Ankyloglossia: To cut or not to cut

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- Background
- Breast Feeding
- Surgical Technique
- Case Examples



Testimonials

Background

Definition: Tight lingual frenulum

Incidence: 0.5/1000

Consequences: Difficulty with breastfeeding, speech articulation, mechanical activities

Importance of Breast Feeding

Benefits to Infant

- Protects against infection
 - Diarrhea
 - H. flu
 - Enhances vaccine response
 - Otitis Media
 - Respiratory Infections

Otitis Media and Diarrhea

TABLE 3.	Percentage of Infants 2 to 7 Months of Age Re	e-
ported as	Experiencing Diarrhea or Ear Infection, by Feedin	ıg
Category in	the Preceding Month	

Feeding Category (% Breast Milk)	Diarrhea	Ear Infection	
Breast milk only (100)	5.4	6.8	
High mixed (89–99)	4.8	6.6	
Middle mixed (58-88)	6.4	9.4	
Low mixed (1-57)	8.5	11.1	
Formula only (0)	11.4	13.2	

Importance of Breast Feeding

Benefits to Infant

- Protects against illness
 - SIDS
 - GERD
 - MS
 - Dental Health
 - Diabetes



ORIGINAL ARTICLE

Breast feeding and respiratory morbidity in infancy: a birth cohort study

W H Oddy, P D Sly, N H de Klerk, L I Landau, G E Kendall, P G Holt, F J Stanley

Arch Dis Child 2003;88:224-228

Increased risk → 2 or more hospital visits for wheezing, lower respiratory illness

Benefits for Mothers

- Lowers Breast Cancer
- Uterine Cancer
- Ovarian Cancer
- Emotional Health
- **Promotes weight loss**
- Decreases Osteoporosis

Medical Expense for Wisconsin

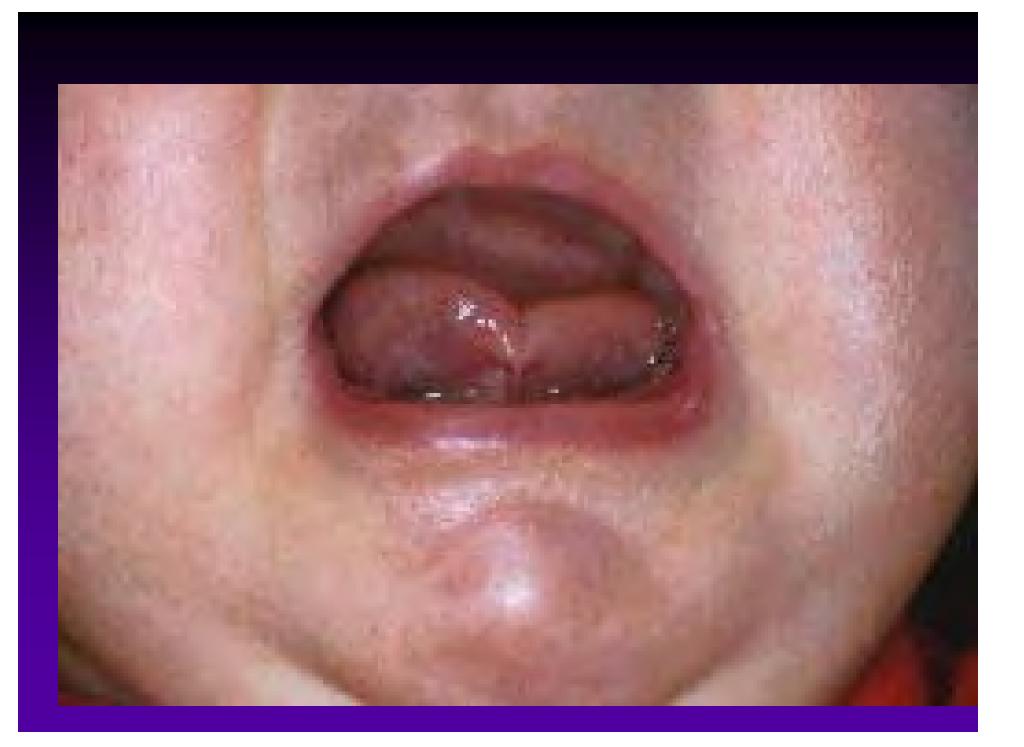
- \$4,645,250/yr Acute Otitis Media
- \$437,120/yr Bronchitis
- \$6,699,600/yr Gastroenteritis
- \$262,440/yr Allergies
- \$758,934/yr Asthma
- \$578,500/yr Type I Diabetes (birth -18yrs)
- \$17,070,000/yr Breast Cancer

