



## Tongue-tie

This fact sheet explains what a tongue-tie is, how it can impact on breastfeeding and how it can be managed.

### What is Tongue-tie?

Tongue-tie (ankyloglossia) is a condition in which the thin piece of skin under the baby's tongue (lingual frenulum) is abnormally short and may restrict the movement of the tongue tip. **Sometimes tongue-ties cause no problems at all and require no action.** The tongue-tie may interfere with your baby's ability to breastfeed efficiently and effectively. This may lead to nipple pain and trauma, poor breastmilk transfer and decrease in milk supply.

### Signs that your baby could have a tongue-tie include:

- Nipple pain or damage
- Compression or blanching of the nipple (turns pale) after a breastfeed
- Baby frequently loses suction and sucking in air while breastfeeding

- A clicking sound may be heard whilst the baby is feeding
- Poor weight gains
- Baby cannot poke their tongue out beyond their lips
- Baby cannot move their tongue sideways
- Baby's tongue tip may be notched or heart shaped
- When the tongue is extended, the tongue tip may look flat or square instead of pointed

### Assessment

A Lactation Consultant or experienced clinician will conduct an assessment of breastfeeding and the baby's tongue movement to determine whether your baby requires any further action.

If your baby does require a "tongue-tie snip" or release of the frenulum, your baby will be reviewed in the Women's and Children's clinic by the paediatric surgical team.

**We recommend not to breastfeed your baby for an hour before the appointment.**



## Tongue-tie release

Your baby needs to be less than three months of age for the release of the frenulum to be done at the clinic review without anaesthetic.

Your baby will be wrapped in a rug to secure the arms and body. We will ask you, the parent, to gently hold your baby on the bed. The clinic staff will gently secure your baby's head with their hands, while the frenulum is snipped.

The release of the tongue-tie involves placing a finger and thumb under your baby's tongue to gain a clean access to the frenulum. The frenulum is released with a small pair of sterile scissors.

Once the procedure is completed, sterile gauze is placed under the tongue and on top of the released skin. Pressure is applied by the index finger of either a parent or staff member to stop

any bleeding. A drop or two of blood at the release site is normal and is rarely a problem. Many babies may actually sleep through the procedure whilst others may be unhappy at being held still and having fingers placed in their mouths.

Following the procedure, the baby will be returned to the mother for feeding. The feed will be assessed by both the mother and the clinician.

Possible complications of the procedure are bleeding or infection, but the incidence of these occurring is extremely rare. There is no specific after care or follow-up required.

If you have any concerns following the procedure, please contact the Lactation Consultant, Child Health Nurse or General Practitioner.

## Where to get more information

### Women's and Children's Clinic

Ph: 4433 2029 (Mon–Fri)

### Child Health

Ph: 4433 9000 (Mon-Fri)

### Free after hours Help Line

13 Health 13 43 25 84

### Lactation Consultant

Ph: 4433 3753

### Australian Breastfeeding Association

Ph: 1800 686 268 – Breastfeeding Helpline

Web: [www.breastfeeding.asn.au](http://www.breastfeeding.asn.au)

#### REFERENCES:

UNICEF UK Baby Friendly Initiative. Tongue tie: Information for parents. <http://www.unicef.org.uk/BabyFriendly/Parents/Problems/Tongue-Tie/>  
[www.health.qld.gov.au/breastfeeding/](http://www.health.qld.gov.au/breastfeeding/)



This publication has been reviewed and approved by Townsville HHS health consumers.



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