

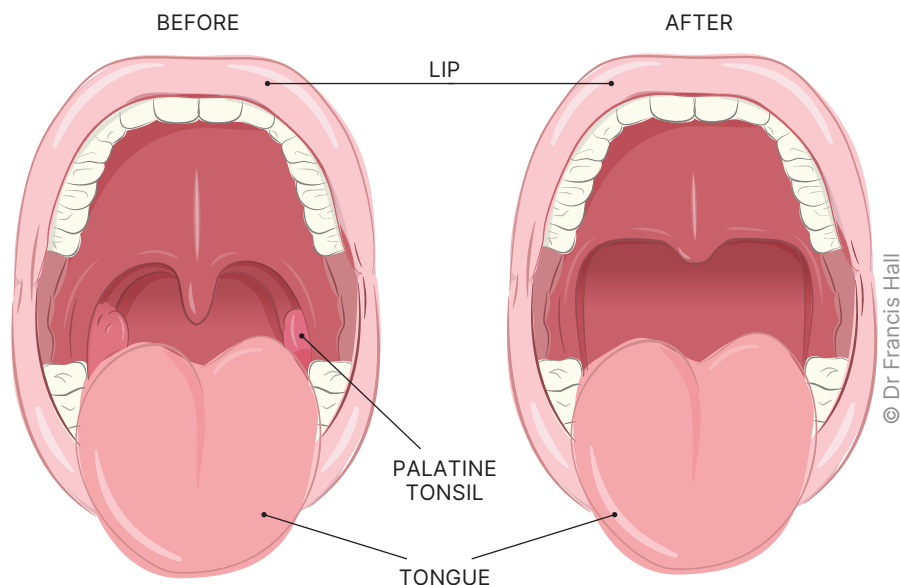


Dr. *Francis* T. Hall

EAR, NOSE, THROAT, HEAD & NECK

## Expansion Palatoplasty care

Expansion palatoplasty is the name of the operation when the tonsils are removed, the throat is widened, and the uvula is shortened. The tonsils lie on either side of the throat. The uvula is the dangly thing that hangs down between the tonsils. This operation is done to treat obstructive sleep apnoea (OSA) and is also very effective for snoring.



Expansion palatoplasty is usually combined with coblation tongue channelling. Coblation uses radio frequency to reduce the size of the tongue. It is done with a small probe and is directed to the back of the tongue.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to feel better as quickly as possible.

## What to expect?

You can expect to have a sore throat for about two to three weeks. Often the throat gets more sore about 6 days after the surgery. Often your ears hurt too. Ear pain is due to referred pain from the throat. There is nothing wrong with the ears, the brain just gets a little confused as to where the pain is coming from as the throat and the ear share the same nerve. Usually, the throat is more sore in the morning, when the throat is dry and you haven't taken your pain medication.

## How can you care for yourself at home?

### Activity:

- Do not drive in the 24 hours following your surgery.
- Getting enough sleep will help you recover.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk.
- You will need to take 2-3 weeks off work.
- In order to reduce the chance of bleeding, avoid strenuous activities, such as bicycle riding, jogging, weight lifting, or aerobic exercise, for 2 to 3 weeks or until Dr Hall says it is okay.
- Do not swim for two weeks.
- Do not fly, go boating or go anywhere remote for 18 days following surgery. If you bleed when you are away from access to medical care you are placing your life at risk.
- What should I eat after my tonsils are removed?
- Because the throat is sore, it hurts to swallow. Usually, soft food is less painful to swallow. Traditionally the recommendation was for jelly and ice cream. However, people eat all sorts of things after having their tonsils removed, including hamburgers, chips, pizza and curry. Eat whatever you feel comfortable eating.
- Although it may hurt to swallow, eating helps keep the pain at manageable levels.
- It is important to drink plenty of fluids-water, milk, juice, whatever. Aim for about two litres of fluid per day. That way you will stay well hydrated and this helps a lot with any pain.

### **Pain medicines:**

- Dr Hall or his anaesthetist will prescribe several different medicines for the pain, from the following list: paracetamol (Panadol), ibuprofen (Brufen), celecoxib (Celebrex), Etoricoxib (Arcoxia), gabapentin and Diffiam spray. Please take the medications as instructed. Call Dr Hall if it is difficult to cope with the pain, he can make changes to your medications that can make a big difference to your level of comfort.
- If you think your pain medicine is making you sick to your stomach:
  - Take your medicine after meals (unless Dr Hall has told you not to).
  - Ask Dr Hall for a different pain medicine.
- My throat looks white and horrible, is it infected?
- After a few days you may notice that there is pale grey stuff where your tonsils used to be. This is the throat's equivalent to a scab on your knee. It is normal and nothing to be alarmed about.

### **Bad breath:**

- It is not unusual to notice bad breath or an unusual smell or taste in the mouth for 1-2 weeks after your surgery.

### **Problems:**

- Bleeding. If you bleed from either your mouth or nose, go to the emergency department. It is preferable to go to the emergency department at Auckland Hospital as they have an ENT registrar on site to deal with emergencies. Please note, neither Middlemore Hospital or Northshore Hospital have an ENT emergency service. Call Dr Hall on 021 733 677 as you are being driven into the hospital.
- Not many patients bleed, only about 2% but for that 2% it can be quite dramatic and frightening.
- Change in voice is uncommon following expansion palatoplasty. Sometimes the change in voice is due to air escaping into the nose when talking. Liquid and even food can go into the nose when swallowing. This is called velopharyngeal insufficiency (VPI), it is uncommon and when it does occur it is usually temporary.
- Likewise, a change in taste is uncommon and usually temporary although on rare occasions it may be permanent.

### **Follow up appointment:**

- Dr Hall usually sees his expansion palatoplasty patients about 6 weeks after surgery. His nurse will arrange your follow up appointment for you. If you have not heard from Rebecca within two weeks of your surgery, please contact her on 09 281 2963.
- Three months after surgery, Dr Hall will arrange a home-based sleep study. This is important as it quantifies the change in your OSA. Usually, most people feel much better after they have recovered from their surgery, the snoring has stopped or lessened significantly, and they are sleeping better. Often, they have returned to sleeping in the same bed as their partner. Despite an improvement in overall well being it is still important to have a sleep study three months after surgery. This is likely to show a significant reduction in your apnoea hypopnea index (AHI).
- It is critically important to not put on weight after surgery otherwise you are likely to negate the effects of surgery and your OSA will return.

**Any problems call or text Dr Francis Hall on 021 733 677**

Dr.  T. Hall