

Frenulum Clinic: Frequently Asked Questions

Q: What are the indications for frenulum division?

A: Frenulum division is most often performed secondary to trouble breastfeeding. Pain or soreness of mother's breasts, a baby who has difficulty breastfeeding due to poor latch or difficulty staying latched, or inadequate weight gain of the baby despite adequate time at the breast, would all be good indications for referral and evaluation. In addition, an inability of the baby to protrude the tongue beyond the teeth with subsequent anticipated speech difficulties may warrant referral.

Q: Can a short frenulum affect speech?

A: Yes. If the baby or child is not able to protrude the tongue beyond the teeth then certain sounds will not be able to be clearly articulated. For this reason, it makes sense to perform a frenulum division sooner rather than later to avoid having to do the procedure at a later age when the child might require general anesthesia.

Q: Can a short frenulum affect gum and tooth development?

A: Yes. Children with a tight frenulum that attaches at the gum ridge may have difficulty with tooth or gum problems later in life. Not all children with a tight frenulum will have this problem, and in most cases the frenulum can be released by a dentist.

Q: What is the best age range for frenulum division using a local anaesthetic alone?

A: The safest age is from birth to three months, although the vast majority of procedures will be done before about six weeks of age. Exceptions are made for individuals who need a revision (if the first release was not deep enough) or for those who are breastfeeding with fairly good volumes, but whose mothers are having persistent and significant soreness. In certain older infants, we may attempt the procedure under local anesthesia, but be unable to completely position the infant. In such cases, we would refer the infant to a pediatric ear, nose, throat specialist for evaluation for surgery under general anesthesia.

Q: What is a labial frenulum/labial frenulotomy?

A: A labial frenulum is a tight cord of tissue between the upper lip and upper gum. A labial frenulotomy, which we are not offering at the Frenulum Clinic at this time, involves division of this tissue between the upper and/or lower lip and the adjacent gums. We would suggest referral to a pediatric dentist if the infant has a very tight or thick labial frenulum.



Frenulum Clinic, (978) 287-3003
www.emersonhospital.org