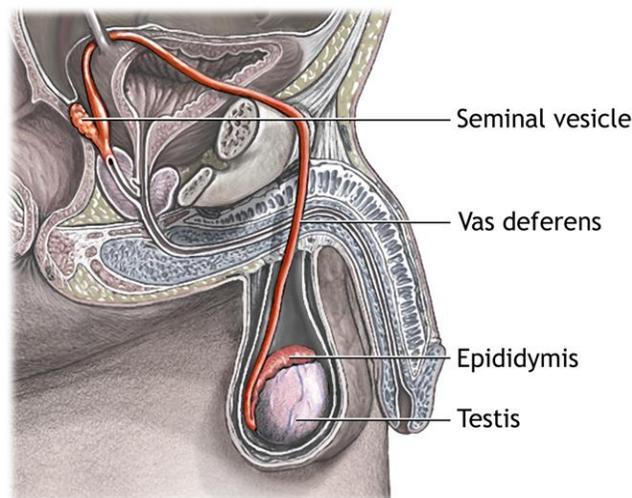


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Hydrocele in Children

Hydrocele: from Hydro (water) and cele (cavity).

Hydroceles are benign swellings of the scrotum. They are very common and more often than not need no treatment. Hydroceles do not harm the testicle in any way. Hydroceles often occur in infants, and these hydroceles usually reabsorb on their own during the first year of life. Occasionally they occur in older children and need a surgical repair.



Normal Anatomy

To understand hydroceles, one must understand the anatomy of the scrotum, or the sac that contains the testicles. Normally every male has two testicles within the scrotum.

The testicles' main functions are to produce the male hormone testosterone and to produce sperm. Normally the testicle is situated in a special sac that bathes the testicles with body fluids. This sac is called the 'processus vaginalis.' The processus connects to the peritoneal cavity, which is the cavity in the abdomen that contains the bowels.

In normal development, the opening between the peritoneum and the processus closes up just before birth. If it stays open, or patent, body fluid can run down into it and cause a swelling, or hydrocele. If it is very wide open, bowel can push into it, and referred to as a hernia.

Treatment

Hydroceles in children over the age of one do not usually go away without treatment, unless it is a very small hydrocele.

A hydrocele repair is done as an outpatient surgical procedure. A small incision is made on the lower abdomen, through which the processus is located and ligated, or tied off. The procedure takes about 1/2 hour to perform. Risks of the surgery include bleeding, pain and infection as is associated with any surgical procedure. The unique risks include recurrence of the hydrocele. The recurrence rate is about 1-2 per 100 patients.

Hydrocelectomy should not affect either the sperm or hormone production of the testicle.