

Contact details

Referrals are made by health visitors or other health professionals. Please speak to them if you require more information about the service and/or the procedure.

To **cancel** a tongue tie appointment, please call 020 8394 8158 between 9.00am and 3.00pm Monday to Friday.

For more information

Further information about breastfeeding and tongue tie can be found at the following websites (search for tongue tie once on the websites):

<http://www.unicef.org.uk>

<http://abm.me.uk/>

<http://www.lcgb.org>

<http://www.babycentre.co.uk>

<http://www.tongue-tie.org.uk> (Association of Tongue Tie Practitioners – for private clinics)

Reference The information in this guide is adapted from an information sheet provided by Mr Mervyn Griffiths, Consultant Paediatric and Neonatal Surgeon at Southampton Hospital.

Need to contact the service?

Please see the Contact details section of this leaflet.

Your experiences

CSH Surrey is committed to putting people first and continually improving services through listening and responding to feedback. To share your experiences, please:

Call: 020 8394 3846/43

Email: CSH.Feedback@nhs.net

Or write to the Head Office address below.

Large print, audio format or another language

Call 020 8394 3846/43

or email CSH.Communications@nhs.net to receive this information in large print, audio format or another language.

General enquiries

Visit www.cshsurrey.co.uk for information and contact details for all other CSH Surrey services.

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Tongue tie and breastfeeding

A guide for parents

Better healthcare together

CSH Surrey, providing NHS community nursing and therapy services in the homes, schools, clinics and hospitals in the heart of Surrey since 2006.

What is tongue tie?

Tongue tie is the name given to a fairly common condition in which a thin membrane that is present under the tongue joins the tongue to the floor of the mouth more than it should do. This restricts the movement of the tongue. Sometimes the membrane is thin and stretchy and sometimes it is quite thick. It may finish anywhere from near the base of the tongue to the very tip. It is often seen in several members of the same family.

Identifying tongue tie

The tongue tie can be seen as a membrane which goes from under the tongue to the bottom of the mouth. It is sometimes picked up by routine examinations when your baby is born. However, a tongue tie is not always apparent and may not be picked up until your baby has feeding difficulties (see below).

You may notice the tongue tie when your baby is crying and the tongue curls up and back in the mouth. It may cause a dimple in the middle of the tongue or make the tongue look heart-shaped when the baby tries to poke its tongue out toward the bottom lip.

Does tongue tie cause any problems with breastfeeding?

A tongue tie may not cause any problems; some babies are able to breastfeed perfectly and nothing needs to be done. However, research shows that around 16 per cent of babies who are experiencing problems with breastfeeding have a tongue tie.

In some babies, the tongue tie may restrict the normal movement of the tongue as the baby breastfeeds.

This can cause problems such as:

- Inability to attach on to the breast
- Painful or damaged nipples
- Inability to maintain attachment or suckle efficiently
- Very long feeds
- Slow weight gain or failure to thrive.

Dividing the tongue tie may help to resolve these problems. However, feeding difficulties can also occur because the baby is not correctly positioned and attached on the breast. It is important that this is always checked first by an experienced professional as not all tongue ties need to be separated.

In cases where babies are bottle feeding, although the tongue is not needed in the same way to obtain the milk, there are occasionally difficulties such as excessive dribbling of milk and persistent wind.

Are there any other problems caused by tongue tie?

Some tongue ties may cause problems with oral hygiene because tongue movement is so restricted that a child or adult cannot use the tongue to clear bits of food debris from between the teeth or other areas of the mouth. Speech difficulties are only rarely associated with tongue tie and early separation of the tongue tie does not guarantee such problems won't occur later in the child's life.

What can be done about tongue tie?

In some cases, very thin tongue ties may break spontaneously. If tongue tie is causing breastfeeding problems that cannot be resolved by correct positioning and therefore optimum attachment, the baby may need to have the tongue tie separated.

It is not possible to guarantee that separation of a tongue tie will solve all pre-existing breastfeeding difficulties. However, you will be given information about local breastfeeding clinics to support you with any ongoing feeding problems.

If tongue tie has been diagnosed and no feeding problems exist, but you still wish the procedure to be carried out, please contact your GP.

How are tongue ties divided?

Separation is a quick and simple procedure that is usually done as an outpatient by a medical professional who has been specifically trained. The baby will be wrapped up and the tongue tie divided with a pair of round-ended, sterile scissors. The procedure only takes a minute or two and does not require a general anaesthetic if the baby is under about six months of age. Occasionally, a baby will even sleep right through the procedure! If the baby wants to feed it can be breast (or bottle) fed straight away.

It is rare that the procedure causes infection or excessive bleeding, and this will be fully explained to you before you consent to the procedure.

How to arrange tongue tie separation

Your midwife or health visitor will arrange the appointment at one of the following clinics:

- Tattenham Health Centre, Epsom Downs
- Medwyn Centre, Dorking.

Sometimes babies with more severe cases of tongue tie are referred to hospital by their GP.