



Ear, Nose and Throat (ENT) Department

Quinsy

What is a Quinsy?

A quinsy is an infection which usually starts in one or other tonsil. The infection spreads outwards into the space around the tonsil, pushing the tonsil inwards and making the soft palate bulge. There is severe pain and difficulty swallowing, and it is usually difficult to open the mouth more than a centimetre or so. Every week we would have 1 or 2 patients admitted for treatment of a quinsy. It is most common in early adult life, but can occur at any age.

How is a Quinsy usually treated?

The infection is bacterial and responds very well to antibiotic. The problem is that it is very difficult to swallow and antibiotic tablets or syrup are not much use. It is better to put up a drip to give the antibiotic directly into a vein and to give extra fluids as required. Simple penicillin is usually all that is required. Sometimes a second antibiotic will be added, and obviously, if you are allergic to penicillin, an alternative will be used. Routine blood samples are sent to check for glandular fever which is an infection that can present in a similar way.

If the infection is caught in its early stages, there is just swelling around the tonsil and the infection will usually improve over the next 24-48 hours. Once you are able to swallow easily, the drip will be taken down and the antibiotic changed to tablets. You will be allowed home on a 10-day course of antibiotic.

If the infection has been present for a longer period, pus may form in the space beyond the tonsil, behind the soft palate. If pus has formed, it should be drained or the infection will continue to linger for up to 2 weeks. The Doctor will spray the palate with a local anaesthetic spray and put a fine needle into the soft palate to remove any pus that has formed. If there is a large collection of pus, the opening will be enlarged to allow it to drain properly. Once the pus is let out, the pain is usually much less and the recovery is generally uneventful as in the paragraph above.

Could it happen again?

The likelihood of you having another quinsy is between 1 in 10 and 1 in 5. Someone who has had frequent recent episodes of sore throat is more likely to have another quinsy than someone who has not had sore throats recently. The tonsil is the source of the infection in almost every quinsy, and removal of the tonsils should prevent the quinsy happening again.

Before you leave the ward you should discuss with the Doctor looking after you whether you want to come back in to hospital at a later stage to have the tonsils removed. Further information on the operation of tonsillectomy is to be found on a separate information sheet available on the ward and also on our external website.

If you have had frequent episodes of sore throats, or if you are very keen to avoid the possibility of another quinsy, we would recommend tonsillectomy. If you have not had sore throats until the recent quinsy, and if you are not keen to have the tonsils removed, we would not usually arrange for any further outpatient review.

Please remember to finish the course of antibiotic given to you on discharge from hospital.

Useful contact numbers:

Dorset County Hospital Switchboard - 01305 251150

ENT Secretaries (Dorchester)

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If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email pals@dchft.nhs.uk



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