



## Literature Review: Evaluation of the Use of Tonsillectomy as a Surgical Intervention in Patients with Recurrent Tonsillitis

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### Article Info

#### Article history:

Received 17 March 2026

Received in revised form 6 April 2026

Accepted 1 May 2026

#### Keywords:

Tonsillectomy

Recurrent Tonsillitis

Quality Of Life

Surgery

### Abstract

Recurrent tonsillitis is one of the most common diagnoses in ENT practice that significantly impacts patients' quality of life. Although antibiotic therapy is the first line of treatment, persistent infection often requires surgical intervention. This study aims to evaluate the clinical efficacy, impact on quality of life, and pharmacoeconomic aspects of tonsillectomy compared to conservative management. The method used was a narrative systematic review of international literature from 2016 to 2025 obtained from Google Scholar, PubMed, and NCBI. The results of the search of 17 selected articles showed that tonsillectomy significantly reduced the frequency of sore throat episodes and antibiotic use compared to medical therapy. The use of modern techniques such as Coblation has been shown to reduce postoperative pain and accelerate recovery compared to conventional techniques. In addition, tonsillectomy provides significant long-term improvements in quality of life, both physically and mentally. In conclusion, tonsillectomy is an effective, safe, and cost-efficient surgical procedure for patients with recurrent tonsillitis, with strict indications to optimize clinical outcomes.

## Introduction

Recurrent tonsillitis remains one of the most common diagnoses in ENT clinical practice worldwide, significantly affecting the quality of life of both pediatric and adult patients (Houborg & Klug, 2022; Tengen et al., 2026; Keskin et al., 2025). Although antibiotic therapy is often the first line of treatment, the persistence of throat infection episodes often forces clinicians and patients to consider surgical intervention. Evaluating the efficacy of tonsillectomy is crucial to ensure that this invasive procedure provides greater benefits (Wilson et al., 2023).

In recent decades, there has been debate regarding the choice between total tonsillectomy (extracapsular) and tonsillotomy (intracapsular/partial) (Mesolella et al., 2025; Mukerji et al., 2022; Piitulainen et al., 2022). The TOTO protocol study emphasizes the importance of evaluating whether tonsillotomy, which is less invasive, can provide equivalent results in terms of reducing recurrent infections compared to standard tonsillectomy. This is based on the need to reduce post-operative morbidity without compromising control of the clinical symptoms of recurrent tonsillitis in all age groups (Guntinas-Lichius et al., 2021; Sheffer et al., 2026; Alenezi et al., 2025).

In adult patients, the decision to perform tonsillectomy is often triggered by the failure of medical therapy and the adverse impact on productivity and daily activities (Magradze et al., 2026; Siciliano et al., 2026; Mwabu et al., 2026). Based on the NATTINA study published in *The Lancet*, there is strong evidence that tonsillectomy is clinically more effective than conservative management (medication) in reducing the frequency of sore throat episodes in adults over a two-year period (Farkas & Leschek, 2024; De Maria et al., 2023; Ibrahim et al., 2025). These findings provide a more robust scientific basis for clinicians to recommend surgery in cases of high recurrence (Wilson et al., 2023; Salzano et al., 2026; Rossin et al., 2026).

In addition to medical efficacy, quality of life (QOL) is a vital evaluation parameter. Recent research by Jurkiewicz et al. (2025) shows that tonsillectomy has a significant long-term positive impact on patients' quality of life. These improvements include not only a reduction in physical symptoms, but also improved mental and social health, given that chronic tonsillitis often causes sleep disturbances, decreased appetite, and repeated absences from work or school (Jurkiewicz et al., 2025; Ban et al., 2026; Rosiak et al., 2026).

