

ADENOIDECTOMY: POST-OPERATIVE CARE PLAN

After adenoidectomy, recovery is usually fairly quick. Typically the operation is performed as a day procedure, with discharge from hospital four hours after surgery. Following is a guide to help you through the recovery period.

PAIN:

1. Recovery from adenoidectomy is usually not especially painful. Some discomfort at the back of the nose is typical, often similar to the scratchy sensation you get at the onset of a cold. Most children are happily running around within hours of the operation.
2. Paracetamol is usually all that is required for analgesia. Non-steroidal anti-inflammatory medication (such as Nurofen), can be used as an alternative as bleeding risk is low.
3. Occasionally some increase in pain is noted around day 5 or 6 after surgery, due to maximal healing at this time.

ANTIBIOTICS: These are not prescribed routinely, as infection is uncommon and there is no evidence they improve healing, and may cause side effects. Occasionally they may be prescribed for some patients, due to other considerations, and your surgeon will advise you in this case.

DIET: It is important to ensure that the diet remains as normal as possible to minimise the risk of dehydration. Even mild dehydration can increase the discomfort experienced after surgery. Following adenoidectomy there are no specific dietary restrictions.

RETURN TO NORMAL ACTIVITY: It is sensible to keep children away from groups of people (especially other children) for one week after surgery to allow healing, and minimize risk of infection. The same applies to child care, and swimming. Children have their own "barometer" with regard to what they feel up to doing, so there is no need to enforce quiet rest. Nevertheless, it is sensible to avoid swimming, sporting activities, and rough play for one week following surgery.

FEVER: A low grade fever is common after the surgery common and may be as high as 38°C periodically for several days. Increased temperature does not indicate infection. Sustained fever over 38.5°C may be a sign of an infection, so please contact your surgeon.

NAUSEA AND VOMITING: This is very uncommon but may occur. Prolonged nausea and vomiting can lead to dehydration, and increased discomfort following surgery. Contact your surgeon if this occurs.

BLEEDING: The risk of bleeding after adenoidectomy is low, but highest in the initial post-operative period, which is why we advocate monitoring in hospital for four hours after surgery. Some blood stained mucus discharge from the nose is typical for 24 hours after the operation. Brisk bleeding or vomiting blood requires immediate medical attention. Call your surgeon immediately and take your child to the nearest Emergency Department.

SNORING AND MOUTH BREATHING: Some snoring may occur for a few days after surgery, and is due to mild swelling of the soft palate and pharynx (throat), and an increase in nasal secretions during healing. Mouth breathing can become more prevalent, and this together with healing tissues can lead to bad breath for a few days.

CHANGE IN VOICE: In younger children particularly, where adenoids are large, there can be a noticeable change in pitch of voice following adenoidectomy. This is because bulky adenoids reduce the amount of resonance in the throat (pharynx) and nose, so their voice can be quite underresonant or "hyponasal" before surgery. After surgery their voice typically sounds better to the trained listener, but can initially sound quite unusual to parents who are used to the abnormally hyponasal voice of their child.

Some children will develop too much resonance in the nose ("hypernasal" speech) following surgery. This is because of splinting of the pharyngeal muscles and soft palate during healing, and laziness of the soft palate muscles which were underutilised because of big adenoids in the way. Unless there is a structural problem with the soft palate (always looked for pre-operatively), the hypernasal speech typically settles over a few weeks. (continued overleaf...)

FOLLOW UP APPOINTMENT: A return visit to our office will generally be organized between two and four weeks after surgery.

AT ANY TIME:

1. Call our office if any of the following occur:
 - Brisk bleeding from the nose or mouth
 - Severe pain
 - Persistent high fever
 - Inability to maintain adequate hydration
2. If you need to contact someone after hours, our mobile phone numbers can be found on our answering service, in the White Pages, and on the paperwork provided to you pre-operatively. In an emergency, please dial 000 for an ambulance to your nearest hospital.