

# Tonsillectomy in adults with severe recurrent sore throats may benefit some people

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Tonsillectomy may result in fewer severe sore throats and could benefit some adult patients, according to a randomized trial published in *CMAJ* (*Canadian Medical Association Journal*).

Recurrent severe [sore throats](#) result in lost work or school days and frequent [use of antibiotics](#).

Researchers from Finland conducted a randomized open trial to determine whether [tonsillectomy](#) reduced episodes of severe sore throats (pharyngitis). The trial involved 86 patients, 46 of whom had the procedure and 40 who did not. The primary outcome was the difference in the number of patients with severe pharyngitis within 5 months. This had to be confirmed by a visit to a medical professional, a throat culture or blood sample and a rating of pain as severe.

At 5 months, 3% of the control patients (1) and none of the tonsillectomy group had a severe sore throat. Of the people in the tonsillectomy group, 4% (2) visited a physician for a severe sore throat compared with 43% (17) in the [control group](#); 80% (32) of the control group had an acute sore throat compared with 39% (18) in the tonsillectomy group.

"During follow-up, the overall rate of pharyngitis and number of days with throat pain, fever, rhinitis and cough were significantly lower in the tonsillectomy group than in the control group," writes Dr. Timo Koskenkorva, Department of Otorhinolaryngology, Institute of Clinical

Medicine, University of Oulu and Oulu University Hospital, Oulu, Finland, with coauthors.

However, "patients in both groups graded their throat pain as mild."

The tonsillectomy group reported improved quality of life with few lost work or school days compared with the control group.

The researchers note that because the trial was open and participants knew whether they had had a tonsillectomy, subjective bias might have been introduced to the study.

"[Adult patients](#) who had disabling pharyngitis involving the palatine tonsils more than 3 times per year that prevented normal functioning and led to medical consultation benefitted from tonsillectomy," conclude the authors. "The morbidity and complications related to tonsillectomy must be considered when physicians and patients decide whether the clinical benefits outweigh the risks of surgery."

**More information:** [www.cmaj.ca/lookup/doi/10.1503/cmaj.121852](http://www.cmaj.ca/lookup/doi/10.1503/cmaj.121852)

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