From a pharmacoeconomic and health policy perspective, the evaluation must also consider the use of long-term antibiotics versus the risks of surgery (Attar et al., 2025; Karim et al., 2026; Davies et al., 2023). A "Lesser of Two Evils" analysis highlights that the excessive use of antibiotics in recurrent tonsillitis contributes to global antimicrobial resistance. In this context, tonsillectomy may be considered a more medically rational choice in certain patients compared to repeated administration of antibiotics that are no longer clinically effective (Jacob et al., 2024; Choudhari, 2026; Sakina et al., 2026).

In Indonesia, the application of tonsillectomy indications in adults must still follow strict criteria, such as the frequency of attacks that meet Paradise's criteria or the presence of secondary complications (Guntinas-Lichius et al., 2021). For example, in the case of a 19-year-old male with chronic tonsillitis, surgery was performed not only because of enlarged tonsils, but also because of functional impairment and the risk of systemic infection. Therefore, this literature review aims to reevaluate the position of tonsillectomy in modern treatment algorithms in order to provide optimal clinical outcomes (Tanjung & Imanto, 2016; Guntinas-Lichius et al., 2023; Albornoz et al., 2024).

## Methods

This study was conducted using a systematic literature review with a narrative approach to examine the role of tonsillectomy as a surgical intervention in patients experiencing recurrent tonsillitis. This design was selected because it allows a broader understanding of the available evidence while still maintaining a structured process in identifying and evaluating previous studies. Through this approach, the review was intended not only to summarize the current findings but also to explore how tonsillectomy has been assessed from clinical, functional, and economic perspectives in different patient populations.

The process of collecting the literature was carried out through electronic database searches in PubMed, Google Scholar, and NCBI. These databases were chosen because they provide wide access to peer reviewed medical publications that are relevant to otorhinolaryngology and surgical practice. The search focused on articles published between 2016 and 2025 in order to capture the most recent developments in the management of recurrent tonsillitis. Several keywords were used during the search process, including tonsillectomy, recurrent tonsillitis, surgical intervention, quality of life, and treatment outcomes. These terms were combined in various ways to ensure that the search remained sensitive enough to identify studies that addressed both the clinical effectiveness of surgery and its broader implications for patient care.

The selection of articles was guided by predetermined inclusion criteria to ensure that only relevant studies were reviewed. Articles were considered eligible when they reported original research or systematic reviews involving pediatric or adult patients diagnosed with recurrent tonsillitis and when they discussed the outcomes of tonsillectomy in relation to symptom improvement, postoperative recovery, quality of life, or economic considerations. Only full text articles published in English were included in the review to maintain consistency in interpretation of the findings. Studies were excluded when they involved duplicated data, lacked sufficient methodological information, focused on unrelated indications for tonsil surgery, or were published outside the defined period of review.

After the initial search was completed, each article underwent a staged screening process. Titles and abstracts were first reviewed to determine whether the studies were relevant to the objectives of the review. Articles that appeared suitable were then examined in full text to assess their methodological quality and their contribution to the research question. This process was carried out carefully to reduce the possibility of including studies that did not directly address the use of tonsillectomy in recurrent tonsillitis. From the 164 articles identified during the initial search, 17 studies were ultimately considered appropriate and were included in the final analysis.

The data obtained from the selected studies were analyzed narratively by comparing the characteristics and findings of each publication. Information extracted from the articles included study design, sample characteristics, surgical technique, postoperative outcomes, and the reported impact of tonsillectomy on patients. The findings from these studies were then interpreted collectively to identify recurring patterns in the literature and to provide a more complete understanding of how tonsillectomy has been evaluated as a therapeutic option for recurrent tonsillitis. Through this method, the review was able to present a comprehensive perspective on the benefits and limitations of surgical management in this condition.

## Result and Discussion

Based on the search results, 164 articles were found using keywords such as 'tonsillectomy', 'surgery', and 'recurrent tonsillitis'. All journals were included in the search and screening. The researchers then screened the titles and abstracts of the articles. At this screening stage, 147 articles were excluded because they did not meet the inclusion criteria or had been published within the last 10 years. Finally, 17 articles that met the inclusion criteria were selected for use in this literature review.

