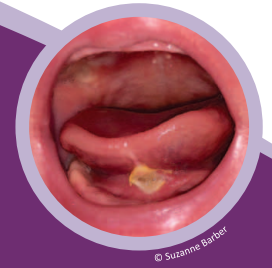


# Aftercare Advice Following Surgical Tongue-Tie Release

This factsheet has been provided by the Association of Tongue-tie Practitioners to support the discussions you have had with your tongue-tie practitioner regarding what to expect and the care of your baby following tongue-tie release.



## Wound healing

Following tongue-tie release there MAY be a diamond-shaped wound healing under the tongue. This will heal by itself and be pink in colour to begin with. Over the first few days it is normal for the wound to look white or yellow and, if your baby is jaundiced, it MAY even look a bright yellow / orange colour. The size of the wound will reduce and then disappear over the next 7-14 days. Further examples of what this can look like can be found on the ATP website

It is advisable to take extra care to thoroughly sterilise any feeding equipment being used to reduce the chance of infection. All formula feeds should be made up in accordance with the manufacturer's instructions on the packaging.

## When to be concerned?

If your baby's wound looks swollen, red and inflamed or if your baby develops a high temperature, reluctance to feed, is sleepy or irritable please make an urgent appointment with your general practitioner (GP) or speak with your out of hours service on 111 as, although very unlikely, your baby may require antibiotics. If you have any questions about the wound healing please contact your practitioner to discuss and / or email them an image of the wound.

## Further bleeding

Your practitioner will check your baby's wound after the first feed to ensure all bleeding has stopped. If your baby vomits after the procedure you may notice some pinkness in the milk / vomit. Similarly, you may notice a small streak of blackness in your baby's stool later on due to a small amount of blood that has been swallowed with the first feed after the procedure.

## What to do if bleeding starts again later when you are on your own:

- Step 1: Offer the baby the breast or bottle and feed them. This will usually stop the bleeding within a few minutes just as it did immediately after the procedure. If the baby refuses to feed then sucking on a dummy/pacifier or your clean finger will have a similar effect.
- Step 2: If the bleeding is very heavy or it does not reduce with feeding and stop within 15 minutes, then apply pressure to the wound under the tongue with one finger using a clean piece of gauze or muslin for 10 minutes. Do not apply pressure under the baby's chin as this can affect breathing.
- Step 3: If bleeding continues after this time and you are concerned, continue to apply pressure to the wound and please call 999 as it will be advisable to get your baby checked in hospital.

For more information see <https://www.tongue-tie.org.uk/wp-content/uploads/2020/12/New-bleeding-guidelines-Dec-2020.pdf>

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## Your baby's behaviour

Babies react differently after the procedure. After the first feed, many babies sleep for a period of time due to the surge of adrenaline around the time of procedure. They then may become more unsettled and may be fussy with feeding for a couple of days.

### Calming strategies

- Cuddles, skin to skin
- Frequent feedings will be comforting. It also means your baby is getting lots of practice at moving that more mobile tongue and any breast milk will help with the healing
- Singing & rocking
- Sling use
- Co-bathing
- Baby massage techniques
- Sucking on your clean finger to calm before latching

## Some babies will benefit from liquid paracetamol:

You may consider administering liquid paracetamol in accordance with the manufacturer's instructions. If you are unsure, and especially if your baby was born prematurely, please check with your healthcare provider.

If your baby is **under 8 weeks** old you will need to discuss this with your GP because, although liquid paracetamol is safe, your GP will need to work out the dose based on your baby's weight.

### Tongue exercises

Currently, there is no evidence that wound massage or stretching is effective. However, with clean fingers and short nails, there are some gentle fun exercises that you may wish to do to encourage tongue mobility in addition to your frequent feeding:

- Stick your tongue out for your baby to copy
- Run your fingers along your baby's gums to encourage sideways movements
- Encourage sucking on your finger and attempt a 'tug of war game'

## Ongoing support

All babies are different. You may notice that your baby's feeding technique improves immediately or, more likely, it may take time as you both get used to the more mobile tongue and adjust your positioning and attachment. Remember, you have been managing for a time with the tongue-tie so both you and your baby may need to relearn. If your nipples were sore before the procedure it may take time for them to heal. In some cases no notable improvement in feeding is observed. Do access the ongoing help you need: -

### Expert infant feeding support

Your tongue-tie practitioner may provide this or they will direct you to your most local services.

## Bodywork

This includes the treatment of osteopathy, cranio-sacral therapy or chiropractic. This is provided by a trained professional and can complement the effect of the tongue-tie release to help with jaw or neck tightness and associated issues.

**And finally**, there are occasions when the wound heals so well that scar tissue forms with a restriction that can have the same effect on feeding as before the procedure. If you notice a marked deterioration 4 weeks post procedure, please contact your practitioner to discuss this further.

### Your tongue-tie practitioner's details / additional information