Evidence Based Anaesthesia for Tonsillectomy

David Linscott
Christchurch Hospital, Christchurch, New Zealand

Tonsillectomy is one of the most frequently performed surgical procedures in children. Anaesthesia for tonsillectomy is the topic of frequent discussion and debate. A substantial body of literature relates to the performance of this anaesthetic. Despite this there are numerous techniques and opinions regarding the ideal tonsillectomy anaesthetic.

A national UK survey of the anaesthetic management of tonsillectomy in 2008 found intravenous induction used by 81% of respondents, intubation used by 79%, with muscle relaxants being used by 47%. Prophylactic ondansetron and dexamethasone were being used by 79 and 70% respectively. 77% of respondents used nonsteriodal anti-inflammatory drugs (NSAID’s) [1]

This presentation is going to focus on several key issues presented in the literature that should influence our management of children undergoing tonsillectomy.

- Is there an ideal analgesic combination, and how effective are the commonly used analgesics? [2,3]
- Does the analgesic efficacy of NSAID’s outweigh the risk of bleeding from these drugs? [4,5]
- Are local anaesthetic techniques safe or effective? [6,7]
- How does our choice of analgesics impact on the incidence of post operative nausea and vomiting? [8]
- Is there an ideal prophylactic antiemetic regimen?[9,10]
- Are dexamethasone and ondansetron harmless essential prophylactic antiemetics? [11,12]
- Does protocol based anaesthetic care improve outcome from tonsillectomy? [8]

3. Postoperative Pain. Pediatric Anesthesia 2008, 18(Suppl. 1) 36-63


