

Adeno-Tonsillectomy (child)

ENT18 Lite - Expires end of January 2024



This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

© EIDO Systems International Limited. The operation and treatment information in this document is published under license from EIDO Systems International and is protected by copyright laws. Other than for your personal, non-commercial use, you may not copy, print out, download or otherwise reproduce any of the information.

eidohealthcare.com



What are the adenoids and tonsils?

The adenoids and tonsils are part of a group of lymphoid tissues (like the glands in the neck) that help to fight off infection. The adenoids and tonsils enlarge naturally in children at around the age of 3 and usually shrink away again by the age of 7. The enlargement happens because children are exposed to a lot of new infections at this age and have many colds.

What are the benefits of surgery?

Your child should get relief from a blocked or runny nose, and may get a better quality of sleep.

If your child's adenoids are large, removing them will allow air to pass through your child's nose while they are talking and eating. This may improve the quality of your child's voice.

Tonsillitis happens if the tonsils become infected. This causes pain, fever and difficulty swallowing and can make your child feel unwell.

Are there any alternatives to surgery?

Your doctor may be able to give you steroid nasal sprays to improve your child's symptoms of a blocked nose and reduce the size of the adenoids.

There are no other treatments for enlarged adenoids other than to leave them alone and wait for the problem to get better.

Surgery is the only dependable way to stop tonsillitis that keeps on coming back.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes about 30 minutes.

Your surgeon will remove the adenoids through your child's mouth.

Your surgeon will perform the tonsillectomy through your child's mouth using one of the following techniques.

- Cold dissection technique – Your surgeon will use a steel instrument to peel or cut the tonsil away from the layer of muscle underneath it
- Diathermy technique – Your surgeon will use a special instrument that uses heat to stop the bleeding

- Coblation technique – Your surgeon will use an instrument that uses radiofrequency energy to dissolve the tonsil

What can I do to prepare my child for the operation?

Your child should try to maintain a healthy weight. They will have a higher risk of developing complications if they are overweight. If your child is having surgery to improve their breathing during sleep, it is less likely to be successful.

What complications can happen?

General complications of any operation

- Bleeding
- Infection of the surgical site (wound)
- Allergic reaction to the equipment, materials or medication

Specific complications of this operation

- Adenoid tissue regrowing
- Small pieces of the tonsil may be left behind
- Lingual tonsillitis
- Earache
- Stiff jaw

Consequences of this procedure

- Pain

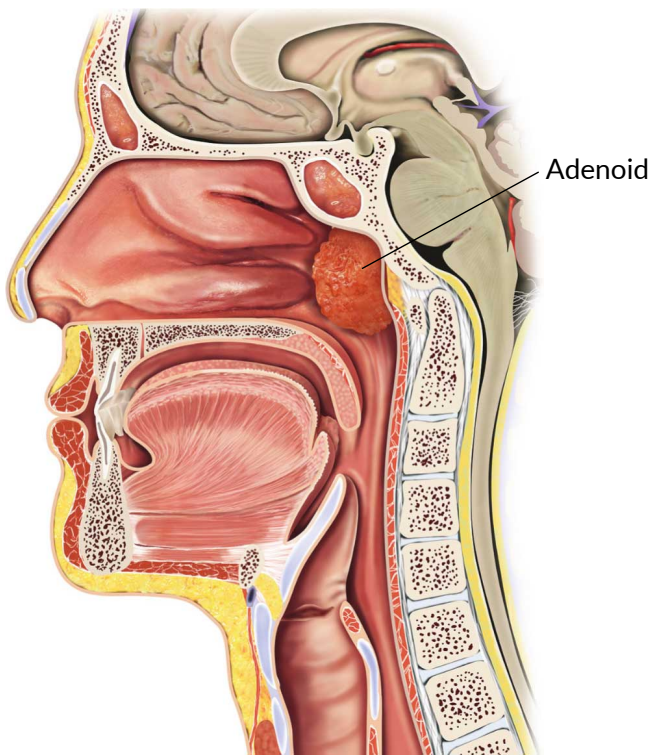
How soon will my child recover?

They should be able to go home the same day or the day after.

It is important your child eats normal food that needs to be chewed and swallowed. This keeps the muscles at the back of the throat moving.

Your child will need to stay off school and away from groups of people for 2 weeks. This is to help prevent throat infections while your child's throat is still healing.

Most children make a full recovery and return to normal activities.



An enlarged adenoid

Summary

For those children who have a very blocked nose or disturbed sleep, an operation should give them a better quality of life. Surgery is the only dependable way to stop tonsillitis that keeps on coming back and the resulting pain, fever and difficulty swallowing.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgements

Reviewer

Matthew Campbell (MBBS, FRACS)

Illustrators

Medical Illustration Copyright ©
Medical-Artist.com

Medical Illustration Copyright © Nucleus Medical
Art. All rights reserved. www.nucleusinc.com