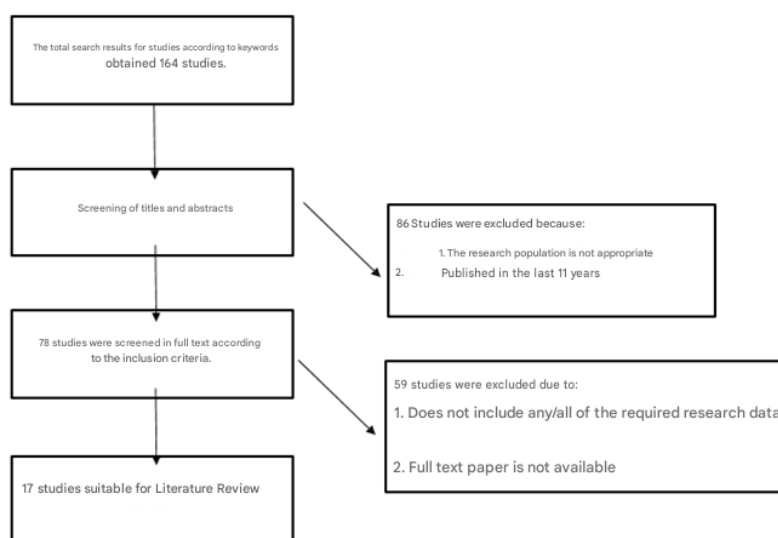


Figure 1. Literature Review

Table 1. Frequency Distribution Analysis of Anxiety Levels Regarding Menstruation

No	Title	Method	Author, Year	Main Results	Conclusion	Journal Source
1	Indications for tonsillectomy stratified by the level of evidence	Literature Review	(Windfuhr, 2016)	The efficacy of tonsillectomy has been proven to be high in severe recurrent throat infections.	Evidence stratification supports surgical intervention in cases that meet the criteria for severity.	PubMed / Scholar
2	The effect of tonsillectomy on morbidity from recurrent tonsillitis-	Morbidity Study	(Douglas et al., 2017)	Significant reduction in the number of sick days and antibiotic use after surgery.	Tonsillectomy effectively reduces morbidity from recurrent tonsillitis.	Clinical Otolaryngology
3	Tonsillectomy in adults: Analysis of indications and complications	Retrospective Analysis	(Galindo Torres et al., 2018)	The main indication in adults is recurrent infection; bleeding complications remain the primary risk.	The procedure is safe for adults as long as complications are carefully managed.	Ear, Nose, and Throat
4	Long-term outcomes of tonsillectomy for recurrent tonsillitis in adults	Long-Term Outcome Study	(Tzelnick et al., 2020)	Clinical benefits persist over the long term with high patient satisfaction.	Improvements in quality of life persist for years after surgery.	Laryngoscope
5	Karakteristik Pasien Tonsilektomi di Rumah Sakit Umum Waled	Clinical Description	(Wardoyo et al., 2025)	The most common patient profile is young people with chronic recurrent tonsillitis.	Demographic characteristics help map local surgical service needs. <sup>11</sup>	Medical Journal
6	Conservative management versus tonsillectomy in adults with recurrent acute tonsillitis in the UK (NATTINA): a multicentre, open-label, randomised controlled trial	Multicentre RCT	(Wilson et al., 2023)	Postoperative patients experienced significantly fewer days of sore throat compared to the conservative group.	Tonsillectomy is clinically and cost-effectively superior to medication in adults. <sup>12</sup>	The Lancet

7	Development of the Mayo Clinic VS Quality of Life Index	Instrument Validation	(Carlson et al., 2023)	The use of disease-specific instruments provides better accuracy in evaluating quality of life.	Surgical evaluation requires clinically validated QoL measurement tools.	Journal of Neurosurgery
8	Coblation Versus Cold Dissection Tonsillectomy	Comparative Study	(Sheet et al., 2022)	Coblation resulted in lower postoperative pain and faster wound healing.	The choice of surgical technique affects the speed of patient recovery.	Indian Journal of Otolaryngology

