

## Dr James Deves

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## TONSILLECTOMY AND ADENOIDECTOMY

Tonsils are a mass of lymphoid tissue on either side of the back of the mouth. The tonsils are concerned with protection against infection. The adenoids are the same type of tissue at the rear of the nose. Enlargement of the adenoids can cause obstruction to breathing through the nose and can block the Eustachian tubes causing glue ear. Tonsillectomy is commonly performed for recurring or chronic tonsillitis, for enlarged tonsils causing breathing obstruction (apnoea) and for cancer of the tonsil. Adenoidectomy is needed when the adenoids get infected at the same time as the tonsils, or they are enlarged causing obstruction at the back of the nose or cause ear infections. A general anaesthetic and an overnight stay in hospital are required. The operation is done through the mouth and there are no external excisions.

### POST OPERATIVE CARE

When patients wake up from this operation they will have an IV cannula normally somewhere in their arm that is used to give IV fluids. The throat is normally sore, and it is important to have regular pain relief to make eating and drinking more comfortable. A soft diet is recommended initially as this will be easier to tolerate, but a normal diet can be eaten as soon as desired. The IV cannula is normally removed the next day before discharge from hospital. Antibiotics will be prescribed to take after surgery.

### PAIN RELIEF

Adults will be prescribed analgesia in tablet form and liquid pain relief is better tolerated for children. Panadol elixir (there are several other brands on the market as alternatives e.g. Dymadon is a thick mixture that may be tolerated easier) or Painstop (there are two types – day, and night is recommended before bed as it contains promethazine and this may help with sleep) should be taken regularly as directed and may be required for at least 10 days post-op. ASPIRIN OR DISPRIN MUST NOT BE USED and neurofen is not recommended. If there are any problems with pain relief please contact the rooms for advice. Cepacaine mouthwash is also suggested for adults and older children as this contains some anaesthetic and may help with the pain. This can be diluted with water if full strength is not tolerated. At home it is important to eat and drink plenty of fluids as failure to do so can cause excessive pain. It is important that the throat remembers how to swallow or it can become tight and painful. Good oral hygiene is also encouraged. The breath may become smelly and a white coating form on the throat where the tonsils were. Pain may also be felt in the ears. This is all part of the normal healing process.

*If you experience excessive pain, discharge, bleeding from the ear, or any other symptoms that concern you, please contact the rooms during business hours (02 4324 5677). After hours, please contact the hospital where you had your surgery (NGPH 02 4324 7111 or BVPH 02 4389 1970) and talk with the staff as they can contact Dr. Deves if there are any problems.*

We wish you a speedy recovery.