• \$30,984,432/yr TOTAL HEALTH COST SAVINGS

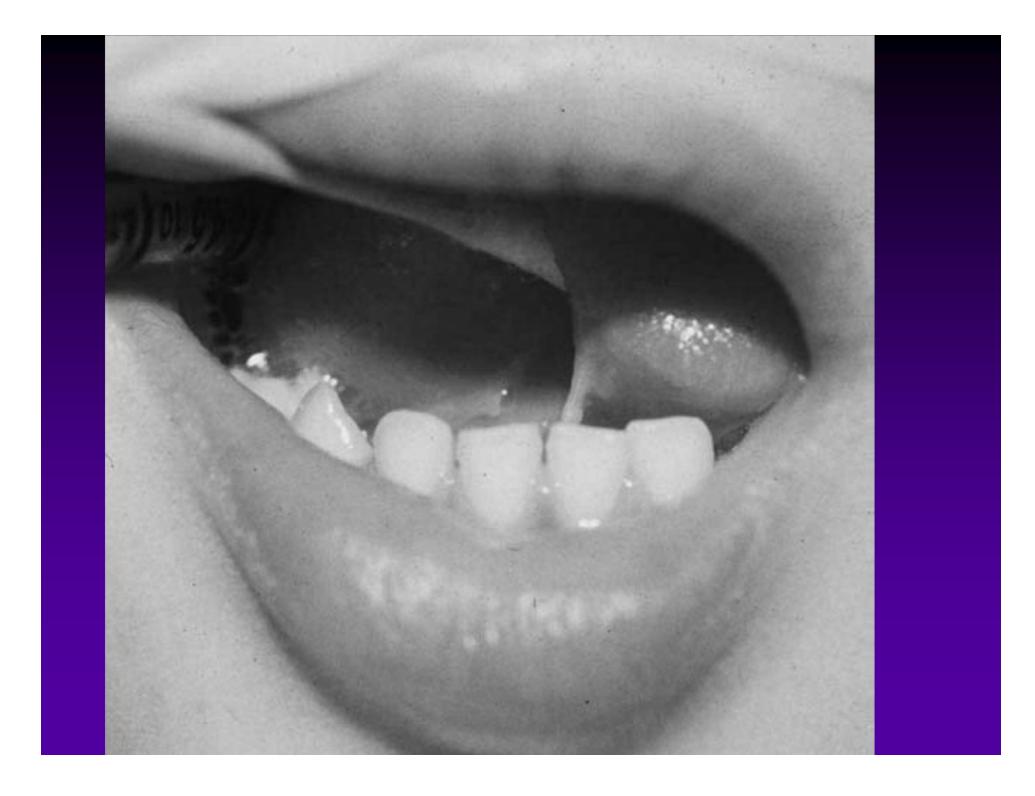
History

- Breathing
- Feeding
- Sleeping













Evidence

To cut or not to cut?

- 1. Frenotomy was performed on 35 infants and breastfeeding improved in 83% (No complications)
- 2. At 3 months, 29 of 35 mothers reported improved breastfeeding
- **3.** The tightness of the frenulum doesn't correlate with feeding difficulty

Literature

Ankyloglossia: does it matter?