Research by Windfuhr (2016) emphasizes the importance of stratifying tonsillectomy indications based on strong scientific evidence to evaluate the effectiveness of this surgical procedure in severe recurrent throat infections. The review results indicate that tonsillectomy has significant efficacy in reducing infection frequency in patients with severe clinical symptoms, thereby reinforcing surgery as the standard of care in cases with high recurrence rates (Windfuhr, 2016).

Douglas et al. (2017) in their study on morbidity found that tonsillectomy effectively reduced the number of sick days and patient dependence on antibiotics due to recurrent tonsillitis. This provides a positive evaluation that surgery not only physically resolves the infection, but also reduces the cumulative morbidity burden experienced by patients in the short and medium term (Douglas et al., 2017).

An analysis by Galindo Torres et al. (2018) on adult patients highlights that the evaluation of tonsillectomy should consider the balance between the efficacy of resolving recurrent infections and the risk of postoperative bleeding complications, which remains a major clinical challenge. These findings confirm that in the adult population, the identification of appropriate indications and perioperative risk management are critical to the success of the final surgical outcome (Galindo Torres et al., 2018).

Tzelnick et al. (2020) evaluated the long-term outcomes of tonsillectomy in adults and found sustained improvement in clinical symptoms and high patient satisfaction over a prolonged follow-up period. This long-term success indicates that evaluating tonsillectomy as a definitive measure has proven capable of permanently breaking the chain of recurrent throat infections in the majority of patients (Tzelnick et al., 2020).

A descriptive study by Wardoyo et al. (2025) at Waled Regional General Hospital provided an overview of clinical characteristics, where tonsillectomy patients were predominantly of productive age with indications of recurrent chronic tonsillitis that interfered with daily activities. This data is an important part of evaluating the use of surgery at the local health service level to ensure that surgical interventions are directed at the population most in need of eliminating the focus of infection (Wardoyo et al., 2025).

The NATTINA randomized clinical trial by Wilson et al. (2023) provides strong evidence that tonsillectomy is clinically more effective than conservative management (medication) in reducing the total number of days of sore throat in adults over two years. This evaluation positions tonsillectomy as a superior therapeutic option compared to repeated medical therapy for patients suffering from high-frequency recurrent tonsillitis (Wilson et al., 2023).

Although Carlson et al. (2023) focused on disease-specific quality of life instruments, their methodology suggests that surgical evaluations, including tonsillectomy, require validated assessment instruments to accurately measure the impact of the procedure on patient well-being. The use of specific parameters helps ENT clinicians evaluate whether a decrease in the

frequency of post-tonsillectomy infections is directly proportional to an improvement in patients' social and physical functioning (Carlson et al., 2023).

A comparative study by Sheet et al. (2022) evaluated the surgical modalities of Coblation and Cold Dissection, showing that the choice of technique significantly affects post-operative pain intensity and recovery duration. In the context of evaluating surgical procedures in general, the use of more modern technologies such as Coblation can increase patient acceptance of tonsillectomy procedures due to a lower pain profile (Sheet et al., 2022).

A second study by Carlson et al. (2023) emphasizes the importance of validating quality of life in post-surgical evaluation as a standard in modern evidence-based medicine. For ENT doctors, integrating this quality of life assessment into tonsillectomy evaluation allows for more holistic monitoring of outcomes, rather than simply the disappearance of clinical signs of inflammation in the throat (Carlson et al., 2023).

Cavalcante et al. in their meta-analysis on PFAPA syndrome evaluated that tonsillectomy often provides complete resolution of symptoms of periodic fever and recurrent pharyngitis. This broadens the scope of evaluation for the use of tonsillectomy, showing that the benefits of surgery are not limited to common bacterial tonsillitis, but are also effective in certain recurrent inflammatory disorders in children (Cavalcante et al., 2025).

