

“Tess Merrell had breastfed three babies and never expected trouble with her fourth. But after a month of struggling with her newborn, she hired Melanie Henstrom for help...to cut under the baby’s tongue with a laser [1].”

A frenectomy is an oral surgery performed to correct a lip or tongue-tie. While most people have multiple frena, i.e., folds on the underside of the tongue, they typically are unnoticeable. However, some frena are too short or tight, causing discomfort to the individual. This can manifest in an infant in different ways, such as problems with speech, oral health, undesired gaps between their teeth, or breastfeeding, as is the case with Tess’s baby. While it is true that breastfeeding has many benefits, there are wholesome alternatives, such as formula milk. Despite these alternatives, some mothers of babies who are unable to breastfeed due to the child’s tethered tongue are convinced that it is worth putting their child through an oral surgical procedure, a frenectomy, to fix this imperfection [2].

As is the case with most surgeries, there are risks involved in a frenectomy, such as bleeding, infection, pain, injury to salivary ducts, etc. [2]. While serious post-surgery complications are rare, cases have been reported in which babies refused to eat, became dehydrated and malnourished, or had their airways blocked by their newly floppy tongues. For some, this surgery is necessary from a medical standpoint; however, for others, it is considered an elective surgery. Often, doctors try to convince mothers that, because breastfeeding is so important, this surgical

procedure is critical for the baby’s normal development [1]. In some cases, the doctor’s primary motivation is monetary gain, taking advantage of the vulnerable mother. As mothers want the best for their children, many will request this procedure. As Jews, we need to determine whether this procedure is halachically permitted.

Halacha is the “user manual” of the observant Jew. It dictates many aspects of our lives, including the decision to undergo elective surgery. Although cosmetic surgery is the most common form of elective surgery and has been practiced for millennia, it involves inherent risks and thus should be discussed with one’s rabbi. Elective surgery raises many halachic questions, such as transgressing the prohibition of mutilating the body (chovel), the risk of loss of life that is involved in any operation, and the theological implications of ‘improving’ God’s work. Rabbi Jakobovits, amongst other current rabbinical authorities, discusses such concerns [3]. This essay will attempt to explore and analyze each of these concerns in depth.

The performance of cosmetic surgery may be a transgression of the Biblical prohibitions of self-mutilation and of not exposing oneself to risk. In Bava Kamma (91b), the rabbis explained the prohibitions of causing unnecessary harm to oneself (chovel b’atzmo) or of wounding another, (chovel b’chaveiro). Regarding cosmetic surgery, before improving the body, the surgeon inevitably first creates a wound in the healthy individual; therefore, the individual choosing to undergo surgery has

voluntarily accepted the possibility of encountering a health-threatening situation [3]. While this is true, Rabbi Moshe Feinstein commented that regardless of some initial surgical incisions, the prohibition of chovel was transgressed only when it caused a damaging outcome and not when the procedure was meant to benefit the patient. Rav Feinstein quoted the (opposing opinion of the) Rambam (Maimonides) in Hilchot Chovel u-Mazik 5:1, noting that “it is forbidden to cause injury to himself or to others... be it an adult, a minor, a man or woman when done in a damaging manner. The person transgresses a negative commandment...” [5] The Rambam further explained that chovel was only prohibited if blood spilled (often due to incisions) and if there was bruising after the procedure. Therefore, according to Rambam, certain procedures, such as botox injections, did not violate the prohibition of chovel, while most reconstructive procedures were in violation [6].

Another potential halachic problem with cosmetic surgery is the unnecessary risk posed to one’s life. Judaism prioritizes guarding one’s health, as seen in Yavikra (18:5): “You shall keep My laws and My rules, by the pursuit of which human beings shall live.” It is also noted in Mishnah Sanhedrin [4:5] that someone who saved the life of another is as if he sustained the entire world. Furthermore, there is a Biblical prohibition to put oneself into a dangerous situation, a sakkana. Before a surgical procedure, no matter how minor, the patient is given a long medical form to sign, explaining all the potential risks of the operation, such as death from anesthesia.

Therefore, cosmetic surgery poses an inherent risk to the patient. Since there are inherent dangers encountered in surgery, even benign operations, one should only undergo surgery if necessary [3].

Rabbi Judah David Bleich discussed situations where it may be halachically permitted to take a risk. In Mesechet (tractate) Shabbat 32a, we are taught that it is forbidden to put ourselves in situations that involve risk, as stated in Devarim 4:15 that we must guard our lives. Therefore, we must educate ourselves on the risks involved in certain activities and not merely rely on God’s protection. However, one may argue that life is filled with ordinary activities that involve inherent dangers and that we would be limited if we stayed away from potentially risky activities. Therefore, Rabbi Bleich explained that “any activity routinely undertaken by members of society and not perceived by them as hazardous is permitted despite the inherent danger...since the multitude has trodden thereon” [8]. For example, as Jews, we are allowed to drive a car even long distances, despite the statistics found between 2012-2014, showing that on average there were 1,098 deaths per year caused by motor vehicle-related accidents in New York [9].

Specifically, Rabbi Bleich discussed weighing the risks of surgery against the possibility of a prolonged life. Over the years, Rabbis had different understandings of this; Rabbi Ze’ev Wolf Leiter, Bet David, II, no. 340, wrote that if there is a one in one thousand chance that medical treatment can help a patient, he is permitted to go through with it. Meanwhile, Rabbi Joseph

Hochgelehrnter noted that this was only allowed if the person had a minimum of fifty percent chance of survival from the surgery. Overall, it was accepted that when medical attention for a serious health condition was required, even when the risk was significant, the value of preserving life outweighed the risk. In contrast, the allowance for procedures for non-life-threatening conditions required deeper analysis, which will be explored [8].

