

Teeth - gapped teeth

Fraenula are little strings of tissue found underneath the tongue, inside the cheeks near the back teeth, and under the top lip. While an embryo is developing in the womb, these strings of tissue guide the growth of some mouth structures. Once we are born, the fraenula are largely redundant, although they seem to help in positioning the baby teeth.

The fraenum (or fraenulum) that attaches the top lip to the upper portion of the gum is called the maxillary labial fraenum. An abnormally low maxillary labial fraenum is the most common cause of gapped front teeth in the upper jaw. The abnormal fraenum is attached so low on the gum-line that it props apart the two front teeth. Whether or not an abnormal fraenum should be surgically removed is controversial.

Symptoms

The symptoms of an abnormally low maxillary labial fraenum can include:

- The fraenum extends down between the front teeth
- The front teeth in the upper jaw are gapped.

Other causes of gapped front teeth

Apart from an abnormal maxillary labial fraenum, other causes of gapped front teeth can include:

- **Natural development** – teeth are usually gapped when they first come through. The emergence of the canine (or eye) teeth often closes any gaps.
- **Missing teeth** – some children are born missing one or two teeth in their jawbones. A missing tooth can cause gapping.
- **Small teeth** – some children may have small teeth that allow for gaps.
- **Large jaws** – some children's jaws are relatively large compared to the size of their teeth.
- **Lingual fraenum** – this is the fraenum that attaches the tongue to the floor of the mouth. In some cases of severe tongue-tie (a condition caused by a restrictive fraenum that stops the tongue from poking out past the lips), the fraenum may cause a gap in the front teeth of the lower jaw.
- **Extra teeth** – sometimes extra teeth are present in the bone between erupted teeth and are unable to erupt.

The gap may close by itself

In many cases gapped front teeth in the upper jaw close by themselves, the baby teeth start to erupt between the ages of six and nine months. At this early age, the front teeth could be gapped and the maxillary labial fraenum attached low to the gum. By the time the child reaches its first birthday, the fraenum has probably shortened, and the eruption of more teeth have closed any gaps. If the second (adult) front teeth are gapped, the eruption of molars (flat, grinding teeth located further back in the jaw) help to 'crowd' the front teeth together.

Complications of gapped front teeth

Complications of gapped front teeth can include:

- **Self-consciousness** – some people may feel embarrassed, and be reluctant to smile with parted lips.

- **Tooth misalignment** – a large gap between the front teeth could leave not enough room for the lateral teeth (the ones next to the front teeth). This may cause tooth displacement and problems with a person's bite.

Treatment options

Your orthodontist should be able to advise you on whether treatment is needed when your child is about 10 or 11 years old. Options may include:

- **Veneers** – if the gap is small, veneers that are slightly wider than the teeth are bonded to the tooth surfaces. (Big gaps aren't treated with veneers, because the resulting front teeth would look abnormally wide.)
- **Removable appliance** – such as a plate.
- **Fixed appliance** – such as braces. Brackets are fixed to the front teeth and rubber bands used to pull the teeth together.
- **Frenectomy** – surgery to remove the fraenum, usually done after the gap is closed by orthodontic treatment.

Gaps occasionally reopen after the treatment appliance is removed. In some cases, the abnormal fraenum is thought to be responsible – without the pressure of braces, the fraenum simply pushes the teeth apart again.

Surgery is controversial

An operation to remove the fraenum is called a fraenectomy (or fraenulectomy). This is a controversial procedure because sometimes it doesn't work, and the front teeth remain stubbornly gapped. Risks of frenectomy include damage to the gum between the front teeth, reaction to the anaesthetic, haemorrhage and bleeding.

Financial assistance

Some young people and adults are also eligible for public oral health services. You are eligible for public oral health services if you:

- Have a Health Care Card or are a dependant of a card holder
- Receive Youth Allowance or Education Maintenance Allowance
- Are Aboriginal or Torres Strait Islander
- Are a newly arrived refugee or asylum seeker
- Are enrolled in special or special development schools
- Are in residential care provided by the Children, Youth and Families Division of the Department of Human Services.

Where to get help

- Your dentist or other oral health professional
- Your public oral health service. To find your closest service Tel. 1300 360 054 or visit Dental Health Services Victoria website at www.dhsv.org.au
- The Royal Dental Hospital of Melbourne clinic Tel. (03) 9341 1000 between 8.30am to 5.00pm Monday to Friday
- For emergencies contact your public oral health service or the Royal Dental Hospital emergency service Tel. (03) 9341 1000 or 1800 833 039 (from rural Victoria) 8.00am to 9.15pm Monday to Friday, 9.00am to 9.15pm weekends and public holidays
- All children from birth until the start of secondary school are eligible for public oral health services. Children receive general oral health advice as well as dental check-ups and treatment.

Things to remember

- The fraenum (or fraenulum) that attaches the top lip to the upper portion of the gum is called the maxillary labial fraenum.
- The fraenum (or fraenulum) which attaches the tongue to the floor of the mouth is called the lingual fraenum.

- Your orthodontist should be able to advise you on whether treatment is needed when your child is about 10 or 11 years old.

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Dental Health Services Victoria

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