

Adenoidectomy

What to expect after the procedure

1. Fever as high as 101 is very common, especially within the first 24 hours. If greater than this (or starts several days after surgery), please contact our office.
2. Bad breath. This may last for 10-14 days. Continue to brush the teeth like normal and know that this will get better. We do not recommend using mouthwashes to try to help this.
3. Ear pain. This is what is called "referred pain" due to the shared nerves in the back of the nose that also go to the ear. It is extremely unlikely there is also an ear infection at the same time. Use Tylenol and Motrin to help with this.
4. Headache and stiff neck. If the patient gets a virus after the procedure, this can cause stiffening of the muscles under the adenoid pad. This is why we recommend keeping your child home from school or daycare for 5 days after the procedure. When it comes with a fever (see #1), this can look like the symptoms of meningitis. Meningitis is not a complication of the surgery, but the normal postop course can look similar.
4. Your child's voice may sound different after surgery for 10-14 days. This is due to swelling of the muscles in the throat allowing more air to escape through the nose. This will resolve as the swelling goes down and the muscles begin to work naturally.

What are Adenoids and why are they important?

The adenoids are made of tonsil-like tissue that grow in the back of the nose. Adenoids are removed surgically, commonly through the mouth, and leave no visible scar. If enlarged or chronically infected, they can cause:

-Ear problems— by affecting the function of the Eustachian tube, either by obstruction or as a source of recurrent infection.

-Recurrent sinus infections—by being a source of bacteria (like the tonsils can be for recurrent strep throat). Approximately half of children with recurrent sinus infections can be cured with adenoidectomy alone.

-Nasal obstruction—by filling up the space in the very back of the nose, making it difficult to breathe. The blockage of the nasal passage can result in snoring and chronic mouth breathing. There is strong evidence that links chronic mouthbreathing to orthodontic problems in the developing child, as well as changes in facial appearance.