Barking, Havering and Redbridge University Hospitals NHS Trust, London, United Kingdom

Aim: In June 2020, and after the first wave of the COVID outbreak has settled, we resumed operating in our trust for elective surgery in three different hospitals. However, it was thought that the number of posttonsillectomy complications had increased. We performed an audit to evaluate the rate of post-tonsillectomy complications in our trust and investigate possible causes.

Method: We measured the rates of patients who developed complications post-operatively during the period from June to November 2020 and compared it to the rates in the pre-COVID year and the national rate. Moreover, we scrutinized retrospectively the operative notes of each patient presenting with a post-tonsillectomy complication and identified risk factors.

Results: In the study period, we performed 129 tonsillectomies. Of these patients, 14 presented with complications; 11of which had bleeding, while 3 had post-operative pain. Two patients needed to return to the theatre to control the bleeding. During the same period in 2019, 28 patients had complications out of a total of 199 patients. The rate of complications in 2020 was 10% which compared favourably with the previous year (14%). The highest number of patients (9/14) was in a hospital which posed a new environment to our surgeons. Dissection by Bipolar diathermy was the most contribute factor for bleeding in most patients (11/14).

Conclusions: The disruption caused by the pandemic situation did not influence overall rates of complications. However, the hospital which presented a new operating environment had the highest rate.