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INTRODUCTION

- CL/CLP care is complex and multidisciplinary, yet clinical practice is not standardized across centres, disciplines, or teams.
- Objective:** Identify and appraise the scope, quality, consistency, and limitations of guidelines for CL/CLP care in children.

METHODS

- PRISMA-guided systematic review; PROSPERO: CRD42021258625.
- Databases: MEDLINE, EMBASE, Scopus, Web of Science, and Cochrane Database of Systematic Reviews through January 2025.
- Guideline quality appraised using the AGREE II instrument.

KEY MESSAGE

54

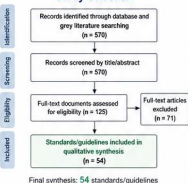
included standards/guidelines

No guideline covered all 9 domains

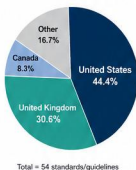
RCPCB Best Practice Guide was most comprehensive

RESULTS

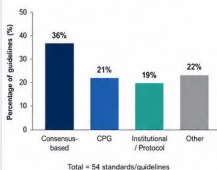
Study Selection



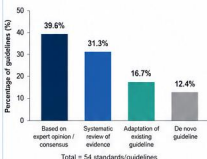
Country of Origin



Design / Type



Development Method



AGREE II Quality



Nine Thematic Domains Used to Code Recommendations



DISCUSSION

- Guidelines were dominated by expert consensus and CPGs, with persistent reliance on older multicentre cleft studies.
- Important discrepancies were identified in presurgical orthopedics and recommended cleft-team composition.
- Applicability was the weakest AGREE II domain, suggesting limited attention to implementation barriers, resource implications, and uptake strategies.

CONCLUSION

- Existing CL/CLP guidelines can be organized into nine key domains of care.
- Current recommendations are broadly useful but remain incomplete and inconsistently comprehensive.
- Future guidelines should prioritize stronger methodology, stakeholder involvement, implementation strategies, and contemporary evidence.