

# ENT

## Tongue-tie division (Incision of frenulum of tongue)

### Introduction

To breastfeed successfully, a baby needs to latch on to both the breast tissue and nipple, and their tongue needs to cover the lower gum so the nipple is protected from damage.

Some babies with tongue-tie are not able to open their mouths wide enough to latch on to the breast properly.

If you're breastfeeding your baby and they have tongue-tie they may:

- Have difficulty attaching to the breast or staying attached for a full feed
- Feed for a long time, have a short break, then feed again
- Be unsettled and seem to be hungry all the time
- Not gain weight as quickly as they should
- Make a "clicking" sound as they feed – this can also be a sign you need support with the positioning and attachment of your baby at the breast

Tongue-tie can also sometimes cause problems for a breastfeeding mother. Problems can include:

- Sore or cracked nipples
- Low milk supply
- Mastitis (inflammation of the breast), which may keep coming back

Most breastfeeding problems, however, are not caused by tongue-tie and can be overcome with the right support.

If you're finding breastfeeding difficult, ask a midwife, health visitor or a breastfeeding specialist for help.



**By your side**

## Guidance for Parents

Tongue-tie division is done by doctors, nurses or midwives. In very young babies (those who are only a few months old), it is usually done without anaesthetic (painkilling medicine), or with a local anaesthetic that numbs the tongue. The procedure does not seem to hurt babies. This is because there are very few nerve endings in the area around the bottom of the mouth. Some babies sleep through the procedure, while others may cry a bit. A general anaesthetic is usually needed for older babies with teeth, which means they'll be unconscious throughout the procedure. The baby's head is held securely while sharp, sterile scissors with blunt ends are used to cut the skin. It only takes a few seconds, and you can start feeding your baby immediately afterwards. There should not be much bleeding. Your baby may get a white patch (ulcer) under their tongue, but this should heal in 1 to 2 days. It will not bother your baby. Research suggests most babies who have treatment for tongue-tie find breastfeeding easier afterwards.

While you are waiting, you can use any extra time in a positive way to help your child to be healthier before their surgery. This can reduce the risk of complications, support their recovery and benefit their long-term health. Here are the ways that your child and whole family can be put yourself in the best place to have your surgery.

- Eating more healthily – A healthy diet is important to a child's development, and even more important prior to surgery. Preventing iron deficiency can reduce the risk of requiring a blood transfusion and improve recovery after surgery. Iron rich diets are the best way to achieve this, although sometimes iron supplements are necessary to top up iron levels.
- Getting control of asthma – Asthma is common in childhood and if poorly controlled can cause problems during the anaesthetic. An assessment of the level of control can be made using the Asthma Control Test ([www.asthmacontroltest.com](http://www.asthmacontroltest.com)). If support or improvements are required please seek advice from your GP or practice asthma nurse.
- Creating a smoke-free home – Children who are exposed to environmental tobacco smoke are twice as likely to suffer airway or breathing problems during or after the operation. If you, or a family member, would like support stopping smoking visit the NHS website for advice and support.
- Getting the right vaccinations – It's important that children and adults have vaccinations at the right time for the best protection. If you or your child have missed a vaccine, contact your GP to catch up.
- Having a health check – If your child is over 14 years of age and has a learning disability they can have a free annual health check at your GP surgery.



• If you're finding breastfeeding difficult, ask a midwife, health visitor or a breastfeeding specialist for help.

### Health and wellbeing if you have to wait

If, for any reason, your child's condition gets worse or you are worried about one of the below please see your GP, call 111 or seek urgent medical attention.

- High temperature
- Not eating
- Not drinking
- Persistent vomiting
- Increased Pain

### Contact us

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