
Tilmelding af Foredrag

Foredragets titel

Throat-related quality of life before and six months after tonsillectomy in patients with recurrent acute tonsillitis: what is the best predictor for improvement?

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Introduktion

Recurrent acute tonsillitis (RT) is the most common indication for tonsillectomy in adults. It remains unclear whether contemporary guidelines (focusing on number of tonsillitis episodes) are the best predictors for improvement in throat-related quality of life (TR-QOL). We investigated the TR-QOL in adult RT patients before and after tonsillectomy and explored predictors for improved TR-QOL.

Materiale/metode

A prospective multicohort study was conducted. Group 1 (G1): patients not meeting the criteria in focus. Group 2 (G2): patients meeting the Danish national guidelines criteria. Group 3 (G3): patients meeting the Paradise and/or the Scottish Intercollegiate Guideline Network (SIGN) criteria. TR-QOL was assessed using the Tonsillectomy Outcome Inventory 14 (TOI-14) and the Glasgow Benefit Inventory (GBI) before and six months after tonsillectomy. Predictors for improved TR-QOL were investigated using linear regression.

Resultater

61 (92%) patients completed the follow-up questionnaires. All groups showed significant TR-QOL improvements (G1 (n=20): Δ TOI-14 31.1, GBI 29.4; G2 (n=31): Δ TOI-14 32.0, GBI 36.4; G3 (n=10): Δ TOI-14 45.6, GBI 39.7). Δ TOI-14 scores were significantly higher in G3 vs. G1 ($p=0.022$) and G2 ($p=0.029$). The preoperative TOI-14 score was the best predictor for improvement (coefficient 0.91, $R^2=0.799$, $p<0.001$). 97% of patients were satisfied having undergone surgery, two were unsure, and no patients were dissatisfied.

Diskussion

TR-QOL scores showed massive improvements in all groups. The majority of patients were satisfied with undergoing tonsillectomy. The preoperative TOI-14 score was a better predictor for improved TR-QOL than the number of tonsillitis episodes, and may be a preferable tool for assessing whether/when RT patients should be offered tonsillectomy.

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