ADENOIDS
What are they & how do they affect my child’s hearing?

WHAT ARE ADENOIDS?
The adenoids are small pads of tissue at the back of the nose but above the throat. They cannot be seen if you look in your child’s mouth, as they are hidden by the roof of the mouth. The adenoids are located near the Eustachian tube, which is the tube that allows air into the middle ear.

WHAT DO ADENOIDS ‘DO’?
The adenoids help to protect the body from germs. There are a lot of organs in the body that also protect us from germs, so your child will still be well protected if the removal of adenoids is required.

If the adenoids are large or swollen, then your child may suffer from frequent ear infections or fluid in the middle ear, which is sometimes called ‘glue ear’. Children who have glue ear will often experience fluctuating hearing loss.

WHY WOULD MY DOCTOR RECOMMEND THAT THE ADENOIDS BE REMOVED?
Removing the adenoids is called an ‘adenoidectomy’. There are a number of reasons why your child may need to have their adenoids removed which include:

- Difficulty in breathing and sleeping at night if the adenoids are enlarged
- Constant mouth breathing due to large adenoids
- Frequent ear infections and / or fluid in the middle ear (‘glue ear’).

WHAT HAPPENS DURING THE OPERATION?
This operation involves your child staying in hospital on the day of the surgery, and sometimes overnight. They must not eat or drink anything before the operation. Your child will be given an anaesthetic to put them into a deep sleep before the operation, this stops them feeling any pain during the surgery.

After the operation children sometimes feel a bit sick, however they are usually allowed to drink and eat whatever they can tolerate. Your child may need pain medicine after they go home, as prescribed by your doctor.
ARE THERE ANY COMPLICATIONS?

As with all surgery, there is a small risk of complications. These may include infection or bleeding. You should discuss the possible risks with your Ear Nose and Throat Specialist and the Anaesthetist before surgery.

WHAT HAPPENS IF NOTHING IS DONE?

If chronic ‘glue ear’ or ear infections are left untreated, young children may have difficulty with speech and language development, or may have difficulty learning at school.

Poor sleeping patterns due to blocked airways may cause fatigue, poor behaviour and difficulty concentrating.

The medical conditions that may develop from ‘glue ear’ may cause permanent damage to parts of the ear and could result in permanent hearing loss.

In some children, as they grow, the adenoids may become less swollen, and there may be less obstruction of the airways.

All of the effects of enlarged adenoids need to be considered when deciding the most appropriate management for your child. Discuss this with your specialist.

HOW DO I KNOW IF MY CHILD HAS ‘GLUE EAR’?

Glue ear can sometimes go undetected. Some signs to look for are: chronic mouth breathing, snoring, ‘nasally’ speech, not responding to instructions, tiredness, poor concentration, and occasionally poor behaviour.

Your child should have a hearing assessment including tympanometry (a measure of middle ear function) to determine if their ears are healthy.

Hearing assessments are available at your local Community Health Centre by appointment.

YOUR LOCAL CENTRE MAY BE CONTACTED AT: