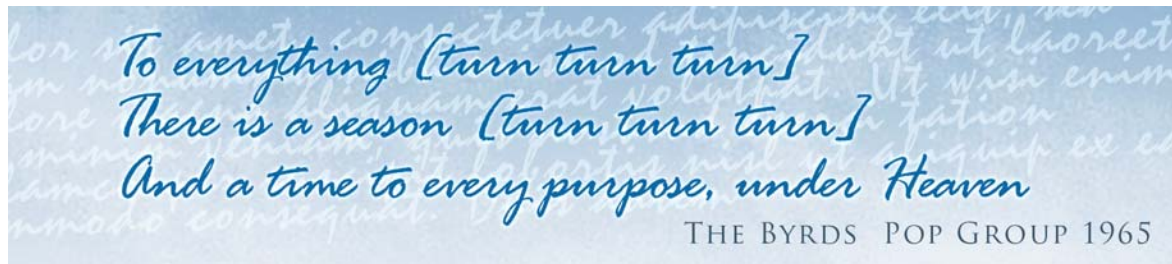


Torsion of the Testis

Torsion of the testis is the twisting of the spermatic cord. When this occurs, the blood supply to the testicle is cut off.

Torsion is a surgical emergency.



Incidence

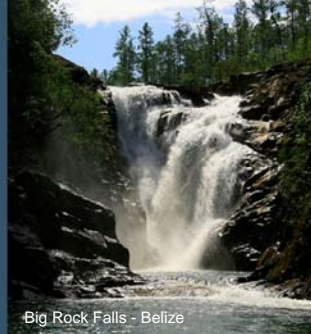
Torsion is an uncommon condition. It occurs in 1 in 4000 males

Age

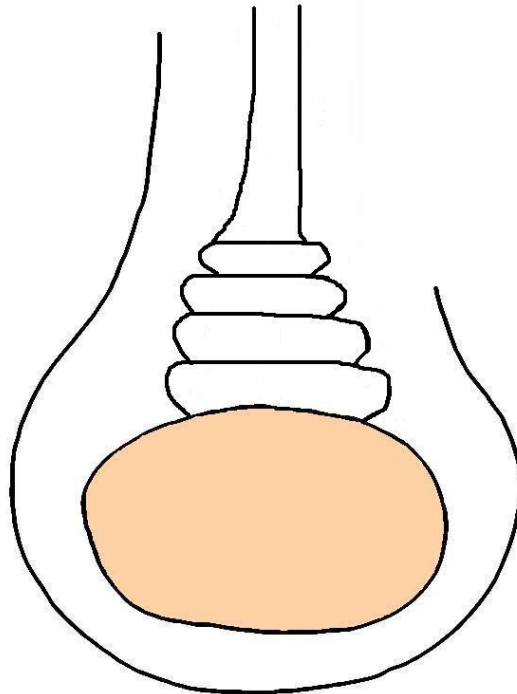
Torsion occurs in children and adolescents. It is very rare after 25 years of age. Also it has occurred before birth.

Sex

It is only found in males



Torsion of the Testis

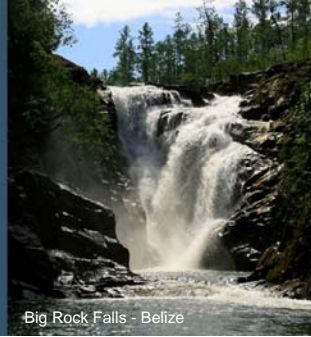


Torsion of the Testis

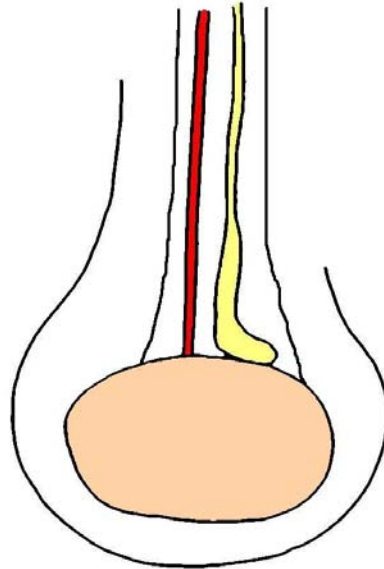
Cause

Most patients have a deformity that they are born with. The testicle lies horizontally. The epididymis and the blood supply to the testicle are attached at the equator of the testis. The anomaly is known as the clapper bell deformity. This acts like a pivot allowing the testicle to twist. Up to 12 % of males will have this deformity. Twisting of at least 720 degrees is thought to be required to compromise the testicular blood supply.

