

# Atlas of Healthcare Variation

## Consumer summary

### Information on surgery (tonsillectomy and grommet insertions) in New Zealand

This is a summary of the [surgical procedures domain of the Atlas of Healthcare Variation](#).

The Atlas is an online tool showing differences in the type and quality of health care people receive in different district health board (DHB) regions. It is published by the Health Quality & Safety Commission.

### What the Atlas shows

This Atlas domain shows tonsillectomy and grommet insertion rates in public hospitals around New Zealand are up to three times as high in some DHBs as in others.

Over the six years studied:

- **tonsillectomy rates** have remained steady at around four operations per 1000 children
- tonsillectomy rates were significantly higher in the non-Māori/non-Pacific ethnic group compared with Māori and Pacific peoples
- the level of variation between DHBs remained consistently wide at around three-fold
- **ventilation tube (grommet) insertion rates** between 2012–13 and 2014–15 were significantly lower than the previous three years
- rates were significantly higher in Pacific peoples than in either Māori or non-Māori/non-Pacific ethnic groups
- the level of variation between DHBs remained greater than two-fold.

The Atlas figures do not include privately funded operations.

### About tonsillectomies

Tonsillectomies can be carried out to treat repeat tonsillitis or sleep-disordered breathing.

Some children with tonsillitis get better without surgery, so surgery is recommended only when the sore throat is disabling and prevents normal functioning.

### About grommets

Grommets are inserted to treat recurrent acute middle ear infections (otitis media) or glue ear (otitis media with effusion).

They can improve hearing for the first six months but may have no effect on language development or understanding in otherwise healthy children. This means the decision to perform surgery in children with recurrent acute otitis media or chronic otitis media with effusion needs to be balanced carefully against the likelihood of the problem resolving itself naturally.

Māori and Pacific children have higher rates of glue ear and associated complications. However, for reasons that are unclear, Māori children don't have higher rates of grommet insertion.

The ideal surgical intervention rates for tonsillectomies and grommet insertions are unknown. High rates of intervention are not necessarily better, and low rates of intervention are not necessarily worse.

### **Further information**

Health Navigator has information on [tonsillectomy](#) and [ear infections \(including grommets\)](#) for patients, families/whanāu and health professionals.