

Policy title	Tongue-tie: Division of ankyloglossia (tongue tie) for infant feeding and speech problems v2.1
Policy position	Criteria Based Access
Date of Forum recommendation	March 2021

For infants with feeding problems:

Division of the frenulum should only be conducted:

- 1. When under 3 months of age, AND
- 2. Where there are perceived breastfeeding difficulties, AND
- 3. As an outpatient procedure AND
- 4. It is usually expected that the patient will have been assessed by a health visitor or midwife with specialist expertise in breast feeding before first.

For older children or adults with speech problems:

Surgery should only be considered for management of speech problems in adults or children with speech problems when:

- 1. The child is at least 5 years of age.
- 2. Speech is significantly and noticeably affected.
- 3. The speech sounds affected are consistent with tongue tie.
- 4. A Speech and Language Therapist has assessed the patient, and states that:
 - a. the speech problem is highly likely to be due to the tongue tie
 - b. the child is unlikely to grow out of the speech problem
 - c. conservative management e.g. speech therapy is unlikely to be successful
- 5. Other causes of speech abnormalities have been ruled out, for example audiological assessment and an assessment for a sub-mucous cleft.

- 1. Ann W Kummer. (2005) Ankyloglossia: To Clip or Not to Clip? That's the Question. The ASHA Leader, Vol. 10, 6-30
- 2. National Institute for Health and Clinical Excellence. (2005) Interventional Procedure Guidance 149: Division of ankyloglossia (tongue-tie) for breastfeeding
- 3. O'Shea JE et al. (2017) Frenotomy for tongue-tie in newborn infants. Cochrane Database of Systematic Reviews
- 4. S Chinnadurai et al. (2015). Treatment of Ankyloglossia for Reasons Other Than Breastfeeding: A Systematic Review, Pediatrics, Volume 135.
- 5. Visconti A et al. (2021) A systematic review: The effects of frenotomy on breastfeeding and speech in children with ankyloglossia. Int J Speech Lang Pathol.

NOTE:

- This policy will be reviewed in the light of new evidence or new national guidance e.g. from NICE
- Where a patient does not meet the policy criteria or the intervention is not normally funded by the NHS, an application for clinical exceptionality can be considered via the ICB's Individual Funding Request (IFR) Policy and Process

Clinical coding:

OPCS-4 code(s):

F262-268

Policy update record	
v2.0 22.6.2021 BLMK 3CF meeting	Bedfordshire, Hertfordshire, West Essex and BLMK Priorities Forum Policy update. No change in content.

Key words: Tongue tie, ankyloglossia, frenulotomy, frenulum