

Giant Hydrocele – Embodiment of Neglect and Poverty.

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Abstract: Giant hydrocele of testis is a condition which has fluid accumulation of more than 1000 ml in its sac. Due to the large size, giant hydrocele hampers functional and social life of the patient. We report a case of giant hydrocele of testis which has caused discomfort and pain with social neglect. The patient life has been restricted to his residence for the last 4 years. Hydrocele is a benign disease with treatment facilities available in every part of this region in all state run hospitals at free of cost. This old man has been denied treatment due to negligence, illiteracy and poverty. Surveillance by community health workers can help avoid this menace.

Keyword : giant hydrocele, social neglect, hydrocelectomy,

I. Introduction

Hydrocele is a chronic accumulation of fluid in the tunica vaginalis sac of the testis. This is a common condition seen every day at surgical outpatient departments. Usually detected early and treated surgically without any morbidity. Giant hydrocele of testis is a condition which has fluid accumulation of more than 1000 ml in its sac. Due to the large size, giant hydrocele hampers functional and social life of the patient.

II. Case report

We report a case of 67-year-old male who presented in our outpatient department, bound in a wheel chair, with complaints of swelling in scrotum for the last 6 years. Initially smaller in size which gradually increased to the present size.

On examination abdomen was normal with intact hernia orifices, but had large scrotal swelling of size 35*30cms noted on the left side and another swelling of 15*10cms on right side was noted. Both sides the testis was not palpable separately. The phallus was completely buried and patient has urine flow which soils over the swelling. The swelling has restricted his normal day to day activities and for the last 3 years he has been confined to his residence. The urine flow was soiling over the swelling with pungent smell around him causing social disengagement. Ultra sonogram revealed echogenic fluid on both sides and left testis was not separately visualised.



Under regional anesthesia hydrocelectomy was done with 4.3 liters of turbid fluid drained of the left sac, the left testis could not be conserved and left orchiectomy done and right side sac opened and 400 ml of clear fluid drained and excision of excess sac done. Excess skin is also excised. phallus located and catheterized. After two weeks when the wound edema settled preputial skin excision done (circumcision) and buried phallus is pulled up and skin cover given. Post surgery the patient was ambulant and was able to pass urine stream without soiling himself to urinary stink. The defecation faced by the patient from his family members has been obviated after surgery.



III. Discussion

Hydrocele is collection of fluid in the tunica vaginalis sac of the testis. This can be classified as either primary or secondary. Primary hydrocele is of idiopathic cause while secondary hydrocele is due to pathology in testis. Generally, the size of hydrocele swelling is variable. Giant hydrocele is a condition where the fluid collection is more than 1000ml in a sac.

Giant hydrocele are mostly due to neglect. Hydrocele is a slowly progressing condition where there is ample time period available for the patient to contact a health facility to assess the disease status. Hydrocele is such a common condition in south india where making a diagnosis of hydrocele is not a difficult task. The treatment facility is also available free of cost in all state run hospitals. In this scenario presentation of giant hydrocele is a rarity. Neglect, poverty, not caring for old age people, are the reasons for presentation of these patients.

Giant hydrocele impairs the functional and social life of the patient. Has negative outlook on self esteem, family relations, poor socialization and community life. Functionally patients have restricted life limited to their residence, with poor care. There is difficulty in micturition as the sheer weight of the giant hydrocele buries the phallus causing overflow of urine over the swelling leading to soiling of his clothes and unbearable urinary stink.

Complications of giant hydrocele include pressure necrosis, wound infection, calculus formation, calcification of sac, hemocele formation, and rarely septicemia.

IV. Conclusion

Hydrocele are benign condition with a slow progression in size. Giant hydrocele creates functional and psychosocial problems for the patient. Poverty, illiteracy and neglect by themselves and family members is the reason for this apathy. Community surveillance by grassroot health workers can help avoid these problems.

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