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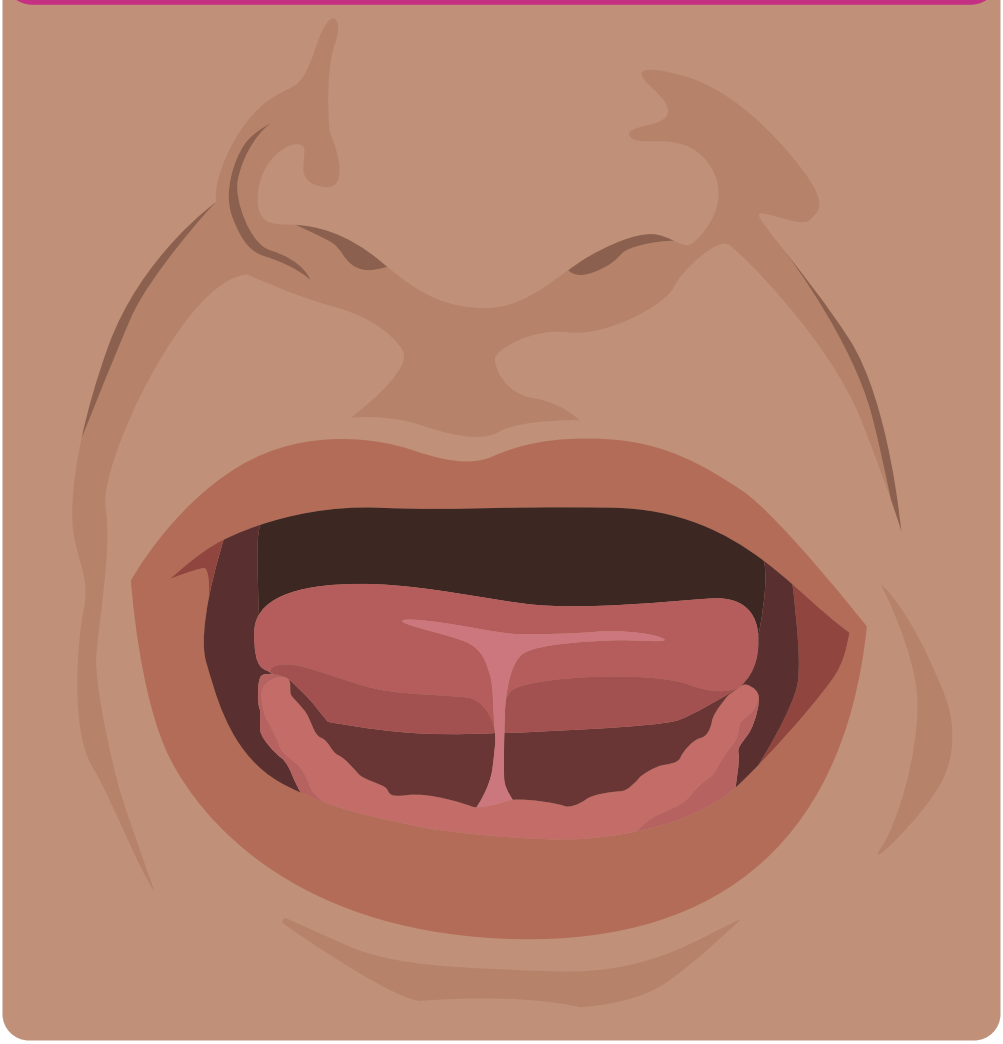
NHS
Sherwood Forest Hospitals
NHS Foundation Trust

Assessing and treating tongue tie

Information for parents, guardians and carers



About tongue tie

A visible frenulum (the string-like tissue underneath the tongue) is normal anatomy. A tongue tie is defined as a restricted frenulum, with current feeding issues. Up to 10% of babies have tongue tie, and 50% of these babies do not require frenulotomy (a procedure which involves cutting and dividing baby's frenulum).

