



York and Scarborough  
Teaching Hospitals  
NHS Foundation Trust

# Hydrocele Repair in Children

Information for parents and carers

## **Department of Urology**

① For more information, please contact:

Paediatric Nurses

Telephone: 01904 726010

Ward 17

Telephone: 01904 726017

York Hospital, Wigginton Road, York, YO31 8HE



<b>Contents</b>	<b>Page</b>
What is a hydrocele? .....	4
What does a hydrocele look like? .....	4
How is the hydrocele treated? .....	4
What does the operation involve? .....	5
What happens before the operation?.....	5
What happens on the day of the operation? .....	6
What happens after the operation?.....	7
What are the alternatives to this operation?.....	7
Are there any side-effects or risks with this operation? ..	8
What issues should I look out for? .....	9
Tell us what you think of this leaflet .....	10
Teaching, training and research.....	10
Patient Advice and Liaison Service (PALS).....	10
Leaflets in alternative languages or formats .....	12

This leaflet is for parents or carers of children who have been advised to have an operation to repair a hydrocele. It explains what a hydrocele is, what to expect when you come to York Hospital on the day of the operation and follow-up care.

## **What is a hydrocele?**

A hydrocele is a swelling in the scrotum or groin. It is a collection of fluid surrounding the testicle. Testicles move into the scrotum through a passageway in normal baby development. If this passage does not close, fluid can flow from the abdomen into the scrotum. This causes the scrotum to swell. A hydrocele can also develop if the testicle becomes inflamed or damaged, or if there is fluid blocking the sperm tube.

## **What does a hydrocele look like?**

The hydrocele makes the testicle look swollen and it feels like a balloon filled with water. It does not usually cause discomfort.

## **How is the hydrocele treated?**

It is treated by a small operation carried out under a general anaesthetic.

## **What does the operation involve?**

Once the child is asleep, the surgeon will make a small cut in the groin and seal off the passage between the abdomen and the scrotum and remove the fluid from inside the scrotum. The cut will be closed with dissolvable stitches or glue.

## **What happens before the operation?**

You will have an appointment in a pre-assessment clinic. You will meet a nurse and a member of the play team. The nurse will ask medical questions and check the child's height and weight. The play team will discuss the anaesthetic to help you and the child understand it more. You will have the opportunity to ask any questions and be given some information to take home.

Please ensure you have some simple painkillers at home for after the operation, for example Calpol. If you are not sure what to buy, check with any pharmacy.

At some stage before or during the admission process, you will be asked to sign the second part of the consent form (FY03CON67-2 Hydrocele repair) giving permission for the operation to take place, showing you understand what is to be done and confirming that you wish to proceed. The child can also sign the form if they wish. Make sure that you are given the opportunity to discuss any concerns and to ask any questions you may still have before signing the form.

# What happens on the day of the operation?

You will have a letter that tells you either to go to Day Ward or Ward 17. These are both paediatric areas. The nurse will meet you and settle you into the ward. They will do some checks and give the child a name band. The doctor will explain the operation in more detail, discuss any worries you may have and ask you to sign a consent form. An anaesthetist will also see you to explain the child's anaesthetic in more detail. If the child has any medical problems or allergies, please tell the doctors.

The child can wear their own clothes to aid comfort. We recommend bringing loose comfortable clothing with no metalwork or zips. The ward can be quite warm.

After the operation the child will recover on the Day Ward or Ward 17. They need to stay a **minimum** of two hours on the ward but quite often they may need to stay longer. They can have a drink and then something to eat. We will ensure they have enough painkillers. We also like them to go to the toilet and pass urine before they go home.

If the child takes any regular medication, please bring this with you on the day of the operation.

## **What happens after the operation?**

The child will benefit from extra rest for a couple of days. It is best to keep the child off school or nursery for two to three days. Please give painkillers according to the instructions on the packet to help ease pain. Sitting on toys or bicycles should be avoided until the wound has healed. Sporting activities such as PE and swimming can be restarted after two weeks.

Following the operation the wound should be kept clean and dry for 24 hours. The stitches are usually dissolvable and do not require removal. Bathing too early may cause the stitches to dissolve too quickly so we recommend quick washes for the first week after the operation.

You and the child may have an outpatient appointment several weeks after the surgery. If an appointment is required, a letter will be posted to you. Your nurse will give you discharge advice before you go home.

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

Observation (the fluid may resolve with time), removal of the fluid with a needle, various other surgical approaches.

# **Are there any side-effects or risks with this operation?**

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)**

- Swelling of the scrotum lasting several days
- Seepage of yellowish fluid from the wound several days after surgery
- No immediate change in the appearance of the swelling for several weeks

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

- Occasionally, a larger hernia may be found which needs to be formally repaired with stitches
- Collection of blood around the testis requiring surgical treatment

## **Rare (less than 1 in 50)**

- Infection of the incision or the testis requiring further treatment
- Recurrence of the fluid collection requiring further treatment

## **Hospital-acquired infection**

- Colonisation with MRSA (0.9% - 1 in 110)
- Clostridium difficile bowel infection (0.2% - 1 in 500)
- MRSA bloodstream infection (0.08% - 1 in 1250)



## What issues should I look out for?

- The child is not drinking well at home.
- The child is in a lot of pain and painkillers do not seem to help.
- The operation site seems inflamed, red, or the skin seems hotter than the surrounding skin.
- There is any oozing from the operation site.

If you have these or other concerns after the operation, please use the following numbers:

**Monday to Friday, day time:** 01904 726010.

Please ask to speak to a paediatric nurse.

**At other times**, or if no paediatric nurse is available at the above number: 01904 722017.

Please note the nurses may give you advice, or they may direct you to contact your GP.

## **Tell us what you think of this leaflet**

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact Mr Mustafa Hilmy, Consultant Urological Surgeon, Department of Urology, York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 725846 or email [Lisa.Browne@york.nhs.uk](mailto:Lisa.Browne@york.nhs.uk).

## **Teaching, training and research**

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

## **Patient Advice and Liaison Service (PALS)**

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email [yhs-tr.patientexperienceteam@nhs.net](mailto:yhs-tr.patientexperienceteam@nhs.net).

An answer phone is available out of hours.



# Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website:

[www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/](http://www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/)

Owner	Mr M Hilmy, Consultant Urologist Catherine Mezzetti, Paediatric Nurse
Date first issued	June 2003
Review Date	September 2027
Version	4 (reissued September 2024)
Approved by	Urology Clinical Governance Group
Linked to consent form	FY03CON67-2 Hydrocele repair (child) v3.1
Document Reference	PIL201 v4.1
© 2024 York and Scarborough Teaching Hospitals NHS Foundation Trust. All Rights reserved.	