



Hôpital général juif
Jewish General Hospital

Herzl Family Practice Center, Goldfarb Breastfeeding Clinic

The Frenotomy Procedure

The procedure takes place in the same exam room where you are seen for your breastfeeding consultation.

1) Before the procedure:

We recommend that you place your baby skin-to-skin to encourage baby to suckle at the breast. Studies show that this can help calm the baby and reduce possible pain after the procedure. We also offer your baby some acetaminophen to help with post-procedure pain. We do not use local anesthetic because of risks to the baby and the fact that the procedure is very quick (few seconds). We may ask you to bring in some frozen breastmilk to offer the baby after the procedure. We will teach you how to perform exercises in the baby's mouth which you will do after the frenotomy (starting the evening of the same day as the procedure for about 2-3 weeks). We will also send you a video. We will answer all your questions.

2) During the procedure:

The physician will perform the frenotomy with the help of a Lactation Consultant. Your baby will be swaddled during the procedure for safety and to avoid arms movements. Sterile scissors will be used. The procedure will take a few seconds only and is done with the parents present. If you wish, you can speak or sing to your baby during the procedure or play some favorite music.

3) After the procedure:

The breast is offered immediately after the procedure as breastfeeding and/or breastmilk can help stop any bleeding and calm the baby. Breastmilk can help the frenotomy site to heal well because of its antibacterial properties. It might take a minute or two for baby to settle down and start breastfeeding. Parents can bring expressed breastmilk in case baby is not able to latch after the procedure. A few drops of breastmilk can be given to the baby with a syringe in this case. The physician and/or lactation consultation will stay with you to help your baby breastfeed after the procedure.

Some parents experience less nipple pain or notice a better latch right away. For others, it may take longer. Some babies latch on immediately after the procedure while others may take longer.

The full benefits of the procedure may take up to 2-3 weeks.

The physician will examine your baby and make sure there is no more bleeding before you leave the Clinic.

4) The following hours:

The frenotomy cut or incision is unlikely to bleed again at home. In some cases, there may be a small amount of bleeding after the post-frenotomy exercises or at other times. It is not dangerous. If there is bleeding:

- Offer your baby the breast. This is a good way to stop the bleeding.
- If this doesn't help, apply pressure with a clean cotton compress under the tongue, above the upper lip like a mustache or under the upper lip (depending on where the frenotomy was done). Then offer the breast again.
- You can put a few drops of breastmilk on the wound.
- During the 1st 24 hours, avoid putting objects in baby's mouth, especially near where the frenotomy was done, except the breast and other tools needed for supplementation.

5) The following few days:

Some babies will not have much pain after a frenotomy, while others may have more discomfort or pain. For the next 2-3 days, try to soothe baby in the following ways:

- Skin-to-skin contact: Remove baby's clothes except for the diaper, and place baby in direct skin-to-skin contact with a parent's chest for 15 minutes or more. This can help reduce baby's discomfort, pain and stress.
- Acetaminophen (for infants): At _____ (time), your baby received _____ ml of acetaminophen. If baby is fussy or seems in pain in the next 24-48 hours, you may give the same dose of acetaminophen every 6 hours as needed.
- Cold breastmilk compresses: You can freeze cotton compresses soaked in breastmilk and apply them to the frenotomy site before baby feeds or before you perform the post-frenotomy exercises. The compress can be rolled onto your finger or onto a Q-tip and touched to the frenotomy site until it thaws.
- You can take a bath with the baby. The skin-to-skin contact and warm water can soothe baby and help with latch.
- Gentle bouncing movements with the baby (such as with a yoga ball or slow squats) can help calm baby and help with latch.

Your baby may have some black stool after the frenotomy due to swallowing of blood during the procedure. This is not dangerous.

If your baby refuses to latch after the procedure, do not force. Continue to offer the breast in a gentle manner, in the same way and schedule as before the procedure. You can place baby skin-to-skin during and/or in between feeds to help. You can try offering some expressed breastmilk and try the breast again. If needed, expressed milk can be offered using a cup, tube with the finger or at the breast (lactation device), or a bottle using paced feeding.

