

ENT

Tonsillectomy

Introduction

A tonsillectomy is the surgical removal of the tonsils. The tonsils are two small almond-shaped mounds of lymphatic tissue that sit on either side of the back of the throat. They are part of your body's system to fight infection and are only important during the first few years of life. This surgery is normally performed as a day case, which means you will come into hospital for the procedure and leave on the same day. It is performed under a general anaesthetic, which means you will be asleep for the entire operation.

Guidance for patients

An ear, nose, and throat (ENT) surgeon will do the surgery while your child is under general anaesthesia. This means an anaesthetist will keep your child safely and comfortably asleep during the procedure.

The surgery is done through your child's open mouth. There are no cuts through the skin and no visible scars.

The two main types of tonsillectomy surgery are:

Traditional tonsillectomy: Both tonsils are completely removed.

Intracapsular tonsillectomy: The surgeon removes all the affected tonsil tissue but leaves a small layer to protect the throat muscles underneath. There's a very slight chance that the remaining tissue can re-grow or become infected and need more tonsil surgery, but this isn't common.



By your side

Adenoids are small lumps of tissue at the back of the nose, above the roof of the mouth. You cannot see a person's adenoids by looking in their mouth. A child's adenoids can sometimes become swollen or enlarged. This can happen after a bacterial or viral infection, or after a substance triggers an allergic reaction. In most cases, swollen adenoids only cause mild discomfort and treatment is not needed. However, for some children, it can cause severe discomfort and interfere with their daily life. If this is the case the doctor may suggest removing the tonsils and adenoids at the same time. This is called an adenotonsillectomy. Removing the adenoids and tonsils at the same time reduces the chance of complications. However, adenoidectomies, tonsillectomies and adenotonsillectomies are quick and straightforward procedures with few complications.

While you are waiting, you can use any extra time in a positive way to help your child to be healthier before their surgery. This can reduce the risk of complications, support their recovery and benefit their long-term health. Here are the ways that your child and whole family can be put yourself in the best place to have your surgery.

- Eating more healthily – A healthy diet is important to a child's development, and even more important prior to surgery. Preventing iron deficiency can reduce the risk of requiring a blood transfusion and improve recovery after surgery. Iron rich diets are the best way to achieve this, although sometimes iron supplements are necessary to top up iron levels.
- Getting control of asthma – Asthma is common in childhood and if poorly controlled can cause problems during the anaesthetic. An assessment of the level of control can be made using the Asthma Control Test (www.asthmacontroltest.com). If support or improvements are required, please seek advice from your GP or practice asthma nurse.
- Creating a smoke-free home – Children who are exposed to environmental tobacco smoke are twice as likely to suffer airway or breathing problems during or after the operation. If you, or a family member, would like support stopping smoking visit the NHS website for advice and support.
- Getting the right vaccinations – It's important that children and adults have vaccinations at the right time for the best protection. If you or your child have missed a vaccine, contact your GP to catch up.
- Moving more – National guidelines for physical activity recommend 180 minutes per day for pre-schoolers and 60 minutes per day for school-age children.



• Having a health check – If your child is over 14 years of age and has a learning disability, they can have a free annual health check at your GP surgery.

Health and wellbeing if you have to wait

If, for any reason, your child's condition gets worse or you are worried about one of the below please see your GP, call 111 or seek urgent medical attention.

- High temperature
- Not eating
- Not drinking
- Persistent vomiting
- Increased Pain

Contact us

Email: bwc.entbwch@nhs.net

Telephone: 0121 333 8947