Further research by Wardoyo et al. (2025) noted that the majority of patients at Waled Regional General Hospital experienced significant improvement in symptoms after the surgical procedure was performed according to strict indication protocols. Routine evaluation of these patient characteristics helps hospitals establish the most effective standard operating procedures to minimize post-tonsillectomy hospitalization (Wardoyo et al., 2025).

The TOTO study protocol by Guntinas-Lichius et al. (2021) provides an evaluation framework for comparing total tonsillectomy with tonsillotomy in treating recurrent acute tonsillitis in all age groups. Evaluating whether less invasive partial techniques can provide results equivalent to total techniques is crucial in minimizing surgical morbidity without reducing therapeutic success (Guntinas-Lichius et al., 2021).

A case report on a 19-year-old male evaluated that tonsillectomy in young adults is often a necessary last resort when chronic tonsillitis has caused hypertrophy that interferes with breathing or swallowing. Surgery in this case was evaluated as an effective solution to prevent further systemic complications that may arise from a persistent focus of infection.

A cost-effectiveness analysis in the NATTINA study (2023) showed that tonsillectomy provides better economic value than long-term drug therapy for the healthcare system. This evaluation is highly relevant to health policy, where a single surgical procedure can reduce the cumulative costs of endless doctor visits and antibiotic purchases (Wilson et al., 2023).

Jurkiewicz et al. (2025) evaluated the long-term impact of tonsillectomy on patients' quality of life and found a significant improvement in physical and mental health over time. These results support the argument that the evaluation of tonsillectomy success should include patients' overall perception of health, which was found to improve dramatically after the source of recurrent infection was removed (Jurkiewicz et al., 2025).

Guntinas-Lichius et al. (2021) in their technical review emphasize that the evaluation of the post-tonsillectomy healing process is greatly influenced by demographic factors and the surgical technique used. A deep understanding of the variation in surgical outcomes across different age groups is key for ENT doctors in providing realistic education about the duration of post-surgical recovery in patients with recurrent tonsillitis (Guntinas-Lichius et al., 2021).

Finally, Jacob et al. (2024) conducted a critical evaluation of the risks of chronic antibiotic use versus the risks of a single tonsillectomy, concluding that surgery is often a safer option in the

face of the threat of antimicrobial resistance. This evaluation provides a new perspective that tonsillectomy is a crucial preventive measure to avoid more complex medical treatment failures in the future (Jacob et al., 2024).

## Conclusion

Based on a comprehensive review of the available literature, it can be concluded that tonsillectomy remains a highly effective and superior surgical intervention compared to conservative management for patients with recurrent tonsillitis, both in children and adults. Clinically, this procedure has been shown to significantly reduce the frequency of sore throat episodes, decrease the duration of sick days, and minimize dependence on repeated antibiotic therapy. From a quality of life perspective, tonsillectomy provides lasting long-term positive effects, including improvements in patients' physical and mental health and social productivity.

Technical evaluations show that technological advances, such as the Coblation technique, have improved the safety profile of the procedure by reducing the intensity of postoperative pain and accelerating recovery time compared to conventional techniques. Although the risk of complications such as postoperative bleeding remains, strict indication identification and modern perioperative risk management have significantly reduced surgical morbidity rates. Additionally, tonsillectomy provides a curative solution for specific conditions such as PFAPA syndrome and plays a crucial role in reducing the global risk of antimicrobial resistance due to irrational antibiotic use.

Economically, although it requires higher initial costs, tonsillectomy is considered more cost-effective in the long term as it reduces the burden of healthcare costs associated with repeated treatments ( ). Therefore, the evaluation of tonsillectomy use in recurrent tonsillitis yields highly satisfactory results, provided that patient selection is based on appropriate indication criteria to ensure optimal clinical outcomes and holistic improvement in patient well-being.

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