

Having a Radical Orchidectomy

Department of Urology

Last reviewed: Jan 2024

Next review: Jan 2027

Information for patients

Leaflet number: 645 Version: 7

Introduction

Tests have shown that you may have a testicular tumour. You and your consultant have decided that you need to have your testicle removed (radical orchidectomy). The operation is performed under general anaesthetic (with you asleep). It involves removal of your whole testicle through a cut in your groin. This will be sent to the laboratory to be examined under a microscope.

An artificial testicle (prosthesis) can be inserted either at the same time as the testicle is removed or at a later date. You can discuss this with your doctor.

The team caring for you

The team of health professionals looking after you is known as the Multidisciplinary Team, or MDT. The MDT looking after you will meet to discuss the most appropriate treatment for yourself. Your doctor will discuss your treatment plan with you.

What are the risks involved?

As with all operations, there are possible risks. These include:

- Swelling - caused by bleeding into the scrotum. This swelling will go down once the fluid is absorbed back into the bloodstream.
- Bruising and bleeding - the scrotum may become quite bruised and sore. The bruising should start to go down after a few days.
- Wound infection - which may require treatment with antibiotics.
- Having a testicle removed may affect your fertility.

You will have time to discuss all these risks with the doctors and nursing staff before you consent to your operation.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Having an artificial testicle (prosthesis) inserted

Having a silicone prosthesis may improve the cosmetic appearance of the scrotum following an orchidectomy. It may also help to improve your body image.

However, the prosthesis may not be exactly the same size as the remaining testicle and may sit higher in the scrotum. There is a risk of infection which may mean that the prosthesis has to be removed.

It is a personal decision whether to have a prosthesis: up to one in four men may be unhappy with the cosmetic result.

What do I need to do before my operation?

You will be seen in a pre-assessment clinic at some time before your operation.

At this appointment the nurse will fill in your admission forms, and provide you with more information about your operation. You will be told about your operation. You will be told about the consent form. You will be asked to sign this when you come in on the day of your operation.

This appointment is a good time to ask any questions you may have.

Depending on your general health and your age, you may have some tests carried out. These will be discussed with you as necessary and may include an ECG (heart tracing) and blood tests.

This surgery is planned as a day case procedure, your consultant will decide if you need to stay in hospital overnight, but this is rare. Before you can have your procedure as a day case you need to arrange for a responsible adult to collect you and take you home in a taxi or car. You must also have someone at home with you for 24 hours after a general anaesthetic.

What happens when I arrive on the ward?

On arrival please report to the ward receptionist situated within the ward area. You will then be allocated to a nursing team.

How am I prepared for my operation?

Before you have your operation the anaesthetist will visit you and discuss your anaesthetic and the pain control you will require after your operation.

You will have been told when you should stop eating and drinking (this is usually six hours before your operation).

You will need to take a bath or shower before your operation. You will then be asked to dress in a clean theatre gown.

Your nurse will then complete a checklist of questions before you leave the ward to go theatre.

On arrival at the operating department you will be handed over to theatre staff, who will go through the checklist again. You will then be taken into the anaesthetic room where you will be given your anaesthetic.

What happens just after my operation?

From the operating theatre you will be taken into the recovery area where you will wake up. The time spent in theatre recovery varies with individual patients, but as soon as you are alert enough a nurse from the ward will collect you and take you back to the ward.

What happens when I return to the ward?

After returning from theatre we will monitor your blood pressure, temperature and pulse regularly.

Wound care

Your wound will have dissolvable stitches in (they do not need to be removed).

You should keep your wound dry for 24 hours, after which you can bath or shower as normal. After your bath or shower, gently rinse the wound with clean water, but do not rub the wound. Then dry it carefully with a clean towel.

Always keep the wound clean and dry. Do not be tempted to touch or pick the stitches. The healing process will take between one and two weeks and your stitches could take up to four weeks to dissolve.

Bruising and slight redness around the wound is usual and will not affect the healing. If you notice any increasing redness, swelling or discharge (leakage) from the wound, you should contact the ward.

Intravenous infusion (a drip)

You may have a drip in your arm or hand. This will be removed once you are drinking normally.

Pain relief

You may feel quite sore for a few days after the operation. Please ask your nurse about the most suitable painkillers to take.

What happens when I go home?

Exercise

You should avoid excessive exercise for about two to four weeks. You should not do any heavy lifting or gardening for four weeks.

Driving

You should not drive for two weeks.

Return to work

Your consultant will advise you about going back to work.

Sex

When you feel ready you can resume sexual activity. Please discuss any worries that you may have with your consultant or nurse.

If you or your family have any questions or concerns after leaving hospital, please do not hesitate to contact the ward, where a member of staff can answer any questions you may have.

Further questions

This booklet has been designed to answer many of your questions, but of course there may be others.

If you have any questions you would like to ask before you come into hospital, you can contact the specialist nurses or the ward directly, using the numbers overleaf.

Further treatment

The results of the tests carried out on the testicle which has been removed will be discussed by your multidisciplinary team.

Some patients receive further treatment or need further tests following surgery. You will receive an appointment to see an oncologist (cancer specialist) about three to four weeks after your operation. You may wish to bring someone with you to this appointment.

Sources of further information

Macmillan Information and Support Centre

Osborne Building

Leicester Royal Infirmary, LE1 5WW

Telephone: 0116 258 6189

Email: cancerinfo@uhl-tr.nhs.uk

Website: www.leicestershospitals.nhs.uk/cancerinfo

Macmillan Cancer Support

For information and support from cancer support specialists.

Freephone: 0808 808 00 00

Website: www.macmillan.org.uk

Cancer Research UK

Ask specialist nurses about anything to do with cancer.

Freephone: 0808 800 4040

Website: www.cancerresearchuk.org

For further information, please contact:

Urology Oncology Nurse Specialists (Key Workers)

Telephone: 0116 258 4637 (Monday to Friday 9.00 am - 4.30 pm)

Outside these hours:

Urology Emergency Admissions Telephone: 0116 258 4247 (24 hours)

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على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk