

## MEMPHIS + HEALTHCARE PROFILES



### The Truth About Tonsils

In generations past, most tonsillectomies were dictated by recurrent tonsillitis, or infections of the tonsils or adenoids. "But today, the most common reason for tonsillectomy is obstruction," says Dr. Lazar.

Tonsil obstruction can lead to difficulty breathing, disrupted sleep (including apnea), and eating challenges, particularly in children. Removing the tonsils through the common, routine procedure of tonsillectomy can remedy the root cause of these symptoms without jeopardizing the patient's future health.

"While some experts believe the tonsils may provide an element of respiratory protection for patients under two years old, there is no evidence to support that tonsils provide any protective function after the age of two," says Dr. Lazar.

Approximately 800,000 tonsillectomies are performed every year in the United States for patients under 18 years old—with no proven increase in future illnesses or issues.



## Breathing Easy

Dr. Rande Lazar of ENT Memphis speaks to the complex and sometimes confusing condition of chronic cough.

**W**e've all suffered from the occasional cough. It's an annoying and unwelcome response to irritation of the airway, but often it resolves with time, and we get on with our normal lives.

However, when an ongoing cough lasts longer than eight weeks (four weeks for children), it's considered chronic. And it can be more than just irritating—it may signal an underlying problem.

"Chronic cough can result from issues such as asthma, gastroesophageal reflux disease, postnasal drip, sinusitis, bronchitis, and even long COVID," says Rande Lazar, M.D., of ENT Memphis, a practice that specializes in ear, nose, and throat conditions in both children and adults, as well as infections of the head and neck, hearing loss, sleep disorders, and sinus problems.

### SOLVING THE MYSTERY

The first step in remedying chronic cough is to determine whether patients are actually suffering from a "true" cough. "Patients sometimes confuse a chronic cough with a clearing of the throat or even a tick," says Dr. Lazar.

A "true" cough will often be present day, night, and during sleep and will interrupt day-to-day functions such as speech. Deciphering whether the cough is wet or dry is another helpful tool in understanding the cough's nature.

Additionally, certain medications may trigger the cough, such as those in the family of angiotensin-converting enzyme inhibitors that are prescribed to treat high blood pressure. In these cases, ceasing the medication may resolve the symptoms.

"Chronic cough is usually minimally productive and not contagious," says Dr. Lazar. "It doesn't necessarily mean the patient is sick. Sometimes the solution is as simple as giving a steroid or an antibiotic to help the body fight off the cough, or weaning the patient from a medication that's triggering it."

Other first-line treatments may include inhalers or cough suppressants. If those fail to relieve the cough, patients might pursue additional diagnostic tools such as endoscopic exams or pulmonary evaluations.

"We've seen an increase in chronic cough cases over the past decade and especially in the past two years in correlation with the COVID-19 pandemic," says Dr. Lazar. "As patients are becoming more educated about this condition, we're seeing higher numbers of patients seeking treatment."



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