

# A Proposed Modification for the Classification of Cleft Lip and Cleft Palate\*

VICTOR SPINA, M.D.

An acceptable classification is essential to international communication in cleft lip and palate malformations. Several classifications have been proposed. Some have been based on morphology, (1, 2, 3), and others based on embryology (4, 5). On the basis of their research, Kernahan and Stark (4) presented the first classification on an embryological basis.

Harkins, et al, (5) appointed and charged by the American Cleft Palate Association, presented a classification based on the same embryological principles as described by Kernahan and Stark. The ACPA classification served as a basis for one adopted by the Subcommittee of the International Society for Plastic and Reconstructive Surgery. (6) The adoption by this Society helped to satisfy an international need. The authors propose a modification of the classification presented by the Nomenclature Committee of the American Cleft Palate Association (5) and plan to present this at a meeting of the International Society of Plastic and Reconstructive Surgery for consideration.

The reference point for the proposed classification is the incisive foramen. The clefts are to be classified as follows:

Group I. Pre-incisive foramen clefts (Clefts lying anterior to the incisive foramen). Clefts of the lip with or without an alveolar cleft.

a) Unilateral

Right { total when they reach the alveolar arcade.  
partial

b) Bilateral

1) Total } On one or both sides  
2) Partial }

c) Median

1) Total  
2) Partial

Group II. Trans-incisive foramen clefts (Clefts of the lip, alveolus and palate).

a) Unilateral { right  
left

b) Bilateral

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\* From the Division of Plastic Surgery and Burns of the Department of Surgery of the University of São Paulo Medical School, Brazil.

Group III. Post-incisive foramen clefts (Clefts lying posterior to the incisive foramen).

1) Total

2) Partial

Group IV. Rare facial clefts

The pre-incisive foramen clefts involve various degrees of lip clefting and/or the alveolar ridge. The trans-incisive foramen clefts affect both the lip and the palate. The post-incisive foramen clefts are various degrees of clefting posterior to the incisive foramen. A partial cleft of the lip and of the palate not transversing the incisive foramen would be termed a pre-incisive and post-incisive foramen cleft. The rare facial clefts would include the oblique clefts (oro-orbital), transverse clefts (oro-auricular), clefts of the lower lip and others.

We feel that this classification fulfills the following requirements: 1) Its terminology is brief and clear, being legible in various languages, since it is based on Latin; 2) the classification is based on both anatomy and embryology since the dividing point is the incisive foramen; 3) there is a standardization of the classification in relation to surgical treatment; 4) provision is made for the unusual clefts; 5) it is easy to memorize; 6) it is easily understood and simple to teach; 7) international communication is simple.

## References

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