

Surgery to remove your child's adenoids

Ear, Nose & Throat	Last reviewed:	December 2024
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What is an adenoidectomy?

Adenoids are small glands at the back of the nose. The adenoids help fight germs when you are a young child. As children grow the adenoids usually shrink. They become less important in fighting germs. Your body can still fight germs without them.

Surgery to remove the adenoids is called an adenoidectomy. We only recommend removal of the adenoids if they are doing more harm than good.

Why does my child need this operation?

The main reasons for taking out your child's adenoids is to improve problems they have with

- their breathing while they are asleep (sleep apnoea)
- nose blockage

If you child has persistent problems with glue ear, we can take out the adenoids and put grommets in the ear at the same time. This may help stop the glue ear coming back. The doctor may recommend this if they think it will help your child.

We may take out your child's tonsils at the same time if they often get sore throat (tonsillitis) or have difficulty breathing at night.

What to do before the operation

Arrange for your child to have 1 week off nursery or school (if appropriate).

Buy a bottle of Calpol and ibuprofen. You can give these at home, if your child needs any pain relief after the operation.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



Please call the waiting list office on 0116 258 6058 if your child has a cold or sore throat in the 2 weeks before surgery. It will be safer to delay surgery for a few weeks.

We will send you an admission letter. It will explain what you need to do with your child for the operation.

Your child should not have anything to eat or drink from the time discussed at the pre-assessment. It is important to follow these instructions. If not your child's operation may have to be delayed or cancelled.

The doctor will explain the operation in more detail. They will talk to you about any worries you may have.

They will ask you to sign a consent form.

You will also see an anaesthetist. They will explain about the anaesthetic. Please tell the doctor if your child has any medical conditions such as allergies.

Please also tell the surgeon if your child has a history of neck problems, or if they have any loose teeth.

What happens during the surgery?

Your child will be asleep under a general anaesthetic.

We will take the adenoids out through the mouth. We will then stop the bleeding. There are different ways your surgeon may chose to do this. It will depend on your child's needs.

The surgery takes about 45 minutes.

Your child will wake up after the surgery in the recovery room.

What happens after the surgery?

Your child will feel sore in the throat/ back of the nose. The doctor will prescribe some simple painkillers.

The nursing team will tell you when it is safe to let your child eat and drink.

The anaesthetic may make your child feel tired and a little clumsy. This lasts for around 24 hours after the surgery. Do not let them do anything that may lead to a fall.

Your child will normally be able to go home on the same day.

Your child may need to stay overnight if they are having other operations at the same time, or has other medical conditions. You will be able to sleep on the ward with your child. Your child can go home once they are eating and drinking and feel well enough.

Your child may have sore ears. This is normal. Your throat and ears have the same nerves. It does not usually mean that your child has an ear infection.

If your child needs to be seen in the ENT clinic we will tell you this before you leave the ward. We will post the appointment details to your home address. If you are planning to move or will be on holiday, please tell the nurse looking after you.

If your child needs any medication to go home, we will give you this as soon as possible. Your nurse will tell you about the correct way to give and store medication.

Make sure you have Calpol and ibuprofen at home. This will speed up your discharge process. **Do not exceed the amount on the bottle for your child's age.**

We will send a letter to your GP.

Rarely, after adenoid surgery on children, some fluids may come out through the nose when drinking. It happens if there is a weakness in the back of the throat. Your doctor will look at your child to reduce this risk before surgery. Even if this happens, it tends to settle by itself.

What do I need to do at home?

It is best to take your child straight home after you leave hospital. Your child may need to rest and sleep. A few days rest at home after leaving hospital is recommended.

Offer your child frequent drinks.

It is best to give light foods to start with such as toast, sandwiches, biscuits. Then slowly return them to their normal diet.

Avoid rich foods, such as chocolate, ice-cream and fried foods. They may make your child feel sick.

Your child may feel their nose is blocked up after the surgery. It will clear by itself in a week or so.

If your child is sick (vomits), give clear fluids (juice or water) until it settles. Then introduce small amounts of food. If your child continues to be sick or develops a fever, and you are worried, please phone the ward from which your child was discharged.

If you notice any bleeding from your child's nose or throat you must see a doctor. This can be serious. Either call the ward, your GP, or go to your nearest hospital Emergency Department to have it checked.

Your child should be able to return to school or nursery after 1 week.

We advise to avoid travelling abroad for 4 weeks after surgery.

Can there be problems?

Taking adenoids out is a safe surgery. But every surgery has a small risk.

Your child's anaesthetist is an experienced doctor. They are trained to deal with any problems that happen during surgery. After an anaesthetic some children feel sick and vomit. They may also have a headache, sore throat or feel dizzy. These side effects are usually short-lived and not severe.

The most serious problem that can happen is bleeding. This may need a second operation to stop it. But bleeding after having adenoids taken out is uncommon. In a survey of all adenoid surgery in England, bleeding happened in 1 in every 200 operations. Please let us know before surgery if anyone in the family has a bleeding problem.

If your child has sleep apnoea, their breathing this may get worse for a short while. If your child has this we will check them closely after surgery to find and manage this.

Rarely, painful or restricted neck movements can occur after surgery. If you are worried this has happened, please call the ward.

Sometimes adenoids can grow back, but this is uncommon.

There is a small chance that that we may chip or knock out a tooth, mainly if it is loose, capped or crowned. Your child's lip, tongue or gums may be injured.

Sometimes your child's voice may sound different after surgery. They may sound like they are talking through their nose a little. This usually settles by itself within a few weeks. If not, speech therapy can help.

Are there any other options to having an adenoidectomy?

Adenoids get smaller as you grow older. You may find that symptoms get better with time. Surgery will make these problems get better more quickly, but it has a small risk.

For some children, using a steroid nasal spray may help to reduce congestion in the nose. It may be helpful to try before deciding on surgery.

Antibiotics are not helpful. They only give temporary relief from infected nasal discharge. They have side effects. They may encourage "super-bugs" that are resistant to antibiotics.

Contact details

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If you have any questions, you can ask us at the pre-assessment appointment or on the day of surgery itself. Or you can contact Ward 19, Leicester Royal Infirmary, on 0116 258 5244 or 0116 258 5534.

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