

# Adenoid Surgery (Adenoidectomy)

This leaflet explains more about adenoid surgery, including the benefits, risks and any alternatives and what you can expect when your child comes to hospital

If you have any further questions, please speak to a doctor or nurse caring for your child.

## What are adenoids?

Adenoids are a collection of immune system tissue (like the tonsils). They are found in the nasopharynx, the back of the nose.

## Does my child need their adenoids?

Adenoids are part of the immune system and help fight infection in early childhood. They are not essential in this function however and the body is able to combat germs and infection without them.

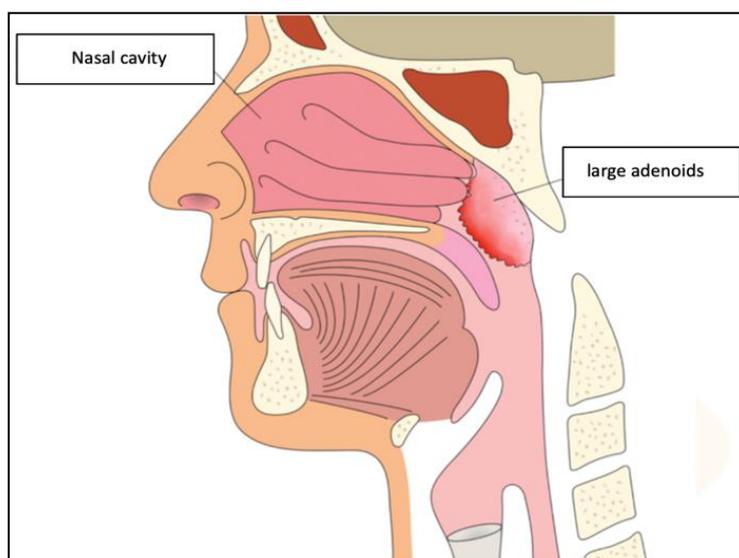


Figure 1: Enlarged adenoids

## What is an adenoidectomy?

Adenoidectomy is an operation to reduce/remove adenoid tissue.

## What are the benefits of this operation?

- Adenoid surgery benefits children with symptoms of mouth breathing, blocked nose and snoring. This may be severe enough to cause obstructive sleep apnoea where breathing is paused for a few seconds during sleep.
- In children with obstructive sleep apnoea, adenoidectomy is usually combined with tonsillectomy (see separate leaflet).

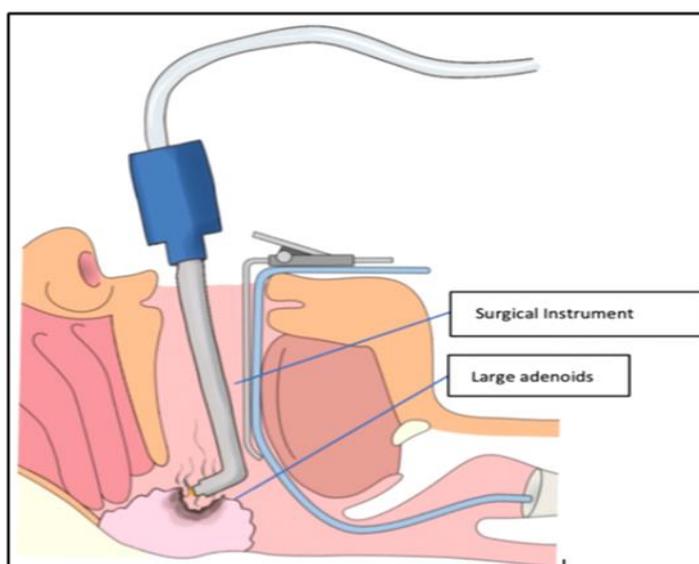


Figure 2: Adenoidectomy

- Adenoid surgery may be combined with grommet insertion for children with glue ear (see separate leaflet).

## What happens during the operation?

The operation is performed under a general anaesthetic with your child asleep and lasts for about 45 minutes. The adenoid tissue is reduced / removed through the mouth and under direct vision. Your doctor will explain this in detail to you.

