

## ***Radical removal of the testis ( $\pm$ silicone implant)***

### **What does the procedure involve?**

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This involves removal of the testis via a groin incision for suspected testicular cancer. A testicular implant may be inserted at the same time if you wish

### **What are the alternatives to this procedure?**

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In reality, there are often none but, occasionally, the surgeon may wish to discuss observation, biopsy or partial removal of the testis where a suspected tumour is present; these occasions, however, are very uncommon. The majority of testicular cancers can be detected by simple examination and ultrasound scanning together with blood tests (to measure tumour markers), a chest X-ray and a CT (body) scan.

### **What should I expect before the procedure?**

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Having only one testis should not adversely affect your life. The remaining testicle takes over the function of the removed one so your sex life and ability to father children should be unchanged. However, testicular cancer and its treatments (especially chemotherapy) can alter the amount of sperm produced. You will, therefore, be given the opportunity to provide semen samples for storage. These can be used in the future for assisted conception if your fertility does not return after treatment. If you are concerned about the cosmetic results of losing a testicle, a false testicle (prosthesis) can be inserted during the operation.

You will usually be admitted the day of your operation. You will normally receive an appointment for pre-assessment, to assess your general fitness, prior to your surgery. After admission, you will be seen by members of the nursing staff, your urologist and anaesthetist.

You will be asked not to eat or drink for 6 hours before surgery.

### **What happens during the procedure?**

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Usually a full general anaesthetic (where you will be asleep throughout the procedure) will be used. The testicle is normally removed through an incision in the groin (similar to that used for repair of a hernia). It may be necessary to take biopsies from the other (normal) testis; if this is needed, it will be discussed with you before the procedure. The operation takes approximately 45 minutes.

## What happens immediately after the procedure?

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You may eat, drink and mobilise when you are fully recovered from the anaesthetic. You will be able to leave hospital as soon as you are comfortable, provided you have someone to collect you and to remain with you for the first 24 hours after discharge. The average hospital stay is 1 day.

## Are there any side-effects?

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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 after a urological procedure.

### Common (greater than 1 in 10)

- Cancer, if found, may not be cured by removal of the testis alone
- Need for additional procedures or treatments such as surgery, radiation or chemotherapy
- Permission to biopsy the other testis if small, abnormal or history of maldescent

### Occasional (between 1 in 10 and 1 in 50)

- Removal of testis only to find that cancer was not present
- Possibility that microscopic examination of the removed testicle may not give a conclusive result
- Infection of the incision requiring further treatment (& possible removal of implant). Infection of the wound or scrotum is more common when a prosthesis is used and is more serious because it usually means that the prosthesis will need to be removed
- Bleeding requiring further surgery (& possible removal of implant)
- Loss of future fertility

### Rare (less than 1 in 50)

- Pain, infection or leaking requiring removal of implant.
- Patient cosmetic expectations not always met by the implant
- Implant may lie higher in scrotum than normal testis
- Palpable stitch at one end of the implant which you may be able to feel
- Long term risks from use of silicone products unknown

## What should I expect when I get home?

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The groin and scrotum may be uncomfortable for 7-10 days. Simple painkillers will usually relieve this discomfort. It is common to notice some bruising in your groin and scrotal area. You may find it more comfortable to wear supportive pants (rather than boxer shorts). You may shower or bath 24 hours after the procedure but ensure that your wound is thoroughly dried by gently dabbing the area. You should be able to return to work after 2 weeks but it is sensible to avoid heavy lifting and strenuous exercise for a month. You are advised not to drive for 2 weeks and, before driving, to check with your motor insurance company; do not drive if you still have pain. Sexual activity can be resumed after 2 weeks although, for some men, the strain of surgery may reduce your sex drive temporarily. Absorbable stitches are normally used but these may take up to 90 days to disappear completely.

## What else should I look out for?

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If you develop a temperature, increased redness, throbbing or drainage at the site of the operation, please contact your doctor.

## Are there any other important points?

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It will normally take 14-21 days for the pathology results to become available. You and your GP will be informed of the results after this discussion. Further treatment will usually be carried out under the supervision of the Oncology Department and this will probably require follow-up for life.

Procedure code for insured patients: N0680



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*For your peace of mind*

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