

Botulism in the PICU: the Critical Role of Speech-Language Pathologists

Botulism Outbreak and the Critical Role of SLPs in Infant Recovery

Starting in November 2024, a botulism outbreak linked to ByHeart formula has affected at least 51 infants across 19 states. While physicians have led the medical management of these cases, speech-language pathologists (SLPs) have played an essential role in supporting recovery, particularly in feeding and swallowing rehabilitation.

Overview of Infant Botulism

Infant botulism is an intestinal toxemia caused when spores of *Clostridium botulinum* or related species are ingested. These spores colonize the infant's large intestine and produce botulinum neurotoxin, which disrupts acetylcholine release at cholinergic nerve terminals. This interference can lead to:

- Bulbar palsies
- Hypotonia
- Asymmetric, descending, flaccid paralysis

Signs and Symptoms

Infants with botulism may present with:

- Constipation
- Poor feeding
- Ptosis (drooping eyelid)
- Sluggish pupils
- Flattened facial expression
- Diminished suck and gag reflexes
- Weak or altered cry
- Respiratory difficulty, potentially leading to respiratory arrest

Treatment & The Role of SLPs

Medical treatment typically includes BabyBIG®, a human antitoxin for infant botulism. In severe cases, respiratory support via intubation may be required. However, recovery extends beyond antitoxin administration—feeding and swallowing difficulties often persist, and this is where SLPs are indispensable.

SLPs provide comprehensive assessment and intervention for swallowing and feeding issues. Their work includes:

- Bedside clinical exams
- Video fluoroscopy swallow studies
- Fiberoptic Endoscopic Evaluation of Swallowing (FEES)

Speech language- pathologists assess an infant's ability to latch, efficiently transfer liquids, and swallow safely. During BabyBIG® treatment and recovery, many infants require alternative methods of nutrition and hydration. SLP intervention focuses on supporting safe sucking and swallowing while closely monitoring changes throughout the illness and recovery process. Collaboration with occupational and physical therapists ensures a comprehensive, family centered- approach that supports the infant's overall development and recovery.

Conclusion: Why SLPs Matter In Infant Botulism Care

Infant botulism is a rare but serious condition that can compromise essential functions like feeding and breathing. While antitoxin therapy addresses the underlying cause, functional recovery depends heavily on restoring safe swallowing and feeding skills. SLPs bring specialized expertise to this process, reducing complications such as aspiration and malnutrition, and promoting developmental progress. Their role is not just supportive—it is critical to survival and long-term health outcomes for effected infants.

Growing Clinician Expertise

Speech-Language Pathologists looking to advance their skills are invited to join our live webinar 3rd Annual Birth to Three Conference on March 26-27, 2026. Taking a whole-child approach, SLPs in all settings can choose your track to:

- ✓ Support Therapeutic Engagement
- ✓ Understand the cardiovascular system
- ✓ Reframe reflux
- ✓ Diagnose and treat apraxia
- ✓ Manage esophageal dysphagia
- ✓ Empower communication with AAC tools
- ✓ Maximize trunk support for feeding and speech

[Learn more and register.](#) Sign up today!

Citations:

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