Operation to remove adenoids

Children’s Ward
Patient Information Leaflet

Introduction
This leaflet is for young people who are considering having an operation to remove their adenoids. It gives information on what adenoids are and what the operation involves.

If you have any questions or concerns, please contact a member of the Children’s Ward.

What are adenoids?
The adenoids are small lumps of tissue at the back of the nose. They are part of the immune system, which helps fight infection and protects the body from bacteria and viruses. They form a kind of barrier against infections.

Only young people have adenoids. They start to grow from birth and are biggest when you are approximately three to five years old.

But by age seven to eight, they start to shrink and by the late teens, are barely visible. In adults, the adenoids have disappeared completely.
The adenoids disappear because although they may be helpful in young children, they are not an essential part of an adult's immune system.

**How are the adenoids taken out?**
The medical name for taking out adenoids is adenoidectomy.

The adenoids are taken out through the mouth. The operation is carried out using a general anaesthetic. This means you will be asleep for the operation. The person who gives you the general anaesthetic is called an anaesthetist.

The anaesthetic is given to you through a cannula that is put into the back of your hand. A cannula is a thin, plastic tube (please see figure 1).

![Cannula diagram](image)

Figure 1 shows a cannula

**What are the benefits of taking them out?**
Sometimes adenoids can swell and get very big. Usually, this does not cause a problem and does not need any treatment. However, sometimes this causes pain and starts to interfere with daily life. It can cause:

- Breathing problems, such as shortness of breath or always breathing through the mouth
- Sleeping problems, often caused by the breathing problems
- A lot of ear infections
- Sinusitis that keeps coming back. Sinusitis can cause a constantly runny nose and face pain.

In these cases, the hospital doctor may suggest that the adenoids are taken out so that these symptoms go away.
What are the risks of taking them out?
All operations have some risks but these only happen to a few people. The risks of having your adenoids taken out are:

- Bleeding. If this happens on the day of your operation, you may have to have another operation to stop it.

- If the bleeding happens at home, during the first 10 days after your operation, it is usually due to an infection. In this case, you may need to come back into hospital for treatment such as antibiotics. (Antibiotics are medicines that kill bacteria.)

  If the bleeding does not stop, you may need to have another operation to stop it.

- If you have any capped, crowned or loose teeth, these may get damaged or may come out during the operation, if the surgeon does not know they are there. (The surgeon is the doctor who carries out the operation). **So you must tell the surgeon before your operation, if you have any teeth like this.**

Are there any alternatives to this operation?
Antibiotics can sometimes be used to treat infections of adenoids. However, if these do not work to reduce the swelling, the hospital doctor may suggest that the adenoids are taken out.

Do I have to have my adenoids taken out?
You do not have to have this operation, if you do not want it. However, your symptoms may continue if you do not have it.

What do I need to do before the operation?
We will send you instructions about this in the operation appointment letter.
What happens when I come for the operation?
You will have an appointment for the morning or the afternoon.

When you arrive at the Children’s Ward, a nurse will ask you some questions and do some tests such as taking your:

- blood pressure
- heart rate
- breathing rate

The nurse will put a wrist band on each of your wrists and put a cream on the backs of your hands. This cream is sometimes called magic cream. It makes the back of your hands numb so that you do not feel any pain. It is used so that when the anaesthetist puts a cannula into your hand to give you the anaesthetic, you will not feel this being put in.

The surgeon will come and see you and explain the operation to you. If you want to have the operation, the nurse will ask you and (if you are under the age of 18) your parent/guardian to sign a consent form. This means that you are giving your permission for the surgeon to do the operation.

The anaesthetist will come and see you to check that you are well enough to have the operation.

The surgeon has a lot of operations to do and so there is a list of these. The surgeon does the operations in the order on this list. The nurse will be able to give you a rough idea of the time you will have your operation. However, sometimes there are delays if operations take a bit longer than they thought.

If you have any questions or worries, please ask the nurse who is looking after you.

What happens when I go for the operation?
A nurse will take you to the anaesthetic room to have your anaesthetic. Your mum, dad or guardian (only one of them) can go with you to the anaesthetic room and stay with you until you are asleep. Nurses will be looking after you all the time that you are asleep.
What happens after the operation?
When you wake up, you will be in a recovery room with a nurse. The nurse will give you a drink and some food, if you want it. When the nurse is happy that you have recovered, they will take you back to the Children’s Ward to your mum, dad or guardian.

You may still have a cannula in your hand when you go back to the ward. This can be used to give you medicine, if you need it. For example, some people feel sick after having a general anaesthetic. If you feel sick, tell your nurse and we can give you some anti-sickness medicine. We will take the cannula out before you go home.

Will it hurt?
We will give you medicine to get rid of the pain (painkillers) while you are having your operation so that when you wake up, you should not feel any pain. We will also give you painkillers regularly when you get back to the Children’s Ward.

When you get home, it is a good idea to have painkillers regularly such as Calpol. You must always read the label on this medicine and not take more than it says on the label.

When can I go home?
After your operation, you will need to stay in hospital for at least six to eight hours. You may need to stay for one night, if your hospital doctor thinks that is a good idea. Either your mum, dad or guardian can stay with you for the night.

After this time, you can go home when:

- you have eaten enough food and drink
- you are not having any bleeding from your throat
- you have had a wee
- you are not being sick
- you have a normal temperature
- your hospital doctor says you are well enough to go home

When you do go home, it is best for you to travel in a car as on public transport (buses, trains, metro), you are more likely to get an infection.
What happens when I get home?
School – you will need to stay off school for at least 10 days to feel completely well and reduce the risk of getting an infection.

Eating and drinking – we recommend that you eat a normal diet. You do not need to eat any special foods.

Please avoid people who have coughs and colds, or who are smoking, for the first week. This will reduce your chance of getting an infection. If you get an infection, it will increase your risk of bleeding from your wound.

What happens if I become ill?
If you feel ill, are sick or have a temperature when you get home, you will need to contact your family doctor or the Children’s Ward. The number of the Children’s Ward is:

01384 244271

If you get any bleeding from your mouth or nose (even a little bit), you will need to ask your mum, dad or guardian to take you to your nearest emergency department (A & E) so that they can check it out.

Will I need to see the hospital doctor again?
If your hospital doctor needs to see you again after your operation, we will send you an appointment through the post. This is usually two or three months after your operation.

Can I find out more?
The NHS Choices website has more information about taking out adenoids:

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Children’s Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

http://dudleygroup.nhs.uk/services-and-wards/paediatrics-and-neonatology/

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Children’s Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

http://dudleygroup.nhs.uk/services-and-wards/paediatrics-and-neonatology/

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Children’s Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

http://dudleygroup.nhs.uk/services-and-wards/paediatrics-and-neonatology/

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.