

TONSILLECTOMY

Why do we do it?

The tonsils are a collection of lymphoid tissue situated in the oral cavity. There are two tonsils in the back of the mouth, one on each side of the uvula.

Tonsillectomy is recommended when there is:

- Chronic tonsillitis, recurrent acute tonsillitis, abscesses
- Snoring, obstructive sleep apnoea

How is it done?

Nonsteroidal anti-inflammatory medications (such as ibuprofen, Advil, and others) should not be taken within seven days of the date of surgery. Tonsillectomy is performed under a general anaesthesia.

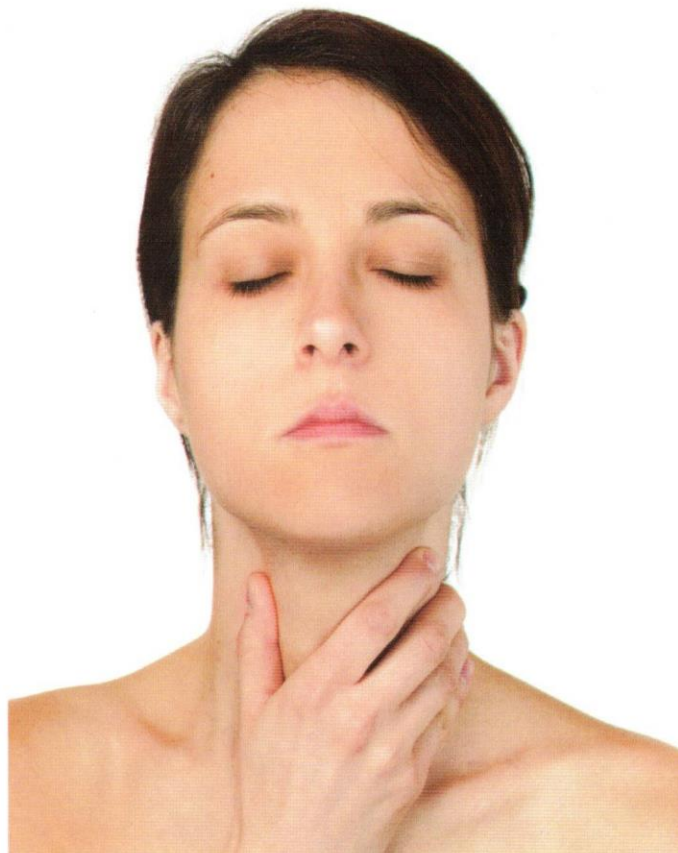
The tonsils are removed through the mouth (totally or partially depending on what was discussed with the surgeon). Bleeding is controlled with an electric cauterising unit.

After tonsillectomy surgery

- After surgery, the patient will be taken to the recovery room where a nurse will monitor him/her. (Children: the parents will probably be invited into the recovery room as the child becomes aware of their surroundings and starts looking for you. You should be able to go home the same day (children: after at least six hours of monitoring) or the next day (some children and all adults)
- When the patient arrives home from the surgical facility, they should go to bed and rest with the head elevated on two to three pillows. Keeping the head elevated above the heart minimises edema and swelling
- It is best to eat a light, soft, and cool diet as tolerated once the patient has recovered fully from the anaesthetic. Avoid hot liquids for several days. Even though the patient may be hungry immediately after surgery, it is best to feed slowly to prevent postoperative nausea and vomiting. Occasionally, the patient may

vomit one or two times immediately after surgery. However, if vomiting persists, your doctor may prescribe medication to settle the stomach

- Pain (throat pain and ear pain) will be controlled with paracetamol for children or other drugs for adults. Antibiotics may be prescribed. You should not take any other medications, either prescribed or over-the-counter, unless you have discussed it with your doctor, especially nonsteroidal anti-inflammatory medications
- You may notice white patches in the back of the throat where the tonsils were formerly located, this is the normal healing process
- Resting is recommended for a week. After three weeks, exercise and swimming can usually be resumed



- It is not unusual to have nasal stuffiness following surgery. The nasal stuffiness may last for several weeks as swelling decreases. Saline nose drops can be used to help dissolve any clots. You may notice persistent or even louder snoring for several days. A temporary change in voice is common following surgery, and will usually return to normal after several months
- Bleeding occurs in 1%-3% of patients after a tonsillectomy. Although it may occur at any time, it usually occurs five to 10 days after the surgery. Dehydration and excessive activity increases the chances of postoperative bleeding. If bleeding occurs, the patient should try to remain calm and relaxed. Rinse the mouth out with cold water and rest with the head elevated. If the bleeding continues, call the doctor

Are there any risks?

Short term:

- Bleeding. Rarely, it may require a trip back to the operating room for cauterisation of the bleeding area under general anaesthesia. In very rare situations there may be a need for blood products or a blood transfusion
- Due to the use of surgical instruments, wounds on the lips, tongue or mouth, or tooth mobility could be found
- Infection, dehydration, prolonged pain, and/or impaired healing that could lead to the necessity for hospital admission for fluids and/or pain control

Longer term:

- Failure to resolve every episode of sore throat, snoring
- A permanent change in voice or nasal regurgitation (rare)