



Ankyloglossia (Tongue Tie): Improving Coordinated Care, Support, and Diagnosis for Infants and Families

FAQs for Healthcare Providers

Tongue tie, also known as ankyloglossia, is characterized by both a short or tight lingual frenulum and tongue movement is restricted. The restricted tongue movement can impact an infant's ability to feed in some circumstances. Management of tongue tie are mainly conservative, requiring no intervention beyond parental education, lactation support, and reassurance. When there are feeding issues related to the presence of tongue tie, a thorough assessment, creation of feeding plan, and appropriate follow-up is required.





The LEAP (Lactation Evaluation of Ankyloglossia Pathway) was created to address variations in care for infants and their families who are identified to have a functional tongue tie issue while at BCWs and BCCHs hospital.

Family/Patient perspectives and healthcare providers' experiential data have highlighted a need to review current processes and resources available for infants with tongue tie and their families. A multidisciplinary working group (neonatology, pediatrics, maternity, lactation consultant, occupational therapy, midwifery, dentistry, advanced practice nursing) worked together to identify gaps in information and processes.

The aim of the project is to provide more coordinated care for families as well as evidencebased tools and clinical care pathways to help guide staff in making decisions about diagnosis, treatment, and follow-up of tongue tie.



The scope of this project includes:

- · Infants <2 months of age
- · Anterior tongue tie
- In-patient BCCHs, BCCHs ER, postpartum, Neonatal Program, Lactation Service outpatient clinic
- Referral to physician/MRP/Pediatrician through LC assessment
- ? How Does Tongue Tie Affect Breastfeeding?

The tongue is very important in feeding. It needs to be able to reach past the lower gum, lower the back of the tongue during feeding, cup or shape around the nipple and move the tongue in a wave like motion from front to back. A breastfeeding assessment is very important to consider other possible causes of breastfeeding difficulties. The tongue tie may not be the main problem.

? Do All Babies Who Have a Tongue Tie (Prominent Frenulum) Need a Release (Frenotomy)? No, not all babies with a tongue tie present need to have a tongue tie release or frenotomy. There is evidence that appropriate family support, education, and follow-up are effective in establishing breastfeeding without intervention.





Who can perform a frenotomy at C&W Hospital?

Some Pediatricians at C & W perform frenotomy in hospital and/or at their community office/clinic. A referral can be made to the Pediatrician on Call – they may be able to consult while in hospital or organize outpatient assessment in a timely fashion. Reach out to **Dr. Shawn George** (sgeorge1@cw.bc.ca) if you need support to find a Pediatrician that performs frenotomy.

For more complex tongue ties, families may need to be referred to a subspeciality (for example Dentistry or ENT) for assessment in hospital. It is important to do this as an inpatient so families do not have to pay out of pocket once discharged.

? Can I Find More Information on the TABBY Assessment Tool?

Ingram et al. published 'The development and evaluation of a picture tongue assessment tool for tongue tie in breastfed babies' (2019).

TABBY Assessment Tool? Link to article: https://rdcu.be/dqHLA

Is frenotomy covered by MSP?

When frenotomy is performed by a Physician in hospital or in their clinic office the procedure is covered by MSP.

? How Do I Refer a Baby for Assessment in the Community?

If a dyad needs a breastfeeding assessment due to a possible tongue tie in the community, please refer them to the BCWs Lactation Service Breastfeeding Outpatient clinic. Families can call to book an appointment at (604) 875-3743. Please specify it is for a tongue tie assessment. Alternatively, families can speak to a lactation consultant at (604) 875-2282. Families that need general breastfeeding support should first access their local resources for timely breastfeeding support.

Where Do I Access the Materials?

The materials are in draft format and accessed through Sarah Coutts. Please contact her directly scoutts-02@cw.b.ca.

Is the LEAP Pathway and Clinical Tool Finalized?

The LEAP pathway and clinical tools are Drafts. The working group would appreciate all suggestions, criticism, comments, and feedback. All suggestions will be discussed in their monthly meeting and revisions will be made as necessary.

More Questions or Comments?

If you have questions about the process or tools being used, please contact:

Neonatal Program

Sarah Coutts <u>scoutts-02@cw.b.ca</u>
Dr. Sandesh Shivananda <u>sandesh.shivananda@cw.bc.ca</u>

Pediatrics

Dr. Shawn George sgeorge1@cw.bc.ca

Midwifery

Caitlin Frame <u>caitlin.frame@cw.bc.ca</u>
Tracy Kemp <u>tracy.kemp@phsa.ca</u>

Lactation Consultant

Trisya Soetanto <u>lisa.soetanto@cw.bc.ca</u>

Occupational Therapy

Samantha Jenkins samantha.jenkins1@cw.bc.ca