



## Treatment at Westmead Centre for Oral Health

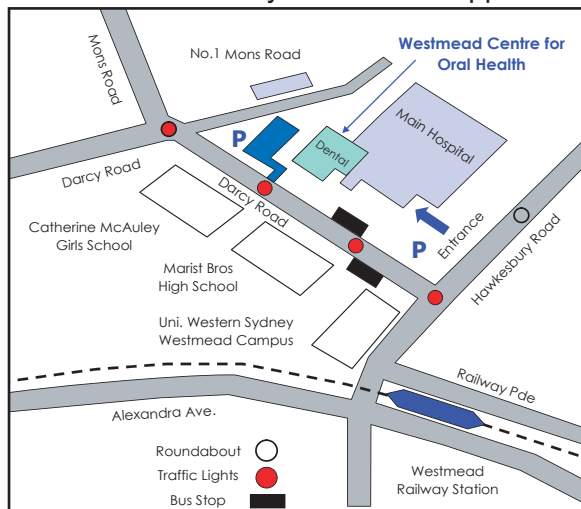
A Speech Pathologist and Paediatric Dental Specialist provide consultations for babies and children who are experiencing difficulty due to their tongue-tie. They also provide recommendations about management options or surgery and monitoring progress.

### Who can refer my child?

A written referral from a health professional is required (e.g., GP or Dentist) stating what difficulties the child is experiencing. The referral can be sent to:

**Tongue-tie Clinic, Paediatric Dentistry Level 3**  
**Westmead Centre for Oral Health**  
**PO Box 533**  
**Wentworthville NSW 2145**  
**Phone: (02) 9845 7839 Fax: (02) 9845 8306**

There is a demand for this service and waiting times apply. You will be contacted by mail with an appointment time.



**Off street parking is available on the hospital campus for a fee.**

**Carers** provide care and unpaid assistance to others. They may be family members, friends or neighbours. It is important to let health staff know if you have a carer.

#### Health care interpreter service

A free and confidential interpreter service is available 24 hours, 7 days a week. Ask our staff to arrange an interpreter for you.

**AUSLAN** is also available.

#### All WSLHD facilities are smoke free.

This means that smoking is not permitted anywhere on the grounds or inside the buildings.

**For assistance to quit call the Quitline™ on 137 848**



# Westmead Tongue - tie Clinic



## What is Tongue-tie?

Tongue-tie also known as Ankyloglossia, occurs when the thin piece of skin under the tongue (the lingual frenulum) is short and may restrict the movement of the tongue.

In most cases, tongue-tie does not cause any problems and requires no action. However, there are situations in which tongue-tie can contribute to difficulty with breastfeeding, speech, oral hygiene and mechanical tasks such as tongue movement. Some children in this situation may benefit from surgical intervention (lingual frenotomy, frenectomy or frenuloplasty) for their tongue-tie.

## How common is Tongue-tie?

Tongue-tie is uncommon but not rare, with figures reported in the literature ranging from 0.02% to 4.8% of births. Tongue-tie is more commonly found in boys (male to female ratio of 3:1) and may run in families.

## Does Tongue-tie affect breastfeeding?

In the young infant with a tongue tie, feeding issues are more obvious when you are breastfeeding. The most common issues are nipple pain and damage, difficulty attaching to the breast, frustration during feeds, decreasing milk supply, clicking sounds, poor weight gain and lengthy and frequent feeds. When bottle feeding, the baby may have problems with leaking, difficulty sucking and slow weight gain.

## Does Tongue-tie affect speech development?

All children are at risk of having a speech disorder, and current research does not suggest that children with tongue-ties are more at risk.

However, there tends to be a common pattern of errors related to tongue-tie. If there are articulation deficits they are usually with the “tongue-tip sounds” like t,d,l, and n, as the child may be having difficulty raising their tongue into this position. Tongue-ties DO NOT effect language development e.g. learning new words, putting sentences together and understanding what is said.”

## Does Tongue-tie affect how my child can move their tongue?

Each case is unique to the individual, however, possible impacts and difficulties include:

- reduced ability to lick the lips and sweep the teeth free of food
- discomfort or cuts beneath the tongue because of a tight frenulum
- playing a wind instrument
- licking an ice-cream cone

These types of symptoms may be accompanied by a sense of social embarrassment. However, not many parents have reported these kinds of social difficulties.