

# Tonsils and adenoids In SDB

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GP Northside  
Network  
Update  
Feb 2013

## T and A's In SDB

- \* Children 2- 20
- \* Ts and Ads
- \* 10-12 % Snore
- \* 1-2% OSA
- \* Parachute use to prevent death and major trauma related to gravitational challenge: systematic review of randomised controlled trials
- \* *BMJ 2003; 327 doi: 10.1136/bmj.327.7429.1459 (Published 18 December 2003)*

## SDB definition

- \* Abnormal respiratory pattern in sleep
- \* Snoring
- \* Mouth breathing
- \* Breathing pauses
- \* Restless sleep
- \* Sweating
- \* Day time symptoms

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## Associations

- \* Poor concentration
- \* Neurocognitive delay
- \* Parasomnias
- \* Failure to thrive
- \* Enuresis
- \* Mid-facial hypoplasia
- \* Cor Pulmonale

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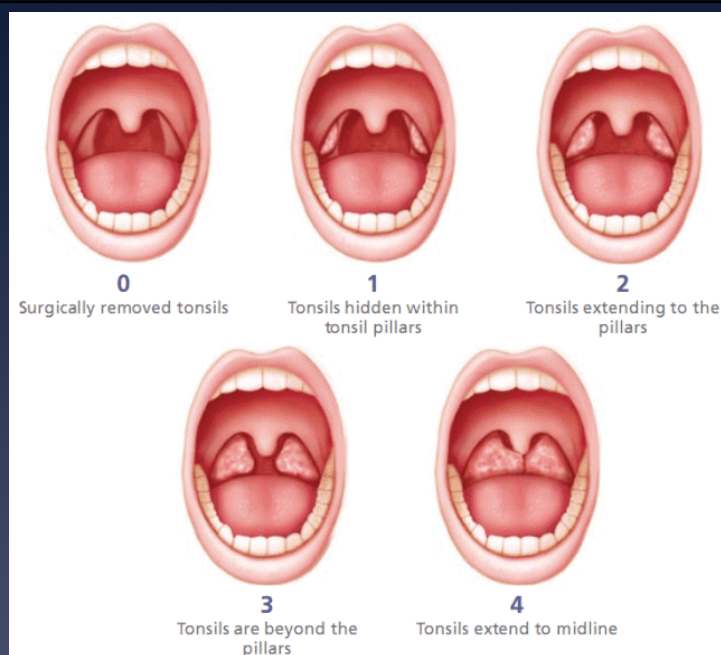
## Clinical picture presenting features

- \* Disordered breathing
  - \* Audio recordings
  - \* Video recordings
- \* Diurnal associations
- \* Exam
  - \* Tonsillar enlargement
  - \* Nasendoscopy -Normal nose
  - \* Otological exam

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## Doctor clinical suspicion

- \* SDB underestimated by carer's
  - \* REM when SDB most likely to occur
- \* Audio
- \* Video
- \* Clinical exam

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## Investigations

- \* Radiology
- \* PSG
- \* OSA= SDB OSA on PSG
  - exact parameters not defined

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## Sleep Study (PSG)

- \* Recommended
  - \* Co-morbidities
    - \* Downs
    - \* Neuromuscular diseases
    - \* Craniofacial deformities
    - \* Mucopolysaccharidoses
    - \* Sickle cell anemia

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## Sleep Study advocated

- \* Controversy between clinical history and exam
- \* Indications for surgery is uncertain
- \* Disagreement in a family
- \* Obesity/overweight (>95<sup>th</sup> />85<sup>th</sup> centile)
  - \* 25-50% SDB
  - \* May well not be cured
  - \* Treatment may not be curative
  - \* Post op PSG
  - \* Weight gain post op
- \* Under 3
- \* No standardization, no clear definition regarding need for surgery

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## Management

- \* Adeno- tonsillectomy remains first line treatment
- \* Improve
  - \* QOL
  - \* Neurocognitive development
  - \* Behaviour
  - \* Facial development
  - \* Enuresis
  - \* Height and weight

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## Other indications

- \* Infection
  - \* >3 per year 2 years or more
  - \* >6 in one calendar year
- \* Asymmetric hypertrophy
  - \* Controversial
- \* Adenoidectomy alone?

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## Techniques

- \* Tonsillectomy vs tonsillotomy
- \* Cut and coagulate efficient
- \* Low volume energy
  - \* Radiofrequency probe
  - \* U/S probe
  - \* Laser ?

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## Post op

- \* Worse before they get better
- \* Slough looks terrible
- \* Halitosis
- \* Treatment
  - \* Analgesia / antibiotics
  - \* No bleeding
  - \* Liquids
  - \* Apyrexial
  - \* (Steroids)

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