Rooting Reflex

The rooting reflex appears at birth and should be integrated by three to four months. The purpose of the reflex is to allow the baby to find the food source. When the cheek is touched or brushed, the head will turn toward the stimulus, or the lip will lift on that side, and the mouth will open. We are concerned about a potential retained rooting reflex when the child has issues with:

- Drooling
- Picky eating
- Speech articulation
- Resistance to textures of some foods
- Constant chewing on clothes or toys
- Thumb sucking past the normal age

We discussed the relationship between the development of the hand and the development of oral functions in our discussion of the palmar reflex. Please review that paper for additional information.

The test for a rooting reflex is very simple. The reflex is an automatic turn towards a touch on the cheek. To test, simple touch the cheek lightly and look for an opening of the mouth, or a turn towards the stimulation. If these do not appear, the rooting reflex is not involved.

As with other symptoms, the above concerns may be due to other issues in the developmental sequence.

The rooting reflex is integrated by the **Infant Pattern** called **Face Rubs**, in which the infant's fisted hands rub around the mouth - the area of the trigeminal nerve. This is the area of the face that, if you are male, you will grow a beard. With our little boys, we can tell them that they are practicing to have a beard!

In reflex integration programs, integration involves using a brush, and I have found several patterns that are recommended. There is no comment about why these particular patterns are recommended. However, the infant uses a diffuse, whole-face stimulus done with the fist (not a finger or brush) and rubs their cheeks and chin area, bringing blood flow and sensory awareness to that area.

Again, we can see that integration is built into the developmental sequence and a retained rooting reflex can be integrated outside of a program of NeuroDevelopmental Movement.