







Scrotal pain and Swelling

Color index:

Important

Further explanation

Editing link

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Acute Scrotal Pain

DDx:

1) Testicular torsion:

- Twisting and strangulation of the testicle on the spermatic cord. Due to a congenital poor fixation of the testicle to the tunica vaginalis
- Sudden and often occurs several hours after vigorous physical activity or minor trauma to the testicles
- you should ask the patient about prior similar episodes that might suggest intermittent testicular torsion.
- Signs: red, swollen hemiscrotum that is usually too tender to palpate, Absent cremasteric reflex, Affected tests lies higher than contralateral testis, horizontal in position and negative prehn sign (there is no pain relief when the affected hemiscrotum is elevated.

2) Torsion of appendages: commonest for prepubertal boys

- Remnants of müllerian duct system located on the testicle or epididymis.
- Symptoms: Gradual pain at the upper part of the testis, The rest of the testis is not tender
- Signs: Blue dot (specific)at the top of the testis

3) idiopathic scrotal oedema

- Unknown cause
- Symptoms :Minimal pain ,usually bilateral
- Swelling and redness in scrotum

4) Epididymitis-orchitis: Commonest for post-pubertal boys

- Both testis and epididymides are involved in the acute inflammatory reaction.
- The affected side of the scrotum is swollen usually unilateral, inflamed and very tender.
- There are usually constitutional symptoms of malaise and fever
- may be accompanied by urinary tract infection with dysuria and frequency.

5) Fournier's gangrene : necrotizing fasciitis of the perineum.

severe pain, starts on the anterior abdominal wall, migrating into the gluteal muscles and onto the scrotum and penis, Pain is accompanied by edema outside the involved skin, blisters/bullae, crepitus,

+ systemic findings : fever, tachycardia, and hypotension.

6) Trauma/surgery

7) Testicular cancer:

Usually painless swelling, gradual onset

8) Strangulated inguinal hernia:

- Hx of previous intermittent inguinoscrotal swelling, sudden onset of pain and inability to reduce the hernia
- 9) Henoch-Schönlein purpura (IgA vasculitis)
- 10) Mumps

11) Referred pain:

Men who have the acute onset of scrotal pain without local inflammatory signs or a scrotal mass on examination may be suffering from referred pain to the scrotum/ abdominal aortic aneurysm, urolithiasis

Personal Data Chief complaint Scrotal Pain, +/- redness,+/- swelling **History of presenting illness: SOCRATES** site **Diffuse:** - Testicular torsion - Hydrocele, varicocele **Upper pole of testis:** - Torsion of testicular appendage **Epididymis:** - Epididymitis - Epididymal cyst onset **ACUTE** - Testicular torsion **SUBACUTE** - Epididymitis - Torsion of testicular appendage - Orchitis - Fournier's gangrene **NONACUTE** -Varicocele

- Torsion of testicular appendage

Elevation of the scrotum? epididymitis

- Torsion of testicul - Orchitis - Fournier's gangre NONACUTE - Varicocele - Hydrocele - Testicular cancer - Epididymal cyst Character Sharp: - Testicular torsion

relieving factor

<u>Dull</u>:
- Hydrocele
- Varicocele

| Associated | Fever: |
|------------|---------------------------------------|
| symptoms: | Epididymitis /Testicular torsion |
| | Trauma / Appendicitis |
| | Nausea/vomiting: |
| | Testicular torsion / Trauma |
| | Dysuria: |
| | Epididymitis / Trauma |
| | Hematuria: |
| | Epididymitis |
| | Scrotal swelling: |
| | -Epididymitis |
| | -Testicular torsion |
| | -Torsion of testicular appendage |
| | -Trauma |
| | Abdominal pain: |
| | Testicular torsion |
| | Torsion of testicular appendage |
| | Fournier's gangrene |
| | Gynecomastia |
| | Testicular cancer |
| | Arthralgia, Gastrointestinal bleeding |
| | Henoch-Schönlein purpura |
| | |

timing

Come during the day and disappear after lying down? hydrocele Increase the size after upper respiratory viral infection ? hydrocele

elevation of the scrotum? testicular torsion

After urinary procedure ? Epididymitis

After prolonged sitting? Epididymitis (inflammatory) After trauma? Testicular rupture/Testicular torsion

After vasectomy? Epididymitis

After sexual activity or physical activity? **Testicular torsion, Torsion of testicular**

exacerbating factors

severity

Moderate:

appendage

Torsion of testicular appendage

Epididymitis

Severe:

Testicular torsion

family history?

Summary: Sudden sharp diffuse pain and swelling + Recurrent episodes of pain + Pain after trauma

past history: same symptoms? recent surgery or instrumentation

Sharp pain in the upper pole of testis with scrotal swelling and abdominal pain (Torsion of testicular appendage)

Dull, aching diffuse pain with scrotal swelling (Hydrocele)

abdominal pain + NV (Testicular torsion)

B- Undescended testis:

True Undescended Testis "Retained testis"

- The testis stopped migration anywhere in the normal pathway above the scrotum
- Presentation: Absence of one or both testes from the scrotum Or scrotum has not developed

Ectopic:

- If the testis stops migration anywhere rather than the normal pathway,
- Commonly in the superficial inguinal pouch.
- Absence of a testis is the common presenting but the patient also may complain from pain Or discomfort during physical activity due to the testis compressed

True and Ectopic management:

- Palpable = Open Orchiopexy
- Not palpable: Laparoscopy-assisted Orchiopexy
- The treatment should be done at the age of 6-12 months to give a chance for spontaneous testicular descent after birth.

Retractile:

- Testis at the scrotum at birth but goes up again, appear and disappear due to hyperactivity of the cremasteric muscle
- Surgery is <u>unnecessary</u> ultimately descend properly before/ or at puberty

Patient with Undescended testis Will present with:

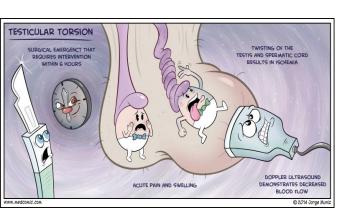
- Empty scrotum
- The testis could be : Palpable or not

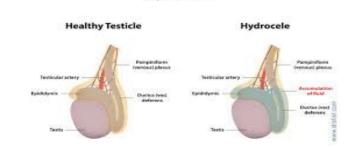
C- Hydrocele

- common condition in old men
- fluid collects in the tunica vaginalis, resulting in an enlarged but painless scrotum.
- The cause of most hydroceles is unknown (idiopathic).
- The fluid is straw coloured and protein-rich.
- Signs: Non reducible Scrotal swelling, Painless, Transilluminates, the testicle cannot be felt

In the Hx you should ask about:

- Premature baby or not ?
- His weight at birth?
- Is there any similar condition in his family





Hydrocele

