

## TREATMENT OF LINGUAL FRENULUM

Case treated by:

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**BEFORE**



**AFTER**



The short lingual frenulum is frequently dealt with in dental practice and the elective therapy is frenulectomy, in the cases where the clinical state requires it. The cold knife incision of the lingual frenulum would cause enormous bleeding. For this reason, it was decided to use Wiser that enables controlling of bleeding and avoiding the final suture.

## Patient:

Age: 9 years.

Gender: female.

General history: nothing relevant.

Case history-ankyloglossia: with typical ankyloglossia symptoms: difficult phonation of dento-linguo-labial consonants and lingual extrusion, presence of a median furrow in protrusion and impossibility of touching the palate with the tip of the tongue with an open mouth.

## Hypothetical therapies.

	Methods	Benefits	Disadvantages
<b>Traditional</b>	Traditional surgery with scalpel and suture.	Rapid intervention.	Abundant bleeding. Hemostasis is difficult. Suturing is difficult.
<b>Laser</b>	Wiser Diode Laser.	Hemostasis. Precision and maximum cutting control. No need for suture, healing by secondary intention without relapses. Decontamination and biostimulation for faster healing.	Not detected.

## Treatment:



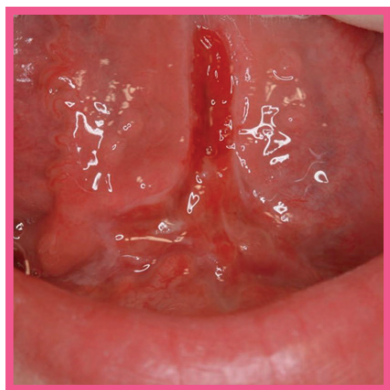
Removal of the frenulum using the laser handpiece with activated and contact fiber.



The use of Wiser allowed us to obtain immediate hemostasis with excellent visibility of the operating site and cutting precision.



The frenulum is completely eliminated according to the longitudinal and the perpendicular planes, in relation to its insertion.



The absence of sutures greatly reduces post-operative discomfort and healing times.

**Conclusions:** The total duration of laser-assisted frenulectomy is shorter than that of a scalpel surgery although the excision itself is much shorter in the second case; with Wiser we have a blood free surgery, with excellent visibility, while with the cold knife, frequent padding and surgical aspiration of blood is required, as well as an accurate final suture. In conclusion, we can state that lingual frenectomy practiced with Wiser is a great therapeutic solution, with no postoperative complications, which increases patient adherence.