Torsion is more prevalent in patients with undescended testicles. This is because they have limited attachment of the cord.



Torsion of the Testis



Clapper Bell Deformity

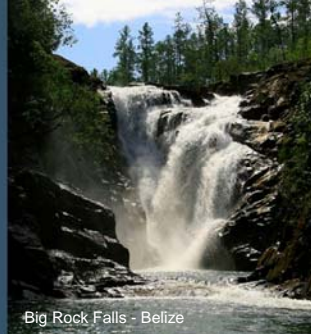
Presentation

The patient presents with acute onset of pain in the scrotum. The pain can be very severe and associated with nausea and vomiting. There is a scrotal enlargement which is often exquisitely tender. The scrotal mass does not transilluminate. There may be a secondary hydrocele. The absence of the cremasteric reflex (the muscle around the spermatic cord that lifts the testicle) supports the diagnosis of torsion. The scrotal skin is reddened and inflamed. The other testis may lie in a horizontal axis when the patient stands.

Some patients present with intermittent scrotal pain. In these cases the torsion may occur commonly and resolve spontaneously.

Prehn's sign

This test helps to distinguish torsion from epididymitis. Scrotal elevation does not relieve the pain of torsion but does in epididymitis.



Torsion of the Testis

Differential Diagnosis

This includes

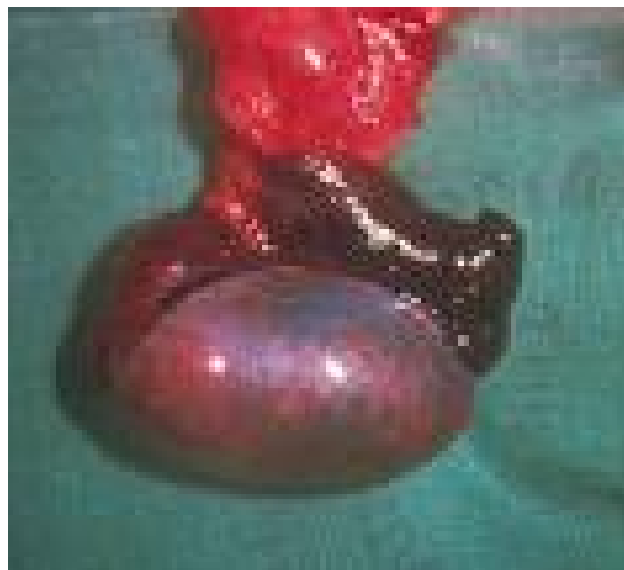
- Torsion of the appendix of the testis
- Hernia
- Epididymo orchitis
- Testicular tumours
- Trauma
- Hydrocele

Investigations

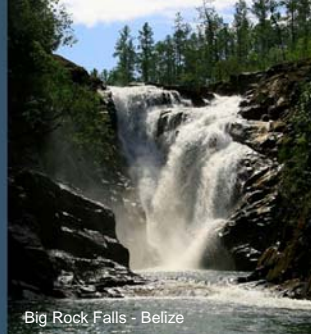
Investigations are not routinely performed as emergency surgery is required.

Treatment

Emergency surgery is mandatory. The sooner this is done the better. The testicle is explored and untwisted. It is important to fix the testicle in the scrotum with sutures. This operation is called an orchiopexy. It anchors the testicle in the scrotum. The other testicle must be fixed also. The other testicle will have the same risk of torsion. An infarcted dead testicle may need to be removed.



Torsion of the Testis



Torsion of the Testis

Complications

These include haematoma, bruising and wound infections. The testis may atrophy if surgery is delayed.

Torsion of the appendage of the testis

Each testicle has an appendage which is a small polypoid structure near the upper pole of the testis. It is also known as the Hydatid of Morgagni.

This small lump can also twist. When it does so, it produces a very sudden onset of testicular pain. It is not possible to differentiate this condition from testicular torsion. It presents in exactly the same way. Emergency exploration of the testis is mandatory in order not to miss a testicular torsion. Excising the twisted appendage cures the condition.



Torsion of the Hydatid of Morgagni
The twisted appendage is brownish black in colour