



CRYPTORCHIDISM (Undescended Testes) in Children

Aster
HOSPITAL

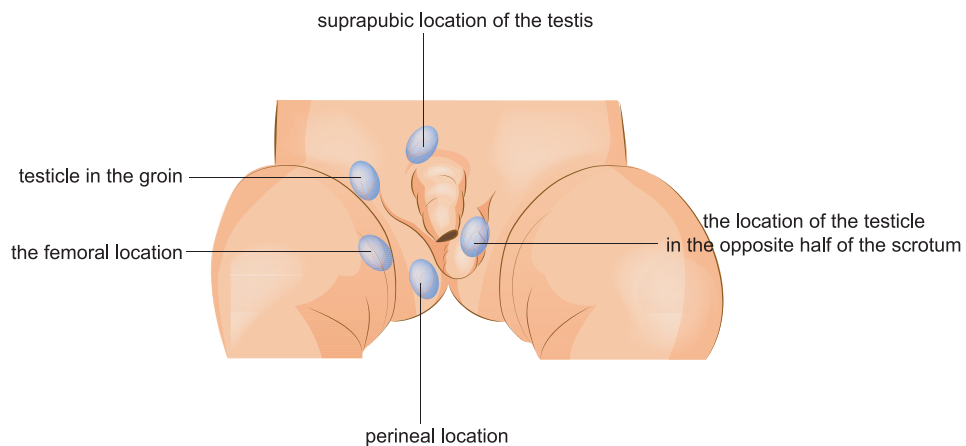
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Digital Version

CRYPTORCHIDISM

options for the location of the testicle in cryptorchidism



WHAT IS CRYPTORCHIDISM OR UNDESCENDED TESTES?

Cryptorchidism means hidden or obscure testes. The condition could be unilateral or bilateral. It is occurring in 3-5% of full-term boys. If a testicle can be milked down to the bottom of the scrotum, it is considered as retractile testes.

DIAGNOSIS OF UNDESCENDED TESTES?

If testes are not palpable by experienced surgeon's hand.

WHAT ABOUT RADIOLOGIC IMAGING?

Ultrasonography could be helpful if testicles are located in the inguinal canal, but for intra abdominal testes, it is of limited use. MRI & CT scan can be useful for intra abdominal testes, but it is difficult to do for small children. It needs general anesthesia and has a high rate of false negative results. Preferred method is diagnostic laparoscopy.

Treatment:

- The most effective treatment is surgery
- Most pediatric urologists recommend orchiopey by 1 year of age or earlier if the testis does not descend by that age. Because there is evidence that early damage to the germ cells that produce sperm begins at this age
- Pharmacotherapy with HCG injection several times per week & over several weeks has the success rate as low as 10%

Laparoscopic Orchiopexy (useful for abdominal testes):

Laparoscopy is useful to find out and localize undescended and non palpable testes in the abdominal cavity. By laparoscopy, we find out if the testes is located in the abdomen or if it is congenitally absent.

If testes is in the abdomen, we can perform laparoscopic orchiopexy at the same time.

Reasons for Orchiopexy:

Prevent damage to testes and further infertility.

Undescended testes have 20-fold higher risk of developing testicular malignancy. Orchiopexy also allows examination for early detection of testicular cancer.

Conclusion:

After diagnosis of undescended testes, operation must be done by 1 year of age or earlier.



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THE LOCATION

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Mankhool, Kuwait Road, Al Mankhool - Dubai

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