

## **Day Procedure Unit Hydrocele Repair**

This leaflet gives information for parents / carers whose child is having a hydrocele repair.

### **What is a hydrocele?**

Hydroceles are common in baby boys. All boys have a connection (also called a patent processus vaginalis or PPV) between their abdomen and their scrotum before they are born. By birth, this connection is usually closes. If a small communication remains open, then fluid from the abdomen can trickle down into the scrotum where it is trapped in the sac around the testis. This is how a hydrocele is formed in children. (If the opening is large, it leads to intestines sliding out which is called a hernia). Most hydroceles resolve spontaneously and do not need an operation. If the hydrocele persists beyond 18/24 months of age, surgery is recommended, since it is a potential hernia. Also there is a small chance of trauma or pain related to the swelling.

### **The Operation**

The hydrocele is repaired under general anaesthesia by the surgeon making a small wound in the groin. The surgeon will find the connection (PPV) and close this off and release the fluid from the scrotum. The wound in the groin is then closed with dissolvable sutures and the area will be covered with Vaseline or some plastic dressing.

### **Risks and complications**

Possible risks and complications for hydrocele include:

- Bleeding.
- Infection of the surgical wound.
- Developing a lump under the wound. This is caused by a collection of fluid that normally settles over a few weeks.
- Injury to nerves.
- Damage to the blood supply of the testicle or the vas deferens (tube leading from the testicles) which may lead to shrinking of testes.
- Recurrence.

### **What to expect after surgery?**

The area will be sore and may be swollen and bruised for the first couple of days after the procedure and you will be advised by the anaesthetist about what pain relief your child may take. It is advisable to offer regular pain relief for at least 48 hours. Your child will probably be more comfortable in loose fitting clothing i.e. pyjamas or tracksuit.

The operation site must be kept clean and dry for the first 5 days; after this he may go into the bath. If there is any sign of infection in the form of redness, swelling or discharge of pus, contact your GP or the Children's Assessment Unit as your child may need some antibiotics.

Your child can return to school after 1 week if he is feeling comfortable but no sports or bike riding for about 3 weeks after the surgery.

You are advised to contact your GP if the swelling and redness are causing concern after the first week.

Only certain cases are given a routine follow-up appointment in the surgical clinics.

### **Useful contacts for further information**

If you have any queries prior to the procedures outlined, and its implications to you or your relatives/carers, please contact the Day Procedure Unit on 01603 286008.

If you should need any help or advice following your child's surgery you are advised to ring the Day Procedure Unit or overnight ring Children's Assessment Unit 01603 289775 for the first 24 hours following surgery, and after this time please contact your own GP for advice.

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