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The Impact of Adenotonsillectomy on Health-Related Quality of Life in Paediatric Patients

Objective: To determine the impact of Adenotonsillectomy on Health-related quality of life (HRQoL) in children's before and after surgery.

Study Design: Prospective, Observational, before and after the trial. 142 children who underwent Adenotonsillectomy were included in the study. Parents were made to fill pre and post-operative questionnaires which were customized from Tonsil and Adenoid health status instrument (TAHSI) and HR-QoL (Health-related quality of life) forms, one day prior to the surgery and 6 months after the surgery respectively, and the results were tabulated and analyzed.

Setting: Tertiary pediatric otolaryngology practices.

Result: Out of the 142 children in the study, 80 were male and 62 were female. Male to Female ratio is 1.3:1. Age group 1-4 years had the highest number of patients while the age group 9-12 had the least. Preoperatively the Mean score of the domain for Sleep disturbances, Physical Symptoms, Emotional distress, Daytime functions, and Caregiver concern was 14.1, 15.83, 6.89, 7.54, and 13.78 respectively. After 6 months of the surgery, the score decreased to 4.65, 4.22, 4.32, 3.1 and 4.2 respectively. This shows a significant improvement in the symptom complex and the quality of the life.

Conclusion: Adenotonsillectomy definitely leads to an improvement in the HRQoL in children as the majority of parents were extremely satisfied with the surgical outcome. Almost all of the parents reported a decrease in Sleep disturbances, Physical Symptoms, Emotional distress, Daytime functions, and Caregiver concern

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Case Report **Published Date:- 2018-08-30**

Congenital poisoning after maternal parenteral mercury administration

This is the case of a full-term baby girl, born to a mother with a history of parenteral inorganic mercury administration. Thirteen years prior, this mother injected 1mL of inorganic mercury in her right forearm, was subsequently hospitalized, but never received chelation treatment. Her first trimester blood and urine mercury concentration were found to be elevated at 28?g/L (normal <10?g/L) and 162 ?g/L (normal <20?g/L) respectively. Her chest x-ray also revealed multiple small punctate metallic densities within the lower lung fields. The remainder of the prenatal course was uneventful. The baby was born at 40 weeks of gestation via uncomplicated caesarian section, and on day of life 3, blood mercury concentrations were found to be 20?g/L (normal <20?g/L). The baby, however, remained asymptomatic throughout her hospital stay and on outpatient follow up. She is now two years old. Mercury poisoning in the pediatric population remains a concern, and knowledge of exposure and health effects continues to be relevant as newer uses and modes of exposure are discovered. This case report illustrates a rare perinatal exposure scenario, and, while the mother and child were essentially asymptomatic, the case serves to raise awareness of the many ways in which fetuses, infants, and children may still be exposed to the harmful effects of mercury. This case underscores the need for careful environmental history taking in pregnancy, after birth, and ideally in the pre-conception period as well.
