

Tonsillectomy and/or adenoidectomy (with a bleeding disorder)

What is a tonsillectomy and adenoidectomy?

Tonsillectomy is removal of the tonsils.
Adenoidectomy is removal of the adenoids.
Tonsillectomy and adenoidectomy (T and A) are often done together.

What can I expect after surgery?

Because children with bleeding disorders have an increased risk for bleeding after this surgery, it is generally recommended that they stay overnight in the hospital for close observation.

It is common to have an upset stomach and possibly some vomiting (throwing up) during the first 24 hours after surgery.

After surgery, desmopressin, Amicar® and/or other medications may be given by IV (in the vein) to help control bleeding. These medicines are important to the healing process, so your child will stay in the hospital until able to take them by mouth or until arrangements can be made to give them by IV at home.

Your child will be given pain medicines after surgery. Children with bleeding disorders **must not** take aspirin or non-steroidal anti-inflammatory medicines, such as ibuprofen (Pediaprofin®, Motrin®, Advil®), Nalfon®, Naprosyn®, or Indocin®. These medicines increase the chance of bleeding.

Children with bleeding disorders **may** take acetaminophen (Tylenol®), Tylenol® with codeine, or celecoxib (Celebrex®) for pain and inflammation (swelling).

Please talk with your doctor, nurse practitioner, or nurse if you have questions about the medicines.

The amount of pain varies. It may be more painful in the morning, and less during the day, when taking pain medicines and keeping the throat moist by eating and drinking. Pain sometimes worsens again in the evening, especially during the first three days of healing. Soreness may be present for up to 2 weeks, especially when swallowing. It may get better after a few days and then become more painful again as the scabs heal. Please call the hematology clinic if the soreness prevents taking the medicines.

Your child's voice may change a little after surgery since there is more space in the throat where the tonsils and adenoids used to be. This change in voice could be permanent, or it may go away after a while.

Ear pain is common, often when swallowing. This is because the ear and throat have a common sensory nerve, and there is an air tube that connects the ear to the throat.

Jaw spasms (uncontrollable movement of the jaw) may occur because these muscles were affected during positioning for surgery. Chewing gum may help relieve jaw pain.

It is common for neck muscles to be sore after an adenoidectomy. This may last up to one week.

Your child will have bad breath for a few weeks, until the throat heals.

Because of swelling in the throat, snoring is common after surgery but should go away after about two weeks. Raising the head of the bed and using a cool humidifier may decrease swelling.

How should I care for my child?

Fluids

Make sure your child drinks enough liquids within the fluid restriction guidelines. Keeping the throat moist eases discomfort and **prevents dehydration** (a dangerous condition in which the body gets dried out). If your child vomits, stop giving fluids for an hour and encourage lying down and resting. After one hour, start fluids again in small amounts.

Controlling bleeding

Your child may need to continue the desmopressin and Amicar after going home, to help prevent bleeding. Desmopressin may be given intravenously (IV) in the clinic, or by using the nasal spray Stimate® at home. With IV desmopressin or Stimate, please follow the **fluid restriction guidelines** given to you, and refer to the education sheets “Desmopressin (DDAVP) for bleeding disorders,” or “Desmopressin (Stimate).”

Amicar is often given by mouth using pills or liquid. Children may not like the taste, but Amicar **must** be taken as often and as long as prescribed to prevent bleeding. See

the education sheet, “Aminocaproic acid (Amicar)”.

Pain control

Before giving pain medicine, ask your child to rate the pain using the Faces or Numbers Scale given to you by the nurse. Using the pain scales will help your child better communicate with you about the pain. Keep a record of your child’s pain scale ratings along with the time and amount of each medicine given. This will help you and your child to know how well the pain medicine is working over time. A pain scale rating of 4 or less means the medicine is working as expected.

Give pain medicine on time. It is important to give pain medicine every 4 to 6 hours (day and night) as ordered, for the first 2 to 3 days. Research has shown better pain control with regular doses, instead of waiting until the pain is bad and then trying to get it back under control. Plan to give the pain medicine 30 to 45 minutes before meals so it has time to work and help make swallowing easier.

Pain medicine suppositories are available for younger children who often refuse to swallow medicines.

Distraction, movies, music, massage, or other non-medicine pain control methods help the pain medicine work better.

More ways to help your child

You can use a cool mist humidifier (especially at night) to decrease morning throat dryness and pain. Raise your child’s upper body with several pillows to make it easier to breathe and swallow.

To prevent bleeding, avoid coughing, nose-blowing, clearing the throat, and spitting. Wipe the nose gently if needed. When sneezing, encourage your child to open the mouth and make a sound, to prevent pressure buildup in the throat.

Avoid people who have colds, flu, or infections.