The frenotomy site will look like a lozenge until the tongue and will turn white, beige and/or grey after the procedure. This will disappear after a few days.

Your baby could drool more due to the process of wound healing after the frenotomy. This is temporary and not dangerous.

It is important to breastfeed your baby as often as possible after the procedure to help baby learn how to move the tongue and/or lips in a different way. The baby has to relearn how to move the tongue and/or lips after the procedure. It may take a few days before you feel a difference in your baby's latch or nipple pain.

Please call the Breastfeeding clinic if you have any concerns or questions.

6) Your next appointment:

The next appointment will be a short visit a few days after the frenotomy to see how baby is doing since the procedure and to review the post-frenotomy exercises. Another appointment will be scheduled 1-2 weeks after that and will be slightly longer, in order to evaluate how breastfeeding is going.

The frenotomy is not a miracle procedure. It helps correct an anatomic restriction in order to improve the movement of the tongue and/or lip. Baby needs to practice breastfeeding in order to relearn how to suck and latch effectively. The exercises that we will show you to do with baby after the procedure will also help baby relearn how to suck well.

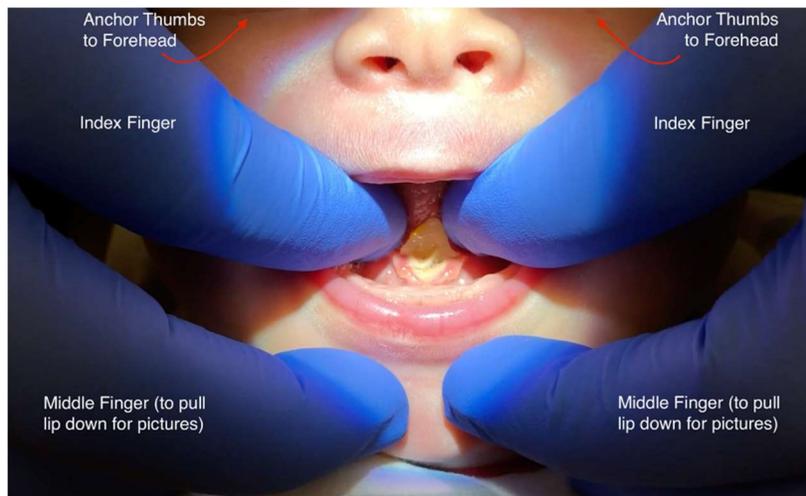
We may refer baby for bodywork (osteopathy, chiropractic or physiotherapy) after the procedure. These professionals can help release musculoskeletal tension which baby may have due to birth issues or muscle compensations related to the restrictive frenulum(s). Pediatric occupational therapists are also useful in some cases to help babies relearn how to move the tongue effectively.

Post-frenotomy exercises:

The process of healing can take up to 3 weeks. There is a possibility that the tongue-tie can reattach during this time. Therefore, active management with specific exercises for baby is helpful to prevent this. You can also continue any pre-frenotomy exercises that you may have done before the procedure.

You can do the following post-frenotomy exercises starting the evening after the procedure, for about 2-3 weeks. Wash your hands and nails with soap before doing the exercises. You don't have to wear gloves.

- a) Stretching of frenotomy site under the tongue: You can do this 3-4 times a day. Place 1 finger on each side of the frenotomy site. Press and lift up towards the tongue. You should see the lozenge or diamond shape below the tongue. Maintain a gentle pressure for 3-5 seconds then release. Avoid directly massaging or pressing on the frenotomy site as this can be painful and cause an oral aversion in the baby.



- b) Stretching under the lip: If a labial frenotomy was done, use 2 fingertips to lift the upper lip towards the nose and maintain for 3-5 seconds. You will see the labial frenotomy site stretch vertically.
- c) With one finger, rub on the gums on either side so baby can follow your finger with the tongue, to the right and the left. You can do this exercise on the upper and lower gums.
- d) Place your finger on baby's tongue and get baby to suck on your finger. Then, slowly try to pull your finger out while stretching baby's tongue. This will help baby stick the tongue out while sucking.

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