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**The Indications for Tonsillectomy in Adults and in Children**

Wskazania do tonsylektomii u dorosłych i u dzieci

Показания к тонзиллэктомии у взрослых и детей

After the views on the role of the lymphatic tissue changed, the indications for tonsillectomy also changed. For the estimation of indications for tonsillectomy all the operated cases in the Laryngological Clinic in Lublin in the years 1952—1972 were analyzed. This analysis revealed, that the number of tonsillectomies in this period diminished three times, whereby in children — six times, and in adults — twice (Fig. 1). The number of these operations diminished mostly due to the decrease in tonsillectomies for general indications, i.e. non-laryngological ones (about 50% and in children even about 70%), less — for laryngological and general indications (about 35%), and at least — for laryngological indications alone (about 15%).

In the last 6 years the rate of tonsillectomies for the laryngological indications in children was 65% and in adults 75% of these operations. In other patients tonsillectomy was performed due to general diseases related to chronic tonsillitis (Fig. 2). The laryngological indications were as follow: tonsils hypertrophy disturbing breathing and deglutition, recurrent peritonsillar abscess, purulent cyst, and some neoplasms. The internal diseases accounted in children for 100% and in adults for 85% of non-laryngological indications, and consisted of all forms of rheumatic fever, nephritis, bronchial asthma. On the remaining 15% of general indications contributed other diseases: the neurological (*Sclerosis multiplex*,

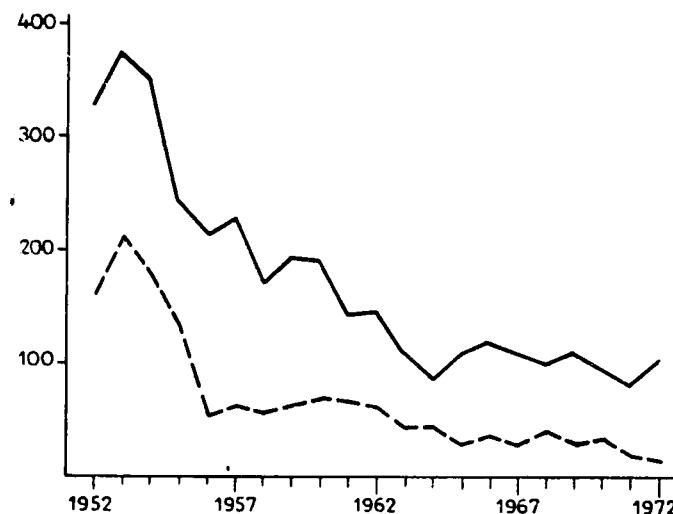


Fig. 1. The number of tonsillectomies in the consecutive years in children and in adults together (continuous line) and in children alone (dotted line)

*chorea minor*), the ophtalmological (*Neuritis nervi optici, retinitis*), the psychiatric (*Psychosis*) and the dermatological diseases (*Psoriasis*).

The rate of tonsillectomies in women was 64% and in men 34% of these operations. A similar relation was observed in children. The reason for the higher percentage of operations in women could be the higher incidence rate of chronic tonsillitis and general diseases related to it in women, and perhaps their greater sensibility to pain as well.

We opened an inquiry concerning the indications for tonsillectomy to

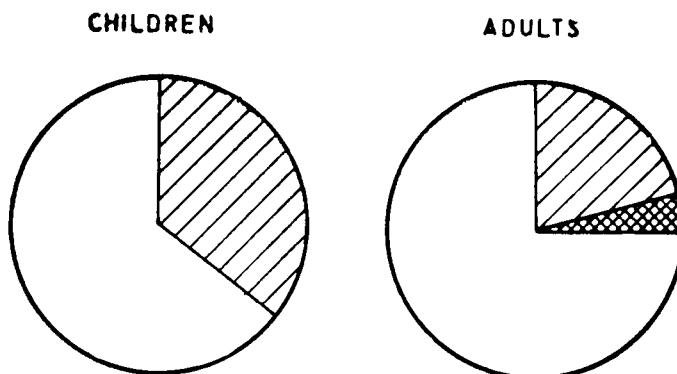


Fig. 2. The indications for tonsillectomy in children and in adults. White area — the laryngological indications, striped area — the internal diseases, black area — other diseases

14 otolaryngological clinics in Europe. The date from the most clinics (9 from 14) were similar to our criteria and management. The reasons for the decrease in the number of tonsillectomies could be the improved results of pharmacological treatment of chronic tonsillitis and the limitation of indications for tonsillectomy. Many investigations revealed that the lymphatic tissue plays an important role in the pathomechanism of allergy and resistance. In the tonsils phagocytosis and the identification of bacterial antigens takes place. The releasing ribonucleic acid (m.RNA) stimulates the synthesis of antibodies in the bone-marrow, the spleen, the lymph nodes and in the tonsils as well. The free antibodies and the antibodies bound to lymphocytes are synthetized (1, 8, 12). There are also antibodies in the secretion of the mucosa of the respiratory tract, but they are a little different from serum antibodies (10).

Many authors think, that some general diseases could be caused by chronic tonsillitis. Following tonsillectomy due to laryngological and general indications (rheumatic fever, nephritis) some biochemical indicators of these general diseases normalize and the incidence rate of anginas diminished too (4, 5, 9). But up to the present time we do not have any objective tests, which could point out the causative relationship between chronic tonsillitis and the general disease. After some authors the course of the general disease following tonsillectomy quite seldom if ever improved (2, 11). That is why the indications for tonsillectomy in the non-laryngological diseases should be taken up by an experienced team of specialists. This has a peculiar significance in children, in whom tonsilectomy deprives the organism of a „vaccine laboratory” and just in the period, when the resistance is mostly required (3, 6, 7).

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## S T R E S Z C Z E N I E

Przeprowadzono analizę wszystkich przypadków schorzeń laryngologicznych i nielaryngologicznych zakwalifikowanych do wyłuszczenia migdałków podniebiennych w Lubelskiej Klinice Laryngologicznej w latach 1952—1972. Z analizy tej wynika, że liczba tonsylektomii w ocenianym okresie zmniejszyła się trzykrotnie, w tym u dzieci — sześciokrotnie, a u dorosłych — dwukrotnie. Omówiono przyczyny spadku liczby tonsylektomii w świetle aktualnych poglądów na rolę tkanki limfatycznej w patomechanizmie odporności.

### O B J A Ś N I E N I A R Y C I N

Ryc. 1. Liczba tonsylektomii w poszczególnych latach u dorosłych i dzieci łącznie (linia ciągła) oraz u dzieci (linia przerywana).

Ryc. 2. Wskazania do tonsylektomii u dzieci i u dorosłych. Pole białe — wskazania laryngologiczne, pole zakreskowane — choroby wewnętrzne, pole czarne — inne choroby.

### P E Z Ю M E

Авторы проанализировали все случаи ларингологических и неларингологических заболеваний, в процессе лечения которых проводилось вылущивание миндаликов. Исследованиями были охвачены больные,леченные в Ларингологической клинике (Люблине) в 1952—1972 гг. Из анализа следует, что число тонзиллэктомии в этот период уменьшилось в три раза, причем у детей — в шесть раз, а у взрослых — в два раза. Авторы анализируют причины уменьшения числа тонзиллэктомии в свете актуальных взглядов на роль лимфатической ткани в патомеханизме иммунитета.