

Tongue Tie Release

How Tongue Tie Release Works

If your baby's tongue tie makes breastfeeding difficult right after birth, your healthcare team may suggest a **tongue tie release**.

During a tongue tie release, a doctor clips the frenulum with scissors. This is a surgical procedure.

There are different methods to release tongue tie. The method used here is a simple procedure. After the procedure, the tongue can move more easily. In most cases, babies can latch more easily, and the breastfeeding parent has less nipple pain.

Your health-care team will discuss the benefits and risks of tongue tie release. A doctor will only do a tongue tie release with your consent.

Tongue tie release early in life may solve breastfeeding difficulties. In babies over 6 months old, the procedure is more complicated. It usually involves general anesthetic (pain medicine). Some tongue ties may need additional consultation from doctors who specialize in more complicated tongue ties.

After Tongue Tie Release

Some healthcare providers suggest special care after a tongue tie release. There is not much evidence on whether tongue exercises are effective after this procedure.

Many healthcare providers feel that breastfeeding after tongue tie release is enough to strengthen the tongue and heal the wound.

Other Options

Not all babies with tongue tie need a tongue tie release

Sometimes a very thin tongue tie breaks by itself. You can also try to stretch your baby's frenulum with gentle massage.

Tongue Tie Release is a Personal Choice.

If you decide not to get a tongue tie release, your health-care team will support you and your baby. If your baby has feeding problems in the future, please contact your healthcare provider. They can refer you for another tongue tie assessment.

To make an appointment with a Lactation Consultant in the breastfeeding outpatient clinic, call **604-875-3743**.

Hospital Address:
4500 Oak Street
Vancouver BC V6H 3N1

For more information on
breastfeeding support:



Your Baby's Tongue Tie: What You Need to Know

Under your baby's tongue, there is a fold of tissue called a **frenulum**. It connects the tongue to the bottom of the mouth. Usually, the frenulum is near the back of the tongue.

Tongue tie, also called **ankyloglossia**, (*ank-uh-lo-GLAH-see-yah*), happens when:

- The frenulum is short or thick, or
- The frenulum is attached to the tip of the tongue.

Tongue tie may limit how the tongue moves. This can make breastfeeding difficult for you and your baby.

A tongue tie by appearance itself may not be a concern but when tongue movement is limited, an assessment may be needed.



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What Causes Tongue Tie?

We do not know what causes the tongue tie. Sometimes it can be passed on through a family.

How Does the Tongue Tie Affect Breastfeeding?

To breastfeed, your baby needs to move their tongue easily. They need to lift their tongue up to their palate, and extend it over their lower gums.

If your baby has tongue tie, sometimes they may not be able to do this.

Not all babies with a tongue tie will have feeding issues.

Your baby may:

- Have problems latching, or staying latched
- Make clicking sounds when they feed
- Gain weight slowly, even if they feed often
- Have very long feeds, because they are not able to get much milk



If you are the breastfeeding parent:

- Breastfeeding may feel painful, even with correct positions or a deeper latch
- Your nipples may be sore, damaged or misshapen during or after feeds
- Your nipples should heal within a few days. Your nurse or a Lactation Consultant can suggest a treatment for your nipples. They can also check your baby's latch.
- You may produce less milk, because your baby is not transferring enough milk from your breast

Signs of Feeding Problems

Right after a baby is born, it might be difficult to tell if a tongue tie is causing issues with breastfeeding, or if the problem is due to something else and the tongue tie is not related. Either way, follow-up might be needed to figure out the reason for the breastfeeding problems.

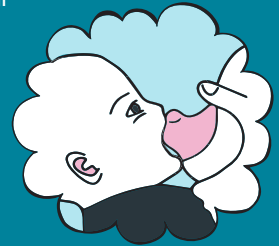
Signs of breastfeeding problems are:

- Poor milk transfer (when your baby does not fully drain your breast),
- Little weight gain, but your baby feeds often, and
- Breast refusal.

Supporting Breastfeeding

Before considering a tongue tie release, try changing your position and your baby's latch:

- Try different positions including laid-back and football, to make latching easier.
- Try to help your baby get a deeper latch by holding your breast in a 'sandwich' shape. Aim your nipple towards your baby's nose and bring baby to your breast. This helps your baby get more breast into their mouth and a deeper latch.



Maintaining Your Milk Supply

If your baby is not able to drain enough milk from your breast, your body will not know that it should make more milk. If you would like to continue feeding your baby breastmilk, you can use a breast pump to express your breastmilk and help maintain or increase your milk supply. Having a higher milk supply can often help many breastfeeding issues.

Pump at least 8 times every 24 hours including overnight. This will ensure that you have enough milk for your baby. Ask your healthcare provider for ways to maintain milk supply when expressing milk.

Diagnosing and Treating Tongue Tie

If your baby has a tongue tie, but breastfeeds well, they do not need treatment.

Trained healthcare providers can examine your baby. They will check how your baby feeds. If your baby has a tongue tie but can move their tongue well, they may not need treatment now. However, feeding problems can happen later on. Please contact your healthcare provider if you notice difficulties in the future.

If breastfeeding is very difficult for your baby, a procedure called tongue tie release or frenotomy can help.

It is important to consider other causes for breastfeeding difficulty first. If tongue tie is not the main problem, your baby does not need a tongue tie release.