

HIGHLIGHTS

Ankyloglossia and frenotomy

Ankyloglossia, or tongue-tie, is characterized by an unusually short, thick or tight lingual frenulum that may interfere with feeding or speech. Although there has been a long-standing controversy over the use of frenotomy for affected infants, the Canadian Paediatric Society does not recommend its use based on the available evidence. Routine surveillance activities led to identification of a temporal increase in ankyloglossia in British Columbia. Researchers conducted a population-based cohort study to examine these temporal trends and those of its surgical treatment in BC from 2004 to 2013. During the study period, there were 459 445 live births and 3022 cases of ankyloglossia. The population incidence of the condition increased by 70% (rate ratio 1.70, 95% confidence interval [CI] 1.44 to 2.01), from 5.0 per 1000 live births in 2004 to 8.4 in 2013. This was accompanied by an increase in the population rate of frenotomy by 89% (95% CI 52% to 134%), from 2.8 per 1000 live births to 5.3 over the study period (Figure 1). The regional health authorities with the lowest and highest rates of ankyloglossia also had

the lowest and highest rates of frenotomy respectively. With increased focus on breastfeeding initiation before hospital discharge in the province, these large temporal increases and substantial spatial variations in ankyloglossia and frenotomy rates may indicate a diagnostic suspicion bias and increasing use of a potentially unnecessary surgical procedure in infants, say the authors. *CMAJ Open* 2016;4:E33-40.

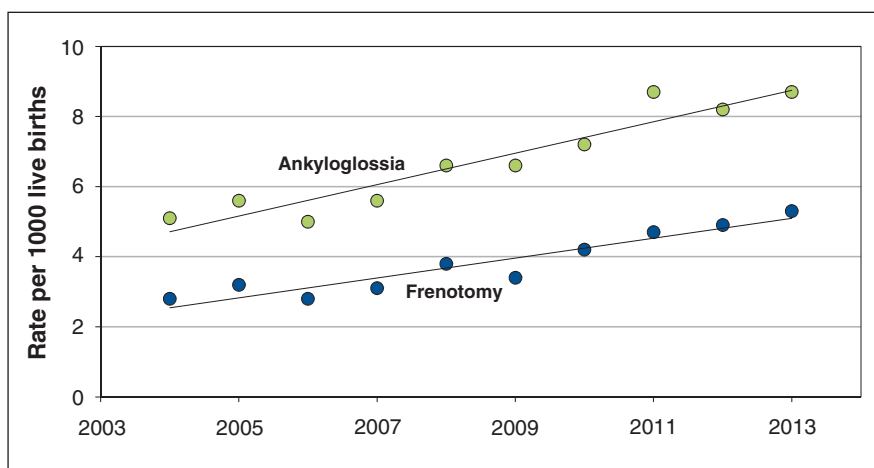


Figure 1: Rates of ankyloglossia and frenotomy by year.

Impact of tobacco packaging policy on use of a toll-free quit-smoking line

In March 2012, Health Canada introduced a pan-Canadian toll-free number for a quit-smoking line on new health warning labels for cigarette packages (Figure 2). Once called, the number automatically sends the caller to the quitline service of their respective province or territory. This study used an interrupted time-series analysis to examine trends in the overall call volume and number of new callers receiving treatment (at least one telephone counselling session) through Ontario's quitline (Smokers' Helpline) before and after the new policy was introduced (2010 to 2013). There was a relative increase of 160% in the average monthly call volume during the 7 months after the introduction of the new labels (an average of 870 calls per month at baseline to 1391 additional calls per month after the policy change; standard error [SE] 108.94, $p < 0.001$). The increase was sustained at 43% in subsequent months. The average number of new callers receiving treatment also increased in the first 7 months (relative increase of 174%), from 153 new callers per month at baseline to 267 additional new callers per month (SE 40.03, $p < 0.001$) after the policy change, with a sustained increase of 80% in sub-

sequent months. The effect was significant even after adjusting for a major promotion campaign and the January effect (i.e., a seasonal phenomenon where people decide to stop smoking as a New Year's resolution). *CMAJ Open* 2016;4:E59-65.



Figure 2: Example of a health warning label for Canadian tobacco packaging introduced in March 2012.