

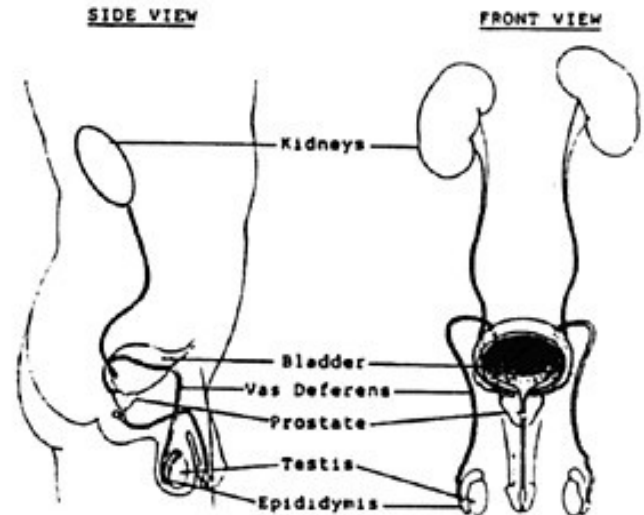
THE UROLOGY GROUP

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TESTICULAR PAIN

Testicular pain is a common condition which occurs frequently in men. To understand testicular pain, it helps to begin with a description of the anatomy. The male anatomy is shown in the adjacent picture. The scrotum or sac contains a testicle on each side. The testicle has 2 functions. It makes testosterone, the male hormone, which is carried from the testis through the blood stream. It also makes sperm, which travels from the testicle into a series of tubes which collectively form the epididymis. The epididymis sits to the side and in back of the testis. Sperm leaves the epididymis by way of the vas deferens (this is the tube that is divided during a vasectomy), which then joins the seminal vesicles and prostate. The vas deferens travels through a structure known as the spermatic cord, which also includes the artery and vein that provide the blood supply to the testis, and the lymphatic vessels that drain the testis. Sperm delivered from the vas deferens, mixes with fluid from the seminal vesicle and prostate to produce the semen, which is the fluid that comes out from the penis at the time of ejaculation.



There are a variety of conditions which can cause scrotal or testicular pain. When testicular pain is present, the primary goal of evaluation is to make sure there is not underlying structural abnormality which would put a man's health at risk. The secondary goal is to determine if there are measures available to help lessen or resolve the pain.

There are a variety of conditions which can cause pain, including epididymitis (inflammation of the epididymis), orchitis (inflammation of the testis), hernia (weakening of the abdominal wall, with bulge in the inguinal region), torsion (twist of the cord and the blood supply to the testis) and testicular tumor. There may also be referred pain to the testis, which means there is pain that originates elsewhere, but is felt in the testis. This can occur if there is a pinched nerve in the back or in the groin area.

In addition to pain which may be present in the testis or scrotal area, there are a variety of conditions which may cause a lump in the scrotal contents. This lump may be felt by the patient, or may be detected by a healthcare provider during a physical exam. Conditions which can cause a lump in the scrotal contents include hydrocele (fluid around the testicle), spermatocele (a cyst in the epididymis), nodule or inflammatory change in the epididymis, and varicocele (a dilation of the veins around the testis). As a general rule of thumb, hydrocele, spermatocele and varicocele do not cause scrotal pain. Testicular tumor is the word used to describe a mass or growth within the testicle itself, which may represent testicular cancer. When a mass is detected within the scrotal contents, scrotal ultrasound (sonogram) is carried out to determine if the mass is within the testis itself or in one of the structures adjacent to the testis.

By far, one of the most common causes for pain in the scrotal contents is inflammatory change in the epididymis or testes. Inflammation can be due to a variety of causes, including urinary infection, viral

illness elsewhere in the body, minor physical trauma, or reaction to medication. In many cases, the exact triggering cause of the inflammation cannot be identified. It should be recognized that epididymitis is typically an inflammatory rather than infectious issue. As such, general measures to address inflammation, including sitting in a warm bath for 20 minutes a day, scrotal support with athletic supporter or brief-style underwear, and anti-inflammation medication (Advil 2-3 tablets 3 times a day, taken with food to avoid stomach irritation) can provide relief.

In some cases, antibiotics may be used to address possible infection. It should be noted that if infection is not present, prolonged use of antibiotics is to be avoided to prevent potential overexposure to antibiotics.

At times, scrotal pain can be vexing to treat, and some men may notice it may take 2-4 months until symptoms subside. On some occasions pain can be persistent, and consultation with one of the pain management specialists may be carried out so that additional treatment can be attempted in an effort to achieve pain relief.

In summary, the primary goal is to make sure there is not underlying disorder, such as testicular cancer, hernia, or testicular torsion which would put the patient's health at risk. Once those conditions have been excluded, then an effort is made to achieve symptom relief as best as able.