surface or on the floor rather than dangling.
- 4) Reduce unnecessary stimuli in the room, such as television, radio, bright lights, direct sunlight, too many people or lots of noise.

Desensitization Strategies

- 1) Approach your child so she/he can see you and let your child know you are going to touch him/her. Using puppets or stuffed animals and turning it into a game may be helpful.
- 2) Start by touching your child's hands and arms, or back and stomach;

then move towards the neck, chin, and cheeks. If your child tolerates this, you can progress to include the lips, mouth, gums and tongue in that order. Try to avoid stimulating the gag response.

- 3) The *type* of touch can also be tailored to meet your child's needs. Textures progress from smooth to soft to unusual or prickly. Try rubbing your child's body with various textures including hands, washcloth, brush, stuffed toys, cloths such as cotton, silk, corduroy, etc.. Pressure progresses from firm to light.
- 4) Massage can be beneficial if used in an organized and consistent way. You may wish to consult an occupational therapist.

Additional Suggestions:

- 1) Eliminate utensils which contribute to hypersensitivity. (i.e., using a long teat on a baby bottle rather than a short one will more likely result in a gag).
- 2) It is important to promote development of non-nutritive sucking with children who are tube fed. A soother is helpful to develop this sucking pattern in infants up to 18 months of age.

- 3) Encourage your child to mouth toys. Variety is important; avoid offering only one toy.
- 4) With infants over 6 months always start with familiar textures, tastes and temperatures before progressing to something new.
- 5) Allow your child to touch the food with his/her hands.
- 6) Practice desensitization strategies for short periods, five to eight times daily.
- 7) Try using a mirror to help your child develop self awareness.
- 8) Try vibrating toys and apply to target areas.

Integrating a Program Into Daily Routines With Infants Under 6 Months of Age:

- 1) Integrate treatment into daily activities (i.e., incorporate the strategies frequently throughout the day, not only in preparation for a feed session).
- 2) Use touch when communicating with your child throughout the day.
- 3) Encourage your child to put his/her hands to mouth during play.

Integrating a Program into Daily Routines With Children Over 6 Months of Age:

- 1) Encourage a playful/relaxed attitude towards meal times and the oral/facial area.
- 2) Use visual imaging and positive thinking (i.e. videos that help your child relax, calming music, stories about pleasant feeding experiences).
- 3) Toothbrushing is beneficial in providing oral stimulation to the mouth and face. Consult your feeding team specialist to find out what brush is best for your child.
- 4) See numbers 1, 2, 3 in previous section.

Sources:

Adapted from What is Oral Hypersensitivity. - Alberta Children's Hospital (1999).
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