


COBLATION[®] Intracapsular Tonsillectomy (CIT): a prospective series of 1,257 paediatric cases with long-term follow-up


Amin N, Bhargava E, Prentice JG, Shamil E, Walsh M, Tweedie DJ. Coblation Intracapsular Tonsillectomy in children: A prospective study of 1257 consecutive cases with long term follow up. *Clin Otolaryngol.* 2021 Apr 27 [ePub ahead of print].

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Key points



Significant postoperative improvements in health-related quality of life (HRQoL) at a median follow-up of 101.5 days (p<0.05)



0.5% secondary haemorrhage rate (6/1257 children) after CIT



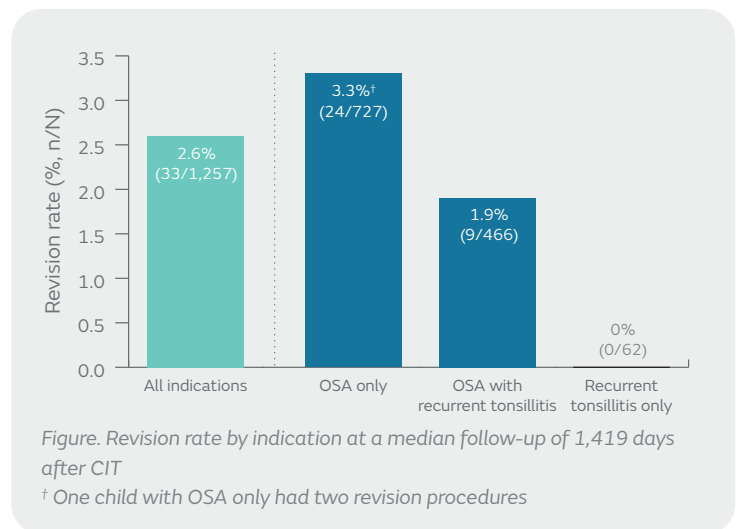
2.6% revision rate (33/1,256 children) at median follow-up of 1,419 days after CIT

Overview

- Prospective, consecutive case series of 1,257 children (median age, 4.2 years; range, 0.9-18 years) undergoing CIT for infective or obstructive symptoms at a tertiary ENT centre in the UK
- Indications for CIT included:
 - Obstructive sleep apnoea (OSA; n=727; 57.8%)
 - Combined OSA and recurrent tonsillitis (n=466; 37.1%)
 - Recurrent tonsillitis (n=62; 4.9%)
- Median duration of direct follow-up was 101.5 days; open access follow-up in the event of any complications or further symptoms was a median of 1,419 days
- Primary outcomes:
 - HRQoL via the T-14 tonsil symptom questionnaire, a validated parent-reported outcome tool for paediatric tonsillectomy
 - Postoperative pain
 - Adverse events and complications

Results

- Significant improvements in HRQoL, including both obstructive and infective domains of the T-14 score at a median of 101.5 days from preoperative values (p<0.05)
- No primary haemorrhages; secondary haemorrhage rate of 0.5% (6/1,257 children), with 3 readmissions for observation and no children returning to the operating room
- Median duration of analgesia was 6 days
- Most children returned to normal diet within 24 hours and to school/nursery within 1 week
- Revision rate of 2.6% (33/1,257 children); all revisions were in children with OSA indications for CIT (Figure)
- 99.5% of parents (1,239/1,245 children) were satisfied
- No serious complications; one child was readmitted for a chest infection and required antibiotics



Conclusions

In a consecutive case series of 1,257 children receiving COBLATION Intracapsular Tonsillectomy for obstructive and/or infective indications, results showed significant postoperative improvements in HRQoL, a low haemorrhage rate and a 2.6% revision rate at long-term follow-up.