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Pediatric Otolaryngology

The Adenoids: Most Frequently Asked Questions

Matthew T. Brigger,
MD,MPH Division
Chief

Morgan Bliss, MD

Daniela S. Carvalho,
MD,FAAP

Wen Jiang, MD

Shelby Leuin, MD

Anthony E. Magit, MD,
FAAP,MPH

Jeremy Yang, MD

Zhen Qian, MD

Elina Kari, MD

Ethan Frank, MD

Tzyynong Friesen, MD

Vijay Patel, MD

Gopi Shah, M.D.>

Physician Assistant:

Virginia Floco, PA-C

Sallie Reyes, PA-C

Megan Copeland, PA-C

Kristina McCauley, PA-
C

Anita Lazar, PA-C

Ashley Sheng, P.A.-C

Melissa Spence, PA-C

Alyssa Odneal, PA-C

Main Office:

3030 Children's Way
1st floor

San Diego, CA 92123

(858) 309-7701

(858) 966-4062 Fax

Regional Offices:

Encinitas

(760) 944-5545

Escondido

(760) 755-7600

1. What are the adenoids?

The adenoids are a single clump of lymphoid tissue in the back of the nose. They are located on the back wall of the throat (pharynx), about one inch above the uvula (the little teardrop shaped piece of tissue that hangs down in the middle of the soft palate).

2. What function do they serve?

The adenoids are lymphoid tissue that reacts to infection by producing antibodies. Studies have shown no long-term problems for those who have had their adenoids removed. There is a great deal of other lymphoid tissue in the body that functions similar to the adenoids. Adenoids will usually "involute" or melt away by the early teen years.

3. Why do the adenoids become enlarged?

Adenoids enlarge in response to infections in the respiratory tract and allergic problems.

4. What are the symptoms of enlarged adenoids?

- Snoring at night
- Breathing through the mouth instead of the nose
- Nose sounds "blocked" when child speaks
- Chronic nasal discharge
- Recurrent ear infections
- Recurrent nasal/sinus infections
- Breathing stops for a few seconds at night during snoring (sleep apnea) or loud breathing which disrupts sleep (sleep disordered breathing)

5. How are the adenoids removed?

Removal of the adenoids is called an adenoidectomy and is usually done on an outpatient basis under general anesthesia. The adenoids are removed through the mouth using a special instrument that reaches behind the nose. The surgery takes approximately 15-20 minutes. Your child will be discharged home after approximately 1-1 1/2 hours.

6. What are the risks of adenoidectomy?

Bleeding is extremely rare after an adenoidectomy (1 in 1000) and most often occurs immediately after surgery in the recovery room.

7. Are there any special instruction when my child comes home?

- You may notice that your child snores, snorts, or appears congested for a short period of time after the surgery. This is due to swelling in the back of the nose and should settle with time. Gentle nose blowing is o.k.
- Bad breath post-operatively is also common. This should resolve 1-2 weeks after surgery. Nasal saline can help reduce the bad breath.
- Your child should return to normal activities immediately and may return to school the next day.
- For pain control, only acetaminophen (Tylenol) and ibuprofen (Motrin, Advil) is necessary on an as needed basis. There may be a mild sore throat the night after surgery.
- You may also notice that your child's voice has a higher pitch and sounds clearer after surgery. This is because larger adenoids can sometimes make the voice sound clogged.