Materials of Conferences

INTRAVAGINAL VOLVULUS WITH ALLOTOPIA OF TESTICLE AMONG CHILDREN OF YOUNG AGE WITH PINCH OF INBORN GROIN-SCROTAL HERNIA OF THE RIGHT SIDE

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Urgency. Throughout the literature sources, available in the internet we have not come across description of intravaginal volvulus with allotopia of testicle among children of young age

with pinch of inborn groin-scrotal hernia of the right side, therefore, we consider our observation urgent and believe that it represents certain scientific and practical interest for practicing doctors.

Research objective. Intravaginal volvulus with allotopia of testicle is one of the most severe pathologies of scrotum organs among children, it is observed among 12,4 to 42,2% of children [1, 2], and practically does not happen to children of early age.

Methods and materials. Our examples studies a diseased child E. aged 1 year and 6 months, who was delivered to railroad clinic of the city of Aktobe in emergency with complaints of vomiting, moderate temperature, and anxiety, according to the words of mother. The woman considered the child to be diseased for 6-7 hours, did not relate his condition to faults of nutrition as the child was on lactation. It is outlines in anamnesis and, according to mother, since the date of birth there was no testicle in the right part of scrotum, and sometimes she noticed its growth in size, in the state of sleep size of scrotum came back to normal due to independent reposition of bowel loop. Local observation of the diseased child revealed swelling of solid-elastic consistence in the right groin-scrotum area with size of $2\times2,5\times1,5$ cm, it was acutely painful for palpation, skin above the swelling was normal. The right testicle in scrotum was unable to define. Hearing of bowels peristalsis registered a solid formation of round shape, sized 5×5×3 cm in the area of right groin, acutely painful, skin above it was moderately hyperemic. The formation in groin area was noticed by mother from birth, but originally it was a small painless moderately-mobile compaction. Preliminary diagnosis - pinched inborn rightside groin-scrotum rupture and acute inflammation of misplaced testicle with reprocession to groin area. Mother had not applied to surgeons before.

With allowance of mother, considering the combination of pathological processes, the diseased child was taken to surgery under narcosis according to emergency indications. A slanting 4 cm cut in groin area was used to cleave soft tissue down to rupture sack, the latter was opened, rupture liquid

was clear with hemorrhagic tint. The pinched loop of iliac bowels was acknowledged as livable after revelation of outer groin ring, and blockade of mesentery root with 7 ml of 0,25% novocaine solution was placed into stomach cavity. Rupture sack was sewed in foundation, bandaged, and cut out. Then soft tissues were moved apart along the way of distal end of seed funiculus after opening of its vagina, via method of careful pressing upon the formation in the area of right vagina of seed funiculus testicle of size $1\times1,5\times0,5$ cm, blue-gray color was extracted into the wound. Intravaginal volvulus of testicle around axis of right seed funiculus with angle of 360° was registered. Blockade of seed funiculus was carried out with the same solution of novocaine, and after detorsion the testicle was acknowledged as livable and placed into the right part of scrotum and fixed on the bottom with catgut (as in case of cryptorchism). Stiches were placed upon vagina of seed funiculus, and groin channel was sewed according to the method of Martynov, way to the area of misplaced testicle was closed completely. Layered stiches, and after hemostasis – aseptic sticker. Post-surgical period flew with no complication. The patient carried suspension, stiches were removed on days 6-7 after surgery, healing per prima. Discharged in satisfactory condition, healthy in 3-6 months, development corresponds to age of patient. Local status: the right testicle is identical to the left in size, scrotum is painless, no swelling is present, skin color is natural.

Summary. The presented observation, though unique, demonstrates the possibility of intravaginal volvulus of testicle around seed funiculus among children of early age with its allotopia and pinching of inborn groin-scrotum rupture.

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