

What is a tonsillectomy?

Surgery to remove the tonsils is known as a tonsillectomy. For children with mild sore throats, watchful waiting is recommended rather than removing the tonsils by surgery.

A tonsillectomy is only considered for a recurrent sore throat if certain criteria are met.

Patient eligibility criteria:

A clinically significant episode of tonsillitis, should be documented on your medical records and usually includes at least one of the following:

- temperature of at least **38.3°C**
- tender tonsils, thyroid gland and drainage system for the internal structures of the throat (anterior cervical lymph nodes)
- a grey or white coating (exudate) on the tonsils
- severe infection (positive culture of group A beta haemolytic streptococci)
- tonsillar enlargement giving rise to symptoms of upper airways obstruction.

The patient's local commissioning organisation will fund a tonsillectomy if the patient meets the following criteria:

- seven or more documented clinically significant, adequately treated episodes in the preceding year
- five or more documented episodes in each of the preceding two years
- three or more documented episodes in each of the preceding three years **AND**
- if symptoms are disabling and prevent normal functioning.

NOTE: Walk in Centre or Out of Hours documented episodes that are communicated in writing to GP Practices are included in the episode count. Children or adults with sleep disordered breathing (apnoea) confirmed with sleep studies can undergo a tonsillectomy procedure in line with recognised management of these conditions.

When in doubt, implementing a six month period of clinical watchful waiting is recommended. Watchful waiting involves carefully monitoring the patients symptoms to see whether they improve or get worse.

The clinician in charge of the care of the patient's specific condition, usually a hospital doctor, can assist the application, if there is exceptional clinical need for the treatment to be funded. The patient's clinician must evidence clinical exceptionality and must be supported by the patient's local NHS commissioning organisation. See separate leaflet for more information on Individual Funding Requests (IFRs).

About tonsillectomies:

The operation can be carried out in a number of ways, as described below:

- **cold steel surgery** – this is the most common method, where a surgical blade is used to cut the tonsils out
- **a probe used to destroy the tissue around the tonsils and to remove the tonsils (diathermy)** – at the same time, the heat seals the blood vessels to stop any bleeding
- **a low temperature probe 60°C used to destroy the tissue around the tonsils and to remove the tonsils (coblation or cold ablation)** – this method works in a similar way to diathermy, but uses a lower temperature (60°C). It's considered less painful than diathermy
- **lasers** – high-energy laser beams are used to cut away the tonsils and seal the underlying blood vessels shut
- **ultrasound** – high-energy ultrasound waves are used in a similar way to lasers.

Each of these techniques is relatively similar in terms of safety, results and recovery, so the type of surgery used will depend on the expertise and training of the surgeon. The patient will usually be able to leave hospital on the same day as the patient has the surgery, or the day after.

For more information search for 'tonsillitis' at www.nhs.uk

