Evaluation of Obstructive Sleep Apnea Before and After Adenotonsillectomy in Children Referred to Qods Hospital, Qazvin

Jalilolghadr SH¹, Khamenehpour Kh¹ Saffari F, Mirzadeh Hs¹

1 Faculty of Medicine, Qazvin University of Medical Sciences, Qazvin, Iran

Introduction

Partial or complete obstruction of airways is called sleep-hypopnea syndrome. The preferred treatment of this in children is adenotonsillectomy. This study was conducted to recognize the prevalent clinical signs of children’s obstructive apnea and evaluate the effect of adenotonsillectomy on curing the symptoms.

Methods

This experimental before-after intervention was performed on 30 children aged between 1 to 12 years old who had the signs of snifing and obstructive apnea and were candidates of adenotonsillectomy in Qods
children hospital of Qazvin, Iran. Data was gathered by standardized and localized BEARS and CSHQ questionnaires and analyzed by paired T, Chi-square and Pearson correlative tests using SPSS v.18.

Results

2 months after performing adenotonsillectomy, there were no signs of repeated awakens during sleep (p=0.027), over-activity (p=0.003) and nightly anxiety and irritability and all the samples were awake 10 to 20 minutes before sleep in their beds (p=0.002). Overall, 26 children were completely cured after 2 months. There were a significant positive correlation between nightly sniffing and appetite loss. Cessation of breathing had a significant positive correlation with sweating while sleeping, nightly anxiety and irritability and weakness of learning.

Conclusions

Nightly sniffing and hardness and cessation of breathing during sleep are the prevalent signs of obstructive sleep apnea in children. Adenotonsillectomy is a suitable method for decreasing the disorders of obstructive sleep apnea in children.