

## HYDROCELE A REVIEW ARTICLE

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### ABSTRACT

**Introduction:** Hydrocele is abnormal collection of fluid in the tunica vaginalis. It classified into congenital and acquired varieties. This article reviews the anatomy, indications, treatment options, and potential complications related to hydrocele. Normally it is idiopathic in origin **Method:** Descriptive Study of Hydrocele. **Result:** If the sac is small, thin and contains clear fluid, either Lord's placcation or evacuation and eversion of the sac behind the testis is preferred, if the sac is thick, in large hydrocele and chylocele, subtotal excision of the sac is done. **Discussion:** Hydroceles are relatively common clinical problem that are associated with swelling, pain, testicular atrophy, reduced fertility rates.

**KEYWORDS:** Hydrocele, infertility, testicular atrophy, vaginal hydrocele.

### INTRODUCTION<sup>[1]</sup>

A hydrocele is an abnormal collection of serous fluid in the tunica vaginalis of the testis or within some part of processus vaginalis.

According to aetiology hydrocele can be divided into two categories-

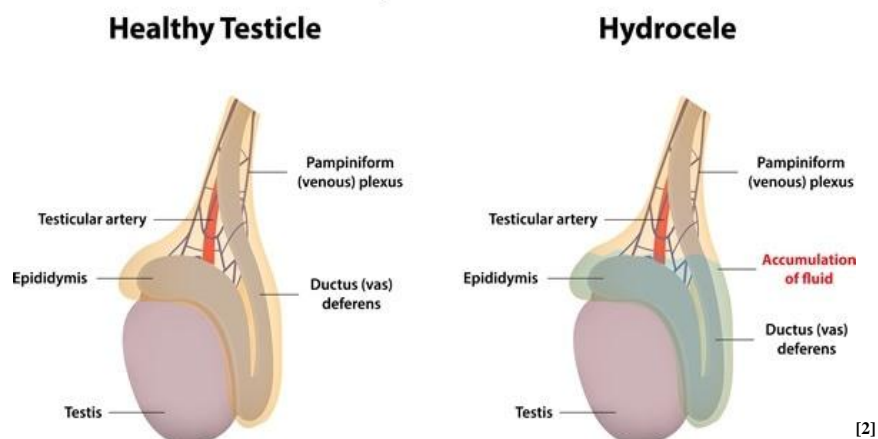
1. Primary or idiopathic hydrocele- the cause of which is unknown i.e. there is no associated disease in the testis or the epididymis.

2. Secondary hydrocele- when hydrocele is secondary to a disease in the disease and / or in the epididymis. A secondary hydrocele is usually small or lax.

Primary hydrocele varieties can be seen-

- (i) vaginal hydrocele- commonest
- (ii) Encysted hydrocele of the cord
- (iii) infantile hydrocele - unusual
- (iv) congenital hydrocele - unusual
- (v) funicular hydrocele - unusual

## Hydrocele



[2]



**Left sided hydrocele**

### **Aetiology**<sup>[3]</sup>

- 1 By connection with the peritoneal cavity via a patent processus vaginalis (congenital).
- 2 By excessive production of fluid within the sac, e.g. a secondary hydrocele.
- 3 By defective absorption of fluid; this appears to be the explanation for most primary hydrocele, although the reason why the fluid is not absorbed is obscure. They are sometimes called vaginal hydrocele.
- 4 By interference with the lymphatic drainage of scrotal structures.

A secondary hydrocele is most frequently associated with acute or chronic epididymo-orchitis. It is also seen with torsion of the testis and with some testicular tumours. A secondary hydrocele is usually lax and is typically small: the underlying testis is usually palpable. If a tumour is suspected, the hydrocele should not be punctured for fear of needle-track implantation of malignant cells. A secondary hydrocele subsides when the primary lesion resolves.

### **Clinical Manifestation**<sup>[4]</sup>

- Swelling of the scrotum
- One can get above the swelling
- Primary hydrocele is not tender but secondary may be tender.
- Gradually disappears when patient lies down but it returns when in erect posture

### **Complications**<sup>[5]</sup>

- ™. Infection
- ™. Pyocele
- ™. Haematocele
- ™. Atrophy of testis
- ™. Infertility
- ™. Hernia of hydrocele sac (rare)

### **Investigations**

Ultrasonography- Inguino scrotal

Duplex Ultrasonography  
Plain Abdominal Radiography

### **Differential diagnosis**<sup>[6]</sup>

- ™. Inguinal hernia
- ™. Epididymal cyst
- ™. Spermatocele
- ™. Testicular tumour
- ™. Scrotal oedema

### **Treatment**<sup>[7]</sup>

Small acquired hydrocele do not need treatment. If they are sizeable and bothersome for the patient, then surgical treatment is indicated. Established acquired hydrocele often have thick walls. There are three main surgical techniques for hydrocele;

**Plication:** Lord's operation is suitable when the sac is reasonably thin-walled There is minimal dissection and the risk of haematoma is reduced.

**Eversion:** The sac is opened and everted behind the testis, with placement of the testis in a pouch prepared by dissection in the fascial planes of the scrotum (Jaboulay's procedure)

**Excision:** Unless great care is taken to stop bleeding after excision of the wall, haemorrhage from the cut edge is liable to cause a large scrotal haematoma. This approach is not recommended.

### **DISCUSSION**

Hydrocele repair has been shown to reverse a spectrum of effects contributing to men with impaired fertility. Hydrocele is main concern towards the infertility. Clinical studies on the intervention have illustrated variable effects on postoperative sperm parameters and pregnancy rates.

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