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Palo Alto, CA 94304-5654, USA

Tongue Protrusion

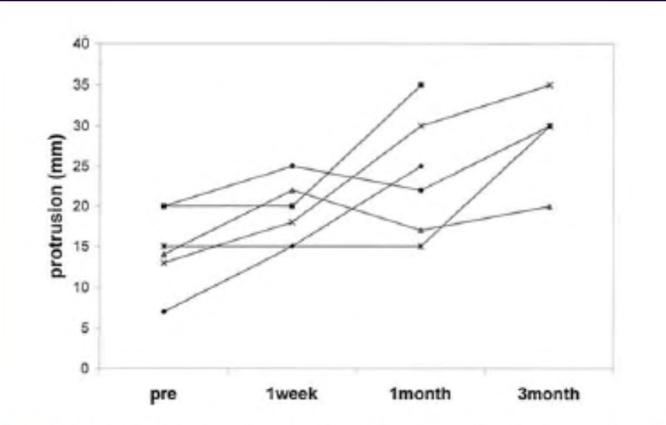


Fig 7. Tongue protrusion values for frenuloplasty patients preoperatively and at 1 week, 1 month, and 3 months postoperatively. Each line represents an individual patient.

Tongue Elevation

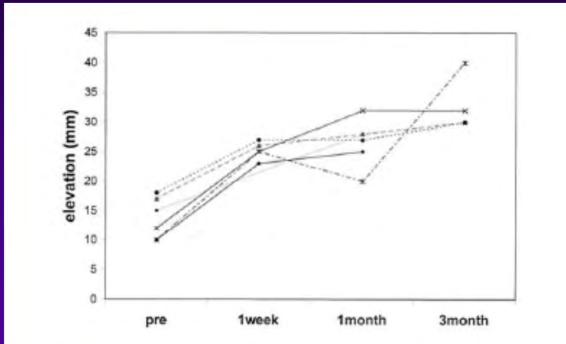
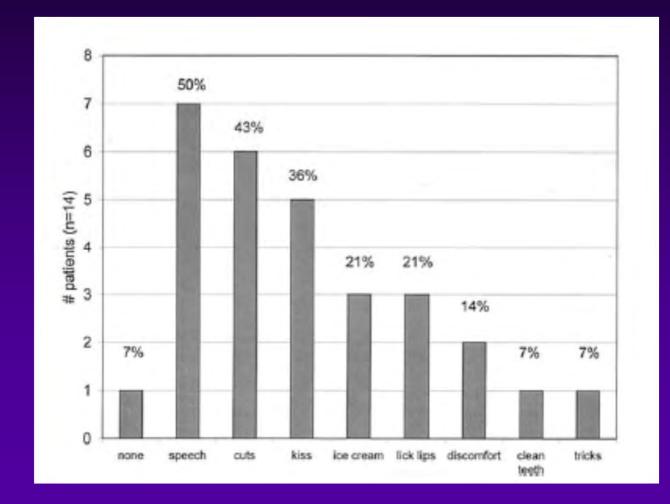


Fig 8. Tongue elevation values for frenuloplasty patients preoperatively and at 1 week, 1 month, and 3 months postoperatively. Each line represents an individual patient.

Functional Complaints



Post Frenuloplasty

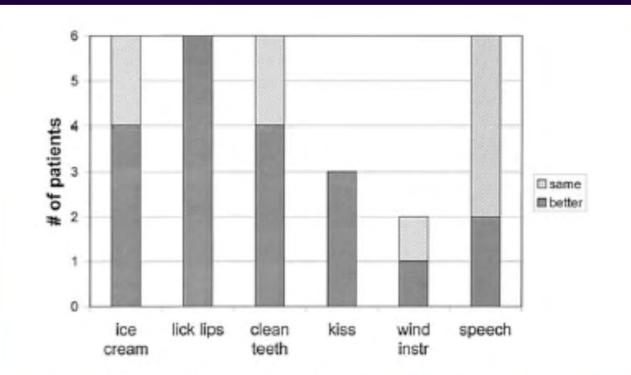
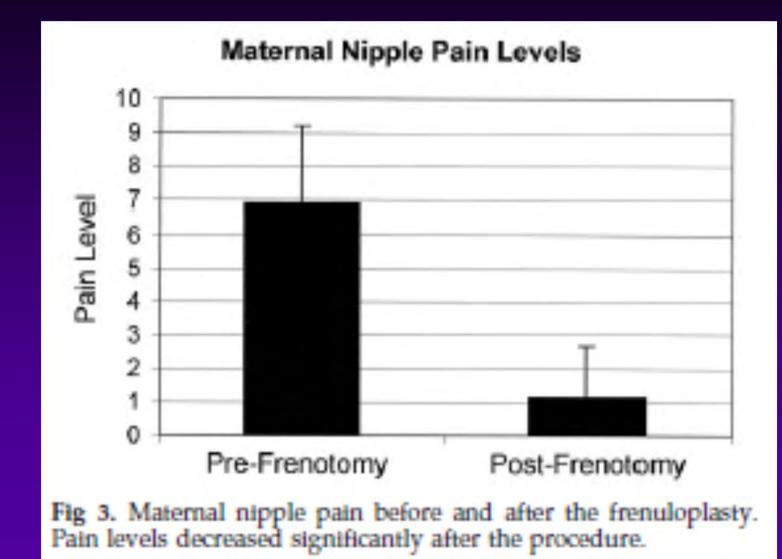


