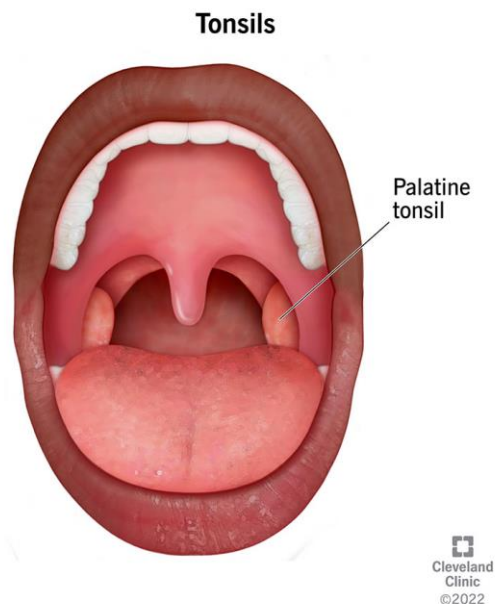


Patient Information Leaflets: Tonsillectomy

What are tonsils?

Tonsils are glands (lymphoid tissue) at the back of the throat, that fight infections.

Tonsillitis is inflammation of the tonsil tissues. This can be caused from a viral (most often) or bacterial infection.



Picture 1. Anatomy of tonsils

When you might need a tonsillectomy?

Tonsillectomy is a surgical procedure for removing tonsils.

The indications for tonsillectomy are:

- **Recurrent tonsillitis**
 - 7 or more episodes in 1 year (requiring antibiotics)
- **Obstructive sleep apnoea**
- 2 episodes of **peritonsillar abscess** (Quinsy)
- **Suspicious** looking, asymmetry or part of the Head and Neck procedures

It may not be required to remove the tonsils as the problem may resolve on its own. In children, some may grow out of the problem in a year or two. These episodes of tonsillitis can be managed with painkillers.



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At the end of the day, it is a shared-decision making process between the patient and the medical practitioners. You can still have sore throat after tonsillectomy due to other infection such as a pharyngitis (inflammation of the throat).

Before a tonsillectomy

You will need to attend the hospital on the day of surgery. Please inform staff member if your child or the patient was recently treated for a cold or was given antibiotics recently. If the patient was unwell recently, the operation may not go ahead as general anaesthetic can cause the lungs to be reactive after a recent illness and can be dangerous to proceed.

Your child or the patient will need to fast for the procedure. Fasting means no eating or drinking before the procedure, usually from midnight on the day of surgery. You will be advised when to start fasting before the operation.

How is the tonsillectomy performed?

Tonsillectomy is performed by **shaving the tonsil tissue** or more rarely **removing the tonsils** through the mouth. This will be done under general anaesthetic.

The procedure will take about **30 minutes** but the patient will be in the operating theatre about an hour. One parent is allowed to follow the child until they are asleep.

Children are kept overnight; Adults depending on distance from the nearest hospital.

What is the recovery period?

The recovery period is usually **2 weeks**, but full recovery is expected at 3 weeks.

The patient **recovers at home**.

You must **not travel** abroad or to remote area within 3 weeks after the operation.

An adult must supervise the child at all times during the recovery period.

You or your child will be **off school/work for 2 weeks**.

No strenuous exercise.

We recommend **staying within 1 hour from a hospital with an Emergency Department**.

In case this is not possible, will advise to relocate temporarily. This is due to the unpredictable nature of posttonsillectomy bleed.

What are the risks of tonsillectomy?

- **Pain** – pain is very common after tonsillectomy. Pain can **become worse at day 5-10**, due to the healing process. Regular **analgesia** is advised for **7 days** after surgery. Pain in the ears is common.
- **Dental damage** – Metal instruments are used to take out the tonsils. There is a small risk of damage to the lips, teeth or gums. Please inform the doctor if your child has a loose tooth.

- **Infection**
- **Halitosis (foul-smelling breath)**
- **Bleeding** – bleeding can occur during or after the surgery usually in the first 2 weeks but can rarely occur at 3-4 weeks. The **risk of bleeding is 7%**. Some patients can have multiple bleeds after the surgery, although uncommon. If the patient has any bleed, this is an **emergency** and you will need to attend **immediately the nearest emergency department**. There has been reported **death** (7 per 100,000) after tonsillectomy. Some children may need blood transfusion, and very rare radiological embolization or carotid artery (blood vessel in the neck) ligation due to the bleeding.
Some bleeding can be due to underlying bleeding disorder that has not been diagnosed and the tonsillectomy is the first surgery the patient may have.
- **Re-growth of tonsillar tissue** is possible after shaving the tonsils. Intervention may be required only if it is troublesome.
- **General anaesthetic risk** – every anaesthetic carries a risk. Some patients may feel sick or vomit after the operation. Other side effects are headaches, sore throat, dizziness or reaction to drugs. These side effects are usually temporary.

What to expect after tonsillectomy?

The throat will be **sore**; this is to be expected. It is important to encourage eating and drink after the surgery; this will help with the healing process and reduce the risk of bleeding.

The patient might have **ear pain** and this is common. This does not mean that the patient has an ear infection.

The **tonsil bed** will have a **grey or yellowish discolouration** during the two weeks after surgery. This is normal and indicates healing. This does not mean an infection.



Picture 2. Normal looking throat post-surgery



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Deciding about Surgery

The table below compares the pros and cons of non-surgical management versus tonsillectomy

If you have other concerns in regards to making the right decision, we encourage to discuss this with the medical practitioners.

Things to think about	Non-surgical management (such as painkillers and antibiotics)	Surgery (tonsillectomy)
Inconvenience	Your child or the patient may keep needing time off school or work. You may need to keep visiting the GP	Most patients will need about 10-14 days off school or work
Pain	Your child or the patient might get more sore throats because of tonsillitis	The patient will have 7-10 days of bad pain after surgery
Short-term risks	Your child or the patient might have mild side effects from antibiotics such as abdominal pain or diarrhoea	See above risk of surgery
Long-term risks	Regular use of antibiotics may mean they stop working so well	Scarring in throat, regrowth of some tonsillar tissue
Long-term outcomes	Tonsillitis may settle down without surgery	Reduces the risk of tonsillitis but you can still have some sore throat due to other viruses

Seek Immediate Medical Attention at the nearest Emergency Department if:

- Any **fresh bleeding** from the **mouth or throat**
- Vomiting blood or large blood clots
- Persistent spitting of blood-stained saliva
- **Difficulty breathing**
- Inability to swallow fluids leading to **dehydration**
- Severe **uncontrolled pain** despite prescribed medication
- Persistent **vomiting** preventing oral intake
- **Fever** associated with increasing throat pain, neck swelling or signs of systemic illness

Patients are reminded that bleeding after tonsillectomy should never be ignored, even if it appears minor.