Tonsillectomies are among the most common procedures performed on children. Approximately 300,000 are performed in the U.S. each year. New research is questioning the benefits of these procedures.

The tonsils and adenoids are immune tissues that lie in the back of the throat and nasal passages. They are responsible for helping inform the immune system of the germs that enter the body through the nose and mouth. Because the role of these tissues is to inform the body of incoming germs, they are in frequent contact with germs. As a result, they can become infected.

There is some question as to whether these infections represent a problem that needs to be treated or a natural response used by the immune system to protect the body.

In a recent study published in a prominent medical journal, the benefits of tonsillectomies and adenoidectomies was reviewed. In the study, a group of children who suffered with chronic throat infections was split into two groups. One group received surgery for the problem. The other group received no treatment. They followed these children for 2 years after the surgeries were complete and recorded the number of re-infections, treatments and cost of treatment.

The results would be surprising to many pediatricians, especially those who commonly perform or recommend these procedures. They found that those children who had the surgeries, had only a very slight reduction in re-infections, not enough to be considered clinically significant. In addition, the cost of treating these children for ear, nose and throat infections over the two year follow-up period was 47% higher for those who had the surgery versus those who did not.

Based on this study, which has been the most comprehensive to look at this issue, it would appear that most children who suffer from tonsil and adenoid infections would not benefit enough from surgery to warrant the procedure. If you have children for whom surgery has been recommended, you might want to ask your pediatrician if he or she has seen this study. It appeared in volume 133 of *Arch Otolaryngol Head Neck Surg*.