Making the Best Use of Resources in Acute Tonsillitis

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Aim

In this project we examined and analysed the rate and duration of admission for acute tonsillitis, in patients who attended A&E with sore throat. Our aim is to assess if changes can be made to improve the management of these cases and utilise better hospital resources.

Method

We collected retrospectively the data for 100 patients who attended A&E and were diagnosed with acute tonsillitis between 11th of July and 14th of September 2017. Patients with miscoded diagnosis or unavailable records were excluded, leaving 95 attendances available for analysis.

Results

From the 95 attendances the 22 resulted in admission, which is an admission rate of 23%. The 40% of those who were admitted were discharged within 24 hours.

The 63.3% of the admissions went to the ENT department, the 27.2% was admitted in the paediatric department and the 9% in the observation ward.

When comparing the observations between the patients who were discharged more or less than 24 hours after admission, it is noted that the average WCC is lower in <24 hours group and neutrophil: lymphocyte ratio is higher in <24 hours group.

The patients who were admitted for less than 24hours received on average 2.6 doses of IV antibiotics, 0.6 doses on IV steroids and only 44% of them received IV fluids.

	Discharged <24hrs	Discharged >24hrs
Average doses of IV abx	2.6	7
Average doses of IV steroids	0.6	2
IV fluids	4pt (44%)	8pt (61%)
Average IV fluids on those given	1300ml	2000ml

Conclusions

- 23% of A&E presentations with acute tonsillitis are being admitted
- 40% of admissions are discharged within 24 hours
- Those discharged within 24 hours seem to have lower WBC and higher neut:lymp ratio
- Those discharged within 24 hours receive approximately 2 doses of IV antibiotics

Discussion

A large number of admissions with acute tonsillitis are sent home on the ward round the following day. We suggest that management of these cases would be better suited to a short stay unit as opposed to an acute in-patient bed.

In the literature there are examples of protocols that have been introduced in the A&E department which lead to a significant reduction of admission rate.^{1, 2}

References:

- Mohammed, H., Jin, X., Masterson, L. & Wickstead, M. (2016) Ambulant management of acute tonsillitis in adult patients, a study on 330 patients. Clinical Otolaryngology 42, 844–950
- Bird J.H., Biggs T.C., Schulz C. et al. (2013) Implementation of an evidence-based acute tonsillitis protocol: our experience in one hundred and twenty-six patients. Clin. Otolaryngol. 38, 410–415

The patients who were discharged in less than 24 hours and the patients who were discharged after 24 hours were as likely to have received oral antibiotics by the GP before admission.