While it is a Jewish value to avoid risks, one must consider whether minor surgery is a halachic risk. Experts argued that due to rapid advancements in medicine, most current surgical procedures are less invasive than in prior years and the associated adverse health risks are very low. According to a study by the American Society of Plastic Surgeons, only about 0.5% out of 400,000 cosmetic surgeries had “adverse outcomes” [6]. In addition, cosmetic surgery typically involves alterations to the body's outer parts; therefore, there is not much concern that it will impact internal vital organs [4]. Generally, in halacha the rule is to go according to the majority; however, we do not follow the majority when the circumstance (i.e., elective surgery) involves pikuach nefesh, mortal jeopardy [6]. However, Rabbi Breisch explained that if the doctor was reputable and had the necessary experience, then “the prohibition of exposing oneself to danger (Rema, Y”D 116:5) was abrogated.” Rabbi Waldenberg countered that despite the unlikelihood of a negative outcome and the possible benefits to the patient, as long as the patient was naturally healthy and without pain, they were not permitted to seek a procedure

involving risks and injuries. This is especially true in cases of cosmetic surgery because such a procedure falls outside of the basic responsibility of healing [5].

In addition to the previous halachic problems with cosmetic surgery, there is a third, philosophical problem relating to the procedure. Philosophically, God is the ultimate craftsman of humans. Therefore, by remodeling ourselves, it is as if we are denying His perfect judgment, as He created us exactly as we should be [3]. Rashi and the Tosafot (Bama Kama 85b) learned from the Biblical phrase “reshut larofeh lerapote,” (“he shall surely heal”) (Shemot 21:19) that even though God put sicknesses in the world, a doctor is still obligated to cure the sick, even if the operation violated chovel. However, according to the Tzitz Eliezer in Cheilek 11, Siman 41, this did not apply to cosmetic surgery, which entailed altering one’s inherent God-given appearance, a change not driven by the need to address a medical condition but rather for aesthetic purposes [6].

In applying the above rules to practical cases, a distinction must be made in recognizing the two categories of elective surgeries — reconstructive and cosmetic surgery — and it is important to differentiate between them. Reconstructive surgery is usually applied to rectify a deformity that often causes pain, while cosmetic surgery is performed to enhance physical appearance [3]. The Talmud (Shabbos 50b) explained that as long as someone’s scabs are causing pain, he is allowed to remove them; however, scabs such lesions should not be removed for purposes of appearance.

While we try to avoid unnecessary surgeries relating to aesthetics, halacha is also sensitive to our psychological well-being and the reality of our environment. Englard-Schaffer and Zimmerman noted that “in reality, we are indeed visual creatures who initially connect with others based on external presentation” [5]. Rabbi Mordechai Yaakov Breish wrote in Chelkas Yaakov about situations when it was permitted to undergo surgery not medically necessary. According to the Tosfot (Shabbos 50b) and Chelkat Yaakov (3:11), people who experience extreme suffering from a psychological perspective, such as being embarrassed to walk in public due to a self-perceived defect, were permitted to undergo a corrective operation, as they considered it as a medical necessity [3, 7]. Therefore, restorative surgeries that “are done for the sake of human dignity” were permitted. For example, skin grafts following an accident or a fire, breast reconstruction in the wake of a mastectomy, skin removal after significant rapid weight loss, etc. [3]. This idea was emphasized Rabbi Shlomo Zalman Auerbach, who learned based on the Tosfot (Shabbos 50b) that someone in an accident was allowed to undergo surgery to reattach a severed limb “in an attempt to look normal.” Furthermore, Rabbi Menasheh Klein discussed a scenario of a woman who is dating and had a blemish or a facial imperfection that made her feel unattractive. He explained that although there were risks with the surgery and it was considered a chavala, she was still permitted to undergo surgery so as not to be embarrassed and to have an easier time finding a spouse. This is a complicated

topic, and there are other rabbis such as Rabbi Eliezer Yehuda Waldenberg, who disputed Rabbi Klein’s reasons, and explained that physical pain and life-threatening situations are the only considerations to allow surgery and that psychological embarrassment was not enough of a reason for elective surgery [5]. It is important to note that even according to Rabbi Klein, cosmetic surgeries to correct a problem not causing extreme psychological pain were not halachically allowed.

What might be the halachic conclusion regarding a frenectomy, specifically in Tess’s case? Assuming that the frenectomy was not medically required, as the people can live comfortably with an intact frenum, other factors must be evaluated to halachically allow such minor surgery. By undergoing this surgery, the baby’s tongue would be fixed, not mutilated, thereby avoiding the transgression of chovel. Moreover, a frenectomy is a minimally invasive surgery that typically takes only a few seconds and can be done in a dental office with local anesthesia. This procedure does not have the serious innate risks encountered in typical surgeries [10]. According to Rabbi Moshe Feinstein, since the outcome of a frenectomy benefited the patient, the procedure was halachically allowed. However, the theological implications of improving God’s work may challenge the allowance of a frenectomy. In Tess’s case, the only concern was her baby being breastfed. Her baby would function normally without the frenectomy, and, perhaps, this procedure would be an unnecessary attempt to perfect God’s work and would not be halachically permitted.

There is room to argue that later in life the intact frenum may be medically problematic. It is important to note that in a medically required surgery, the concerns of chovel and improving God's work are overlooked. Each case needs to be assessed individually to determine whether the patient should undergo elective surgery. Orthodox Jewish parents like Tess must consult with their Orthodox Jewish rabbi to discern whether their procedure is considered a medical necessity under the parameters of halacha.

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