

Tonsil Surgery

(Bipolar diathermy / intracapsular coblation tonsillectomy)

This leaflet explains more about tonsil surgery, including the benefits, risks and any alternatives and what you can expect when you come to hospital.

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

What are tonsils?

Tonsils are a pair of immune system glands, one on either side of the throat (oropharynx).

Does my child need their tonsils?

The tonsils are part of the immune system and help fight infection in early childhood. The body can still combat germs and infection normally without the tonsils.

What is a tonsillectomy operation?

Tonsillectomy is the surgical removal of tonsils. There are different ways of performing the operation, including bipolar diathermy (small forceps which apply an electric current to stop bleeding), or coblation intracapsular tonsillectomy (a “wand” which dissolves the tonsil tissue from the inside).

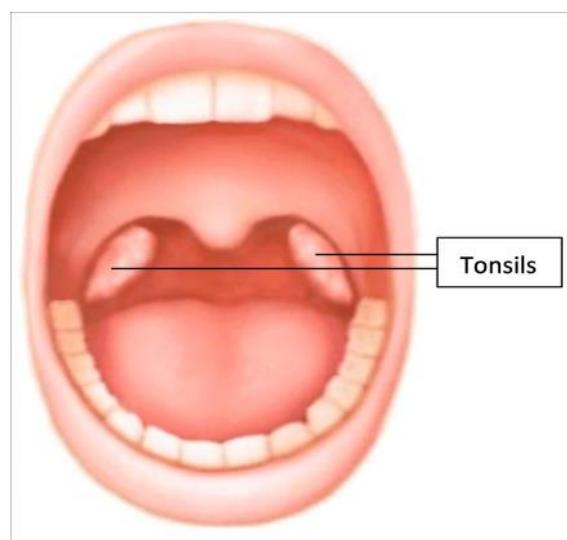


Figure 1: Tonsils

What are the benefits of this operation?

Removing the tonsils can help treat recurrent tonsillitis (sore throats) and obstructive sleep apnoea.

- Tonsillitis: Tonsils can be a source of recurring infection. Removal is recommended if the infections are frequent, severe and impact the quality of your child's life including time off school.
- Obstructive sleep apnoea: In some children, tonsils can be enlarged, causing snoring and disturbed sleep. Snoring and pausing breathing during sleep (obstructive sleep apnoea) can reduce sleep quality. If a tonsillectomy is performed for obstructive sleep apnoea it is usually combined with an adenoidectomy – this is then known as an “adenotonsillectomy” (see separate leaflet).

What happens during the operation?

The operation is performed under a general anaesthetic (i.e. with your child asleep) and lasts about an hour. The tonsils are removed through the mouth under direct vision. Your doctor will explain this in detail to you.

Most children will be able to go home on the same day. In some cases, children may need to be admitted to hospital overnight for observation. This depends on their weight, the reason for surgery and other medical conditions.

Will my child feel any pain?

This operation is painful. We will 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 will guide treatment. Regular paracetamol and alternate ibuprofen are routinely used.

After discharge, one to one care is suggested for up to ten days. The pain is usually worse on days five to seven after the operation. Do not give more than the recommended dose of pain medicine.

What are the risks?

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

- **Bleeding:** This is the most serious risk. If your child has any bleeding from their mouth after the operation, even if it is a small amount and it stops, **bring them straight to your nearest hospital Emergency Department.**
- **Infection.** This is not common. Please note that it is normal for there to be yellow-white discharge (exudate) on the back of the throat after tonsillectomy and this is not a sign of infection.
- **Sore throat:** This operation is painful especially five to seven days after the operation. Regular and structured pain relief is recommended.
- **Regrowth:** In coblation surgery, there is a possibility of tonsil regrowth and future infection (tonsillitis). This is uncommon, however.
- Earache which will settle in a few weeks.
- A temporary change in your child's voice.

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

Are there any alternatives?

Before deciding on an operation, we may treat your child's tonsillitis with antibiotics.

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.
- Arrange for your child to have two weeks off school / nursery following surgery.

What happens after the operation?

After surgery your child will be taken into a recovery area for a period of close monitoring before being 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 pain. Please also encourage a drink with every meal.

What do I need to do after I go home?

- Arrange for two weeks off school / nursery following the operation.
- Long distance travel is best avoided for at least six weeks.

Will I have a follow-up appointment?

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

Useful sources of information

You may find additional information on the following website helpful:

WWW.ENTUK.ORG

[https://www.entuk.org/sites/default/files/files/ENT/Children%20Tonsil%20Surgery%206pp%20DL%20\(09002\)_7_16.pdf](https://www.entuk.org/sites/default/files/files/ENT/Children%20Tonsil%20Surgery%206pp%20DL%20(09002)_7_16.pdf)

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.

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

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

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

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). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



Reference: ENT_TON_01 **Published:** May 2021 **Review date:** May 2023