



West Middlesex University Hospital

Chelsea and Westminster Hospital **NHS**
NHS Foundation Trust

Division of your baby's tongue-tie

You have been given this leaflet because it has been identified that a tongue tie is potentially affecting your baby's feeding.

What can be done?

If the tongue tie is causing feeding problems, which cannot be remedied by help from breast feeding experts, the frenulum can be 'released' to free the tongue from the floor of the mouth - allowing sufficient movement to be restored which may improve feeding.

How is the tongue tie released?

Tongue tie division (or frenulotomy) is a very simple procedure in young babies which only takes a minute or so. The baby is wrapped securely to prevent wriggling, and the frenulum is 'snipped' with sterile, blunt-ended scissors. The frenulum has a very poor nerve and blood supply. This means that the baby feels very little pain, if any, and there is very little bleeding afterwards. Some babies do not even wake during the procedure.

Post-release

After the procedure, the baby is given straight back to the mother for a breast or bottle feed (as this is the best way, if necessary, to calm the baby and stop any bleeding). The midwife carrying out the procedure will help you with feeding and will discuss with you where you can get ongoing support if necessary.

The mouth heals very quickly, and breast milk helps to prevent any infection. There is often a small diamond-shaped white or yellow scar on the underside of the tongue lasting 1 – 7 days. This does not appear to cause any discomfort to the baby and there is no need for any dressing or treatment.

The baby may need to get used to the new way their tongue moves; for this reason, frequent feeding will ensure that the wound heals and helps to prevent the tongue tie recurring (where the wound can adhere to itself again).

In older babies it may also help to play tongue-stretching games; at your tongue tie clinic appointment you will be given after-care guidance.

Follow up

No specific follow up is necessary following the procedure. However, for most babies the tongue tie release is not an instant fix. Sometimes the procedure can reduce nipple pain immediately, but in most cases, it takes **time, patience and perseverance** for the baby to increase the strength in their tongue in order to be able to feed more effectively. Continued breastfeeding support following the release will ensure improvement is maximised. If there are any signs of infection or you think the baby is unwell, you should take the baby to your GP or attend Accident and Emergency.

How do I get an appointment?

All the following needs to be met:

- Your baby is 20 weeks or below at the Chelsea site and 6-8 weeks and below at the West Middlesex site
- You are still experiencing feeding issues despite ongoing feeding support by an appropriately trained professional who have observed the baby at the breast and assessed the feeding on at least 2 occasions
- Your baby has received IM vitamin K or 2 oral doses.

The person supporting you with feeding will need to complete a referral form. The decision on whether a tongue-tie is impacting on feeding and whether it is appropriate to offer to divide it, will be made by a specialist tongue tie practitioner.

Please note that we will only see babies with feeding difficulties.

There is currently no strong academic research to confirm or disprove that tongue tie is a cause of speech impediments

There is also currently no published evidence supporting a link between breastfeeding issues and lip tie - <https://www.tongue-tie.org.uk/position-statements/>

Useful contacts and Information

Chelsea Site

Infant feeding team: 0203 315 3017

Email: caw-tr.tonguetie@nhs.net

West Middlesex Site

Infant feeding team: 0208 321 5006

Email: TongueTie.WMUH@nhs.net

Community Midwifery Office:

020 8321 2581

- [Tongue-tie - NHS \(www.nhs.uk\)](https://www.nhs.uk)
- National Breastfeeding Helpline : 0300 100 0212
- Association of Tongue Tie Practitioners:
<https://www.tongue-tie.org.uk/help-and-information-for-parents/>
- NICE guidance: <https://www.nice.org.uk/guidance/ipg149>