Symptoms may include clicking, dribbling, excessive wind, reflux, static weight or weight loss, unable to maintain latch, and painful feeding if you are breast/chest feeding. Your midwife or health visitor can refer your baby to the infant feeding team for tongue tie assessment – please note division is not guaranteed.

If your baby is fed with artifical formula your GP needs to send a referral for assessment and also needs to check if there are any other conditions which could be causing feeding issues which are not related to tongue tie.

What is a tongue tie assessment?

This is an oral examination to assess tongue appearance and function.

This is offered at home if you live in the area covered by Sherwood Forest Hospitals, or are recieving postnatal care from midwives at this Trust. If you live out of the area we offer assessment at our outpatient clinic at King's Mill Hospital. Please note we do not currently divide 'hidden' frenulum (which sit beneath the base of the mouth) as current research does not show benefit for division of these types of frenulum.

What happens during the clinic appointment?

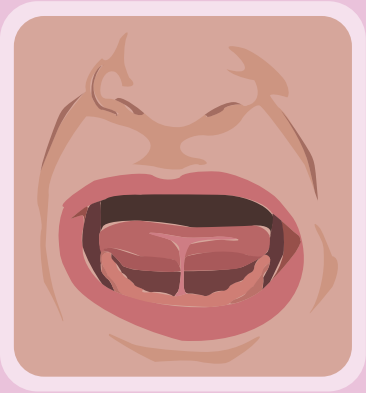
The hour-long appointment includes discussion of feeding history, current feeding issues and parental feeding goals, observation of feed, feeding support, and assessment of the frenulum. Partners and family members are also welcome, but it is important that the woman/birthing person who is primarily feeding baby attends the clinic appointment.

Things to consider:

- We do not offer anaesthetic as there are very few nerve endings in the area around the bottom of the mouth. Although baby will feel pain/discomfort you can feed baby after the procedure; feeding provides analgesia through suckling. Human milk also offers additional pain relief.

- Tongue tie division is not a 'quick fix' – babies need to adapt after the procedure, and also build strength and tone in their tongue muscles.

If a frenulotomy is not clinically needed or is declined you may decide not to have the procedure done and we can provide breast/chest feeding support, exercises suitable for use with intact frenulum, or refer to community infant feeding support if baby is no longer under midwifery care. You may also decide to access private paid-for services, however, we do not recommend these as NHS practitioners.



If the procedure is clinically needed and you offer consent, baby will be held by one of our team members during the procedure – you are welcome to stay or leave the room.

The procedure takes a couple of minutes – you can see a video here: **https://www.youtube.com/watch?v=8IQ2N0_olmU**

Benefits:

- To improve tongue function.
- To ensure effective breast/chest feeding.

Risks:

- A one in 500 chance of excessive bleeding after the procedure (while in the hospital room).
- A one in 10,000 chance of infection.
- Three percent chance of the tie reattaching.

What happens next?

If you have declined vitamin K after birth, or baby still requires oral doses of vitamin K, we ask you to stay for one hour after the appointment in case baby's wound bleeds excessively.

Before you go home

We check the wound is not bleeding; if the wound bleeds at home, feed baby immediately. If the bleeding continues after a feed, apply pressure to the wound with a clean cloth for 10 minutes. Call 999 if the bleeding continues.

Aftercare

No exercises are required and are not recommended. The wound should heal within 7-10 days. It may look yellow – this is normal.

Call 111 as soon as possible if:

- **Baby seems unwell.**
- **Wound area appears inflamed.**
- **White edges around wound area.**

Contact details:

- **Infant Feeding Specialist Midwife** (Natalie Boxall): 01623 622515, extension 2773.
- **Lime Green Team:** sfh-tr.infantfeeding@nhs.net
- **Maternity Triage:** 01623 676170.

Further sources of information

NHS Choices: www.nhs.uk/conditions
Our website: www.sfh-tr.nhs.uk/our-services/maternity/infant-feeding/

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

If you require a full list of references (if relevant) for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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