

Name of Operation: **Orchidopexy**
(bringing the testicle down from the groin to the scrotum)

Main issues:

- Site of wounds (see both sets of dotted lines on right-hand diagram below).
- Sometimes no testicle is found, or it is so poorly developed that it will never work, so it is safer to remove it (risk of future tumour in it). This is *not* serious, as both puberty and fertility are usually normal with only 1 testicle. However, in that case, we often recommend securing the good testicle in the scrotum, at the same operation, to protect it from the small (but then very serious) risk of possible twist in the future.
- Dissolving stitches (no need to remove).
- Likely post-operative schedule and recovery-time.

Intended benefits:

- Easier detection in the unlikely event of future testicular problems.
- Cosmetic (improved appearance).
- It's not yet scientifically proven whether this operation has any benefit for future fertility or for the increased (but still very small) risk of adult testicular tumour.



(Adapted from
<https://medlineplus.gov/ency/imagepages/9998.htm>)

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Common or serious risks:

- Bleeding (rarely serious).
- Infection in either wound (rarely serious).
- Damage to the testicle (including its complete loss), its circulation, sperm-tube, bowel, or bladder (rarely serious). Very occasionally the testicle may become completely disconnected from all its tubing, and so the procedure has to be abandoned.
- Being unable to get the testicle all the way down to the bottom of the scrotum in one go: sometimes another operation may be needed at least 6 months later.
- In less than 1 in 10 boys (< 10 %), despite an apparently successful orchidopexy, the testicle can shrivel up or be pulled back up into the groin or tummy by scar-tissue as healing occurs over the next year or so. Another operation may be needed.
- A hernia (lump in the groin) developing, needing another operation (1 in 100 boys).
- Poor healing of the wound: unusual, but very occasionally may need later surgery.
- Nerve-pain, even for many years afterwards (very rare, but may need later surgery).
- Anaesthetic problems (rarely serious, but around 1 in 250,000 general anaesthetics in children can be fatal).