What can my child eat?

Encourage mild, bland clear liquids such as:

- apple juice or white grape juice
- Gatorade®
- Jell-O®
- Kool-aid®
- Popsicles®
- flat pop (stir to remove bubbles)
- water (use only if getting enough calories from other liquids or food)

If your child has an upset stomach, give small amounts often. **Note:** If your child vomits after drinking red liquids, the vomit will be red.

When your child wants food, add dairy and soft foods such as:

- applesauce
- cooked cereal, thinned with milk
- ice cream
- milk shakes (use a spoon, not a straw)
- mashed potatoes
- pudding
- smooth yogurt

Liquids are more important than food. **Be sure your child drinks enough to urinate every 8 hours**, but if your child is using IV desmopressin or Stimate, follow the fluid guidelines for those medicines.

When your child wants other foods, ask yourself: “Is it easy to chew? Does it get very soft when chewed? Is it free of coarse, rough, or crispy edges?” If the answer is yes, your child can probably eat it. (See the chart below for ideas.)

Be sure to cut foods **very small** and encourage your child to chew them **well**. Continue the soft diet for 2 weeks after surgery or until there is complete healing.

Avoid citrus fruits and juices such as orange juice and lemonade, as they may sting your child’s throat. **Avoid** foods that are hot in temperature or spicy hot.

Here are some soft food ideas:

May eat	Should not eat
<ul style="list-style-type: none"> • soft bread • soggy waffles or french toast (no crusts), soaked in syrup • pancakes • scrambled or poached eggs 	<ul style="list-style-type: none"> • toast • crispy waffles • fried foods
<ul style="list-style-type: none"> • oatmeal, other creamy cereals • soggy cold cereal (soaked in milk) 	<ul style="list-style-type: none"> • crunchy cold cereal
<ul style="list-style-type: none"> • soup • pasta, noodles • rice • Spaghetti-Os® • macaroni and cheese • hot dogs, hamburger • tender, moist meat, chicken, or fish 	<ul style="list-style-type: none"> • tough, dry meat, chicken, or fish
<ul style="list-style-type: none"> • milk • custard, pudding • ice cream • malts, shakes • yogurt (smooth) • cottage cheese 	<ul style="list-style-type: none"> • cookies • crackers • pretzels • chips • popcorn • nuts

sandwiches (no crusts): <ul style="list-style-type: none"> smooth peanut butter and jelly processed cheese tuna 	<ul style="list-style-type: none"> grilled cheese sandwiches
<ul style="list-style-type: none"> cooked vegetables mashed potatoes 	<ul style="list-style-type: none"> raw vegetables tomatoes
<ul style="list-style-type: none"> applesauce bananas canned fruits watermelon without seeds 	<ul style="list-style-type: none"> citrus fruits most fresh fruits
<ul style="list-style-type: none"> juices (not citrus) Kool-aid® flat pop (no bubbles) Jell-O® 	<ul style="list-style-type: none"> citrus juices pop with bubbles

What else do I need to know?

Bleeding risk is greatest at two times: right after surgery and 7 to 10 days afterwards, when the scab may fall off. Please be sure to come back to the hematology clinic as instructed, usually about 6 to 8 days after surgery.

Do not travel out of reach of your doctor for 2 weeks.

Healing takes about **2 to 3** weeks. Complete healing occurs when there is no longer any scab present in the back of the throat. Your hematologist will show you pictures of what this healing will look like.

Encourage quiet activities indoors for the first 3 to 5 days. Children can usually return to school or day care after one week. **No** active play, gym, or running for 2 or 3 weeks after surgery. **Avoid** any activity that lowers the head below the heart (such as gymnastics or hanging from monkey bars)

for 3 weeks after surgery, because this greatly increases the risk of bleeding.

Who and when should I call for help?

Call the hematology clinic if:

- any bleeding.
- vomiting blood or pink-tinged fluid
- nosebleed.
- soreness prevents taking medicines.
- problems giving Amicar, DDAVP, or Stimate.

Call the surgeon if:

- pain is not relieved with the medicines used as ordered.
- upset stomach and vomiting after 24 hours.
- temperature higher than 101° F (38.3° C).
- signs of dehydration are present:
 - sunken eyes
 - dry, sticky lips
 - no urine for more than 8 hours
 - no tears

Questions?

This sheet is not specific to your child, but provides general information. If you have any questions, call your child's doctor.

For more information about the medicines used to prevent bleeding, please see the education sheets "Aminocaproic acid (Amicar)," "Desmopressin (DDAVP) for bleeding disorders," or "Desmopressin (Stimate)."

Children's Hospitals and Clinics of Minnesota
Patient/Family Education
2525 Chicago Avenue South
Minneapolis, MN 55404
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