

Post-Operative Care for Adenotonsillectomy or Tonsillectomy

The recovery from a tonsillectomy is a very painful period, often the worst pain people can recall, so please be understanding and patient with yourself, or the patient you are caring for. There are generally two periods to recovery, the first severe and the second less so, before returning to normal health.

The first period lasts 5-7 days in children and 7-10 days in those over about twelve years old. This is the time the throat is "re-growing" its covering. If you look at the throat then, it is red and white and swollen, especially the uvula that hangs down in the middle of the throat.

The second period lasts another 5-7 days in children or 7-10 days in those over twelve years old and has less pain, although you will still find that yawning, coughing, and sneezing will cause sharp twinges of pain. During this time the swelling improves and the tissue looks gray.

Dehydration is the biggest enemy of the recovery period. It will increase the pain, increase the risk of bleeding or infection, and delay the healing. It usually happens because the pain of swallowing keeps the patient from drinking enough liquids.

Therefore, the key is to force fluids, and that works best when pain control is maximized. This means alternating liquid Ibuprofen (Nurofen®) with liquid Paracetamol. Each medicine can be taken every 6-8 hours, so the patient will be taking one of them every three hours, going back and forth between the two. You may find it helpful to take pain medicine during the night, especially if the patient awakens. These are usually best taken with some other liquid or soft food, because they can be irritating to the stomach.

The worst pain is usually in the morning, especially beginning a day or two after the operation. Please be aware that no combination of medicines will eliminate the pain – the patient will need to continue eating/drinking in spite of the remaining discomfort.

Bleeding can occur in 5-7% of patients. This **must be taken seriously** and the patient needs to attend the nearest emergency department for assessment, where they may liase with Mr Rockey.

Most of the time this is managed with intravenous antibiotics as it tends to be an infection causing it. For this reason, the patient should not be more than 30 minutes from the hospital for the first ten days. The most likely time for bleeding is 5-7 days after the operation, although it may occur at any time.

Remember that the patient should at the very least have liquids or soft foods for the first ten days. Any liquid or soft food is safe, but most people will prefer cold over warm, and most find acidic things (citrus, carbonated soda or tomato products) will be more irritating. Favorites among our patients are popsicles, ice cream, sherbet, jello, pudding, applesauce, yogurt, eggs, potatoes, pasta, and soups. Try to avoid spicy and salty foods.

Remember, no flying for at least two weeks following your procedure. And no strenuous activity for 14 days following the operation. (this includes no lifting of more than 5 kilograms). Please ensure you discuss commencement of flying or any strenuous activity with Mr Rockey prior to commencing.

Please do not hesitate to contact our consulting rooms on **03 5442 1150** if you have any concerns and they will contact Mr Jason Rockey for you. Alternatively you can contact your GP or the Emergency Department.