

Hydrocele Repair (child)

Local Information

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What is a hydrocele?

A hydrocele is a swelling around the testicle caused by a collection of fluid. It is a common problem in children.

Your surgeon has recommended an operation to repair your child's hydrocele. This document will give you information about the benefits and risks to help you to be involved in the decision. If you think your child is mature enough, it is best to discuss the operation with him too so he can be involved in the decision too.

If you have any questions that this document does not answer, ask your surgeon or the healthcare team.



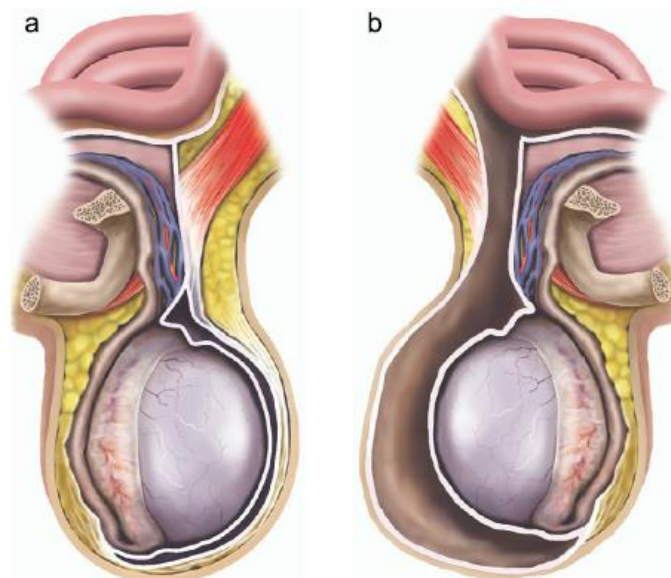
Fluid collecting around a testicle

How does a hydrocele happen?

All boys have a connection (patent processus vaginalis) between their abdomen and their scrotum before they are born. This connection passes through the inguinal canal, where blood vessels supply the testicle pass through the abdominal wall.

By birth, this connection is usually closed. If it stays open, the fluid that surrounds the bowel may trickle down and collect in the scrotum.

If your child has a viral illness, such as a cold, the swelling may increase and be uncomfortable.



a Normal development

b An open connection causing a hydrocele

What are the benefits of surgery?

Your child should no longer have the hydrocele. Surgery should prevent your child from having discomfort or embarrassment caused by the hydrocele getting larger as he gets older.

Are there alternatives to surgery?

A hydrocele usually improves, as the connection will often close within the first few years of life. Surgery is usually recommended if the connection has not closed by the time your child is 2 to 3 years old.

What will happen if I decide that my child will not have the operation?

If the hydrocele does not get better, it may get larger as he gets older. This may cause discomfort or embarrassment. There is also a risk that your child may develop a hernia later in life.

What does the operation involve?

The healthcare team will carry out a number of checks to make sure your child has the operation he came in for. You can help by confirming to your surgeon and the healthcare team your child's name and the operation he is having.

The operation is performed under a general anaesthetic and usually takes about an hour. Your child may also have injections of local anaesthetic

to help with the pain after the operation. Your child may be given antibiotics during the operation to reduce the risk of infection.

Keyhole surgery can be used to repair a hydrocele but most hydroceles in children are repaired using open surgery.

Your surgeon will make a cut on the groin. The cut is usually made close to a skin crease so that the scar is harder to see.



The cut usually made to repair a hydrocele

Your surgeon will find the connection, which is stuck on to the blood vessel that supply the testicle and on to the vas, the tube that will carry sperm away from the testicle. Your surgeon will peel the connection away from these tubes before trying it off. They will close the skin with dissolvable stiches.

What should I do about my child's medication?

Make sure your healthcare team know about all the medication your child takes and follow their advice. This includes all blood-thinning medication as well as herbal and complimentary remedies, dietary supplements, and medication you can buy over the counter.

What can I do to help make my child's operation a success?

Your child should try to maintain a healthy weight. He will have a higher risk of developing complications if he is overweight.

Your child can reduce his risk of infection in a surgical wound.

- Your child should have a bath or shower either the day before or on the day of the operation.
- Your child should keep warm around the time of the operation. Let the healthcare team know if your child feels cold.

What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for your child.

Some complication can be serious and even cause death.

You should ask your doctor if there is anything you do not understand.

Your anaesthetist will be able to discuss with you the possible complications of having an anaesthetic.

General complications of any operation

- Bleeding during the operation. It is common for the groin, penis or scrotum to be bruised.
- Infection of the surgical site (wound). It is usually safe for your child to shower after 2 days but you should check with the healthcare team. Let the healthcare team know if your child gets a high temperature, you notice pus in his wound, or if his wound becomes red, sore or painful. An infection usually settles with antibiotics, but your child may need special dressings and their wound may take some time to heal. In some cases,

another operation might be needed. Do not give your child antibiotics unless you are told they need them.

- Allergic reaction to the equipment, materials, or medication. The healthcare team is trained to detect and treat any reactions that might happen. Let the doctor know if your child has any allergies or if they have reacted to any medication or tests in the past.

Specific complications of this operation

- Developing a collection of blood (haematoma) or fluid (seroma) under the wound or in the scrotum. This usually settles within a few weeks.
- Damage to nerves that supply the skin around the groin, leading to a numb patch or continued pain.
- Damage of the blood supply to the testicle. The testicle on the same side as the operation may shrink and not work (risk: 1 in 1000). Fertility may then depend on whether the testicle on the other side is working.
- Damage to the vas (risk: 3 in 1000). Any damage is usually repaired during the operation, but the vas may not be able to carry sperm. Fertility may then depend on whether the vas and testicle on the other side are working normally.

Consequences of this procedure

- The healthcare team will give your child medication to control the pain and it is important that they take it as you are told so they can move about and cough freely.
- Unsightly scarring of the skin.

How soon will my child recover?

In hospital

After the operation your child will be transferred to the recovery area and then to the ward. He should be able to go home the same day. However, your doctor may recommend that your child stays a little longer.

If you are worried about anything, in hospital or at home, contact the healthcare team. They should be able to reassure you or identify and treat any complications.

Returning to normal activities

Children usually recover quickly and can be back to normal within a few days. Your child will usually be well enough to return to normal activities as soon as he feels comfortable. This may take up to 4 weeks. He should not do strenuous exercise during this time.

The future

Most children make a full recovery and can return to normal activities. For a small number of children, the hydrocele comes back and may need another operation (risk: less than 1 in 100).

In the future, let health professionals know that your child's scar is from a hydrocele repair, not an appendectomy. Make sure your child can explain this too.

Summary

A hydrocele is a common condition where fluid collects around a testicle. Surgery is usually recommended if a hydrocele continues beyond the second year of life. If left untreated, a hydrocele can get larger and is unlikely to get better.

Surgery is usually safe and effective, but complications can happen. You need to know about them to help you to make an informed decision about surgery for your child. Knowing about them will also help you to help the healthcare team to detect and treat any problems early.

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

Acknowledgments

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