The operation can be performed as a day case. This means your child can go home on the same day. In some instances, however, some children with obstructive sleep apnoea may require overnight admission for observation.

## Will my child feel any pain?

This is a relatively painless operation. However, it is often combined with a tonsillectomy and this will cause more pain. We use pain assessment tools to assess your child's pain score. This is done after the operation and throughout their stay in hospital. This information will help us gauge your child's level of pain and guides treatment. Regular paracetamol and alternate ibuprofen are routinely used.

## What are the risks?

This is a straightforward and safe operation. However, all operations carry some risks:

- Mild sore throat: Regular painkillers for the first few days will settle this. The pain is more severe if tonsillectomy has also been performed. Sometimes pain is felt in the ears because of how the pain nerves in this region work.
- Blocked nose for about a week.
- Regrowth: the adenoids can grow back in 5-10% of patients.
- A strong odour from the nose or mouth for about a week.
- Regurgitation of fluid into the nose and a change in speech (velopharyngeal incompetence). This is not common and usually resolves over time.
- **Red flag symptom:** A stiff, painful neck or difficulty swallowing. This is an extremely rare but serious complication requiring urgent review by an ENT doctor in hospital. **Please attend the Emergency Department** of the hospital where your child had their surgery.

The doctor will discuss the risks with you in more detail.

## Are there any alternatives?

A trial of nasal steroid medication may sometimes be used before deciding to have surgery, if your doctor suspects that your child also has rhinitis (inflammation of the lining of the nose). However if the adenoid is very large, it is likely that surgery is the only helpful treatment.

All treatment options will be discussed with your doctor.

## Asking for consent

It is important that you feel involved in decisions about your child's care. You will be asked to sign a consent form to say that you agree for your child to have the treatment and understand what it involves. You can withdraw consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

## How can I prepare my child for the operation?

- Remember to follow the fasting (starving) instructions included in your appointment letter. Not doing so may delay or result in the operation being rescheduled.
- Please contact the Ear, Nose and Throat department if your child becomes unwell in the week leading up to the operation as this may result in the operation being postponed.

## What happens after the operation?

After surgery your child will be taken into the recovery area for a period of close monitoring before they are transferred to a children's ward.

Your child will be allowed to eat and drink after waking from the general anaesthetic. Eating normal food after the surgery even in small amounts will help with the healing process and any pain. Please also encourage a drink with every meal.

## What do I need to do after I go home?

- Arrange for three to four days off school/nursery after the operation. If tonsillectomy has also been performed your child will need two weeks off.
- It is also best to avoid swimming for ten days.

## Will I have a follow-up appointment?

Information about follow-up appointments will be provided on your discharge letter.

## Useful sources of information

You may find additional information on the following websites helpful:

**WWW.NHS.UK**

<https://www.nhs.uk/conditions/adenoids-and-adenoidectomy/>

**WWW.ENTUK.ORG**

[https://www.entuk.org/sites/default/files/files/ENT/Adenoid%20Surgery%20pp%20DL%20\(09003\)\\_7\\_16.pdf](https://www.entuk.org/sites/default/files/files/ENT/Adenoid%20Surgery%20pp%20DL%20(09003)_7_16.pdf)

## Reference

Images adapted from [www.ent4kids.co.uk](http://www.ent4kids.co.uk) with permission.

## Contact us

If you have questions or concerns, please contact your consultant's medical secretary on 020 8725 2052 or 020 8725 2493, or use the ENT secretarial email address:

[stgh-tr.entsecretariesadmin@nhs.net](mailto:stgh-tr.entsecretariesadmin@nhs.net).

If you have more urgent concerns or your child feels unwell, see your GP, an urgent care service or your nearest Emergency Department.

**For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.stgeorges.nhs.uk](http://www.stgeorges.nhs.uk)**

## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

**Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

### NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

**Web:** [www.nhs.uk](http://www.nhs.uk)

### NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

### AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://www.accessable.co.uk)). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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