

Tonsils and Adenoids

Tonsils and the adenoids are collections of lymph tissue at the back of the throat and behind the nose. They are involved in the body's defense against infection and usually regress in size by the teen-age years. If they become chronically infected or unusually enlarged, they can result in health problems.

If a patient is experiencing recurrent episodes of tonsillitis requiring multiple antibiotics, physician visits, missed time from school or work, a tonsillectomy may be indicated. The other big reason or surgery is if obstructive symptoms are present due to enlarged tonsils and/or adenoids. Quite often tonsillectomy and adenoidectomy are performed together, as there is significant overlap of the symptoms between the two.

TONSILLITIS:

An infection of the tonsils with symptoms of fever, sore throat, swollen, red and enlarged tonsils with white patches (exudates) on their surfaces.

TONSIL HYPERTROPHY:

When tonsils are unusually enlarged, symptoms may include loud snoring, restless or disrupted sleep, sleep apnea, poor feeding, and growth.

ADENOID HYPERTROPHY:

Symptoms of enlarged adenoids include snoring, mouth breathing, nasal obstruction and recurrent sinus and nasal infections. There is an association between enlarged or infected adenoids and ear infections.

TONSILLECTOMY:

Tonsillectomy is an outpatient procedure performed at the hospital under general anesthesia. It takes about one hour to perform and is done through the mouth. The recover period is about two weeks but may vary from person to person. The post-op period is characterized by sore throat and difficulties eating. The majority of the pain and discomfort occurs within the first seven to ten days and it is unusual to have any pain by three weeks post-op. We recommend keeping a patient out of school or work for the first week. In the second week, the patient may return to work or school but should avoid exercise, gym or strenuous activity.

ADENOIDECTOMY:

An adenoidectomy takes less time to perform than a tonsillectomy. It is also performed through the mouth and is done on an outpatient basis under general anesthesia. An adenoidectomy alone generally has an easier post-op course. If there is a sore throat, it is usually mild and lasts only for a few days.

RISKS:

Bleeding: The risk of post-op bleed is about 2%. It usually occurs at about day five through seven post surgery but can occur at any time. If the bleeding is profuse or doesn't stop after a few minutes, it may require cauterization either in the emergency department or in the operating room under general anesthesia.

Dehydration: If the pain post-operatively is such that a patient cannot drink or maintain their fluid balance, dehydration may result. On rare occasions, readmission to the hospital for intravenous fluids or pain control is required. Some patients cannot be discharged as an outpatient if they are unable to drink.