

Information Leaflet for Parents/Carers

# Orchidopexy

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## Introduction

During pregnancy, boys' testicles are formed inside their tummy. Before birth, the testicles then move into the scrotum through a passageway in the groin. If they do not reach the scrotum, they are called undescended testes. It may occur to one or both testicles.

Sometimes this is noticed at the newborn or six week baby check carried out by health professionals, but sometimes is only noticed later on.

Sometimes the testicles will naturally descend by themselves. However, if your baby is 6 months old and this hasn't happened, the chance of the testicle moving into the scrotum on its own is small, so we offer an operation to bring it down.

Your child will first be seen in the clinic, where your doctor will feel for the testicle. The operation suggested depends on where it is felt.

## What is an Orchidopexy?

This is an operation done under general anaesthetic (your child will go to sleep) to allow the surgeon to reach the testicle and move it to the scrotum.

Orchidopexy may also be done on older boys and rarely on teens.

If your child has undescended testes on both sides, they may be operated on at the same time.

Depending on the location of the testicle, one or two small incisions are made in the scrotum, the groin, or the abdomen. Sometimes another surgical method called keyhole surgery (which involves making a very small incision) is used to move undescended testicles when they are located high in the abdomen.

Usually only one operation is needed. However, in some cases where the testicles are located high in the abdomen, orchidopexy may require two separate operations that are done several months apart.

## **What if my child`s testicle is not in the groin or in the tummy?**

In some children, one of the testicles may have not developed properly. This means that they will only have one testicle. In this case, your child`s chances to have children later in life will not be affected.

## **What are the benefits of the operation?**

- A testicle inside the tummy or in the groin can be injured or twisted. Having an operation stops this from happening.
- The function (growth and sperm production) of a testicle inside the tummy will be affected by the higher temperature inside the tummy, meaning it will be less effective.
- If the testicle is inside the tummy, when your child gets older, they will not be able to feel any changes that may occur in their testicle, such as lumps. This means they are less able to check for any signs of testicular cancer.
- Surgery can boost a boy`s self-esteem. An empty or partially empty scrotum can make a boy feel insecure about his body, especially during his teen years.

## How will my child recover after the operation?

Please keep your child's wound clean and dry. Your child should not be bathed for five days after the operation, though gently wiping over the area with warm water is fine.

Your child should wear loose fitting clothes for a few days after their operation. Tight clothes can rub on the wound and make it sore.

Children may find some physical activities (such as PE at school, bicycle riding and swimming) uncomfortable and should therefore refrain from these for one to two weeks.

Paracetamol ('Calpol') and/or Ibuprofen ('Brufen') should be given to your child to prevent pain. Please follow the instructions on the bottle.

## Are there any other possible treatment options?

There are no other treatment options for an undescended testicle.

## Are there any risks of the operation?

- Complications from this operation are rare. They include:
- Wound infection: if your child's wound becomes red, there is increased tenderness, or the wound starts to leak fluid, contact your GP or your surgeon for some antibiotics.
- Testicular ascent/recurrence: the testicle can sometimes return to the groin). If this happens, it will require another operation.
- Injury to the sperm tube (vas): however this will not prevent your son fathering children later on in life.
- Injury to the blood vessels of the testis: this will cause reduced blood supply to the testicle so it may shrink (atrophy). This will not affect your child's growth and future chances to have children.

- Injury to other structures: Very occasionally, when doing keyhole operations, other structures such as the bowel or bladder may be injured. This is usually noticed at the time of operation and repaired then.

## Follow up

Your child will be followed up in the children`s outpatient department of Birmingham Children`s Hospital. Your clinic appointment will be sent in the post.

Any urgent or general concerns related to the operation after you go home can be reported to your GP or, out of hours, to your surgeon. The surgical team can be contacted via the hospital switchboard on 0121 333 9999.

## Looking after and sharing information about your child

We have a duty of care to help patients and families understand how information about them is kept and shared and we include the following information in all our patient leaflets:

Information is collected about patients relevant to their diagnosis, treatment and care. We store it in written records and electronically on computer. As a necessary part of that care and treatment we may have to share some patient information with other people and organisations who are either responsible or directly involved in the patient's care. This may involve taking the patient's information off site. We may also have to share some information for other purposes; such as research etc. Any information that is shared in this way will not identify the patient unless we have the patient's and parent's/carer's consent. If you have any questions and/or do not want us to share that information with others, please talk to the people looking after your child or contact PALS (Patient Advice and Liaison Service) on 0121 333 8403.

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