

What is it?

It means that the testis *can't* come into the scrotum (bag). An undescended testis is usually in the groin but sometimes it can be in the abdomen/tummy and, rarely, it can actually be missing. There are some testes that spend a lot of their time "out" of the scrotum, but *can* come into the scrotum. They aren't undescended and don't need an operation.

How did my child get it?

In early pregnancy, all testes are up near the kidney and come down into the scrotum a few weeks before birth. That's why a lot of premature and even some term baby boys don't have testes in their scrotum at birth. These can come down during the first 12 months of life but won't do so after that.

We don't know why your baby/child has this problem. It has nothing to do with anything you or your partner did or didn't do during pregnancy.

Is it a problem?

Unfortunately, yes.

👉 It can reduce fertility. This has nothing to do with looking or acting like a man. If the testis isn't down *before* puberty, it won't make normal sperm.... but we don't know what the *best* age for operation is.

👉 Undescended testes may be more likely to twist on themselves than normal testes. When this happens, the blood supply is cut off. It causes severe pain and swelling and should be fixed straight away.

👉 Hernias are more common in boys with undescended testes. If your boy gets severe pain (with or without swelling) in their groin, go straight to a doctor!!!!

👉 Cancer of the testis is at least 10 times more common in men who have had an undescended testis than in other men. Unfortunately, putting the testis in the scrotum doesn't change that risk and the other (normal)

testis can also be affected. However, cancer of the testis is quite rare and if your child gets a cancer in their lifetime it's more likely to be a cancer of the bowel, skin or lung than of the testis

👉 Some people worry that having only one testis in the scrotum affects you emotionally. Boys with one testis, who have been brought up to believe they are normal, rarely want an artificial/plastic one in later life

👉 Some people believe that a testis in the groin is more likely to be injured than one in the scrotum. They've never had a testicular injury! 😊

What needs to be done?

Waiting won't change anything after the first 6mths of life. Hormonal therapy is painful, its' side-effects are unclear, is rarely successful and we no longer recommend it routinely. Surgery is the best way of fixing the problem. We usually operate in the second year of life. This usually involves two cuts- one in the groin and one in the scrotum. The testis is freed up and dissolving stitches hold it in the scrotum. Sometimes it's possible to only make a scrotal cut. Sometimes we do a laparoscopy. The cuts are closed with internal dissolving stitches. All you see is a scratch on the skin.

The surgery is done under general anaesthetic, usually as 'day stay'.

What can I expect afterwards?

Children set their own pace. Depending on their age, it may take 1-7 days to get over the operation. There may be some minor bruising or swelling around the cut- and a lot in the scrotum! This is from the operation itself and the local anaesthetic I put in. The swelling goes away within a fortnight except from the scrotum (which may take up to 3 months to go away).

I'll give you a handout on pain, washing, eating, wound care and so on.

Possible risks include infection in the wound and bleeding.

Of greater concern.....

- ◆the blood vessels to the testis may spasm (resulting in a testis that shrivels up and disappears)
- ◆the vas (tube that carries sperm in later life) may be damaged,
- ◆the testis may go back up into the groin.

All of these things are unlikely and the overall chance of getting a good sized testis that stays in the scrotum is about 80-95% - depending on where the testis was in the first place. Remember that not operating gives a chance of success of 0%.

Unfortunately even if the operation is a success, future fertility can't be guaranteed - undescended testes are probably intrinsically abnormal.

I'll arrange follow-up with your local doctor or me at around 4 weeks after the operation, then 6 months, and finally 12 months (to make sure the testis has stayed down and has survived)

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(P.S. Why not use the rest of this page for notes and things to remember...)

Undescended Testes

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