Fig 5. Subjective gains in tongue function at 1 month postfrenuloplasty. Kissing and ability to play a wind instrument were applicable to only 3 and 2 patients, respectively.

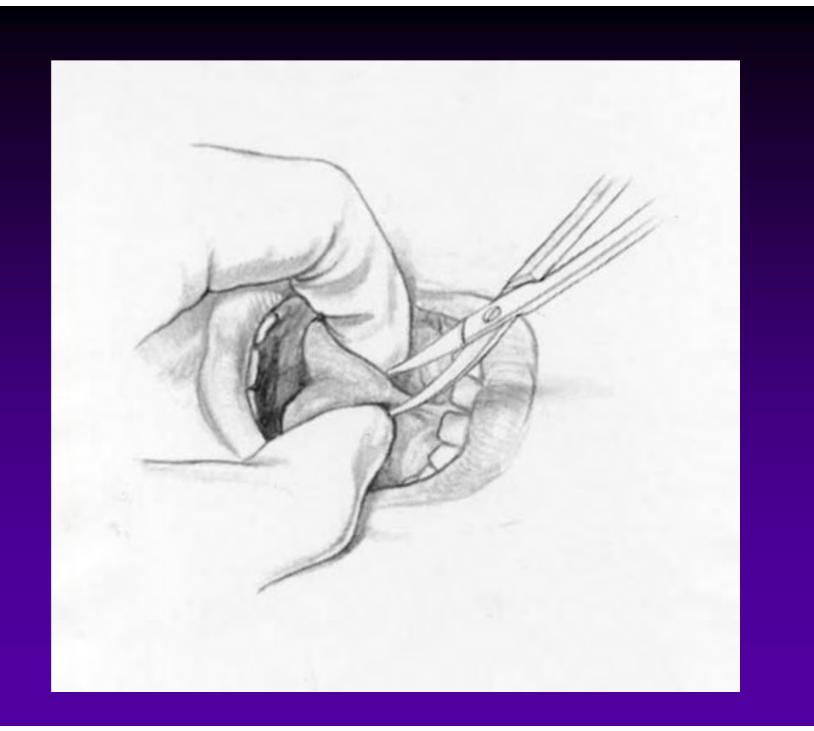


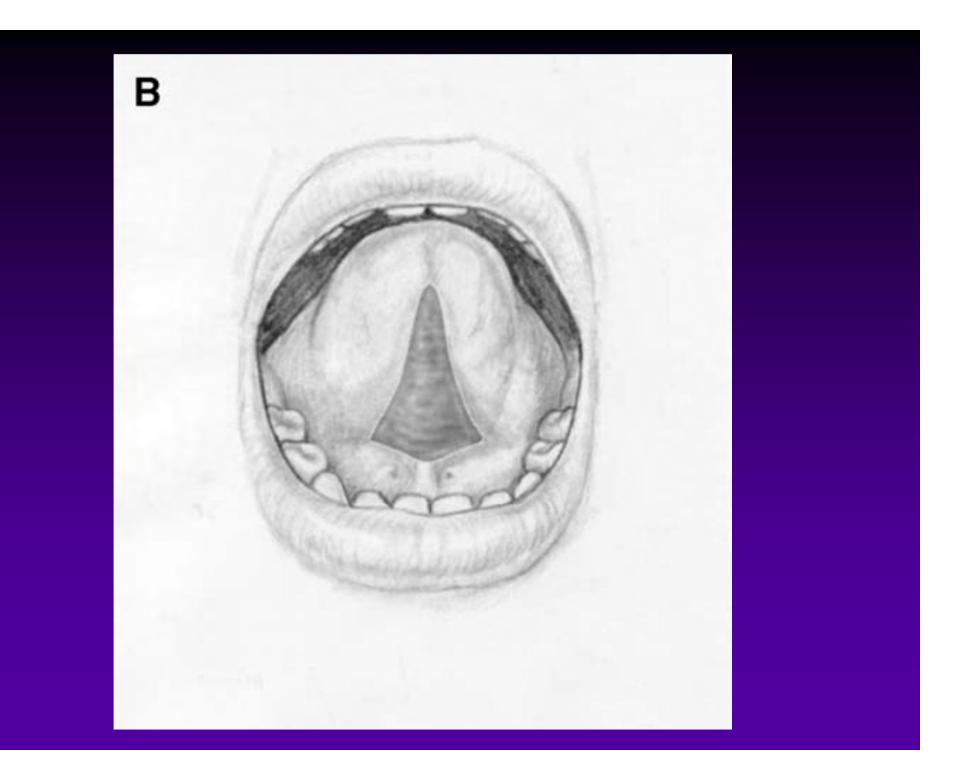
