

Why take them out?

Sometimes adenoids are so large that they can block the nasal airway causing mouth breathing and snoring. Some children even stop breathing for a few seconds while they are asleep. Adenoids can also cause ear problems because they sit just at the entrance of the tube that links the middle ear to the back of the nose. Removing them can also reduce the problem of a blocked nose and sinus problems when your child has a cold.

Alternatives to surgery

Your adenoids get smaller as you grow older, so you may find that nose and ear problems get better with time. Surgery will make these problems get better quicker, but all surgery carries a small risk. You should discuss with your ENT consultant whether to wait and see, or have surgery now. For some children, using a steroid nasal spray will reduce congestion in the nose and around the adenoids, and may be helpful to try before deciding on surgery.

Antibiotics are often not helpful and may only produce temporary relief from infected nasal discharge. They have side effects and may promote 'superbugs' that are resistant to antibiotics.

Please speak to your GP or ENT consultant to discuss alternatives to adenoid surgery.

The operation

You will be contacted by the Pre-Operative Assessment department to check your details and to complete a medical history for your child. This is often carried out over the telephone. Please let us know if your child has any bruising or bleeding problems, or if such problems run in the family.

Any investigations needed prior to surgery will be arranged for you. If you and your child would like a pre-operative visit to the Day Surgery Unit, please feel free to contact the team on 01271 322455.

During term time it is important to arrange a week off of school after the surgery and ensure that you have stocked up with sufficient pain relief medications, for example, paracetamol and ibuprofen. Let us know if your child has a sore throat or cold in the week before the operation – it will be safer to put it off for a few weeks.

Adenoidectomy is a day case procedure which means your child will be able to go home the same day. However, sometimes an overnight stay may be needed so please make arrangements in case this is required. Adenoidectomy is performed under a general anaesthetic. We take the adenoids out through the mouth then stop the bleeding. When the surgery is finished your child will then go to a recovery area to wake up.

After the operation

Your child will come back to the ward to recover after their surgery. Your child will be with us for the majority of the day for optimum and safest recovery. Your child's nose may seem blocked after the surgery but it will clear by itself in a week or so. Your child's throat may be a little sore but will get better day by day. It is very important to give your child regular pain relief medications ideally half an hour before meals for at least the first week. Do not give your child aspirin as this could increase the risk of bleeding due to blood thinning properties.

Eating a normal diet will help your child's throat to heal as well as helping the pain. Ensure that your child drinks plenty of fluids and avoids spicy foods.

Your child may experience ear ache as the throat and ear have a shared nerve supply. It does not usually mean that your child has an ear infection. If symptoms increase or persist, please contact your GP.

You may notice that your child has bad breath during the healing period. This will resolve.

A small number of children find that their voice sounds different after surgery. It may sound like they are talking through their nose. This usually settles by itself within a few weeks. If not, speech therapy can be helpful.

Please make sure that your child rests away from crowds and smoky/dusty places, and away from people with coughs and colds as this could increase the risk of infection.

Possible complications

Complications following adenoidectomy are not common. Every operation however carries some risk. The most important thing to look out for is bleeding. If you notice any active bleeding at any time, or any bleeding more than spotting, please attend your hospital emergency department without delay. Bleeding can be serious.

During the operation there is a very small chance that a tooth may be chipped or knocked out. There is a higher risk of this if your child has caps, crowns or loose teeth so please let us know beforehand if this is the case.

Further information

Day Surgery Unit

7.30am – 9pm, Monday – Friday

Tel: 01271 322455

Tel: 01271 322499

Caroline Thorpe Ward

Open 24 hours a day, 365 days a year

Tel: 01271 322704

Little Journey app

There is also an app you can download on your iPhone or android devices that has a virtual tour of the Day Surgery Unit and gives further information on what to expect on the day. This is available at <https://littlejourney.health/>

PALS

Have your say

Northern Devon Healthcare NHS Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

'Care Opinion' comments forms are on all wards or online at www.careopinion.org.uk.

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