



The TRUTH about TONGUE-TIES

TREATING A TONGUE-TIE IS SIMPLE WHEN YOU HAVE THE RIGHT HELP!

A tongue-tie used to be thought of as something that only affected babies and breastfeeding. But modern medicine and dentistry is finding that the problems associated with a tongue-tie can affect both children and adults of all ages. Releasing a tongue-tie is now an integral part of achieving optimal oral and dental health.

WHAT IS A TONGUE-TIE?

A tongue-tie is also known as a restricted lingual frenum or a tethered oral tissue (TOT). The frenum is the line or band of tissue under the tongue - we all have one. It connects the tongue to the floor of the mouth. In some people however, the frenum is too tight or too short, and it can actually restrict the movement of the tongue, as well as prevent it from resting in the correct place. Lips can be tied as well.

WHY DOES IT MATTER?

Your tongue should fill up the entire roof of your mouth. When it does, it provides an internal support structure for the upper jaw. If your tongue is in the right place, your teeth will grow in straighter and your face will develop properly. A tongue-tie keeps your tongue in the bottom of your mouth.

People who are tongue-tied often mouth breathe, so they experience a variety of myofunctional problems and symptoms. Chronic jaw pain, facial pain, headaches, and clenching and grinding, along with dental and orthodontic issues are common in people with tongue-ties. Studies show that children who are tongue-tied are more likely to develop sleep apnea and airway issues.



TREATING A TONGUE-TIE

1. THE FRENECTOMY

Most often, a tongue-tie must be treated surgically.

The procedure can be called a frenectomy, frenotomy or frenulectomy. It's a simple, fast, and painless procedure. It can be done by a dentist using a laser or scalpel and should only take a few minutes.

Finding an experienced doctor to perform the procedure is very important.

2. PRE-OP EXERCISES

It's critical to do myofunctional therapy exercises before the procedure for a successful outcome!

Your myofunctional therapist will prescribe a series of exercises to help strengthen and prepare the muscles of the tongue for the new range of motion they'll experience post-surgery.

3. WOUND CARE

The mouth is very good at healing after a surgery, which is why caring for the wound is an integral part of the process. If the wound is not managed properly, it's possible that the the tongue will reattach back the way it was before the frenectomy.

4. MYO-THERAPY

The tongue and oral muscles will need to be retrained and strengthened after the frenum is released.

Think of it just like any other surgery where rehabilitation is required. The muscles in tongue have never learned to move or rest properly, so in this case, myofunctional therapy is just like physical therapy, only for the mouth.

THE GOOD NEWS IS THAT TREATMENT IS EASY AND THE RESULTS ARE PERMANENT AND LIFE CHANGING!

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