Surgical Technique

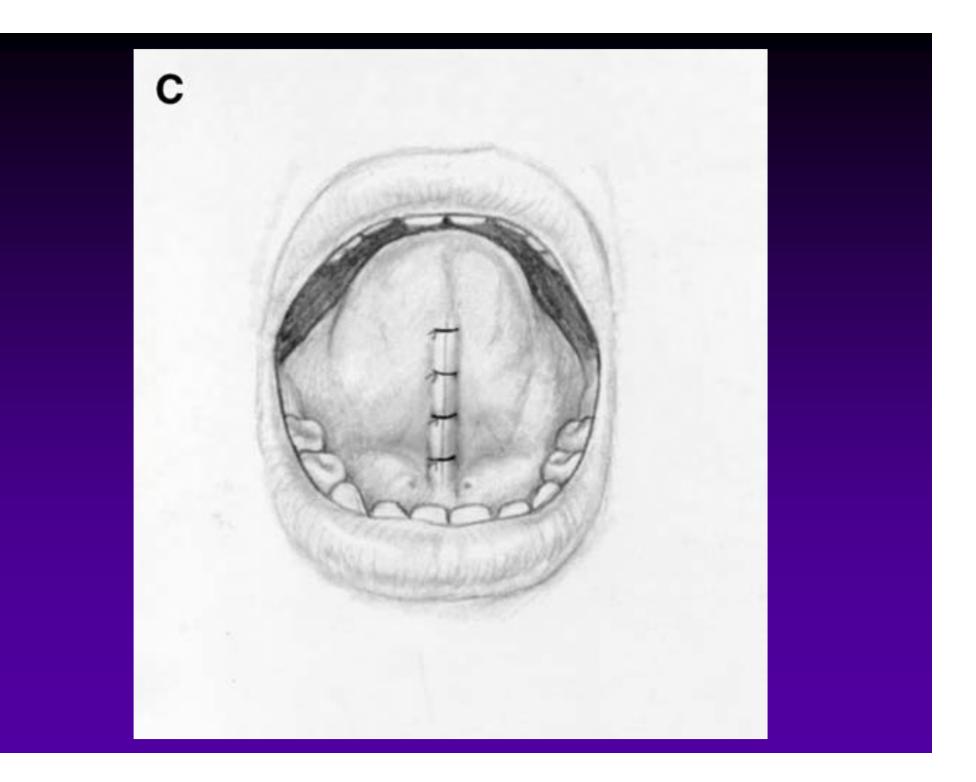
• Operating Room vs. Clinic

- Secure the child
- Open the mouth with tongue blade
- Use fine scissors or electrocautery
- Groove director placed under the tongue
- Band is cut
- Stitches are placed (optional)







