

Tonsillectomy may carry more risks in kids age 3 and under

March 16 2018, by E.j. Mundell, Healthday Reporter



(HealthDay)—When a child's tonsils become inflamed, surgical removal

—a tonsillectomy—is often ordered.

But new research suggests more caution may be needed in patients aged 3 or younger.

The study of more than 1,800 cases involving children under the age of 6 found that the rate of complications— events such as bleeding or respiratory issues—rose for the youngest patients.

Specifically, kids aged 3 or under had a 7 percent odds of requiring care for these post-tonsillectomy issues, compared with 4.6 percent of children aged 3 to 6, the findings showed.

Furthermore, "we did not find [a child's] weight to be a useful predictor of complications," wrote the researchers, who were led by Dr. Claire Lawlor, a pediatric otolaryngologist at Boston Children's Hospital.

The bottom line, the study authors said, is that "age rather than weight" is key to gauging the safety of tonsillectomy in very young kids.

A pediatrician who wasn't involved in the study said the findings confirm much of what's already known on the subject.

"The take-away for parents, I would say, is that tonsillectomy may be appropriate for some children, whether because of recurrent [tonsil] infections or obstruction," said Dr. Michael Grosso. He's chair of pediatrics at Huntington Hospital in Huntington, N.Y.

"However, it is an operation that is not altogether without risks," he added. "First, be sure that it is necessary, and get a second opinion if there is any doubt."

The Boston researchers also noted that the complication rate didn't seem

to change whether or not the child had had an overnight stay in the hospital after a tonsillectomy.

Grosso pointed out that many hospitals— his included—mandate such overnight stays, and he believes they can help safeguard kids to a certain extent.

However, the new research shows that inpatient observation and care "protects against some complications, but not those that can take a week or more to happen," Grosso said.

Specifically, the new study "found that dehydration and breathing problems happened more often in the younger patients, while bleeding was present in almost the same number of [children](#), regardless of age," he explained.

The study, published online March 15 in *JAMA Otolaryngology—Head & Neck Surgery*, is the largest such review on the subject ever conducted, Lawlor's team noted.

Dr. Lee Smith is chief of pediatric otolaryngology at Cohen Children's Medical Center in New Hyde Park, N.Y. He believes that inpatient admission for kids under 3 does help safeguard patients, should a complication arise.

"This policy has been in place [at the medical center] for greater than eight years and has worked well to maintain a safe environment for these young patients," Smith said.

"All surgery has inherent risk, and as [health care providers](#) we need to establish guidelines which mitigate those risks and provide the safest environment for our pediatric [patients](#)," he added.

More information: Michael Grosso, M.D., chair, pediatrics and chief medical officer, Huntington Hospital, Huntington, N.Y.; Lee P. Smith, M.D., chief, pediatric otolaryngology, Cohen Children's Medical Center, New Hyde Park, N.Y.; March 15, 2018, *JAMA Otolaryngology—Head & Neck Surgery*, online

Find out more about tonsillectomy at the [American Academy of Otolaryngology—Head and Neck Surgery](#).

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