

What are the risks of frenotomy?

Current evidence suggests that there are no major safety concerns about cutting tongue-ties.

Possible but rare complications include:

- Bleeding -this stops very quickly
- infection very rare <0.01 %
- occasionally, a small , diamond shaped white patch may be seen under the tongue of some babies. This is normal and should resolve within two weeks of the release
- re-joining of the tongue tie
- ulceration
- damage to tissues around the cut

Sometimes feeding problems continue. Nipple pain may continue until latching is corrected and any trauma heals – this can take up to 2 weeks in some cases.

What are the benefits of frenotomy?

- Your baby will be given much greater movement of the tongue
- Breastfeeding will likely improve
- Likely better milk removal
- Greater weight gains

Available practitioners

Dr Yvonne Le Fort (away at present)

Location 50 East Coast Road, Milford

Cost \$195

Call 09 449 0005

Milk and Honey Paediatricians

Dr Abby Basket and Dr Carmen Basu

Appointments are held on Mondays

Level 3 Parnell Birthcare

20 Titoki St, Parnell

Book online www.milkhoneypaeds.com

Dr Graeme van Meer ENT Surgeon

Location 160 Gilles Ave, Epsom

Cost : Price on asking POA

Call 09 925-4071

Dr Julian Holland ENT Surgeon

Call: 09 638 6039

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Credit to: the Royal Women's Hospital,
Victoria, Australia;
Counties Manukau Health
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Tongue Tie

Information for
Postnatal Women



Women's Health
Auckland District Health Board

Welcome *Haere Mai* | Respect *Manaaki*
Together *Tūhono* | Aim High *Angamua*

What is tongue-tie?

Tongue-tie, or ankyloglossia, is a condition where the tongue can't move freely because the frenulum (the bit of skin that connects the tongue to the floor of the mouth) is too tight or too short. Tongue-tie is a condition that can run in families.

What is the impact of tongue-tie?

Tongue-tie may make it difficult for baby to latch and suckle efficiently. This may lead to:

- Nipple pain
- Poor feeding
- Poor weight gain
- Lowered milk supply

Tongue-tie may also have an effect on oral hygiene. Its effect on speech development remains uncertain.



Will my baby need treatment?

For most babies, there is no reason to treat tongue-tie urgently unless you have severe breastfeeding issues. You can take your time to get to know each other and recover from birth. The most important thing is to ensure your baby is breastfeeding well. You may need extra support to help baby latch effectively.

Your baby will be assessed and a referral made if it is recommended that they have treatment. You will be given enough information and time to make a decision.

What are the signs of a tongue-tie?

- Tongue cannot extend beyond the baby's lips
- Tongue tip may be notched or heart-shaped
- The tongue may not be able to lift up

Breastfeeding problems such as :

- nipple pain and damage
- poor milk transfer at the breast
- a misshapen nipple or compression/stripe after breastfeeding
- loses suction whilst feeding and slips off breast
- clicking sounds whilst baby is feeding
- poor weight gain
- milk leaking when feeding- poor seal

How is tongue-tie treated?

If breastfeeding is painful, if there is poor milk transfer or if there is significant tongue-tie, a procedure called a **lingual frenotomy** will be recommended.

A lingual frenotomy is a minor procedure that involves placing a finger and thumb under the baby's tongue and releasing the frenulum with a small pair of sterile scissors. In babies that are only a few weeks old, anaesthetic is not usually needed.

Your baby may be unhappy at being held still, or startled when the release is performed, but babies usually settle quickly. You will be encouraged to breastfeed straight away.

It is likely that there will be a little bit of blood where the cut is made. This is normal and rarely a problem. There is no special care required following the procedure.

If you are concerned about your baby following a tongue-tie release, please contact your lactation consultant, lead maternity carer or local doctor.