Role of Adenotonsillectomy in OSAS children andBehavioural disturbance
Rola adenotonsilektomii u dzieci z zespołem obturacyjnego bezdechu sennego (OSAS) i związane z nią zaburzenia behawioralne

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ABSTRACT

Aim: The main aim of this study was to assess the presence of behavioural disturbances in children with OSAS before and after adenotonsillectomy (AT).

Background: In children adenotonsillar hypertrophy is associated with increased probability of OSAS. Children with OSAS present neurobehavioral disorders like attention deficit and hyperactivity, learning disabilities and daily attitudes due to excessive sleepiness.

Materials and Methods: 195 consecutive young patients suffering from OSAS and recurrent throat infections (control group) underwent AT. All underwent clinical evaluation, polysomnography, Behaviour Assessment System for Children questionnaire (BASC-2), for parents evaluation of behavioural disturbances and nasal functionality tests (before and 6 months after surgery).

Results: Snoring and nocturnal apnoea were no more present in almost all. In OSAS group before AT 12 children were normal, 4 children were borderline and 2 were clinically significant at the BASC-2. After AT 16 children were normal, 2 children were borderline and none was clinically significant according to the same questionnaire. In the control group 9 children were normal and 1 was borderline both before and after AT.

Conclusion: Adenoids/tonsils hypertrophy and nasal hypoventilation are frequent causes of snoring and OSAS. AT improves significantly both snoring/apnoeas and OSAS children’s behavioural disturbances. Polysomnography cannot be carried out routinely due to the lack of specialised centres and because of its excessive cost. Nasal functionality tests can be useful for the differential diagnosis between sleep apnoea syndrome and other noises.

Key Words: OSAS; Adenoid Hypertrophy; Tonsils Hypertrophy; Adenotonsillectomy; Polysomnography; Behavioural Disturbance; BASC-2