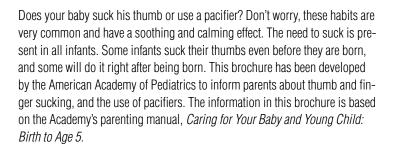
Thumbs, Fingers, and Pacifiers

Guidelines for Parents



Thumb and finger sucking

Thumb and finger sucking is normal for young children. Most children suck their thumbs or fingers at some time in their early life. Many thumb or finger suckers stop by age 6 or 7 months. The only time it might cause you concern is if it goes on beyond 6 to 8 years of age or affects the shape of your child's mouth or teeth. If you see changes in the roof of your child's mouth (palate) or in the way the teeth are lining up, talk to your pediatrician or pediatric dentist.

Children who suck their thumbs past 6 to 8 years often get teased by friends, brothers, sisters, and relatives. Sometimes these comments are enough to get the child to stop. If not, talk to your pediatrician about other ways to help your child stop.

Pacifiers

Many parents have strong feelings about pacifiers. Some oppose their use because of the way they look. Some resent the idea of "pacifying" a baby with an object. Others believe that using a pacifier can harm a baby. This is not true. Pacifiers do not cause any medical or psychological problems. If your baby wants to suck beyond what nursing or bottle-feeding provides, a pacifier will satisfy that need.

A pacifier should not be used to replace or delay meals. Offer a pacifier only after or between feedings, when you are sure your baby is not hungry. If your child is hungry, and you offer a pacifier as a substitute, he may become so upset that it interferes with feeding. It may be tempting to offer your child the pacifier when it is easy for you. However, it is best to let your child decide whether and when to use it.

Some babies use a pacifier to fall asleep. The trouble is, they often wake up when it falls out of their mouths. Once your baby is older and has the skill to find and replace it, there is no problem. Until then, your child may cry for you to find the pacifier. **Do not attempt to solve this problem by tying a pacifier to your child's crib, or around your child's neck or hand.**This is very dangerous and could cause serious injury or even death. Babies who suck their fingers or hands have a real advantage here, because their hands are always readily available.



Shopping for a pacifier

When buying a pacifier, keep the following points in mind:

- Look for a one-piece model that has a soft nipple (some models can break into two pieces).
- The shield should be at least 11/2 inches across, so a baby cannot put the entire pacifier into her mouth. Also, the shield should be made of firm plastic with air holes.
- Make sure the pacifier is dishwasher-safe. Follow the instructions on
 the pacifier and either boil it or run it through the dishwasher before
 your baby uses it. Clean it this way frequently until your baby is
 6 months old so that your child is not exposed to germs. After that,
 your baby is less likely to get an infection in that way, so you can just
 wash it with soap and rinse it in clear water.
- Pacifiers come in two sizes, one for the first 6 months and another for children after that age. For your baby's comfort, make sure the pacifier is the right size.
- You will also find a variety of nipple shapes, from squarish "orthodontic" versions to the standard bottle type. Try different shapes until you find the one your baby prefers.
- Buy some extras. Pacifiers have a way of getting lost or falling on the floor or street when you need them most.
- Never tie a pacifier around your baby's neck or hand, or to your child's crib. The danger of serious injury or even death is too great.
- Do not use the nipple from a baby bottle as a pacifier. If the baby sucks hard, the nipple may pop out of the ring and choke her.
- Pacifiers fall apart over time. Inspect them every once in a while to see whether the rubber has changed color or torn. If so, replace them.

How to help your child stop

As children grow and develop, their need to suck usually goes away, most often by the time they are 6 to 8 years old. Also, with increases in peer pressure, children are more able to control their behavior.

As a first step in dealing with your child's sucking habits, ignore them! Most often, they will disappear with time. Harsh words, teasing, or punishment may upset your child, and the habit will get worse. Punishment is not an effective way to get rid of habits.

Older children (more than 3 years of age) may use sucking to relieve boredom. Try getting your child's attention with an activity that she finds fun. Rewarding good behavior is the best way to produce a change. Praise and reward your child when she does not suck her thumb or use the pacifier. Star charts, daily rewards, and gentle reminders, especially during the daytime hours, are also very helpful.

If these measures do not work and your child wants to stop, your pediatrician might recommend trying a reminder such as covering the thumb with a plastic strip or "thumb guard" (an adjustable plastic cap that is taped to the thumb).

Your child should be directly involved with the treatment chosen. Before using these methods, be sure to explain them to your child. If they make your child afraid or tense, stop them at once. If your child's teeth are affected by the behavior and you have tried all the methods described above, talk to a pediatric dentist. Some dentists will install a device in the mouth that prevents the fingers or thumb from putting pressure on the palate or teeth. In fact, this device usually makes it so unpleasant to place the thumb or finger into the mouth that your child removes his thumb or finger.

Severe emotional upsets or stress-related problems might cause your child to suck his thumb or use a pacifier for a long time. It is also possible that your child may be one of the very few who cannot seem to stop. However, most children stop daytime sucking habits before they get very far in school. This is because of peer pressure. These same children might still use sucking as a way of going to sleep or calming themselves when they are upset. This is usually done in private and causes no harm either emotionally or physically. Putting too much pressure on your child to stop this type of behavior may cause more harm than good. Even these children eventually stop the habit on their own.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.



