

# Kids getting too many opioids after tonsillectomy

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THURSDAY, Aug. 8, 2019 (HealthDay News) —Amid a U.S. epidemic

of opioid abuse, a new study finds that even children are being prescribed powerful opioid painkillers after having their tonsils removed.

The trend is happening despite a lack of evidence that opioids (such as OxyContin) are the best option for post-op pain or complications, the researchers said.

"Our study suggests that many [children](#) receive [opioid prescriptions](#) after tonsillectomy and that the amount of opioids in these prescriptions may be excessive," said study lead author Dr. Kao-Ping Chua.

"We need to conduct research to identify interventions that safely and effectively reduce opioid exposure for these children," added Chua, who is a researcher and pediatrician at the University of Michigan C.S. Mott Children's Hospital, in Ann Arbor.

Tonsillectomy remains one of the most common surgeries for children. Currently, the American Academy of Otolaryngology recommends non-opioid painkillers—such as nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen—for tonsillectomy.

But how closely are doctors adhering to those guidelines? To find out, Chua's group tracked data on nearly 15,800 U.S. children under the age of 18. All were covered by private insurance coverage and they had undergone tonsil removal in 2016 or 2017.

The researchers found that 60% of the children received opioid painkillers, with the average prescription lasting six to 10 days.

However, "to minimize the risks of opioids to children and their families, clinicians should rely on non-opioids when possible," Chua said in a university news release. "When opioids are used, they should aim to

prescribe only the amount that patients need."

He believes that it's "possible to reduce opioid exposure among children who undergo this common surgery, without increasing the risk of complications."

Chua speculated that there are several possible reasons why so many children receive opioid prescriptions despite guidelines advising against it. One factor could be the mistaken belief that opioids might provide better pain relief or reduce risk of return visits for uncontrolled pain leading to dehydration.

But that's just not borne out by the evidence. The study found that taking opioids wasn't associated with fewer return visits for pain or dehydration, but it *was* tied to a higher risk of constipation and at least one case of an opioid overdose.

Conversely, some surgeons believe that NSAID painkillers increase the risk of bleeding after tonsillectomy, Chua said. But, again, [clinical trials](#) have not found that to be the case.

Furthermore, the median opioid prescription for children in the study was eight days, which could represent 48 doses of opioids—much more than what the average patient needs, Chua said.

A prior Mott study found that children who underwent [tonsillectomy](#) in 2013 were prescribed an average of 52 [opioid](#) doses but had an average of 44 leftover doses.

Over-prescribing opioids to children not only poses a risk to them, but also to family and friends who may abuse the leftover opioids, the researchers said.

The study was published Aug. 8 in *JAMA Otolaryngology-Head & Neck Surgery*.

**More information:** The U.S. National Library of Medicine has more on [tonsillectomy](#).

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