A Collaborative Team Approach in Tongue–Tie Management for Newborn with Breastfeeding Problem.
Yip Mo King
Department of Obstetric and Gynaecology, Queen Mary Hospital

Keywords:
Tongue-Tie management
Breastfeeding problem

Introduction
Tongue-tie, occurs in approximately 3.2-4.8% of consecutive term infants at birth. It restricts the mobility of the tongue resulting in nipple injured, poor milk transfer from breasts and poor weight gain. Infants are more likely to stop breastfeeding in their first week if they have a tongue tie. Early support by lactation consultant, pediatrician and pediatric surgeon for this group of newborns e.g. latch modification, frenotomy could reduce breastfeeding failure and prevent related complications. However, collaborative care across department in tongue-tie management is not available in HA hospitals of Hong Kong.

Objectives
To provide one stop service and specialty follow up care to mothers and infants and improve mothers satisfaction level to breastfeeding supportive service. To provide specialty lactation support, assessment, management and treatment for mothers and infants with tongue-tie related feeding problems to improve the breastfeeding rate and exclusive breastfeeding rate at one month

Methodology
A one stop service was launched since June 2015 for newborns with tongue-tie related breastfeeding problem. Infants with breastfeeding problem would be referred to Lactation Consultant for lactation support and assessment. Infant with significant tongue-tie that need advance treatment would be referred to Pediatric surgeon through pediatrician for frenotomy. The program was evaluated for its effectiveness by reviewing their feeding mode at 1 month after delivery. Survey for evaluate mother’s satisfaction level to this service in tongue-tie management would be conduct in 1Q of 2016.

Result
From June to December of 2016, there were 18 number of cases had received supportive care provided by the team. There were 7 (39%) number of infants had frenotomy done while 11(61%) number of infants received Latch modification only. Among the group of infant with frenotomy, 84% were still breastfeeding at 1 month
with 29% were exclusive breastfeed, 57% were mixed feeding and 14% were bottle feed. Among the group of infant received Latch modification only, 100% were still breastfeeding at 1 month with 36% were exclusive breastfeed and 64% on mixed feeding. One stop multidisciplinary approach collaborative care service for tongue-tie newborn provides optimal care and timely management which bring about successful and enjoyable breastfeeding.