

Thames Valley Priorities Committee Commissioning Policy Statement

Policy No. TVPC 22 **Tonsillectomy for surgical management of recurrent tonsillitis and obstructive sleep apnoea in children and adults.**

Recommendation made by the Priorities Committee: **May 2015**

Date of issue: **November 2015**

A watchful waiting approach is more appropriate than tonsillectomy for children with mild sore throats. Tonsillectomy is recommended only for recurrent severe sore throat in adults.

Indications for consideration of tonsillectomy for recurrent acute sore throat in both Children (<16) and adults:

- sore throats are due to acute tonsillitis
- the episodes of sore throat are disabling and prevent normal functioning
- **five or more** well documented, clinically significant, adequately treated sore throats in the preceding year; Centor score 3-4¹ OR
- **three or more** such episodes in each of the preceding two years

Indications for considering tonsillectomy for sleep disordered breathing in children (<16)

- confirmed diagnosis of sleep disordered breathing either on basis of history and examination or, if necessary, findings from further investigations (e.g. Sleep study)
- consider impact on quality of life, behaviour and development
- consultation with parent/carers about management options using shared decision making strategies and tools where appropriate
- management options: tonsillectomy or adenotonsillectomy, or if appropriate, referral to paediatrician or discharge back to primary care

Indications for considering tonsillectomy for sleep apnoea in adults

- confirmed diagnosis of OSAHS (obstructive sleep apnoea/hypopnea syndrome) in the presence of large tonsils.

This policy statement has been informed by the SIGN guideline: [Management of sore throat and indications for tonsillectomy \(2010\)](#) and [Royal College of Surgeons Commissioning Guide: Tonsillectomy \(2013\)](#).

¹ <http://cks.nice.org.uk/sore-throat-acute#!scenario>

NOTES:

- Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.
- This policy will be reviewed in the light of new evidence or new national guidance, e.g., from NICE.
- Thames Valley clinical policies can be viewed at <http://www.fundingrequests.ccsu.nhs.uk/>