

Department of Urology

Excision of a Hydrocele

A hydrocele is a collection of fluid which develops around the testicle. This gives the appearance of a swelling in the scrotum, the bag (or sac) in which the testes rests. The condition may occur on one or both sides. Normally there is a small amount of fluid surrounding the testicle but if the amount of fluid increases a spherical swelling becomes evident on one side of the scrotum. This is usually painless, although sometimes the fluid is produced because of infection of the testicle, which is then painful.

Why does it occur?

A hydrocele may appear after an injury to the testicle and sometimes as a result of infection of the testicle. It may result from a previous operation either on the testicle or in the groin. Sometimes hydroceles develop when there is generalised swelling of the lower half of the body due to fluid retention and heart failure.

What are the alternatives?

Observation, removal of the fluid with a needle or various other surgical approaches.

What preparations should be made?

There are no special preparations, but you will receive an appointment for pre-assessment to assess your general fitness, to screen for MRSA and to perform some routine investigations. At the pre-assessment visit you will be given information about the procedure.

Please can you bring a list of all your current medication with you when you attend your pre-assessment. If you take **Warfarin** or **Clopidogrel** **or drugs to thin your blood**, please ensure that your consultant is aware, as these will have to be stopped before the operation but this information will be given to you at the pre-assessment.

The operation is often performed as a day case. You will be admitted on the same day as the operation to either the Day Procedure Unit (DPU) or to the Same Day Admission Unit (SDAU). You will be given instructions on when to stop eating and drinking once you have your operation date and time of admission.

After admission, you will be seen by members of the medical team and nursing staff. During the admission process, you will be asked to sign a consent form giving permission for your operation to take place, showing you understand what is to be done and confirming that you wish to proceed. Make sure that you are given the opportunity to discuss any concerns and to ask any questions you may still have before signing the form.

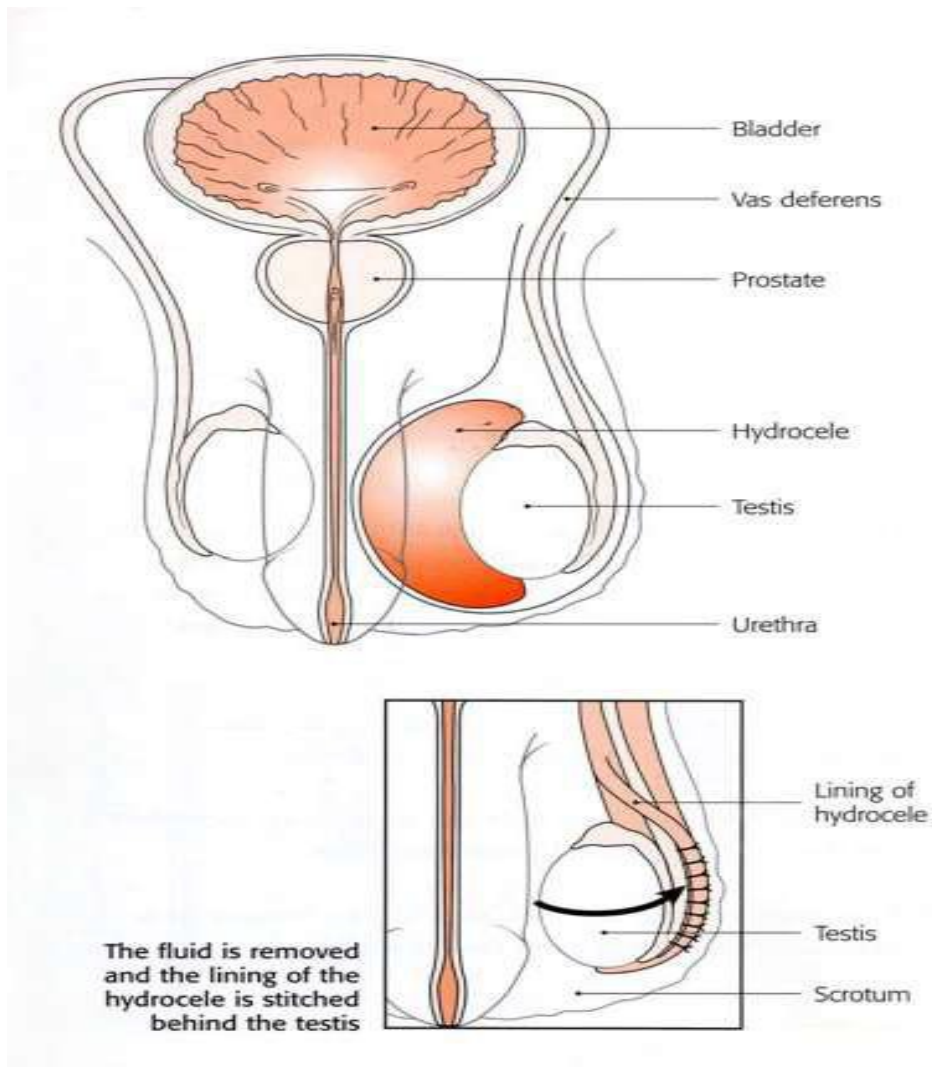
How is the operation performed?

