

# Tonsillectomy and Adenoidectomy

## Introduction

A tonsillectomy and possible adenoidectomy is a very common and safe operation. It is the second most common surgery performed on children; however, sometimes it is necessary for adults as well. Tonsillectomy and adenoidectomy, or T&A, can help to prevent frequent sore throats and may also help decrease the chances of middle ear infections. A tonsillectomy and adenoidectomy are not always performed together; only one or the other may be needed.

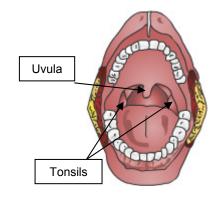
This reference summary will help you to better understand what a tonsillectomy and adenoidectomy is and how it could help you or someone you love.

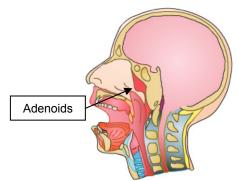
## Anatomy

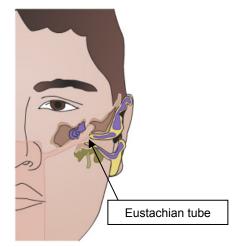
The tonsils are glands located on both sides of the back of the mouth. The tonsils are part of the immune system and help fight infections.

The adenoids are located behind the soft palate. The soft palate is the back, muscular part of the roof of the mouth. The adenoids are also part of the immune system and help fight infections. The uvula is also located in the back of the mouth. It dangles down from the middle of the soft palate.

Behind the uvula, there is a passageway that connects the nose to the mouth. The Eustachian tubes connect the middle ear to the back of the nose. These tubes prevent the pressure inside the ear from changing too much.







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Swelling and inflammation around the adenoids can cause blockage of the Eustachian tubes. If the Eustachian tubes get clogged, the middle ear could fill up with pus and cause middle ear infections or inflammation. This can sometimes lead to hearing loss.

#### Symptoms & Causes

The most common reason that a tonsillectomy is performed is due to repeated tonsillitis.

Tonsillitis is infection in the throat that occurs in the tonsils. Tonsillitis usually causes a severe sore throat and fever. Swallowing becomes painful and difficult.

Tonsillitis is considered to be chronic or dangerous if there have been:

- 5 or more episodes in 1 year
- 3 or more episodes per year for 2 years
- Episodes that do not respond to antibiotics

The tonsils may get large enough to touch each other. When this happens, it is known as "kissing tonsils."

Another reason for a tonsillectomy is an abscess surrounding the tonsils. An abscess is a pus-filled sac. This rarely happens, but is a reason for a tonsillectomy.

Repeated middle ear infections in young children, due to swollen adenoids and clogged Eustachian tubes, can lead to hearing loss. Sometimes hearing loss can cause speech problems. An adenoidectomy may be performed to help prevent middle ear infections.

Enlarged tonsils or adenoids can lead to difficulty breathing while sleeping. This condition is known as obstructive sleep apnea or OSA. Taking the tonsils and adenoids help relieve the obstruction and cure OSA.

## **Diagnosis & Treatment**

Treatment of tonsillitis and ear infections usually requires antibiotics. If left untreated, tonsillitis could damage other organs in the body, such as the heart or kidneys. A tonsillectomy is an operation aimed at taking out the tonsils; an adenoidectomy aims at taking out the adenoids. The combined operation is called a T&A. The surgeon may decide to do one or the other, or both.

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If antibiotics do not work to eliminate tonsillitis or ear infection, a tonsillectomy and possible adenoidectomy may be performed. These operations help to reduce the number of throat and middle ear infections. Before a T&A, the doctor may request a blood test to find out:

- whether the blood is able to clot correctly
- if the platelet count is normal

Blood tests can help the doctor make sure that there will not be too much bleeding after surgery. The mouth area tends to bleed more than other areas of the body; if blood cannot clot properly or if the platelet count is low, there is a higher risk of bleeding too much.

In cases of obstructive sleep apnea or OSA, the doctor is able to diagnose the problem on the basis of:

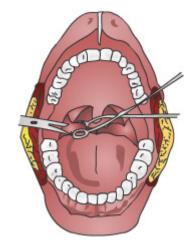
- A history of difficulty breathing while sleeping and
- A physical exam that shows enlarged tonsils and adenoids.

## Procedure

A T&A is performed under general anesthesia, which means the patient is asleep during surgery.

The surgeon removes the tonsils and possibly the adenoids in one of several ways. If you need a T&A, your surgeon can discuss which method he or she will use; one is not better than another. When the surgeon is done, bleeding is stopped and the patient is taken to the recovery area.

After surgery, in the recovery area, the patient is allowed to wake up. He or she is given medications to reduce pain and swelling. When the patient has recovered from surgery, he or she is able to go home. It is important that someone else drives the patient home because it would be unsafe for the patient to drive.



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## **Risks & Complications**

Risks and complications include those related to anesthesia and those related to any type of surgery. Your anesthesiologist or nurse anesthetist will discuss the risks of anesthesia with you in greater detail. Risks specific to a T&A operation include bleeding and infections, however, these are very rare. The doctor should be called immediately if:

- there is bright red bleeding for more than 1-2 minutes
- the patient has a fever of 101°F or higher
- there is continuous pain that medicine does not get rid of

## After The Surgery

T&A is a very well tolerated operation. A sore throat is normal after the operation.

It is important to watch for bleeding after a tonsillectomy. If the patient swallows a lot, the surgical site may be bleeding; it is important to check inside the mouth often for the first few days.

It is easiest to swallow liquids and cold desserts at first. It is important to drink a lot, even if it hurts to swallow because otherwise, the patient could become dehydrated.

Children will usually have a sore throat for about 1 week after surgery; adults tend to have a sore throat for about 2 weeks following surgery.

## Summary

A T&A is a common and successful operation.

A T & A can help patients who experience frequent throat infections, OSA and other more serious complications.

Understanding T & A, as well as the possible risks and complications, can help make the surgery a success.



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