**What is Frenotomy**

Frenotomy or frenectomy is a procedure used to correct a congenital condition when the lingual (tongue) or labial (lip) frenulum is tight resulting in restriction of function. This may potentially result in difficulty of breastfeeding and other concerns such as dental, digestive, and speech issues. If your lactation consultant or doctor feels that this procedure is warranted, then your baby may have a tongue tie and/or lip tie.

**Tongue Tie**

A tight lower tongue frenum attachment may restrict the mobility of the tongue and appears as a cupping or heart-shaped tongue when the tongue is elevated. This can result in an inability to get the tongue under the nipple to create a suction to draw out milk. Long term, a tongue tie can result in speech problems and/or issues later with transferring food around the mouth for chewing.

**Lip Tie**

A tight upper lip frenum attachment may compromise full-lip flanging and appear as a tight, tense, upper lip during nursing. This can result in a shallow latch during breastfeeding. Additionally, the tight upper lip may trap milk, resulting in constant contact of the milk to the front teeth, and possibly lead to dental decay. If the frenum attaches close to the ridge or into the palate a future diastema (gap between the teeth) can also occur.

**About Us**

Krizman Dental combines the best aspects of general and biological dentistry, with a state of the art laser frenectomy practice. Dr. Krizman has an Advanced Degree in General Dentistry, is a Master Clinician in Implant Placement, is Laser Certified, and has a Masters Degree in Public Health. She is a mother of two boys, who were both breast fed. She understands the frustrations associated with problematic breastfeeding.

Jeanne Anne Krizman, DMD, MPH

Helping Nursing Mothers and Their Infants Establish a Healthy Breastfeeding Relationship

Krizman Dental

INTEGRATIVE BIOLOGICAL DENTISTRY

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Symptoms
Some babies can have tongue or upper lip ties and not be symptomatic. To know if the ties are a problem, we ask two major questions: “Is the baby getting enough to eat?” and “Is nursing comfortable for the mother?” Symptoms can be as follows:

Baby’s Symptoms
- Poor latch
- Slides off nipple or falls asleep while trying to latch
- Frustration at the breast
- Colic and/or reflux symptoms
- Poor weight gain
- Continuous feedings
- Gumming or chewing of the nipple
- Unable to take a pacifier of bottle

Mom’s Symptoms
- Creased, flattened or blanched nipples after nursing
- Cracked, bruised, or blistered nipples
- Severe pain when infant attempts to latch
- Incomplete breast drainage
- Plugged ducts or mastitis

Procedure
Babies tolerate the procedure very well, and we try to ensure that discomfort is minimized. A topical numbing gel is placed on the frenulum tissue.

It is common for babies to cry and/or act fussy during and after the procedure. Babies typically lose only a small amount of blood, if any at all. Once baby is numb, they are treated in our laser treatment room and immediately returned to you. Please feel free to nurse, bottle-feed and/or cuddle your baby, depending on your preference.

If your baby does swallow a small amount of blood, he or she may have brown spit-ups or stools after the procedure.

After the Procedure
Dr. Krizman recommends natural remedies for pain relief such as Arnia, Orajel Naturals (no benzocaine), and Hyland’s Teething Gel. You may also use Tylenol or ibuprofen (for 6-mo. of age and older).

The primary concern after the procedure is that the healing site will reattach due to the rapid healing capability of the mouth. This could cause a new limitation in mobility, and a return of symptoms. Therefore, it is recommended that you perform the following stretching exercises for your baby.

Follow-up Care
There is a follow-up appointment one week after the procedure, to monitor healing. Dr. Krizman implements a team approach, and highly recommends that her patients see a lactation consultant both before and after the procedure, to increase breastfeeding success. Babies have an exquisite ability to compensate during feeding, which is harmful and requires tremendous energy.

The Benefits of Using Laser
- Minimal to no bleeding allowing better visibility for the doctor (compared to scissor)
- Enhanced precision due to better visibility
- No need to inject epinephrine-based local anesthetic
- Complete removal of desired tissue
- Less trauma to underlying tissue layers, compared to electrosurgery technique

Wash your hands very well prior to performing the stretches. Coconut oil is a natural anti-inflammatory and anti-microbial and can be used during the stretches. Rest baby on your lap with his/her head closest to your hips. You can make these exercises fun if you sing a song or play when stretching. Stretches must be done 6 times per day for three weeks, and tapering off the fourth week. No more than 6 hours between stretches.

1. Place finger under lip and move it as high as it will go (until bump resistance). Gently sweep side-to-side, 5 times.
2. Insert both index fingers under the tongue. Pick tongue up (not backwards) as high as it will go and hold for 2 seconds and relax.
3. Prop tongue up with one index finger and place other index finger deep into the center of diamond. Use an upward-sweeping, side-to-side motion to separate the healing tissues.
4. Let the baby suck on your finger and play “tug-of-war” to build strength.
5. Rub the lower gum line of the baby’s mouth to encourage their tongue to follow your finger.

Inside spread