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## HEALTHY BREASTFEEDINGS: CHANGES OF BREASTFEEDINGS AND OF BREASTS BEFORE AND AFTER SURGERIES ON THE ANKYLOGLOSSIA WITH DEVIATION OF THE EPIGLOTTIS AND LARYNX (ADEL)

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**Background:** Historically frenotomy was performed at newborn babies' baptism for a healthy breastfeeding over many centuries. Although it was necessary for nursing babies, its application was denied subjectively without clinical observation since the early 20th century. As a result solutions for breastfeeding and breast problems are confused now. The causes of confusions result from:

- 1) the majority of babies (93.6%) have ankyloglossia.
- 2) ankyloglossia is accompanied by deviation of the epiglottis and larynx (ADEL).
- 3) There were strong relationship between tongue and respiration.
- 4) The relationships between the tongue and respiration were ignored;
- 5) various symptoms and signs of ADEL were ignored; and, above all,
- 6) there has been no standard of healthy breastfeeding.

Methods: In healthy breastfeeding, the baby opens its eyes wide and latches onto the mother's breast with a wide mouth. It masticates the breast milk when it bites the areola and nipple and gobbles up the milk that gushes out. The movements of the jaws during masticating the milk are observable by the movement of both the temporal muscles and the ears. We studied changes in breastfeeding and mothers' breasts before and one month after the operations for ADEL by standards for healthy breastfeeding and breasts.

Results: With regard to suckling, before the surgeries 24% of babies opened their eyes during breastfeeding, after surgeries 76% opened eyes while nursing. 30% of the babies correctly latched onto the mother's breast with. After surgeries 84% properly latched on. 73% of the babies had calluses on the upper lip before surgeries, and no calluses were observed after surgeries. 27% of babies before surgeries moved the jaws during breastfeeding, but after surgeries 88% moved the jaws while nursing. White debris was on the dorsum tongue in 70% of babies prior to surgeries. After surgeries 22% was with debris. 67% of mothers experienced nipple pain before their babies' surgeries while 6% had pain after the surgeries. 73% of mothers had palpable breast masses, after the surgeries 25% had palpable masses. Flattened nipples were observed in 55% of mothers before surgeries, 7% had after surgeries. 23% of mothers having breast pain before the surgeries, 4% had breast pain after the surgeries. Mastitis was from 9% to 1% after surgeries.

**Summary:** Remarkable improvements in breastfeeding and in mothers' breasts were achieved after their infants operations for ADEL. These results indicate the necessity of surgical interventions in babies with ADEL.

## **Biography**

Susumu Mukai has been graduated from Chiba University as Medical Doctor, with the specialities including Oto-Rhino-Lryngology and Cervico-Facial Surgery. Diplome in Lalyngology from Keio University. Later on he obtained his post graduation from Otorhinolarynglogy et Chirtgie Cervico-Facial of Université de Montpellier with subjects on mechanism of the larynx and then started working in the Yamato City Hospital where he continued OLR and CF surgeries. Presently he has been working at the Yamato City.

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**Notes:** 

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