

## Insufficient evidence for effectiveness of adenoidectomy for recurrent or chronic nasal symptoms in children

<b>Clinical question</b>	How effective is adenoidectomy for recurrent or chronic nasal symptoms in children?
<b>Bottom line</b>	Current evidence regarding the effectiveness of adenoidectomy for nasal symptoms is sparse, inconclusive and has a significant risk of bias. Only 2 studies were found and both involved adenoidectomy (with or without myringotomy) versus non-surgical treatment or myringotomy only. It therefore remains uncertain whether adenoidectomy has an effect on recurrent symptoms (3 or more episodes of nasal symptoms in a period of 6 months, or 4 or more episodes in a period of 12 months) or chronic nasal symptoms and nasal obstruction alone.
<b>Caveat</b>	Due to the lack of data on factors that may modify the effect of adenoidectomy, such as age, adenoid size or allergic rhinitis, it was not possible to perform subgroup analyses and identify children that may benefit more or less from the operation. Both studies reviewed were small (76 and 180 participants, respectively), and differed regarding inclusion criteria and outcomes measured.
<b>Context</b>	Infections of the upper respiratory tract, presenting as recurrent nasal symptoms (nasal discharge with or without nasal obstruction) are very common in children. Adenoidectomy is frequently performed and is thought to prevent recurrence of nasal symptoms.
<b>Cochrane Systematic Review</b>	van den Aardweg MTA et al. Adenoidectomy for recurrent or chronic nasal symptoms in children. Cochrane Reviews 2010, Issue 1. Article No. CD008282. DOI: 10.1002/14651858.CD008282.pub2. This review contains 2 studies involving 256 participants.
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[References]

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