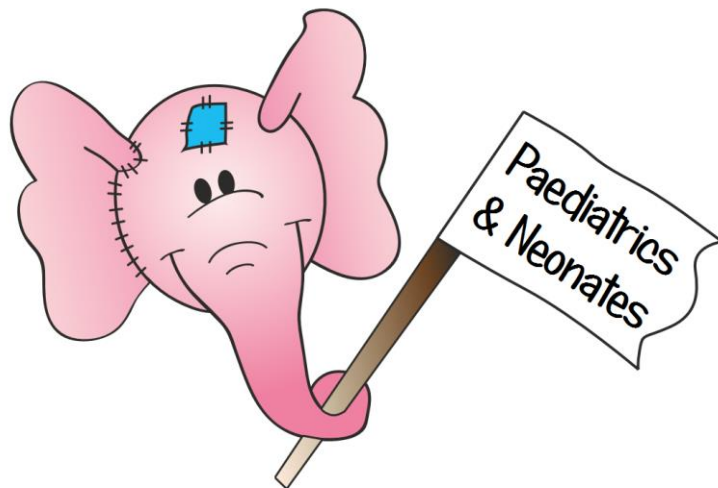


Release of tongue-tie

Children's Ward

Parent/Carer Information Leaflet



Introduction

Your child's consultant has suggested that your child has an operation for release of a tongue-tie. This leaflet explains more about the operation, the benefits and risks, and what to expect when your child comes to hospital. The medical name of this operation is a frenulotomy.

If you have any questions or concerns, please contact a member of the Children's Ward.

Why does my child need this operation?

Tongue-tie is a problem affecting some children where they have a tight piece of skin between the underside of their tongue and the bottom of their mouth. The medical name of this condition is ankyloglossia.

During a baby's development this piece of skin, known as a membrane, is there to guide the formation of their mouth. As a woman approaches the end of pregnancy, the membrane normally thins and by the time the baby is born, the membrane loosely attaches the tongue to the base of the mouth.

In children with tongue-tie, this piece of skin is unusually short and tight, restricting the tongue's movement.

This happens for a range of reasons, for example, when babies are born early. Tongue-tie occurs more in boys than girls, and where other members of the same family have had tongue-tie.

Your child may need the operation because they have limited use of their tongue and this is causing problems for them. Your child's ability to talk is influenced by a variety of factors. The presence of a tongue-tie may cause problems with this as the tongue's movement aids in the formation of words. They may also have difficulty in eating certain foods.

The operation involves cutting the tight membrane to release the tongue. It is carried out using a general anaesthetic, where your child will be asleep.

What is the benefit of the operation?

The benefit of the operation is that it should improve the movement of your child's tongue.

What are the risks?

As with any operation, there are some risks:

- Very rarely, bleeding may occur after the operation. Sometimes the wound can bleed slightly for up to 24 hours. The bleeding normally settles on its own with no further treatment or long term effects on your child.
- There is a small risk of infection. After the procedure, if your child shows any signs of infection such as a high temperature, being sick or they are generally unwell, it is important to contact your GP for a check-up.
- There are some rare risks of general anaesthetics which you can discuss with your child's anaesthetist in more detail before the operation. After the anaesthetic, some people feel sick or are sick. Your child may have a headache, sore throat or feel dizzy or lightheaded but these effects should only be temporary.

What is the alternative?

There is no alternative way to release a tongue-tie. However, it is your choice as to whether your child has this operation.

What happens before the operation?

We will give you instructions about when your child needs to stop eating and drinking before the operation, with your appointment letter.

What happens when we come for the operation?

You will have an appointment for the morning or the afternoon.

When you arrive at the Children's Ward, a nurse will ask you some questions and assess your child's:

- blood pressure
- heart rate
- breathing rate

If you have any questions or worries, please ask the nurse who is looking after your child. They are always happy to answer your questions.

The nurse will put a wrist band on each of your child's wrists and put a numbing cream on the back of their hands. This is used so that when the anaesthetist puts a cannula into their hand to give the anaesthetic, they will not feel this being put in. A cannula is a thin, plastic tube.

The surgeon will come and see you to explain the operation. If you want your child to have the operation, the nurse will ask you to sign a consent form, if you have not already signed one at a previous appointment.

The anaesthetist will come and see your child to check that they are well enough to have the operation.

The nurse will be able to give you a rough idea of the time your child will have the operation. We try to minimise delays as much as possible but sometimes these occur.

When it is time for your child's operation, one parent can go with them to the anaesthetic room and stay until they are asleep. The operation will last about 20 to 30 minutes.

What happens after the operation?

On waking, a nurse will bring your child back to you on the ward, when the recovery team are happy with them.

During the recovery period on the ward, the nursing team will assess your child and offer them something to eat and drink, when it is safe to do so.

Your child may still have a cannula in when they come back to the ward. We recommend that this is kept in until your child goes home. This can be used to give your child medicine, if they need it. For example, some people feel sick or are sick after having a general anaesthetic. If your child feels sick, please tell the nurse and we can give them some anti-sickness medicine.

Will my child be in pain?

It is usual for your child to be uncomfortable for a few days after this operation. We will give them pain relief while they are having their operation and they can have regular pain relief when they are back on the ward.

We recommend that you give them a simple painkiller such as paracetamol, if your child is able to tolerate it (always read the label; do not exceed the recommended dose). Brand names of this include Calpol, Disprol and Medinol. Please ask for advice from your pharmacist, if you need it.

When can my child go home?

Your child may need to stay in hospital for at least six to eight hours after the operation, or one night depending on the consultant's advice. One parent is welcome to stay overnight with their child. Before they can go home, your child will need to have:

- Eaten an adequate amount of food and drink
- Had no bleeding
- Passed urine
- Stopped being sick
- A normal temperature
- The doctor's approval to go home

We recommend that your child does not travel home on public transport due to the risk of infection.

How do I care for my child after their operation?

Your child's saliva may be pink just after the operation. It is a good idea for them to eat cool, soft foods for the first two to three days after the operation, to avoid catching the wound area.

If your child's wound bleeds and this does not settle, please contact the Children's Ward on 01384 244271 for advice.

When the tongue-tie has been cut, it opens into a diamond shape at the base of the tongue. This seals over quickly and then becomes a white patch which looks a bit like an ulcer. This gradually gets smaller and heals over a period of one to two weeks.

What do I do if my child becomes unwell?

If your child:

- has a high temperature
- has smelly breath
- is being sick
- is generally unwell

please contact either your GP or the Children's Ward for advice.

Follow up

If your child needs to see their consultant again, we will give you an outpatient appointment before you leave hospital.

Can I find out more?

You can find out more from the following weblink:

NHS Choices

<http://www.nhs.uk/conditions/tongue-tie/Pages/Introduction.aspx>

If you have any questions or if there is anything you do not understand about this leaflet, please contact:

Children's Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dudleygroup.nhs.uk/services-and-wards/c2-childrens-ward/>

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm să sunați la 0800 073 0510.

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