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The role of laser in tongue tie division: A pilot study

Talijancich Kaye
Perth Pediatrics, Australia

Background & Aim: Laser tongue tie division is an option suitable for neonates, older children and adults. No general anesthetic is used, but an analgesic gel is applied. The procedure is very quick, taking only 2 to 3 minutes to perform. The study aims to assess the outcome of patients who underwent tongue tie division with diode laser at Perth pediatrics.

Method: We conducted a retrospective review of the 49 children who underwent laser repair of tongue tie at Perth pediatrics between 30/01/2017 and 10/7/2017. The age of the children ranged from 4 days to 6 months. We assessed the outcome after 1 to 6 months, with a questionnaire via telephone. Of the 49 children's mothers telephoned, a total of 41 children were contactable. The outcome was assessed in terms of improvement of breastfeeding comfort to the mother and procedural complications.

Result: The outcome was assessed in terms of improvement in breastfeeding and lack of discomfort. 41 mums had immediate relief, which was rated good to excellent. 3 mums had poor immediate relief but there was improvement after 2 weeks if procedure and was rated good. Only 2 out of 41 mothers reported no relief in improvement in breastfeeding. Furthermore, it was noted that reflux symptoms in 3 children decreased post laser treatment and a weight gain increase was noted. There were no immediate or delayed procedural complications in terms of post-operative bleeding, infection, scarring or recurrence.

Conclusion: 95.2% (39/41) of children, who underwent tongue tie division with laser, were reported by their mothers, to have improvement in breastfeeding improvement in terms of latch/leakage. This outcome also included an improvement in the mother's discomfort i.e. nipple pain, nipple damage and mastitis.

kayetali@optusnet.com.au