



Hemorrhagic Tonsillitis

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Abstract

Rare but potentially life-threatening non-iatrogenic condition. It is defined as continuous bleeding for more than one hour, or more than 250 ml of blood loss regardless of the duration of bleeding. Bacterial tonsillitis is the most common cause of spontaneous tonsillar hemorrhage, and accounts for 1.1% of cases. Hemorrhagic tonsillitis has been reported in 55 patients in the worldwide literature to date. Conservative management includes adrenaline-soaked gauze, silver nitrate and use of hydrogen peroxide gargles. If bleeding fails to cease conservatively, surgical intervention is required.

Case Presentation

22-year-old British male, previously healthy, presented to the Ear, Nose and Throat emergency service at the Royal London Hospital with one-hour history of spontaneous tonsillar bleeding [1]. Two days prior to his presentation, he was seen by his local General Practitioner and was diagnosed with acute tonsillitis and commenced on oral antibiotics. No significant surgical, medical or social history was noted [2]. On examination, there was active bleeding from the inferior pole of the right tonsil, which was arrested in the emergency department using adrenaline-soaked gauze. Hemoglobin level at presentation was 141 g/L. He was admitted to the hospital for observation [3]. No further bleeding overnight and the patient significantly improved. He was discharged home the next day (Figure 1).

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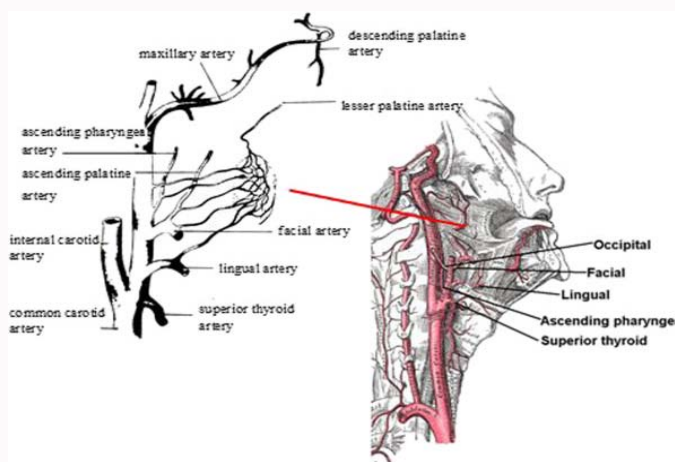


Figure 1: Hemorrhagic tonsillitis.

Conclusion

Spontaneous tonsillar hemorrhage is a surgical emergency that could be fatal if not managed appropriately. If the bleeding does not cease conservatively, bilateral tonsillectomy might be required as soon as possible. It is important to identify the cause of tonsillar bleed. The majority are due to acute tonsillitis, but other causes such as peritonsillar abscess, mononucleosis and tonsillar cancer have been reported. Spontaneous tonsillar hemorrhage will need to be investigated accordingly.

References

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