

## ORCHIDOPEXY

An orchidopexy is an operation to place undescended testes (testicles) in the scrotum. Undescended testes occur when the testes (one or both) do not move down into the scrotum.

The testes may come down by themselves in the first twelve months following birth. If they do not, an operation called an orchidopexy is needed. The best age for this surgery is controversial and you should discuss this with your specialist. Many experts recommend the operation take place when the child is aged around 6-12 months.

### REASONS TO HAVE ORCHIDOPEXY

Orchidopexy surgery is usually needed if the testes do not come down by themselves by the time a baby is twelve months of age, because there is risk of ongoing health issues. These can include:

- Trauma such as twisting (torsion)
- Hernia - lump of bowel coming through the same hole as the testis
- Lower fertility - the body temperature in the abdomen is higher than in the scrotum and this can affect the sperm production in the testes
- Risk of testicular cancer
- Poor self esteem because of the cosmetic problem.

### THE OPERATION

An orchidopexy is performed to bring the testis (testicle) down into its normal location in the scrotum. A small cut is made in the groin and the testis is freed up before placing it in a pouch in the scrotum through a second cut which is then stitched up. This operation is usually a day procedure and your child should be able to go home on the same day.

If the testes cannot be felt in the groin at all when your boy is seen in clinic, you may be referred to Southampton for a second opinion. This is because the surgery may then need more complex equipment and which is not available on-island.

### COMPLICATIONS

An orchidopexy is usually a straightforward operation. However, as with other operations, complications may arise during or after the surgery;

- Occasionally the testis does not reach the scrotum after the first operation and it needs to be done again.
- If the testis is very high in the abdomen or the blood supply to the testis is poor, it may shrink and disappear. This is very rare.

### CARE AFTER THE OPERATION

- Make sure your child has enough pain relief - Calpol is usually enough
- Make sure your child continues to eat and drink normally
- If your child develops a temperature over 38.5 C, contact the surgeon or hospital
- Your child's doctor or nurse will give you instructions on how to care for your child's wound
- Watch for signs of infection: a high temperature, or red, hot or oozing around the wound
- Limit your child's activity for the first few days after surgery - the surgeon will advise you of this
- Please call your local doctor or the hospital surgeon if you have any concerns.

### FOLLOW-UP APPOINTMENTS

- An appointment will be made with the MSG nurses to check the wound 1 week after surgery
- An appointment will be made for your child to see the Mr Cole 2 months after the operation
- At the follow-up appointment the Mr Cole will discharge your son if all is well. Sometimes further checks are needed to make sure the testicle remains in the scrotum
- Your son will need to learn how to do regular testicular self-examination when they become a teenager.

### KEY POINTS

- There may be several reasons why the testes do not move down into the scrotum. Usually the cause is unknown
- An operation called an orchidopexy is done if the testes do not come down by themselves after 12 months of age. This is done to reduce ongoing health issues
- This operation is a day procedure and your child will usually go home the same day.

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