

New Outpatient Procedure Makes It Easier – And Less Painful – To Remove Tonsils & Adenoids

By Mark Zeme, M.D.

Because pediatricians have been reluctant to recommend tonsillectomies during the past few decades, parents often assume that their young children will outgrow tonsil problems. Unfortunately, not all children do so, and when infections recur in teens or even adults, the tonsils need to be taken out.

Now, thanks to a new procedure called Coblation® Tonsillectomy, removing tonsil tissue from the sides of the throat and rear of the pallet is less painful than it used to be.

Traditionally, surgeons use scalpels to cut out tonsil tissue, or a heat-driven electrocautery wand to vaporize it with a jolt of electricity. Recovery from these standard procedures can be difficult, however, because scalpel cuts may inflame the area adjacent to the tonsils, and cauterization techniques may cause thermal burns to mucous membranes – all of which creates significant soreness in the throat that may persist for 10 days or more after the operation.

By contrast, the Coblation process – done on an outpatient basis – uses low-temperature technology that combines radiofrequency energy with a saline solution to precisely target and remove the tonsils and minimize damage to surrounding healthy tissue. Consequently, patients can resume their normal activities and diets within a couple of days, rather than running the risk of dehydration or rapid weight loss because of the longer recovery period needed for traditional tonsillectomies. (Following any type of tonsillectomy, however, patients should avoid vigorous activities such as sports and running, and young children, in particular, should not be allowed on playground equipment like monkey bars.)

When the tonsils can no longer perform their assigned role – to fight infections and combat bacteria that come through the mouth and nose – they become a source of infection themselves and the resulting condition is called tonsillitis. Doctors typically recommend performing a tonsillectomy if a person experiences three to four episodes of infectious tonsillitis per year for three consecutive years; five episodes in one year; or seven such infections in two years.

While many people assume that these infections lead to the 600,000 tonsillectomies in the U.S. each year, the more common reason for removing tonsils is because they are too large and block the throat. This blockage can interfere with normal breathing, nasal sinus drainage, swallowing, speaking, and most importantly, sleeping.

Not only can enlarged tonsils aggravate snoring, they can even cause an alarming condition called sleep apnea, which involves an occasional stoppage of breathing. Yet

one study showed that only 18 percent of parents knew that tonsillectomy is a common treatment for conditions such as pediatric obstructive sleep apnea.

Rather than tolerating problems – and possibly serious infections or life-threatening apnea – parents and patients should talk with their doctors and explore new options for removing the tonsils, including the use of Coblation techniques.

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