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ORIGINAL ARTICLE

ANALYSIS OF SCROTAL SWELLINGS IN RMMCH, CHIDAMBARAM

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ABSTRACT

AIM: To study the various causes, clinical presentations, diagnostic and therapeutic modalities of various types of scrotal swellings. **METHODS:** This is a prospective study of patients admitted with scrotal swellings from October 2013 to October 2015 at the surgical unit of Rajah Muthiah Medical College Hospital, Annamalai Nagar. **RESULT:** In our study of 162 cases of scrotal swellings, the commonest presentation was Hydrocele (73.5%), followed by Epididymoorchitis (10.50%) and the least was spermatocele (0.61%). Based on our study the pattern of age distribution in patients with primary vaginal hydrocele, maximum number of patients presented within the age group of 31-40 years. **CONCLUSION:** Primary vaginal hydrocele is the commonest cause for scrotal swellings with 74%.Majority of the patients with primary hydrocele belonged to 31-40 yrs of age group(32.4%), followed by 41-50 yrs of age group (21.9%).

Keywords: Scrotal swellings, Chidambaram

1.INTRODUCTION

The scrotum is a sac of skin and involuntary muscles enclosing the testis, epididymis, vas deferens and spermatic vessels. The scrotum functions to provide an apt environment to the testis for optimal spermatogenesis, which is so important for perpetuation of a race. In other words scrotum is the thermoregulator of spermatogenesis.

The high incidence of male infertility and other morbidities associated with scrotal pathologies, make a detailed study into them and their management worthwhile. This study intends to look into the various pathologies of the scrotum and its contents, which present as scrotal swelling; and to highlight upon the best way to approach them; in order to restore the anatomy and physiology to the maximum possible level.

2.METHODOLOGY:

This is a prospective study of patients admitted with scrotal swellings from October 2013 to October 2015 at the surgical unit of Rajah Muthiah Medical College Hospital, Annamalai Nagar.

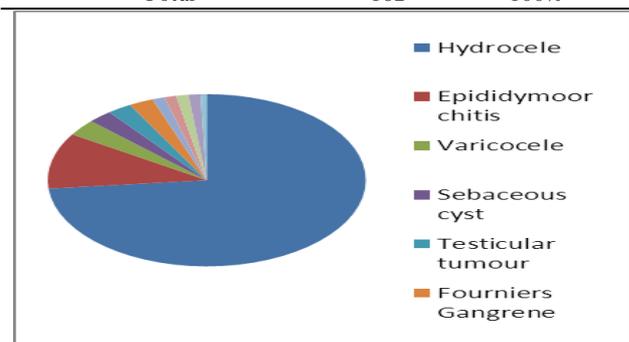
Swellings arising from the testis and its coverings, epididymis and spermatic cord are included in the study. Inguinoscrotal swellings and swellings from scrotal skin are excluded from the study.

3.RESULTS:

In our study of 162 cases of scrotal swellings, the commonest presentation was Hydrocele (73.5%), followed by Epididymoorchitis (10.50%) and the least was spermatocele (0.61%).

ANALYSIS OF SCROTAL SWELLINGS

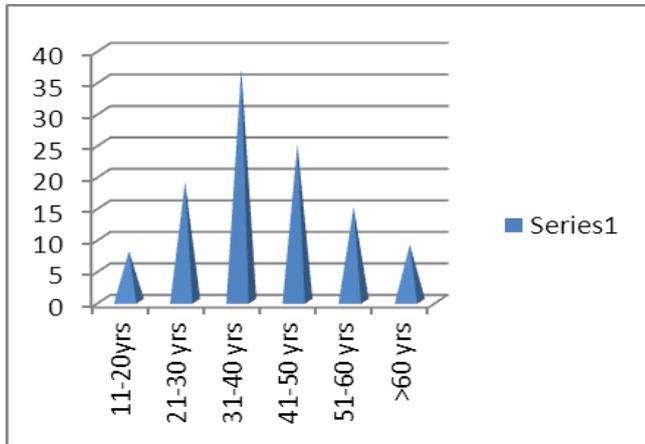
SI. No.	Scrotal swellings	No. of cases	Percentage
1	Hydrocele	119	73.5%
2	Epididymoorchitis	17	10.50%
3	Varicocele	5	3.10%
4	Sebaceous cyst	4	2.46%
5	Testicular tumour	4	2.46%
6	Fourniers Gangrene	4	2.46%
7	Epididymal Cyst	2	1.24%
8	Heamatocele	2	1.24%
9	Scrotal Abscess	2	1.24%
10	Torsion testis	2	1.24%
11	Spermatocele	1	0.61%
	Total	162	100%



Based on our study the pattern of age distribution in patients with primary vaginal hydrocele, maximum number of patients presented within the age group of 31-40 years

AGEDISTRIBUTION IN PRIMARY

Sl.No	Age group	No. of pts	Percentage
1	11-20yrs	9	7.9%
2	21-30 yrs	19	16.6%
3	31-40 yrs	37	32.4%
4	41-50 yrs	25	21.9%
5	51-60 yrs	15	13.3%
6	>60 yrs	9	7.9%
Total		114	100%



4.DISCUSSION

In our study of 162 cases of scrotal swellings, of these 119 were hydroceles of various types making about 74% of the total. The other common causes we came across in this study were epididymo-orchitis and varicocele both accounting for about 14%. The remaining 12% were due to testicular tumour, Fournier's gangrene, epididymal cyst, scrotal abscess, haematoceles, spermatoceles and sebaceous cyst.

Clinical examination was found to be very important for diagnosis. Most of the swellings were oval in shape and globular. In most cases scrotal rugosity was lost in hydroceles. Majority of the swellings were cystic in consistency, fluctuant, translucent and transillumination was negative in cases of secondary hydrocele, spermatocele, haematocele, pyocele and because of the opaque nature of their contents. After scrotal examination the diagnosis was confirmed by scrotal ultrasonography.

If the hydrocele is small and thin walled Jaboulay's Procedure or Lord's Plication can be done. If the hydrocele is large or the sac is thick walled, excision of the sac is the procedure of choice. Varicocele were treated by palomo procedure. Tetracycline and Doxycycline were used for epididymo-orchitis.

Hydrocele is the commonest of all scrotal swelling that we encountered in our series of which 114 cases of primary hydrocele and 5 cases of secondary hydrocele were reported. Based on our study the pattern of age distribution in patients with primary hydrocele. The maximum number of patients presented during 31-40 years of age.

5.CONCLUSION

On analysing 162 cases of Scrotal swellings

1. Primary vaginal hydrocele is the commonest cause for scrotal swellings with 74%
2. Majority of the patients with primary hydrocele belonged to 31-40 yrs of age group (32.4%), followed by 41-50 yrs of age group (21.9%)

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