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Undescended testes in newborn

Cryptorchidism, a common issue in male dogs, occurs when one or both testicles fail to descend into the scrotum, usually due to improper development of the gubernaculum structure that guides their descent. This condition typically arises between 6–16 weeks of age and is often linked to genetic factors, with breeds like Pomeranians, French Poodles, Siberian Huskies, and others being predisposed. Diagnosis can be made through physical examination or family history, though additional tests such as hCG or GnRH response tests may be recommended for accuracy. The undescended testicle(s) can become trapped in various locations between the scrotum and kidney, necessitating precise surgical intervention to prevent complications like testicular torsion and cancer. Surgical procedures involve a series of steps including palpation to locate the testicles, ultrasound imaging if needed, and exploratory surgery if the testicles are still undetectable. The aim is not only to treat the condition but also to ensure sterility in affected dogs to prevent unwanted breeding. Cryptorchidism in Dogs: Causes, Treatment, and Aftercare Cryptorchidism is a common issue in dogs where one or both testicles fail to descend into the scrotum. This can make it challenging for veterinarians to locate them, leading to increased surgical costs. The condition can be treated surgically, with delays in neutering recommended until 1 year of age to allow the testicle(s) time to develop. Flea and tick season is here! Can you find the right flea prevention for your dog? Undescended testicles affect one in every 25 boys at birth. They usually don't need treatment, but if left untreated, can cause fertility issues later in life and an increased risk of testicular cancer. A condition where the testicles fail to descend into the scrotum is known as retractile or undescended testicles. In young boys, this is usually a cause for concern, but it may settle permanently in the scrotum as they age. It is essential to monitor children with retractile testicles during childhood, as they may not descend naturally and treatment may be required. Parents should consult their GP if they notice that their child's testicles are not within the scrotum. When a child's testicles fail to descend, it can occur in one or both testicles, with only one being affected more frequently. In rare cases, both testicles may also fail to travel to the scrotum. During pregnancy, the testicles develop inside the abdomen and should be in the scrotum by the time the child is one year old. However, some children may have their testicles in the scrotum but cannot feel them because they naturally rise back into the body due to temperature or fear. If a parent notices that their child's testicles are not feeling normal, it is essential to seek medical attention. Untreated undescended testicles can cause complications such as testicular torsion, which can be painful and require immediate medical attention. The exact reason for undescended testicles is unknown, but it is more common in premature babies. Around one in 20 male babies are born with an undescended testicle, and in about one in 70 cases, the testicle remains undescended. Treatment options vary depending on the suspected cause and may include hormone therapy or a short operation under general anesthesia called orchidopexy. In young children, usually around one year old, undescended testicles can cause issues if left untreated. The testicles need to be at a slightly cooler temperature than the rest of the body to produce sperm effectively. Men who had undescended testicles as children tend to have lower fertility levels and fewer healthy sperm if they weren't treated early on. This increases their risk of developing testicular cancer later in life. Early detection is also more challenging when the testicles are inside the abdomen rather than in the scrotum, which further raises the risk of complications like testicular torsion. To address these issues, an operation called orchidopexy can be performed to move the undescended testicle(s) into its proper position in the scrotum. This procedure typically takes around 45 minutes and can usually be done as a day surgery, although some cases may require a short hospital stay. Prior to the operation, parents will attend a pre-admission appointment with their child's surgeon to discuss any concerns and review the planned procedure. It is essential for children to fast beforehand according to the specified guidelines to minimize the risk of complications or cancellation. The type of surgery used depends on the position of the testicle(s), with open or keyhole (laparoscopic) procedures being employed as necessary. In rare instances, the surgeon may find that the testicle has not developed properly while in the abdomen and will need to remove it. To ensure the remaining healthy testicle remains in place and develops normally, the surgeon may secure it in the scrotum. Every surgical procedure carries a small risk of complications, including infection or bleeding, but these risks are minimized with proper care from experienced medical professionals. There's a tiny chance that the testicle might get hurt during surgery. This is more likely to happen if the surgeon can't feel it properly inside. Even so, the doctor will keep an eye on how well it grows after the procedure. Your child will stay in the ward for recovery and go home once they're feeling okay to eat and drink again. We'll call you the next day to check on their progress. In the first 24 hours, your child might feel a bit sick. Just make sure they drink plenty of fluids, even if they don't feel like eating much at first. They should get some pain relief during surgery, but this might start wearing off soon. You'll need to give them medicine regularly for at least three days after coming home. The area where the surgery was done will probably be sore and look a bit swollen for a while. But this should get better within a few days. The stitches used in the operation won't need to be taken out because they dissolve on their own. You might see some Steri-strips or skin glue that fall off after five to seven days. It's a good idea to keep the area clean and dry for two to three days after surgery so it can heal properly. If your child needs a bath or shower, just don't soak the area until it feels settled down. They should avoid cycling or using sit-on toys for about a month because the area might still be uncomfortable. They'll need to come back to the hospital for an outpatient appointment in three months. We'll send you the date. 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