#### **Tonsils**

### Information for Parents

#### What are the tonsils?

At the side of the throat are swellings called tonsils.

#### What do the tonsils do?

Tonsils are made of lymphoid tissue, just like the adenoids and appendix. There is lymphoid tissue in many parts of the body. Lymphoid tissue contains cells from the immune system. Removing a small amount of lymphoid tissue however does not prevent your body from fighting germs.

## Doesn't my child need his tonsils?

Although tonsils are part of the immune system sometimes they can cause more harm than good. Children generally have fewer infections following tonsillectomy, not more, as the tonsils have become a site of recurrent infection.

## Why do we remove tonsils?

Tonsils can cause a number of different problems. In the past tonsils have been commonly removed. Nowadays we only recommend removal if the tonsils are causing a lot of trouble.

#### 1. Recurrent infections

Some children are prone to recurrent infections in their tonsils (tonsillitis). If this is impacting significantly on their lives then it may be better to have the tonsils removed (tonsillectomy), especially if they are missing a lot of school.

#### 2. Breathing difficulties

Large tonsils can cause obstruction to the breathing, especially at night. Children may have pauses in their breathing. Recurrent pauses are known as obstructive sleep apnoea. If a child has sleep apnoea they may have secondary effects during the day. It may cause them to fall asleep during the day and impair their concentration and school performance. These problems have been shown to be much improved by removal of the tonsils and adenoids. In very severe cases obstructive sleep apnoea causes heart problems.

### 3. Other problems

Rarely, tonsils can get diseased. Abscesses and occasionally tumours can form in the tonsils. Sometimes abnormal-looking tonsils need to be removed to exclude these problems.

### What happens on the day of the Operation?

# **Eating and drinking**

Your child will be admitted on the morning of the operation and will have no food for six hours prior to the general anaesthesia. Clear fluids (water or clear juice) may be taken until two hours before the general anaesthesia. You will be advised of the exact times by the ward staff, who usually call you the day before the operation.

## **Before the Operation**

You and your child will be seen by the anaesthetist and the surgeon. The surgeon will explain the procedure once again and ask you to sign a consent form.

# What happens during the Operation?

The operation involves a general anaesthetic. Whilst your child is asleep the tonsils are removed through the mouth. There is usually only a little bleeding and this is controlled before the child is allowed to wake up.

### What happens after the operation?

## Recovery

Immediately after the operation your child is taken to the recovery room while still asleep and observed carefully as they start to wake up. When they are sufficiently awake the nurses will call you.

# **Going Home**

Children having their tonsils removed will generally stay in hospital overnight. They will be seen by the doctor the following morning and if they are eating and drinking sufficiently well and do not have a high temperature then they will go home that morning.

Occasionally, older children can go home the same day as the surgery (day surgery). Your doctor will decide if your child is suitable for this.

## Looking in the throat

After having your tonsils removed the throat appears white. The new lining of the throat is forming under the white coating. As the throat heals the white coating gradually disappears. This takes about two weeks.

#### Sore Ears

The pain following tonsillectomy is commonly referred to the ears. It is usual for children to complain of earache. Parents often worry there may be an ear infection, however the ears are quite healthy.

### **Pain Medication & Antibiotics**

Having your tonsils removed is painful. This can be controlled by pain medication, which is given regularly while in hospital. Often the child seems quite well in the early stages due to the medication. It is important to continue with regular pain medication while your child is at home.

It is not uncommon for the pain to get worse during the first week after the operation and then gradually improve during the second week. Eating and drinking will help and should be encouraged.

The main painkillers used are Paracetamol (Calpol) and Ibuprofen (Nurofen). Codeine phosphate is available for additional pain relief if required. These three types of medication work independently hence they can be given together (as directed by your doctor). Antibiotics are often given to prevent infection.

#### When can my child go back to school or nursery?

After removal of the tonsils children should keep away from school for one week. This is simply to try and reduce the chance of them picking up an infection from another child, which will make them feel more uncomfortable. They can mix with family and close friends. They do not need stay in the house but should avoid children with infections.

# When can my child go swimming or flying?

Your child will be safe to swim and fly two weeks after the operation.

## Follow up appointments

Your child will be seen one week after the operation. It is important to keep this appointment so that your consultant can check that everything is healing after the operation.

## What are the risks of tonsillectomy?

Tonsillectomy is one of the commonest operations performed in the United Kingdom and problems are uncommon. No operation is, however, without any risk.

A general anaesthetic is required. Your child will be fully assessed by a paediatric anaesthetist before the operation who will be able to answer your questions about this. Parents often worry about anaesthesia but the risks in a healthy child are extremely small indeed.

Occasionally, children experience some bleeding at home after tonsillectomy. This is usually minor. However, in the event of bleeding your child should see a doctor.

Rarely, a child has serious bleeding after tonsillectomy. If your child has persistent bleeding you should take them directly to the nearest accident and emergency department by ambulance if necessary. If you are unsure what to do the nurses on the ward where your child was admitted for surgery can give you advice by telephone.

#### Contact

If you have any concerns regarding your child's post-operative recovery please telephone Mr Hartley's secretary (during office hours) on 020 7390 8352.

Alternatively, please call the Portland Hospital on 020 7380 4400 and ask to speak to the Duty Sister who will be able to give you advice.