

It's Good to Finally SUCK!

BY DR. SUSAN MAPLES

The ability for a mother to successfully breastfeed her baby is a great gift! It not only helps moms and babies bond but lavishes immeasurable health benefits on each. Most adults recognize that breast milk is the best source of nutrition and immunologic protection for a baby; less known are the wonderful benefits of the baby's ability to suck directly from the breast, versus using a bottle. The action of latching and suckling from the breast increases the strength and size of the baby's tongue, expands the palate, opens airways, oxygenates the blood, supports baby's brain growth and helps prevent obstructive sleep apnea — a debilitating, life-shortening condition — later in life.

A baby's failure to latch properly and effectively express milk from the breast causes great frustration and discomfort to the mom and baby. The baby's

inability is most often due to a tongue-tie, lip-tie, or both. These ties are called "tethered oral tissues" (TOTs). This can commonly result in weak latch, clucking sounds, swallowing air (aerophagia), reflux, fatigue during eating, vomiting after eating, weight loss, gagging, lip blisters, gas and congestion for the baby. Moms often intuitively know something is wrong, leading to frustration, fear and possibly postpartum depression; not to mention pain from bruised, blistered and/or cracked nipples.

Tethered tissues hinder the tongue from extending out and under the breast areola and hinders the upper lip from flanging on top. The medical team's ability to offer an early and clear diagnosis of the problem is highly variable. Sadly, TOTs are often not recognized or addressed as an easily treatable condition until the

child demonstrates a speech problem. To catch it early, you can evaluate your baby's mouth by sweeping your index finger across the floor of the mouth (under the tongue) and under the upper lip from side to side. If your finger is hindered by a band (or bands) of tissue, they probably need to be released.

Historically, severe tongue-ties have been treated with the quick snip of a scissors, which usually results in incomplete revision and almost never includes an assessment of the upper lip.

Lasers to the rescue: the state-of-the-art remedy for TOTs is laser surgery, and it can be done as early as the day your baby leaves the hospital. In the hands of a trained laser surgeon, TOTs can be released in seconds with almost no discomfort and practically no bleeding. It's best for mom to bring the baby to the appointment hungry, so she can experience the joy of "normal" breastfeeding immediately after the revision. Depending on the advancing age of the infant, he or she may need a little time to relearn new sucking habits.

In my professional career, there is nothing more gratifying than being able to instantly prevent a lifetime of medical issues (such as reflux, sleep apnea, ADHD, learning disabilities and failure to thrive). If you are unsure about whether your child is handicapped by TOTs, ask your lactation consultant (IBCLC), pediatrician or infant-caring dentist. ■

Our Infant Oral Health
Program includes
lip and tongue tie
assessments and laser
release treatments



SUSAN MAPLES, DDS
Personalized Dentistry For A Lifetime of Health



*Photo taken five minutes after
laser treatment procedure.*