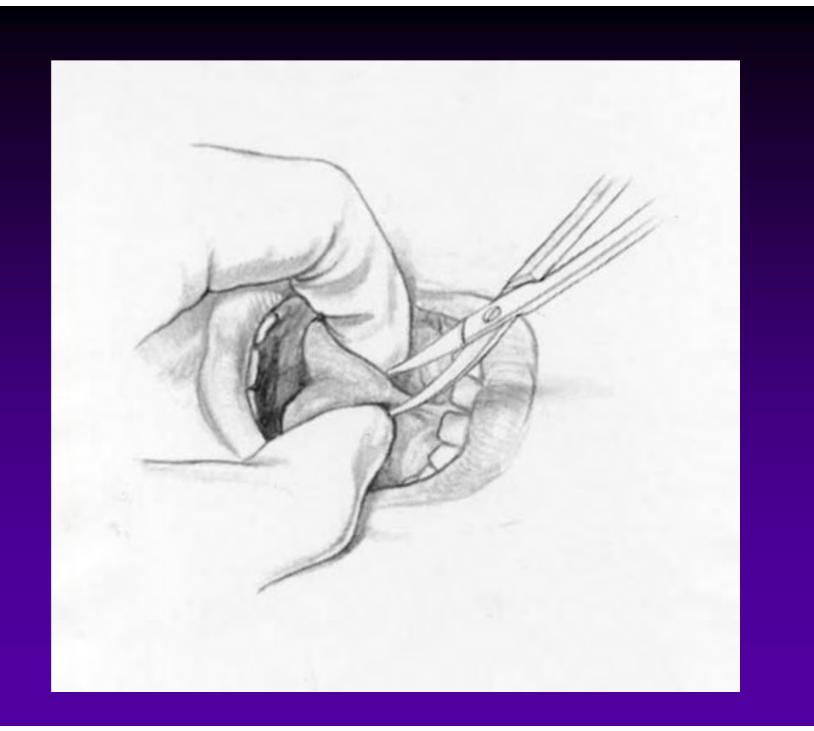


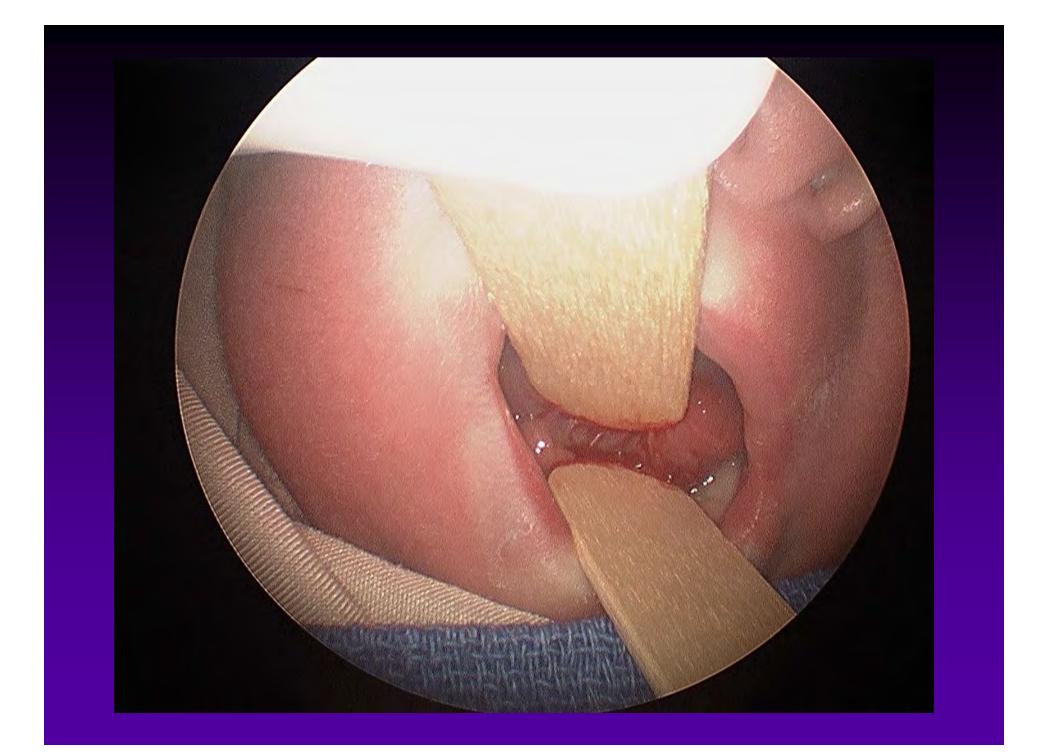
Case Examples

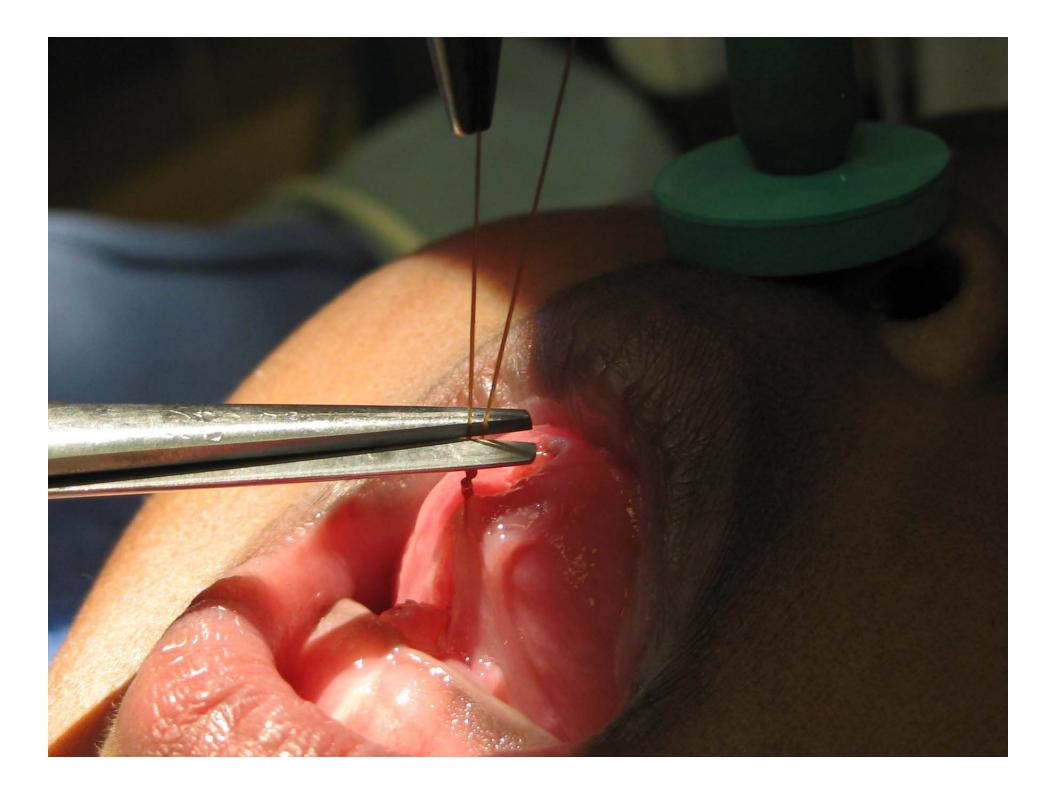
• Frenotomy vs. Frenuloplasty













Post- Frenulectomy Care

•Pacifier with sucrose

•Breast Feeding

•Baby Tylenol

No antibiotics

Complications

•Infection

•Bleeding

•Scarring

Conclusion

Mothers of infants with any degree of tongue-tie who have trouble breastfeeding despite lactation support often report immediate improvement after frenotomy