

Parental preferences for duration of hospital stay following tonsillectomy

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Abstract

Parents of children undergoing (adeno) tonsillectomy were questioned about their preferences for a period of hospitalization. The proportion wanting early discharge increased as their children recovered after surgery.

Key words: Tonsillectomy; Day care; Parents

Introduction

Children are kept in hospital for a variable length of time for tonsillectomy. As the length of hospital stay is proportional to cost and to the stress for children and parents, we investigated the opinions of parents about their preference regarding the period of hospitalization.

Patients and methods

Children awaiting tonsillectomy in this hospital informally visit the unit several weeks before surgery to familiarize themselves with the ward and the nursing staff. They are then admitted the day before surgery and stay in for two nights following the operation.

The parents of 74 consecutive children (40 boys and 34 girls, aged from three years seven months to nine years two months: median age six years two months) admitted from the waiting list for (adeno) tonsillectomy were asked by medical staff to complete a questionnaire anonymously. They were asked at various times during their stay, whether they wanted to and would be able to look after their children at home. The questionnaire consisted of four parts. The first part was to be completed at admission, the second part four to six hours after the oper-

ation, the third part on the first post-operative day and the final part on the second post-operative day before discharge. The third and fourth part asked for the previous part to be answered again to assess whether their views had changed after seeing what was involved in their children's care. They were asked about the time taken to travel to the hospital, the availability of private transport, the presence of other pre-school children at home and whether both parents worked full-time. They were assured that the responses would be read only after their child was discharged and would not affect routine care.

Results

Table I summarizes the responses.

All parents felt it was unnecessary to admit children a day before surgery.

Four to six hours post-operation

The parents of nearly half the children felt they would be able to look after their children at home and nine of these parents would have preferred it.

On the first post-operation day

After experiencing the care given at night in the hospi-

TABLE I
SUMMARY OF RESPONSES (*n* = 74)

	Wanted day-case operation			Able to manage as a day case		
	Yes	No	Don't know	Yes	No	Don't know
On admission	8 (11%)	62 (84%)	4			
4-6 hours post-op	9 (12%)	61 (82%)	4	36 (49%)	36 (49%)	2
1st day post-op	12 (16%)	59 (80%)	3			
2nd day post-op	34 (46%)	39 (53%)	1	18 (24%)	54 (73%)	2

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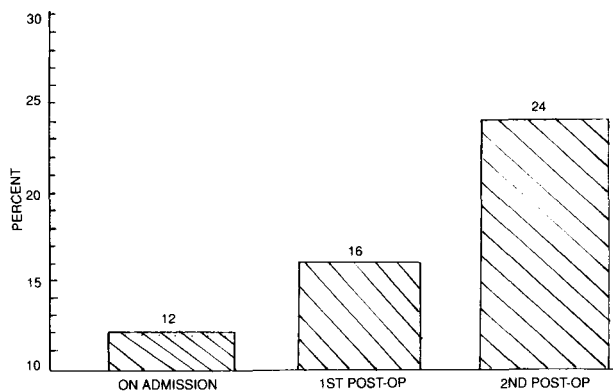


FIG. 1

Proportion able to manage as a day case

tal, the parents of four among the above nine, changed their minds and felt that their children were better looked after in the hospital while the parents of seven other children who had earlier not wanted to take their children home, now felt they could have cared for their children just as well at home.

On the second post-operative day

Before discharge, nearly half felt that tonsillectomy on a day-case basis would have been very convenient. A quarter felt that they would have managed such an arrangement.

The parents of 30 (40 per cent) children wanted them discharged on the first-operative day while 43 (58 per cent) were pleased that their children had spent the second night in hospital.

All parents lived within 30 minutes of the hospital and most (86 per cent) had private transport. This and the presence of other pre-school children at home did not influence the preferred time of discharge.

Discussion

Most units, including this one now discharge their patients on the first post-operative day.

All parents would be influenced by the normal routine of the unit and this may explain why a proportion wanted their children kept in hospital for two nights following the operation.

The apparent progressive decrease in the proportion feeling able to manage as a day case is due to the same question being perceived differently. While a few hours after operation parents were expressing their ability to look after their children at that time, at discharge the response relates to their final conclusions about day-case tonsillectomy.

As parents experienced the normal post-operative course following tonsillectomy so an increasing proportion felt able to provide the care at home. The proportion of parents who felt able to manage as a day case increased as they progressed in the post-operative care of their children (Figure 1). Hospitalization is stressful for children and parents (Bradford and Spinks, 1992) and in this study nearly half would have preferred a very short stay if safety could be assured.

Tonsillectomies are increasingly being performed as day cases in North America and Canada and this is well accepted by parents (Maniglia *et al.*, 1989; Colclasure and Graham, 1990; Riding *et al.*, 1991).

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