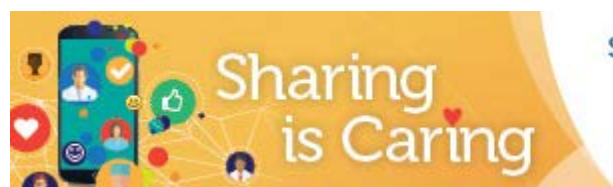


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Tonsillectomy Versus Watchful Waiting for Recurrent Throat Infection: A Systematic Review

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Abstract

CONTEXT: The effectiveness of tonsillectomy or adenotonsillectomy (“tonsillectomy”) for recurrent throat infection compared with watchful waiting is uncertain.

OBJECTIVE: To compare sleep, cognitive, behavioral, and health outcomes of tonsillectomy versus watchful waiting in children with recurrent throat infections.

DATA SOURCES: MEDLINE, Embase, and the Cochrane Library.

STUDY SELECTION: Two investigators independently screened studies against predetermined criteria.

DATA EXTRACTION: One investigator extracted data with review by a second. Investigators independently assessed risk of bias and strength of evidence (SOE) and confidence in the estimate of effects.

RESULTS: Seven studies including children with ≥ 3 infections in the previous 1 to 3 years addressed this question. In studies

reporting baseline data, number of infections/sore throats decreased from baseline in both groups, with greater decreases in sore throat days, clinician contacts, diagnosed group A streptococcal infections, and school absences in tonsillectomized children in the short term (<12 months). Quality of life was not markedly different between groups at any time point.

LIMITATIONS: Few studies fully categorized infection/sore throat severity; attrition was high.

CONCLUSIONS: Throat infections, utilization, and school absences improved in the first postsurgical year in tonsillectomized children versus children not receiving surgery. Benefits did not persist over time; longer-term outcomes are limited. SOE is moderate for reduction in short-term throat infections and insufficient for longer-term reduction. SOE is low for no difference in longer-term streptococcal infection reduction. SOE is low for utilization and missed school reduction in the short term, low for no difference in longer-term missed school, and low for no differences in quality of life.

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