

WOUND HEALING MILESTONES

Evaluating Wound Healing Progression Post-Lingual Frenuloplasty: Key Considerations for Therapists

Wound healing following a lingual frenuloplasty begins immediately upon making the surgical incision, with each stage unfolding sequentially from the outset. Understanding these stages is crucial for therapists to effectively manage expectations, monitor and support the healing process, and to ensure a smooth recovery. Falling outside the typical healing range may indicate the potential for early or delayed healing, and may alter the myofunctional and rehabilitation therapy timeline.



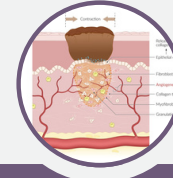
HEMOSTASIS



INFLAMMATION



PROLIFERATION



PROLIFERATION: CONTRACTION



MATURATION REMODELING

1 END PHASE: DAYS 1 - 2

INITIAL HEALING

Objective: Healing begins instantaneously post-incision, with the body initiating clot formation to stem bleeding. This immediate phase is crucial for setting the stage for subsequent healing. It is typical for some bleeding up until day 2, however, bleeding that continues past this point increases the risk of a delay in the healing process.

Care Instructions:

- Engage in gentle tongue movements and protect sutures by avoiding full extension.
- Manage pain with over-the-counter medication or holistic options like arnica or CBD oil.
- Apply ice therapy to the neck and jaw area to reduce swelling.
- Manage initial bleeding, use prescribed pain medication wisely, and maintain oral hygiene through gentle rinsing. Note that inflammation signals the onset of the healing process.

2 END PHASE: DAYS 3- 5

EARLY HEALING

Objective: Reduction of acute inflammation signs, with redness, swelling, and warmth beginning to subside. This indicates the body's effective response in clearing debris and fighting potential infections, setting the stage for the next phase of healing. It is typical for inflammation to subside by days 3-5, however if inflammation continues past day 5, increases the risk of a delay in the healing process.

Care Instructions:

- Monitor for signs of excessive pain, bleeding, or drainage. Begin gentle massaging of the wound area and light stretches as advised by your therapist.
- Preserve the integrity of sutures & PeriAcryl glue, essential for recovery.
- Maintain oral hygiene through gentle brushing and rinses with salt water, xylitol, or diluted alcohol mouthwash to prevent infection.
- Schedule a 3-day post-operative virtual orofacial myofunctional therapy check to adjust care based on healing progress.

3 END PHASE: DAYS 5 - 10

ACTIVE HEALING

Objective: Significant progress in tissue and blood vessel development within the wound area. By the end of this stage, the wound should be well on its way to being covered with new, healthy tissue, evidencing the body's capacity to rebuild and repair. It is typical for granulation tissue formation to integrate by days 5-10, however if this stage continues past day 10, it may suggest a delay in the healing process.

Care Instructions:

- Understand that the body generates new, healthy tissue, including granulation tissue rich in collagen and blood vessels, to effectively cover and heal the wound. Concurrently, new skin cells form a protective barrier from the wound's edges inward.
- Wound Care: Maintain the integrity of sutures and any PeriAcryl glue used, as they should come out naturally during this timeframe.
- Incorporate gentle tongue exercises to promote healing
- Continue with recommended stretches and exercises as prescribed by your therapist, possibly including adjunctive therapies like fascia physical therapy or 1064/800 nm laser therapy for inflammation.

4 END PHASE: DAYS 10 - 60

WOUND CONTRACTION

Objective: Wound contraction will occur to varying degrees, with new tissue maturing and gaining strength during this period. It is typical for contraction to subside within 60 days, however if this stage continues past day 60, it may suggest a delay in the healing process.

Care Instructions:

- Resume tongue exercises diligently focusing on avoiding compensatory movements. Encourage tongue range of motion with minimal compensation (vertical opening, tongue clicks, and side-to-side movements) to promote healing and functionality.
- Begin integrating exercises that enhance cheek and lip balance and support nasal breathing. Emphasize the importance of maintaining new oral motor patterns to prevent relapse.

5 > 60 DAYS - 6 MONTHS

LONG-TERM HEALING

Objective: The final stage of the healing process where scar tissue matures, and collagen fibers reorganizes, helping to produce maximum function and mobility. This process happens most commonly between 2 to 6 months post-surgery and continues on for one year or more. As the body remodels collagen, expect scars to become flatter, smoother, and gain tensile strength. If some initial signs of maturation are not present between two and six months, this may suggest delayed healing and indication for adjunctive treatment modalities.

Care Instructions:

- Tissue Refinement: Focus on regular stretches and exercises to further enhance tongue range of motion and orofacial functionality. As the body remodels collagen, expect scars to become flatter, smoother, and gain tensile strength.
- Orofacial Therapy: Continue with orofacial myofunctional therapy as needed to reinforce new movement patterns and counteract any pre-surgery compensations.
- Healing: Initially the mucosa may appear more rough and irregular, but typically sees considerable integration in color and texture in approximately 2-6 months post-operation.