Royal United Hospital Bath NHS

NHS Trust

RUH Having an orchidectomy

Information for Patients

You have been referred to us with a lump in your testicle and the ultrasound scan shows that there is a tumour in the testicle. The best treatment for this is an Orchidectomy.

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What is an Orchidectomy?

An Orchidectomy is the removal of a testis (or testicle). Under anaesthesia a small incision (cut) is made in the groin or more rarely the scrotum. The testis is found, the blood vessels carefully cut and tied, and the testis is removed. The skin is then closed with stitches.

Before the operation

Before the operation we will need to assess if you are fit enough to have a general anaesthetic, this is called a Pre-operative assessment. This will involve some blood tests including Tumour Markers, blood pressure, chest x-ray and a heart tracing called an ECG. The anaesthetist will see you either at this time or just before your operation. You will be told when to attend for your operation and when to stop eating and drinking. You may be asked at this time if you wish to have a Prosthesis fitted (a false testicle), if you feel unable to decide at this time, this can be offered again in the future.

What are the risks and side effects of this operation?

Occasional

- Cancer, if found, may not be cured by surgery alone.
- Need for further treatment such as chemotherapy, surgery or radiotherapy.
- Loss of future fertility.

Rare

- Removal of testes only to find that cancer was not present.
- Possibility that pathological diagnosis will be uncertain.
- Infection of incision requiring further treatment.
- Bleeding requiring further surgery

How will I feel after the operation?

After the operation you may feel drowsy and it is essential that someone is able to collect you. You can usually go home on the day of the operation or the day after depending on how you feel. Before you leave the doctor will see you and check you are:

- Moving around freely
- Able to eat and drink
- Mostly pain free
- Able to pass urine/water

Will the operation be painful?

Any discomfort you experience should be relieved by taking the analgesics (pain relief medication). You will be given these after your operation and a small supply to take home. In the unlikely event these do not control your pain or you require more please contact your GP.

Will I need to do anything to the wound?

The stitches are usually dissolvable, so do not need removing. The wound dressing may be removed 2 days after the operation when you have a bath or a shower. Soap and water is entirely adequate and you may wash as often as you like. When you remove the dressing there may be a small amount of blood on it, this is quite normal and nothing to worry about. The wound may be swollen and bruised as well as the scrotum on the same side, but this should subside gradually. However, sometimes the wound can show signs of an infection, these are:

- Redness
- Tenderness
- Persistent throbbing
- Feeling shivery as if you have flu and you
- have a temperature
- Wound is leaking fluid or pus
- Swelling around the wound

If this happens please make an appointment to see your GP.

When can I go back to work?

You can return to work usually 1-2 weeks after the operation, but if you perform strenuous work which requires heavy lifting, you should not return for 4-6 weeks.

When can I drive?

You should not drive for at least a week, however you should refrain from driving until you can perform an emergency stop without strain or pain.

When can I start playing sports?

In most cases sporting activities can resume after four-six weeks.

When can I start having sex again?

Once you feel comfortable. After this operation some men experience problems with body image and lack of masculinity this is normal and usually subsides in time. Be patient and your sexual function should return to how it was before the operation. One of the hormones your testicle produces is Testosterone, this makes you feel male, gives you hair and beard growth, shapes your body, gives you your sex drive and helps give you and maintain erections. In a few men when a testicle is removed the remaining testicle has not got the ability to take over the production of testosterone and men feel tired, lack of sex drive and erectile dysfunction. If you have any of these signs please tell your nurse or the team in Bristol.

Are there any other effects I should know about?

After the operation we can not guarantee that your fertility has not been affected, if you wish to discuss this further before or after your operation please speak to your nurse/doctor. Sperm Storage may be discussed prior to the operation.

What happens next?

After the surgery a Computerised tomography (CT)Scan of your Chest, Abdomen and Pelvis will be arranged to see if the cancer has spread to any other parts of the body. This is carried out within two weeks of the operation. Further blood tests (Tumour Markers) are arranged.

When these three things are completed a referral is sent to the Bristol Testicular Cancer Service Multidisciplinary Team, who will review your case. This meeting is held every Friday morning at 08.30am. The team will look at the tumour under the microscope, look at the CT scan and the blood test results and make a plan for your further treatment. This is carried out within two weeks of the operation. You will be sent an appointment to be seen by the team in the Testicular Cancer clinic in the Bristol Haematology and Oncology Centre where you will be told the results of the meeting.

Will I need any further treatment?

If the cancer has not spread and the Orchidectomy removed all of the tumour, the operation may be the only treatment you will need and a programme of follow-up offered (called Active Surveillance) to check if the cancer returns in the future. However, Sometimes, if the risk of further problems is deemed to be significant or the cancer has spread to other organs such as the lungs and lymph nodes in the abdomen, a course of chemotherapy or radiotherapy is recommended, this will be discussed with you in Bristol.

Which ever option you and your doctor agree on it is important to remember that even if the cancer does come back, that more than 9 out of 10 men with testicular cancer are cured of the cancer.

We hope that this leaflet has answered some of your questions and that you now know more about your operation. If you have any further questions please contact the team.

Contact details

Urology Outpatient Department:

01225 824819 (Mon-Fri 9am-5pm)

Miranda Benney and Ros Helps (Macmillan Uro-Oncology Nurse Specialists) Mon–Fri 9-5 01225 824250 (answerphone)

Bristol Testicular Cancer Service 0117 342 2418