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## Tonsillitis

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### Summary

- The tonsils sit at the back of the mouth and are part of the body's immune system.
  - The most common cause of tonsillitis is viral infections.
  - Operating to take out your tonsils may help if you get frequent infections, but the operation is complicated and may be unsafe.
  - After tonsillectomy, your sore throat may last for two to three weeks, but try to get back to your normal diet as soon as possible – avoid sticking to jelly and ice-cream.
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Your tonsils are the two small pads of glandular (lymphatic) tissue located each side of the back of your throat. They are part of your immune system. They make antibodies and white blood cells (lymphocytes) to attack germs inside your mouth. This makes the tonsils part of your first line of defence against bacteria in food or air.

The tonsils are relatively small in the first year of a baby's life and increase in size as a child grows older. They are usually at their largest between the ages of four and seven years.

Tonsillitis occurs when your tonsils become infected, and can be caused by either bacteria or viruses. Tonsillitis can develop in people of all ages. However, adults who get tonsillitis have generally had more infections in their lives, so they no longer get sick as often as children.

### Symptoms of tonsillitis

The symptoms of tonsillitis include:

- White or yellow spots of pus on the tonsils
- Sore throat – although some children complain of pain in their tummy, rather than a sore throat
- Swollen lymph glands under each side of the jaw
- Pain when swallowing
- Fever
- Bad breath.

### Bacteria, viruses and tonsillitis

When tonsillitis is caused by bacteria (about 15 per cent of all tonsil infections), it is usually a streptococcus bacterium. It is not easy to tell when tonsillitis is caused by bacteria – your doctor may do a throat swab (gently rubbing sterile cotton wool on a stick over the tonsil) and send it for testing.

There are many viruses that can cause tonsillitis. Antibiotics do not help if the tonsillitis is caused by a viral infection.

### Complications of tonsillitis

Tonsillitis can lead to a number of complications, including:

- Chronic tonsillitis – infection of the tonsils which does not clear up. The person may go on feeling unwell and tired
  - Secondary infections – the infection can spread to the person's nose, sinuses or ears
  - Glue ear (otitis media) in children – the adenoids are part of the same group of lymph nodes as tonsils. When the adenoids swell up (usually when the tonsils are also large), they can block the Eustachian tube, which goes from the back of the throat to the middle ear. This is the thin tube that you push air along when you 'pop' your ear. If this tube stays blocked most of the time, sticky fluid forms in the middle ear which interferes with
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hearing. This is called a glue ear

- Quinsy – if the infection spreads into the tissue around the tonsils, an abscess can form in the throat, also known as a peri-tonsillar abscess. This causes severe pain and can interfere with swallowing and even breathing. Antibiotics may help, but sometimes an operation is needed to drain the abscess.

### **Treatment of tonsillitis**

Because most attacks of tonsillitis are caused by viruses, most of the treatment is aimed at helping to relieve the symptoms such as pain and fever. Paracetamol can help and the person should rest. Most children with tonsillitis do not feel well and it hurts them to swallow. Try cool drinks (cold drinks can hurt), ice blocks and ice cream. Don't worry if a child stops eating for a day or two. Usually, they pick up quickly when the infection has gone.

For tonsillitis that is caused by bacteria, antibiotics are prescribed.

### **Tonsillectomy**

If attacks of tonsillitis become frequent and severe, or cause complications, your doctor might suggest an operation, known as tonsillectomy.

Reasons for tonsillectomy can include:

- Recurrent bouts of tonsillitis accompanied by pain, discomfort and high temperature
- Chronic tonsillitis that doesn't clear up with antibiotics
- Frequent ear infections associated with tonsillitis
- Breathing difficulties due to enlarged tonsils
- Abscesses forming in the throat (peri-tonsillar abscesses or quinsy)
- A child failing to thrive because of difficulty in swallowing due to frequent infection and enlargement of their tonsils.

### **Medical issues to consider before tonsillectomy**

Before doing a tonsillectomy, your doctor will give you a complete physical check-up. The tonsil pad has a large blood supply, and special note will be taken whether you have any abnormal bleeding tendencies. Your doctor will check to see if your tonsils are actively inflamed and, if so, will prescribe antibiotics for a few weeks to control the infection before the surgery.

### **Tonsillectomy procedure**

A tonsillectomy is performed under general anaesthesia. The surgeon props open the person's mouth and clamps their tonsils with special instruments. The glandular tissue is contained inside a skin lining which the surgeon cuts using scalpel, scissors, laser or an electric current (electrocautery). The surgeon then removes the tonsils. Each tonsil pad has a substantial blood supply, so electrocautery is often used to fuse the blood vessels and reduce the risk of haemorrhage.

### **Immediately after a tonsillectomy operation**

After the operation you can expect:

- When you wake up, you will be lying on your side – this is to prevent choking if any bleeding occurs from the tonsil pad
- A sore throat
- Pain-relieving medication, if necessary
- The nursing staff will regularly check your pulse, blood pressure, breathing rate and your throat for any signs of bleeding
- For the first four hours after the operation, you will probably not be allowed to have any food or liquids
- You may find it difficult to eat or drink, but you will be encouraged to do so – the more often you use your throat, the better
- You can expect a hospital stay of just one day or so.

### **Complications of tonsillectomy**

Possible complications of tonsillectomy include:

- The pain may ease within two days or so, but may flare up again up to six days after the operation. You may also have ear pain.
- There can be excessive bleeding (haemorrhage) from your tonsil pads. Most cases of haemorrhage occur within one week of surgery.
- The scabs that form on the wounds may give you a bad taste in your mouth.

### **Self-care after tonsillectomy**

Be guided by your doctor about how to care for yourself at home, but general suggestions include:

- Do not smoke.
- Avoid vigorous exercise immediately after the operation.
- Usually, you should have a week or so at home before returning to work or school.
- Avoid crowded, enclosed areas (such as cinemas) for at least one week, to reduce the risk of infection.
- Your sore throat may last for two to three weeks, but try to get back to your normal diet as soon as possible – avoid sticking to a jelly and ice cream diet.
- Some foods can cause irritation and pain – avoid sour drinks (such as citrus fruit juices), spicy foods and roughly textured foods for about 10 days.
- Avoid taking aspirin, since this pain-relieving medication can cause bleeding. Only take medications recommended by your doctor or surgeon.

### **Long-term outlook after tonsillectomy**

A tonsillectomy won't lower the risk or frequency of problems such as upper respiratory tract infections (the common cold), chest infections, laryngitis, middle-ear infections, sinusitis or nasal allergies. However, it will stop the tonsillitis and allow you to swallow more easily. You will probably lose your bad breath, if that was a problem.

### **Where to get help**

- Your doctor
- Ear, nose and throat specialist
- NURSE-ON-CALL Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)

### **Things to remember**

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