



Valerie Monterrey, CPM

814-392-2272

midwife4you.com

vmonterrey@yahoo.com

POST REVISION PICTURES



EXAMPLES OF DIFFERENT TIES



BUCCAL



LIP



TONGUE



10% of people have a tongue tie.



There is a 50/50 chance of your baby having a tie if either parent has or had a tethered oral fixture.



Boys are more likely to have tie issues than girls, indicating a gender link.

TOTs

“Tethered Oral Tissues” solved

ASSESSMENT AND RELEASE OF BARRIERS

- **Tongue Ties** - Tongue, or Tethered Oral Tissues is a short, thick lingual frenulum that restricts the mobility of the tongue and is nearly always associated with a lip tie. Often it restricts the tongue from extending beyond the lower gum line during suckling. This can significantly impact feeding and may cause the baby to compensate by making abnormal or strained tongue and jaw movements during breast or bottle feeding.
- **Lip Ties** - It is necessary for the lips to form an adequate seal on the breast to aid in thorough milk extraction. The lip(s) with restriction may not be able to latch well enough to generate the negative pressure needed for breastfeeding. Providers can release both (or all) tethered oral tissues to reduce or resolve compensatory muscle use.
- **Cheek Ties:** A buccal tie or a cheek tie, as they are often to, are abnormal mucosal tethers extending from the cheeks to the gingiva. These tethers occasionally interfere with breast or bottle feeding and may eventually contribute to gum recession. Fortunately, buccal ties are easily released the same way as tongue and lip ties.

How do you know if your child needs an assessment?

Answer yes to any of the following:

- Creased, Cracked or blanching nipples
- Painful latching of infant onto breast
- Poor or incomplete breast drainage
- Gumming or chewing of the nipples
- Infant unable to achieve a successful, tight latch
- Falls to sleep while attempting to nurse
- Unable to keep a pacifier in mouth
- Slides off the breast when attempting to latch
- Short sleep episodes (feeding every 1-2 hours)
- Waking up congested in the morning
- Only sleeping when held upright position, in car
- Apnea- snoring, heavy noisy breathing
- Gagging when attempting to introduce solid foods
- Poor weight gain
- Reflux

WHAT TO EXPECT DURING ASSESSMENT

- Infant is placed in moms lap or on table with mom helping
- A head lamp is used for clear vision
- A sweep made around upper and lower jaw and under tongue
- Baby's weight is compared to birth weight
- A short questionnaire is filled out
- Recommendation of practitioner and permission to move forward for any ties released that may be suggested

WHAT TO EXPECT DURING THE RELEASE

- Sterile technique is used
- A numbing agent may be used
- A hemostat solution is used to retard bleeding
- Gauze
- Instructions for post care given

<https://www.drghaheri.com/>

<https://www.ncbi.nlm.nih.gov/pubmed/23523198>

<http://www.firstfoodforbaby.com/tongue-lip--buccal-ties.html>

<https://kiddsteeth.com/articles.php>

<https://www.youtube.com/watch?v=llmAhDoKno>

<https://www.youtube.com/watch?v=3w51OnU-468>