



## Service Priorities and Programmes Electronic Presentations

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### **Breastfeeding Support to Newborn with Tongue- tie**

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#### **Keywords:**

Tongue -tie

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#### **Introduction**

Infants with Ankyloglossia, known as tongue-tie are more likely to have breastfeeding problems and makes mothers stop breastfeeding in their first week after delivery. They would be referred to Lactation Consultant (LC) for assessment and lactation support before determine the necessarily for advance treatment 'Frenotomy'. Early support by trained LCs with skills support e.g. latch modification, tongue exercises could reduce breastfeeding failure and the necessarily of invasion surgical intervention.

#### **Objectives**

1. Early identify infants with tongue- tie related breastfeeding problems.
2. Provide timely support to mothers on breastfeeding skill.
3. Empower parents with methods and skills to help infants achieving effective breastfeeding.

#### **Methodology**

The tongue-tie management program was launched since June 2015. 16 LCs had completed the specialty training program including theory and practicum on skills in using tongue function assessment tools, performing and teaching latch modification, and tongue exercises to parents. Both in-patient and out-patient could be referred to LCs by midwives, nurses or doctors from Department of O&G or PAM. Data for evaluation of the breastfeeding outcome at one month after delivery and the rate of frenotomy were collected.

#### **Result**

There were total 18 cases of tongue-tied infants had breastfeeding problem who received LC support from June to Dec 2015 and total 40 cases in Year 2016 (from Jan to Dec 2016). Exclusive breastfeeding rates at one month were 33% and 34% respectively (HA excl. BF rate 26%).

Infant who needed advance treatment 'Frenotomy' were 47% and

3 % in Year 2015 and Year 2016 respectively. A great reduction of 44% of frenotomy with similar breastfeeding outcomes were noted after mothers and infants received skills support service provided by LC team.

In conclusion, 'Frenotomy' is not the only treatment for tongue-tie infants with breastfeeding problem. A positive outcome of breastfeeding could be achieved if early identification and parents are provided with timely and appropriate skills support. Training should be provided to LCs in supporting mothers with tongue-tied infants who are in need of help.