

# HN (NI) 2001/19

DATE: 11 October 2001

**For Attention and Action by:**  
**Chief Executive of each HSS Trust**  
**General Manager/Chief Executive of each HSS Board**  
**Chief Executive of each Agency**



HEALTH ESTATES  
ESTATE POLICY

**NORTHERN  
IRELAND  
ADVERSE  
INCIDENT  
CENTRE**

**TITLE:**

**Single use electrosurgical (diathermy) forceps for  
tonsil and adenoid surgery**

**MANUFACTURER/SUPPLIER**

Various

**PROBLEM**

Reports in England of increased incidence of secondary haemorrhage in following tonsil and adenoid surgery associated with the introduction of single use instruments.

**DISTRIBUTION**

This notice should be brought to the attention of all who need to know or be aware of it, including those listed below, in accordance with local procedures. This will include:

- Liaison Officers
- Medical Directors
- ENT Surgeons
- All surgeons performing tonsil and adenoid surgery
- Infection Control Nurses
- Control of Infection Doctors
- Chairs of Infection Control Committees
- Theatre Managers and Operating Room Staff
- Supplies Officers
- Risk Managers
- Registration Inspection Units (for onward distribution to Private Clinics)

Boards/Trusts should ensure that if appropriate, this information is passed to all persons having the responsibility for the premises registered under "THE REGISTERED HOMES (NI) ORDER 1992.

**IMMEDIATE ACTION**

- All units performing tonsil or adenoid surgery should immediately review their post operative haemorrhage rates and compare these with the rates prior to the changeover to single use instruments. Adverse events should be reported to NIAIC.
- Electrosurgical forceps should be chosen with the smallest electrode area compatible with achieving the required clinical result.
- As a general rule, when using bipolar electrosurgery it is advisable to start with a low setting especially when using a new electrode.

**H A Z A R D  
NOTICE**



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## BACKGROUND

Following the introduction of single use instruments for tonsil and adenoid surgery the Medical Devices Agency (MDA) have received reports of significant increases in the rates of secondary haemorrhage at a number of centers in England. No reports have been received by NIAIC. Whilst a number of factors could be implicated, preliminary investigations appear to indicate that this is related to differences between the electro-surgical forceps that were previously used and the newly supplied single use instruments. The cause is likely to relate to using too high a power/intensity setting on some makes of electro-surgical generators.

The use of reusable electro-surgical (diathermy) forceps in tonsil an adenoid surgery leads to decreased diathermy effect over time. This decreased effect is usually overcome by increasing the power setting for reusable forceps. The decrease in diathermy effect is not seen with single use instruments, which may need to be used at lower power settings to achieve the desired clinical effect. Use of higher power settings can lead to excessive tissue damage resulting in secondary haemorrhage a week to ten days after surgery.

Electro-surgical forceps should be chosen with the smallest electrode area compatible with achieving the required clinical result. With some (but not all) makes of electro-surgical generator the area of the individual electrodes will determine the power delivered to the tissues; a significant change in electrode area will have a proportionate effect on the power delivered to the tissues. The design of generators varies such that it is not possible to make general recommendations about specific power levels and settings at which they should be used in tonsil an adenoid surgery. The advice therefore is:

- a. to start with a low setting especially when using new bipolar forceps; and
- b. to follow any additional guidance set out in the user instruction manual for the electro-surgical generator in use.

This problem has raised a number of questions concerning other devices used in tonsil and adenoid surgery. Further advice will be issued in due course as necessary.

This notice has been discussed with and endorsed by the Association of Surgeons, British Association of Otorhinolaryngologists – Head and Neck Surgeons and the British Association of Maxillo-Facial Surgeons.

## ENQUIRIES

Enquires to the NIAIC should quote the reference number HN(NI) 2001/19 and be addressed to:

Northern Ireland Adverse Incident Centre (NIAIC)  
Health Estates  
Estate Policy  
Stoney Road  
Dundonald  
Belfast BT16 1US  
Marked for the attention of Mr Brian Godfrey

Tel: 02890 523714  
Fax: 02890 523900  
Email: [brian.godfrey@dhsspsni.gov.uk](mailto:brian.godfrey@dhsspsni.gov.uk)

Brian Godfrey  
NIAIC Manager

### HOW TO REPORT ADVERSE INCIDENTS

Adverse Incidents relating to medical devices, non-medical equipment, plant and buildings should be reported to NIAIC as soon as possible. Advice on how to report is given in Safety Notice SN (NI) 2001/01. If you are in doubt about how to report incidents, please speak to your liaison officer or contact NIAIC using the telephone number provided.

*Heath Estates is an Executive Agency of the Department of Health, Social Services and Public Safety  
Áisíneacht Feidhmeannach don Roinn Sláinte. Serbhíst Sóisialta agus Sábháilteacht Phoiblí*