Undescended testis

What is undescended testis?
When a baby boy is growing in the uterus, his testes form inside his abdomen before moving down into the scrotum. In full term babies, both testes are generally down in the scrotum. Each testis needs to lie in the scrotum for it to develop normally.

There are many factors that influence how well the testes descend. Your doctor will be able to discuss these with you. If one or both testes do not reach the scrotal sac, it is known as an undescended testis.

A testis that is temporarily pulled out of the scrotum is known as retractile testis. Your doctor will be able to tell the difference.

Note: the word ‘Testis’ means 1 testicle and ‘Testes’ means the pair of testicles.

Will they come down after birth?
The testes may come down during the baby’s first three to six months. If the testes have not descended by then, they will not come down.

Will my child need an operation?
Yes. If your child has an undescended testis when he is over 6 months of age, he will need an operation to place it in the correct position.

A retractile testis usually does not need an operation. Your son should however be followed up by your doctor until the position of the testis is certain.

The operation is done after your doctor confirms the diagnosis of an undescended testis. This can be done from 6 months of age onwards, and ideally by about 1 year of age.

The operation is called an orchidopexy (or orchiopexy). The operation moves the testis from its original position, tunnelling it into a pouch in the scrotum. When the testis is very high, your child may need two operations to get the testis down. With treatment, the testis has the best chance to grow and produce hormones and sperm.

How long does the operation take?
Your child comes to hospital on the day of the operation and is usually home the same day. He will be in the operating room for about one hour. This includes time spent in giving the anaesthetic and preparing him for the operation. There will be a scar in the groin and scrotal sac. The stitches dissolve. The operation can also be done through a “key-hole” technique. This is usually done for testes that are not able to be felt and are suspected to be still in the abdomen. You will need to discuss this with your doctor.

Is there pain after the operation?
Your child will need pain relief. This will be started before he leaves the hospital. Ask your doctor for advice on pain medicine when your child goes home.

Pain is not the only cause of distress after the operation. Fear, anxiety and hunger can all contribute. Try to stay
calm and comfort your child. Most children also feel more calm and comfortable when they get home.

If you are worried at all, contact the hospital or doctor.

What about activity after the operation?
Generally, your child should not sit on bikes, climb stairs or trees or be involved in any rough play for the first three weeks. After that, there is no need to restrict his activity. Many children will be playing and active the day after the operation. This will not affect the healing of the wound. Your doctor will explain how to care for your child’s wound.

Can they go back up?
- Some boys have a testis that is in the scrotum in infancy but slowly gets higher in the pre-school and early school years. These “ascending” testes also need operation.
- Rarely, a testis may not be properly down in the scrotum after operation.

Remember:
- Only your doctor can tell the difference between undescended testis and retractile testis.
- If your child has an undescended testis after the age of six months, he will need an operation.