

Post-tonsillectomy deaths up in children with complex chronic conditions

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The rate of postoperative mortality following tonsillectomy is 7.04 per

100,000 operations overall among children younger than 21 years and 117.22 per 100,000 operations for children with complex chronic conditions, according to a study published in the June 21 issue of the *Journal of the American Medical Association*.

M. Bruce Edmonson, M.D., M.P.H., from the University of Wisconsin School of Medicine and Public Health in Madison, and colleagues estimated postoperative mortality following tonsillectomy in U.S. [children](#) in a retrospective cohort study. Data were included for 504,262 participants younger than 21 years for whom discharge records were available, with at least 90 days of follow-up. Participants underwent 505,182 tonsillectomies.

The researchers found 36 linked postoperative deaths, which occurred a median of 4.5 days after surgical admission. Fifty-three percent occurred after surgical discharge. The unadjusted mortality rate per 100,000 operations was 7.04. Neither age younger than 3 years nor sleep-disordered breathing was significantly associated with mortality in multivariable models, but significantly higher mortality was seen for children with complex [chronic conditions](#) versus those without these conditions (117.22 versus 3.87 deaths per 100,000 operations). Children with complex chronic conditions accounted for 2.8 and 44 percent of tonsillectomies and postoperative deaths, respectively. Of the deaths associated with complex chronic conditions, most occurred among those with neurologic/neuromuscular or congenital/genetic disorders.

"These findings may inform decision-making for pediatric tonsillectomy," the authors write.

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