The operation is performed under general anaesthetic (where you are put to sleep) or under a spinal anaesthetic (where you are numbed from the waist down). A small cut is made in the scrotum and the hydrocele sac is either removed or folded. The incision is repaired with

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stitches that are dissolvable.

The surgery takes 20 - 30 minutes.



What happens afterwards?

After your operation you will be taken back to the ward, and you will be able to eat and drink as soon as you feel able.

The nurses will observe your wound for any oozing. You will have a dry dressing over your wound.

You may experience some pain from the wound and this can be controlled with tablet painkillers.

A scrotal support (jock strap) will help with the bruising and swelling, but if you find that ordinary cotton Y front underpants with good support are more comfortable then wear them.

Are there any side-effects?

Most procedures have a potential for side-effects. You should be reassured that, although all these complications are well-recognised, the majority of patients do not suffer any problems

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after a urological procedure.

Common (greater than 1 in 10)

- Swelling of the scrotum lasting several days.
- Seeping of yellowish fluid from the wound several days after surgery.

Occasional (between 1 in 10 and 1 in 50)

- Blood collection around the testes which resolves slowly or requires surgical removal.
- Possible infection of the incision or the testes requiring further treatment with antibiotics or surgical drainage.

Rare (less than 1 in 50)

- Recurrence of the fluid
- Chronic pain in the testicle or scrotum

At Home

You should keep the wound clean and dry for 24 hours. If a dressing is in place, this can be removed following a short bath or shower. Until the area heals, you should not have long baths or showers because this can encourage the stitches to dissolve too quickly and may cause infection.

The stitches in the wound are dissolvable and do not need to be removed. They dissolve from 1 – 4 weeks depending on the stitches used.

This surgery can sometimes leave you with a degree of bruising and swelling around the testicles this should settle down after a few weeks. If you develop a temperature, increases redness, throbbing or drainage at the site of the operation please contact your GP.

Sexual intercourse can be resumed 2 weeks after your surgery or when you feel comfortable to do so.

Some lumpiness above or behind the testicle is common following the procedure and is often permanent.

You are advised to take 10 – 14 days off work this will allow the wound to heal and you will find that you are a lot more comfortable.

You are advised not to drive for a minimum of 24 hours. Thereafter, due to soreness you may wish to avoid driving until comfortable.

Points of contact

If you have any other questions, or require more information prior to your treatment, please contact the Urology nurse practitioners on 01603 289410, between the hours of 08.00 to 17.00

Patient Information Leaflet for: Excision of a Hydrocele

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or leave a message on the answer machine.

If you have any questions, or require more information following your surgery please contact Edgefield ward on 01603 289962.

Please can you bring all your current medication with you when you are admitted to hospital.

References: Patientwise- Edited by Dr P Wise, Dr R Pietroni and S Wilkes Patient Pictures, Urological surgery, R. Kirby, Health Press, Oxford British Association of Urology Surgeons website - www.baus.org.uk

This sheet describes a surgical procedure. It has been given to you because it relates to your condition and may help you understand it better. It does not necessarily describe your problem exactly. If you have any questions please ask your doctor.

