

Infants' tongue-tie may be overdiagnosed and needlessly treated, American Academy of Pediatrics says

July 29 2024, by Mike Stobbe



This combination of photos provided by Dr. Maya Bunik in July 2024, shows a baby with ankyloglossia where the tongue does not extend beyond the gums, left, and a baby with an indentation at the tip of a the tongue which may be a sign of ankyloglossia. On Monday, July 29, 2024, one of the largest doctor's groups in the U.S., voiced concerns that the condition, also known as "tongue-tie" which can affect breastfeeding, is being over-diagnosed and often treated with unnecessary surgery to babies' mouths. Credit: Dr. Maya Bunik via AP

Tongue-tie—a condition in infants that can affect breastfeeding—may be overdiagnosed in the U.S. and too often treated with unnecessary surgery, a prominent doctors' group said Monday.

The American Academy of Pediatrics is the latest, and largest, medical society to sound an alarm about the increasing use of scissors or lasers to cut away some infants' tongue tissue when [breastfeeding](#) is difficult.

"It's almost an epidemic," said Dr. Maya Bunik, a Colorado-based co-author of the report.

Experts say there isn't a good count of how many infants each year are being treated for tongue-tie with surgery, though Bunik believes the annual tally may exceed 100,000. Research suggests many of those treatments are not necessary, she added.

The academy's new report encourages pediatricians and other medical professionals to consider nonsurgical options to address breastfeeding problems. The report cites a study that suggests less than half of the kids with the characteristics of tongue-tie actually have difficulty breastfeeding.

Ankyloglossia, or "tongue-tie," occurs when an infant is born with a tight or short band of tissue that tethers the bottom of the tongue's tip to the floor of the mouth. The condition can make it hard for the infant to extend and lift their tongue to grasp a nipple and draw milk—which in turn can be painful for the mother.

Doctors say it's critical to get breastfeeding on track in the first three to four weeks, and surveys indicate most parents want to breastfeed, so it's natural that they want a quick solution to a problem, Bunik said.

Ankyloglossia diagnoses have been increasing worldwide, though there is no uniform diagnostic criteria for this condition and no consensus on how to treat it. One common approach is to cut the tissue with scissors, but dentists increasingly are using lasers to vaporize the tissue—some charging \$800 or more.

But the procedures can cause pain and sore mouths, potentially deterring babies from trying to breastfeed, Bunik said.

"The practice (of treating tongue-tie) got to be very common without a lot of good data," said Wisconsin pediatrician Dr. Jennifer Thomas, who also co-authored the report.

The report also recommends lactation experts, pediatricians and surgeons and other medical professionals work with parents to evaluate possible reasons for breastfeeding challenges and make the best treatment decision.

The American Academy of Pediatrics, which has 67,000 members who specialize in treating children, started working on the report in 2015 after some pediatricians began to notice that an increasing number of patients were going to dentists to get treatment for tongue-tie, Thomas said. Pediatricians were finding out after the surgeries.

At least two other medical groups have issued statements about tongue-tie. In 2020, the American Academy of Otolaryngology-Head and Neck Surgery issued a consensus [statement](#) in which member physicians said they believe tongue-tie is being overdiagnosed in some places and that there isn't sufficient evidence to support claims that using lasers is superior to other techniques.

A year later, the Academy of Breastfeeding Medicine, an international group, issued a position [called for](#) more research into tongue-tie

treatment and stressed that decisions "require a high level of clinical skill, judgment, and discernment."

The American Dental Association didn't directly respond to The Associated Press' questions about the new report. It sent a statement saying the organization agrees with a [2022 policy statement](#) by the American Academy of Pediatric Dentistry, which noted not all children with ankyloglossia need [surgical intervention](#) and that a team-based approach with other specialists can aid in treatment planning.

Haley Brown saw a lactation consultant two years ago after her son Shiloh, who was born prematurely, had trouble nursing. But as months passed and the situation didn't improve, Brown turned to a Denver dentist she heard about on social media. The dentist diagnosed Shiloh with tongue-tie and also lip-tie, in which the tissue inside the upper lip is too tight. Shiloh underwent a short laser procedure that cost \$750.

Breastfeeding improved immediately. "Things just seemed a little easier for him," said Brown, 33, of Englewood, Colorado.

Brown later had another baby, and another lactation consultant told her that a scissors snip could have been less involved and just as effective. Brown said the laser treatment worked for Shiloh, but added, "I probably should have consulted with my pediatrician before I went straight to the dentist."

© 2024 The Associated Press. All rights reserved. This material may not be published, broadcast, rewritten or redistributed without permission.

Citation: Infants' tongue-tie may be overdiagnosed and needlessly treated, American Academy of Pediatrics says (2024, July 29) retrieved 29 July 2024 from <https://medicalxpress.com/news/2024-07-infants-tongue-overdiagnosed-needlessly-american.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.